Reviewer’s report

Title: Developing recommendations to improve the quality of diabetes care in Ireland: a policy analysis.

Version: 2 Date: 1 June 2014

Reviewer: Mark Harris

Reviewer’s report:

This is an interesting analysis of the development of policy and programs to improve quality of diabetes care in Ireland as a case study using the elements of Multiple Streams Theory as a framework – problem, policy and politics. The introduction and methodology is generally appropriate. The findings present the story well including the evolution of common ground within the EAG and between it and some of the policy makers in the Department of Health on the need for national policy.

Minor Essential Revisions

The reasons for the lack support in political stream are attributed to concern about the costs of proposals, the lack of resources available and contracting health budgets (presumably in association with the GFC). Clearly the economic crisis was a major constraint of the development of new health programs. Were there examples of other policies and programs that were introduced in 2008-9 despite this?

Figure 2 is not very illuminating – only emphasising the weak links between the EAG and senior management of the Health Service.

Major Compulsory Revisions

There is no real analysis of the competing priorities and it would be useful to know more detail on how the EAG recommendations were communicated with and received by the HSE. In many other countries the introduction of national diabetes policy and programs has been incremental addressing individual components such as guideline development; information and communication systems, minimum datasets and performance measures; workforce development including changes to roles of health professionals such as practice nurses, nurse practitioners and health assistants; establishment of local clinical governance and shared care structures; and the more expensive programs such as establishing local care planners to coordinate care, eye screening and treatment programs etc. There is no sense of how the less costly initiatives were prioritised and developed over time under the umbrella of the national policy.

Another element of the policy and political process is the influence of diabetes NGOs and professional organisations on the political process. This is not very clearly described in the case study. These have the potential to influence and articulate the problem, policy and politics especially in defining not only the need
to address rising costs but also to improve poor quality of care as an increasing problem with an increasing burden on the population.

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

**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.