Reviewer's report

Title: How can we improve guideline use? A conceptual framework of implementability

Version: 1 Date: 29 September 2010

Reviewer: Rebecca Lawton

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Minor Essential Revisions

This article represents an important contribution to the field of implementation research and practice. However, the authors make claims about the nature of their review process that are not entirely substantiated. First, the authors suggest that their review is based on a meta-narrative approach. This approach is recommended when 'there is complex evidence.... in a challenging methodological area', particularly where the literature is sought from a number of different disciplinary areas or research traditions. If this was the approach adopted here the authors need to explain the process by which they assimilated and mapped the different strands of research, how the issue of guideline features were differentially characterised by the different professional or disciplinary groups etc. Second, the review is relatively narrow, focusing only on those articles that have 'described guideline features desired by, or influencing the behavior of health professionals'. Moreover, the search terms are also limited, using the term practice guideline, when terms such as procedure, clinical protocol, clinical pathway might also have produced relevant material. There is a large literature, which the authors have contributed to, that examines attitudes to clinical guidelines/protocols. Although participants may not be asked to consider specific features of the guidelines that support compliance in these studies, they do often refer to such features or these might be inferred from what they are saying. For example, in our own work on compliance with clinical protocols (Lawton and Parker, 1999) participants were concerned that evidence goes out of date quite quickly and there is a need to update and revise protocols. The need to include a review date could, therefore, be interpreted as a useful feature of guidelines. Other participants were not clear about exactly how they should use a guideline and whether this differed depending on your role (e.g. was an inexperienced nurse or junior doctor required to adhere strictly to the guideline whilst a more experienced member of staff might deviate). The need for guidance on the level of compliance required for different aspects of a clinical guideline might have been extrapolated from these suggestions.

1. With this in mind, I would recommend that the authors be more cautious in the claims they make and rewrite the sections on Approach and Data collection within the methods section to reflect the limitations of their search.

2. The data analysis section should refer directly to the framework (which I
assume is shown in Table 2). The authors might also consider explaining to the reader the process by which they condensed the findings of the review (Table 1) into a framework for use in the later analysis of guidelines (Table 2). This is important because there are a number of features of guidelines that occur repeatedly in Table 1 and are perceived as encouraging use of guidelines (e.g. the need for guidelines to be concise, to be flexible to local context and patient needs and the desire for checklists or summary documents to support implementation) but these are not immediately obvious domains in the framework shown in Table 2. I wonder whether some useful information (at least for the guideline developer) might be lost in the translation of the specific features into more scientific terms such as adaptability, validity etc.

3. The paragraph in the Discussion section beginning 'It remains unclear....' (please amend this sentence because it is grammatically incorrect) goes beyond the findings of this review and the argument is difficult to follow. Please rewrite this paragraph and make clear the extent to which the findings of the review support the claims made here.

4. In the third paragraph of the Background section please amend the sentence beginning 'In one RCT....' to make it clear that the guideline was 'modified to include vignettes'.

5. Please add 'or' between health system and funding structure at the end of the third paragraph in the Background section

6. Please add 'of' to the first sentence of the Approach section: presence of implementability elements.

7. Please explain what is meant in the Data analysis and interpretation section where the authors refer to 'Element presence was summarized quantitatively with mean, median or frequency'.

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.