Reviewer's report

Title: Development of quality indicators for the measurement of the organisation of palliative care in Europe: The Europall project

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Reviewer's report:

Review report of submitted paper:
Quality indicators for the measurement of the organisation of palliative care in Europe: a systematic review. Woitha et al. BMC Health Services Research

This paper describes a development procedure for a set of quality indicators for the organisation of palliative care in Europe.

Although interesting and relevant, I think this paper lacks sufficient detail to assess the quality of the development procedure and developed QI set. According to me, this paper needs at least further explanation on the concepts and methods used, which can be seen as Major Compulsory Revisions.

Concepts:
The authors focus on the organisation of palliative care specifically, and define this as: “systems to enable the delivery of good quality in palliative care”. The authors give no further operationalization of this definition, or aspects of organisation of palliative care. What for instance means “good quality”? In the methods where they describe the QI selection they say that project members were asked to indicate whether the suggested QI was a criterion for the organisation of palliative care. But it is not clear which criteria were used.

At several points the authors mention the recommendations for palliative care of the European Council, and that for measuring the quality of the organisation of palliative care this should meet the recommendations. However, the authors do not elaborate on these recommendations, nor reflect in the discussion on them by stating to what extent the QI set covers the recommendations of the European council.

I would suggest a framework with the aspects of organisation of palliative care maybe combined with recommendations of the European council (and aspects of the definition of palliative care of the WHO) to classify the QI set. The authors use a previously developed framework, and it is possible that this meets the above mentioned classification, but that does not become clear in the paper.

Such a framework based on used concepts is also necessary to determine which QIs are lacking.

Methods:
The title of the paper suggests a systematic review, but the paper describes a development process of QI sets, with a review as part of this.

According to me this review part as well as the developmental process needs further explanation:

Review part:
The authors state that they used as inclusion criterion publication date from December 2007 to May 2009, as a previous systematic review ran until December 2007. However, it is not clear to me if and how they used the results of this previous review in their review.

Above that, the previous review used less databases than the authors used in their review. Shouldn’t they have used a broader date range for these additional databases?

Furthermore, they state that they used the search strategy of the previous review, but they also state that they were not only interested in papers describing QIs, but also interested in publications that describe characteristics of the organisation of palliative care, in order to develop QIs that are not available yet. Was this search strategy suitable to systematically find publications that describe characteristics of the organisation of palliative care?

What exactly were the inclusion and exclusion criteria for this review? Information is given in the different subparagraphs in the methods section, and it would be much clearer to give a clear list at one point in the methods section.

Developmental process
It is not clear to me how exactly the QI selection went:

Which criteria for the organisation of palliative care were used? This is not operationalized.

Was there a special procedure for suggesting new QIs (how was it assessed to be relevant?) and adaptations of found QIs?: In the results is mentioned that 20 new QIs were developed based on important organisational aspects found in the literature. This needs further explanation and I would suggest a table with the found important organisational aspects and the QIs developed based on this found important organisational aspects.

Also 90 (of the 110) found QIs were adapted. Please give more insight in this procedure.

What is meant by “adaptations of an existing framework” (point 3 indication each QI)

Why is QI 2 in table 3 excluded?

General comments
The paper lacks any reflection on the differences between European counties regarding organisation of palliative care, nor whether the developed QI set is suitable for all European countries.
For instance, in the grey literature only ‘policy’ papers from Belgium, The Netherlands and the UK were found. And are the found QI’s originally developed in different European countries? In other words: how European is this QI set? In the last paragraph about further research it is stated that a modified Rand Delphi group procedure is done and pilot tests in 26 countries. I think this paper would be better if this RAND procedure is integrated in current paper.

The authors state in the discussion that the use of the QI set is partly comparable to Claessen et al. This makes me wonder what the current paper adds to this Claessen study.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests