Reviewer's report

Title: Supervision, support and mentoring interventions for health practitioners in rural and remote areas: a systematic review and thematic synthesis of the literature to identify key mechanisms for successful outcomes

Version: 1 Date: 24 September 2013

Reviewer: Sheila Keane

Reviewer's report:

This paper addresses an important question of how ongoing professional education, supervision and mentorship affect rural health workforce development and retention; the methodology is robust and well described, and the summary table is a useful addition to the literature.

Minor Essential Revisions

1. The Figures need revision. Figure 1 is distorted where arrows overlap the text, and the typeface in Figure 2 is too small to be readable.

2. The table borders also vary in both line thickness and colour. The credibility of the paper would be improved if this was more professionally formatted.

Discretionary Revisions

1. There is some degree of ambiguity throughout the paper in relation to what is meant by “successful outcomes”. It may be useful to report how various authors defined this concept early in the results section as this would help to frame the results reporting mechanisms associated with “success”.

2. Results reported in the section “Key mechanisms by mode of delivery” are better synthesised with the literature as compared with results reported in the section on “Key mechanisms associated with successful supervision, support and/or mentoring interventions”. Subheadings used in the latter section helped the reader conceptually but the text within each subheading often reads as a list rather than integrated concept, and it was sometimes unclear which source was being attributed with which finding (for example, see paragraphs relating to Tumosa et al)

3. I think there is an important aspect that is missing in the discussion. The literature on the relative importance of access to professional development varies considerably between professional groups. Medicine, nursing and allied health professions have different professional cultures, practice in varying service contexts (e.g. public versus private sectors) and have substantially different access to resources to support their professional development.

4. There is also a distinction to be made between rural and remote practice
settings (see Wakerman J (2004) Defining remote health. Australian Journal of Rural Health, 12(5), 210-214). As they form about two thirds of the health workforce overall, nurses working in regional/rural settings are not particularly isolated. In contrast, medical practitioners and allied health professionals are relatively scarce in regional/rural areas, a factor that appears to apply to nurses more in remote areas. As remote practice and living conditions differ considerably from regional/rural settings, the literature on professional development may be reporting effects of education & mentorship on isolated medical and allied health professionals in regional/rural settings versus remotely practicing nurses. Interprofessional comparisons need to be met with some degree of scepticism.

**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