Reviewer's report

Title: Measurement of a model of dissemination for health care: Toward a testable theory

Version: 2 Date: 3 February 2012

Reviewer: Laura Damschroder

Reviewer's report:

This paper attempts to operationalize Greenhalgh, et al's exemplary model of diffusion, dissemination, and implementation by developing a quantitative close-ended survey and accompanying semi-structured interview. The paper needs considerable tightening and focus to be useful for readers. If the authors can address the issues listed below, this paper has potential importance as one of the most methodical and comprehensive attempts to operationalize Greenhalgh's model. The authors may also consider using some applicable definitions from the CFIR (which is referred to early on), rather than re-inventing new ones, where possible.

Major Compulsory Revisions:

1. The stated objective needs clarification. The authors switch between use of the terms "dissemination" and "implementation" and seem to use these terms interchangeably. Especially, because one goal of this paper is to clarify terms, it is important to use these terms consistently themselves.

2. It is unclear to whom this "package" of survey and semi-structured interview guide is targeted. How is this going to be used? What are the research aims driving development of this package of measures? In the Introduction, the authors state it is in preparation of a "national roll-out of two evidence-based psychotherapies..." but then proceed to mention "specific treatments for PTSD." Either way, it is unclear whether this is targeted to local stakeholders or policy level or both, etc.

3. Because of the lack of clarify of objectives, it is hard to know how to situate this paper. The authors could consider writing this paper as a protocol for assessing "dissemination" or "implementation" (whichever it is) and then describe the specific targeted program. Alternatively, the authors could situate this as a synthesis and then follow one of the standard protocols for reporting syntheses.

4. Somewhat related to the lack of clarity in this paper, the authors mention use of administrative data on page six - which seemed to come out of "left field" - this is an argument for writing this as a protocol paper which would give the latitude to include use of VA-specific data sources along with the data collection package (survey + interviews).

5. Table 1 needs to be embedded in the paper though it is a large table; it is
central to your results. Include your operationalized definitions in the table along with the quant and qual measures. Then, in the main text, walk through the table in the same order as listed in the table. Do not repeat information already in the table but rather explain your rationale for including/excluding elements of Greenhalgh’s model. For example, start off by listing the number of elements in Greenhalgh’s model and how many made it into your table of measures and why. Consider also, adding source information into Table 1 as well to avoid having to laundry-list them in the main text.

6. There are many inconsistencies in the text and a few especially awkward sentences (e.g., the last 3 sentences on page 7) or incomplete sentences (e.g., first sentence in the last paragraph on page 10) and extra words (e.g., last sentence in first paragraph on page 4).

7. An example of the sometimes wandering text is under "Adoptor Characteristics" on page 8 where you lead off with a description of early adoptors, etc but then on page 9 (1st full paragraph) discount that characterization.

I will not list discretionary edits at this stage because of the amount of work needed under compulsory.

**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.