Reviewer’s report

Title: Health information technology capacity at federally qualified health centers: a mechanism for improving quality of care

Version: 4 Date: 14 September 2012

Reviewer: Rachel Gold

Reviewer’s report:

All of these comments should be considered major and compulsory.

1. This paper addresses a very interesting and timely topic, and has the potential to be a very useful addition to the literature. However, it is poorly written and full of typographical errors, misspellings, and inappropriate punctuation. This made it frustrating to read; moreover, it led me to question the care with which the paper was written and by extension the care with which the analyses were conducted. My overall suggestion is that this paper be heavily edited. I would be glad to read it again after this has been done.

I’ll give a few examples of these errors, but there are many more.

Abstract: There is a semicolon where there should be a comma, and ‘FQHCs HIT capacity’ should be in the possessive: ‘FQHCs’ HIT capacity’. The phrase “examined the homogeneity between basic and advanced capacity of health information technology” is totally unclear.

Background spelling errors: Inpatient mortality, not inpatient morally. Availability, not availably.

2. There are also a number of places where the text is very unclear or imprecise. Again, I’ll just give a few examples – there are many more.

Abstract conclusion: “Our findings indicate that while the adoption of health information technology may be important to service delivery, the capacity of health information technology is central to improving quality of care.” … does not precisely agree with findings stated immediately beforehand: FQHCs’ use of a patient notification system for preventive and follow-up care WAS associated with improved care quality, but “… capacity, either basic or advanced was not associated with receipt of discharge summaries or timely appointment for specialty care.” … Please edit to more precisely reflect the findings.

Background:

“The goal of HIT is to establish information” … No, the goal of the federal policies is to promote the use of HIT-based information in a meaningful way. HIT doesn’t have a goal. Please edit for precision.

“Leveraging HIT to improve service delivery and outcomes in smaller
organizations, especially at FQHCs is important to assessing their capacity to absorb the expected increase in demand whilst improving quality of care.[2, 25]" More precise would be, ‘important to increasing [or enabling] their capacity … ‘ Or, if what you meant was 'Leveraging HIT to evaluate service delivery, then say that.

“… strategies that improve access to quality of care.[27]” You either mean, improve access to care, or, improve care quality, or, improve access to high quality care. But as currently phrased this sentence is imprecise.

Methods: “In all cases the strength of association reduced.” This sentence needs clarification.

3. Many of the references cited in the Background are out of date; #s 10 and 12, for example, are from 1994 and 1996. Suggest remove any references that are more than 10 years old because the nature of HIT has changed so much in the last decade.

Consider the following more recent papers:


**Level of interest:** An article of importance in its field

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

I declare that I have no competing interests.