Reviewer’s report

Title: Adapting Local Inputs and Resources for Secondary Stroke Prevention in VHA: Provider Barriers and Facilitators

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Reviewer: Jacqueline Fickel

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Overall, my impression is that this is a nice baseline assessment ahead of an implementation study to be conducted in two sites, but the writing needs to be tightened up a great deal to clarify several points, better demonstrate the rigor of the methods, and strengthen conclusions related to how the findings will lead to specific actions.

The research question of how to best adapt existing stroke-prevention resources and tools into a more systematic program for secondary stroke prevention would be important to the field of care for patients who have had strokes.

Major Compulsory Revisions

1. The researchers seem to have done a purposive sampling of stroke care professionals, but the Methods should include more description of how the interviewees were recruited. It is especially important to explain what steps you took to minimize selection bias, since they were staff members recommended by someone in authority in their service. A table outlining key characteristics of the sample could be helpful.

2. In the Results and Discussion sections, you describe finding “three emergent primary themes” from the interview statements. These appear to me to be the same as the major topics that were included in the interview guide. If that’s the case, it would be a little circular to identify these topics as themes that emerged from the data. I think it could clarify your description of the themes revealed by your analysis if you take these three topics down to the next deeper level of what people said about them more specifically in order to identify themes. You do have information that shows how the interviews increased your understanding of the topics under discussion. For example, under the topic “Current provider practices . . .” it looks to me like there is a theme that “providers play a role in secondary stroke prevention.”

Minor Essential Revisions

3. The Background could use a little more information to establish how you know that the current resources and tools need adaptation. This should include brief description of the already existing stroke prevention tools that are planned for implementation into usual care at the two VAMCs.
4. A related issue is that it was a bit difficult for me to tell at first whether this was a formative evaluation of an implementation project that was already underway, or a baseline assessment to help develop tools and procedures prior to an implementation. Clarifying language in the Design section should help with this.

5. The Methods should include a paragraph describing the two sites, and why they were chosen. It would be particularly interesting to know if there is anything relevant to the goal of local adaptation of the tools for the different sites.

6. In the Methods, Interview section—what conceptual framework did you use to help organize the literature review and clinical experience information, and guide your development of the interview guide? I think you touch on this at the last of the Background, but some specifics here in the Methods would be very helpful.

7. Also in the Methods, a few more specifics about the team of interviewers would be a strength. For example, did they work individually or in pairs, how many total interviewers were there, did the same people do interviews at both sites, etc.? This gets at potential questions about the consistency of the interviewing process.

8. In the Discussion, the statement that “most VA health providers . . .” is too general for this study, and should be rephrased to indicate you’re referring to most of the providers interviewed for this study.

9. The Discussion and Conclusion need some more explicit description summarizing what you learned about the gaps in existing stroke prevention resources and tools, and what specific actions you are pursuing to make improvements in their application for secondary stroke prevention in these sites, prior to the implementation phase. In particular, it is not clear what changes you may be making to update the tools overall, and what you might be doing for local site-specific adaptations.

10. This manuscript needs another editorial pass in general to smooth out the language and check grammatical errors. Especially, please check the correct usage of the semicolon.

Discretionary Revisions

none

**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:** No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

I declare that I have no competing interests.