Author's response to reviews

Title: Barriers and Facilitators to Evidence-Use in Program Management: A Systematic Review of the Literature

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Author's response to reviews: see over
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Dear Armee:

Thank you for the helpful feedback on our paper, “Barriers and Facilitators to Evidence-Use in Program Planning, Implementation and Evaluation: A Review of the Literature”. We very much appreciate the opportunity to submit a revised paper that reflects the reviewers’ comments and hope you will find it acceptable.

Please find below details of how we addressed each of the reviewers’ comments for your consideration.

Thank you again and we look forward to your reply,

Serena Humphries

Reviewer 1:

1. “There is a lot of literature about determinants of innovation processes in healthcare organizations. Please explain what this review adds.”

The purpose of this review was to determine the state of the science on what is known about potential barriers and facilitators to the use of evidence in the management of programs within healthcare organizations. We have clarified this in the background section. Presenting a discussion of determinants of innovation processes would have been out of scope and worthy of its own paper.

2. “The subject of the review is unclear.”

We revised the paper to clarify that the focus of this review was program management decision-making in healthcare, a topic for which there appears to be no existing systematic reviews.

3. “Knowing the conditions for successful change of innovation is of high importance for selecting and designing an appropriate change strategy”.

Again, this was not the purpose of our review. We hope our revisions to the Background section clarify the intended purpose.

4. “Studies limited to health policy decision-making at levels other than that of a programme were excluded. Again, not clear what exactly the subject of the review is but might be clarified by a more extended background”.


We have made revisions to the background, objective and carried them through the entire paper that explicates the subject of the review. We have also explained our inclusion and exclusion criteria for selecting studies in the Methods section.

5. “OECD – explain abbreviation and its context for the review.”

We have written out the abbreviation and added a sentence that explains why we used the top ranked OECD countries. We were focusing on countries with similar economies and socio-demographics comparable to Canada since they are likely to face similar challenges.

6. “There are several well developed frameworks for determinants of change…I highly recommend to use such a framework…”

Again, this paper’s was not about determinants of change. To our knowledge, there are no such frameworks for programme management decision-making that we could have used to inform the analysis.

7. “The table is not readable without explanation…”

We have clarified the types of barriers and facilitators in the tables where there was room for improved clarity. The Tables are not intended to stand alone and are explained in detail in the text.

8. “The classification of barriers in groups is questionable…”

We used standard qualitative techniques to code any chunks of text with negative undertones. We have explained this in the text.

9. “Results are just an enumeration of every barrier found in the literature.”

We grouped barriers into themes to understand the issues managers face and how they could be addressed. We have clarified this in the Methods section.

10. “I miss the strengths and limitations of the review”.

We have added a strengths and limitations section.

11. “Recommended strategies are difficult to link to the results”.

With the clarifications made throughout the paper on the intended purpose of the review, we trust that the results section is now more explicit in its objective in terms of adding to
our understanding of the barriers and facilitators that managers encounter when using evidence to inform program planning. This understanding can then act as a foundation to overcoming these barriers and ensuring facilitators are directed at the best possible place to align potential strategies with what is known to promote and impede the use of evidence by managers in program planning.

12. “Conclusion is too general and extensive”

The conclusion is one, short paragraph summarizing the key findings and suggesting potential areas for application.

Reviewer 2:

1. “This type of evidence in decision making is not a new topic in public health…”.

While the topic is not new, to our knowledge, there has yet to be a systematic review specifically looking at decision-making at the program management level in healthcare organizations.

2. “The objective of the review is not clear”.

We have added a sentence clarifying the purpose at the beginning of the paper and revised throughout to ensure that the intended purpose and scope is clear.

3. “The main analysis appears to be based on 14 papers (this is a small number)…”

We agree that this is a small number, but it is a reflection of the fact that studies addressing this topic are limited.

4. “What is the importance of understanding barriers and facilitators in decision-making?”

As described in the paper, understanding barriers and facilitators to program management decision-making is needed in order to develop potentially effective strategies.

5. “What is the purpose behind this article?”

Similar to Comment 2 above, we revised the paper to clarify that the focus of this review was program management decision-making in healthcare, a topic for which there appears to be no existing systematic reviews.
6. “It is not clear how the exclusion criteria were implemented”.

We tabulated and categorized the excluded studies to reflect the exclusion criteria and added them to the PRISMA diagram.

7. “What about studies in other OECD countries?”

We included all empirical studies in the English language that were published during the specified time period that were specifically examining the barriers and facilitators to using evidence in program management within health care organizations.

8. “The purpose of Table 2 is unclear and does not add much to the study…”

Table 2 comprises the results of the critical appraisal, which is an important component of a systematic review. It highlights key questions and responses which help to determine the quality of the included studies.

9. “I am not sure how the review actually fills the gap”.

In the discussion and conclusions section we explain that fills the gap around what we actually know about barriers and facilitators to program management decision-making.

10. “The distinction between clinicians and managers is very interesting and important. Maybe the authors should focus on these two levels.”

We agree that this would be interesting, but the focus of this review was on management, rather than clinical decision-making.