Reviewer's report

Title: Implementing a provider-initiated testing and counselling (PITC) intervention in Cape Town, South Africa: A process evaluation using the Normalisation Process Model

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Reviewer: Luciana Ballini

Reviewer's report:

This paper is a very good example of implementation research focused on process, of which there is much need and which Implementation Science is committed to host.

My opinion is that this paper deserves publication.

I have few comments/questions, listed below.

I will leave it to the authors and the editor to decide whether some of my point need taking up.

Discretionary Revisions

I have particularly appreciated the convincing and, in my opinion, successful use of the NPM for a retrospective coding and analysis of a large quantity of data and information, collected in a variety of ways.

Although some information regarding the trial is provided, I felt the need to know a bit more. For instance how many clinics took part and was the qualitative enquiry carried out in all participating clinics. Moreover I would have liked to see the actual data showing that poorer performance pertaining to clinics where skill-set workability proved more difficult.

In Table 1 main differences between PTIC approach and VCT approach are highlighted. This outline is very useful to grasp at a glance the entity and content of the implementation effort. I would like to know how and on what the basis the choice of the salient elements – on which comparison is based – has been made (e.g. patient access, primary purpose, pre-test encounter) – how do we know there are no others? why are similarities not listed? The impression is that of a “convenient” list with strong face-validity, but lacking advice and directives on how to transfer such an analysis to other contexts/interventions.

Table 3 is a very good and organized way of reporting process.

While the account of the unfolding of the process provides an easy and smooth read, I felt at times it lacked a clear categorization of elements hindering normalization and of strategies put in place to correct for barriers. This gives the impression that things happened quite spontaneously - without a premeditated approach based on analysis followed by action – and that any link between barriers and interventions has been identified retrospectively.

For instance: page 14 “By framing the new intervention as both responding to a
service need as well as enhancing clinical practice for STI patients, the project manager may have strengthened the willingness of nurses to accept the new approach and consider its implementation”. I get the impression that the intervention “project champion” was not thought as an implementation intervention in its form and content and that its role/success was appreciated mainly in retrospect.

Even if this is what happened in reality, I believe that the reporting should endeavour to systematize the process by linking barriers and interventions. In Table 4, which provides a very clear account of facilitators and barriers (promoting factors and potential threats), strategies used to overcome barriers could be listed next to the potential threats. In this way the project champion, the Committee, the project manager, the cluster meetings etc would “raise” to the category of purposeful implementation strategies and their effectiveness become open to scrutiny.

This “exercise” would help give more emphasis to the possible side effects of implementation strategies, which is briefly touched upon in the conclusions: page 27 “adding more tasks to the clinical guideline may have enhanced interactional workability …. but … may have reduced [skill-set workability]”

Although the “change in the division of labour” certainly deserves great attention, as it turns out to be the most inadequately addressed barrier, maybe the account could be shortened and made less repetitive.

Thank you for the opportunity to read this well written paper.

**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 have taken part in the development of the NPM and of the NPT theory.