Reviewers report

Title: A novel performance monitoring framework for health research systems: experiences of the National Institute for Health Research in England

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Reviewer: cy frank

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This is a well written, interesting and, I believe, potentially important paper in this field of endeavour that deals with an important topic (integrating a system to monitor some 'research impacts' within a health system). The title describes the content quite well. The paper is well framed as it documents the rationale for the development of a performance monitoring framework for research designed to be embedded within a health system, the necessary background on this topic, the novel method that the authors developed to meet their stakeholder needs, and many of the issues and compromises required to create a 'dashboard of measures' in the real world of the NHS. Overall, while this paper is very descriptive in a sense, with very little new 'data' per se, I found this to be an excellent review of this topic and a good description of the processes used to date - with a number of useful lessons embedded. There was a fairly well described qualitative process that led to the outcome. I don't feel that there are any major deficiencies. The following are what I would consider to be discretionary suggestions for improvement (mainly of their discussion and conclusions).

COMMENTS and SUGGESTIONS

1. It is interesting to me that the only stakeholders involved were system managers and research and development directors, as opposed to any clinicians. As a result, the framework and indicators ignore impacts on the potential products of research on the health system: health, health products and health services. While they do deal with the somewhat narrow perspective a bit on page 12, could the authors also please comment on which stakeholders were not engaged, and the rationale for their exclusion, in their discussion? Would they have ended with a different dashboard if different stakeholders were engaged?

2. There is a bit of a black box here in how they went from 250 indicators to 30 and down to 15 in the final dashboard to be piloted. The exact steps involved (written voting versus discussion-based consensus elimination or other methods?) would be helpful to those trying to reproduce this work.

3. Do the authors believe that the indicators selected would be generalizable to other health systems internationally? Is there data available to inform all of these indicators? Have any been eliminated subsequently because of cost or other
feasibility issues?

4. As above, a bit more of a critical analysis of the processes used and the 'process lessons learned' would be helpful for readers. If they had this process to run over again, would they do it the same way? Any final advice for other research and health system administrators elsewhere in creating a dashboard for the purposes outlined?

**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