Reviewer's report

Title: An Exploration of Barriers to the Implementation of Clinical Practice Guidelines in Singapore Hospitals

Version: 2 Date: 27 November 2007

Reviewer: Jenny Ploeg

Reviewer's report:

General
Is the question posed by the authors new and well defined?
The study aim is new for Asian countries, and well defined, as understanding the perceived barriers to implementing a falls prevention guideline.

Are the methods appropriate and well described, and are sufficient details provided to replicate the work?
The tool was revised from a previous tool. However, more description of the tool is required. Also, further details re the methods used to conduct the survey are required.

Are the data sound and well controlled?
The authors obtained an excellent response rate of 80.2%.
The descriptive statistics are clear.

Does the manuscript adhere to the relevant standards for reporting and data deposition?
See suggestions below for improvements required in results and discussion sections.

Are the discussion and conclusions well balanced and adequately supported by the data?
See suggestions below for improvements required in discussion section.

Do the title and abstract accurately convey what has been found? The title could be changed to focus more clearly on barriers to implementing a guideline for falls prevention. The abstract should also refer to the specific guideline on falls prevention, rather than more generally to clinical practice guidelines.

Is the writing acceptable? There are some spelling and grammatical errors in this paper.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)


More description is needed in the results section on what is meant by terms such as ‘access to facilities’ and ‘availability of support staff’: what do these mean? Then the implications of these should be discussed in more detail in the discussion section: what would you do to improve access to facilities, or improve availability of support staff, in order to support implementation of the practice guideline?

The discussion provides a summary of the general barriers identified and how these findings relate to previous research. However, no link is made between the barriers and implications for implementing the falls prevention guideline. How can the study findings be used to influence the implementation of the Falls Prevention Guideline? What could be changed to promote success? (e.g., education of staff and patients related to falls? Improving access to facilities such as ???; improving availability of support staff (who are they and what are their roles in relation to the guideline?) Findings could also be discussed in relation to one or more of the theories of change referred to in the background (e.g., PARIHS).

The addition of a table of key suggestions for implementing the guideline, based on study findings, would be helpful. This should include discussion of the specific needs of older adults, as they are the most likely to fall in acute care settings, are they not? You should discuss needs of older adults in relation to patient characteristics. Also, you could organize your recommendations based on the six levels of change you refer to in your background.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Suggest a short description of the Prevention of Falls guideline be provided, including a brief summary of the recommendations, as this may also influence the barriers to implementing the guideline (either as a table or in the text).

Suggest a brief statement related to the incidence of falls in acute care hospitals in Singapore, so there is an understanding of the extent of the problem.

Suggest adding the questionnaire that was used including the six questions that were added related to the implementation of the Fall Prevention guideline as a Table.

Add description of the methods used to obtain such a good response rate, for example, was a modified Dillman approach used? Were any incentives used? Any reminders?

Add a statement related to the psychometric properties of the Peters et al tool that was used. Was this tool developed for physicians? Is it applicable for nurses? Has it been used with nurses in the past?

Under study limitations, should report limited psychometric testing of the revised tool, given that six questions were removed and six questions were reworded to address the practice guideline.
Add statement regarding how long it took to complete the tool.

Under ethics, need to describe how the nurse managers were asked to distribute the tool to the nurses in order to avoid a sense of coercion.

Information re the Ministry of Health, Singapore, on top of page 9, is part of the context, or background, rather than discussion.

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Discretionary Revisions (which the author can choose to ignore)

Perhaps add a brief description of the nursing context in Singapore, or Asia, under background, since you report this is the first Asian study to identify the barriers to implementing CPGs, eg the age of respondents is 29.5 years, which is quite young compared to North America. Also, on page 9 you note that 19% of nurses hold tertiary qualifications; describe what is meant by tertiary. Describe percentage with degrees, etc. For the five hospitals that were included, can you indicate the variability in number of patient beds (e.g., x to x beds). What are the implications of this context for implementation efforts?

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

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

Quality of written English: Needs some language corrections before being published

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