Reviewer's report

Title: Identifying priorities for quality improvement at an emergency department in Ghana

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Reviewer: Deborah Garnick

Reviewer's report:

The authors take on an important topic, improving quality in emergency departments in Ghana. While we have some concerns about the small sample size and suggestions about better explaining methods and updating references, we suggest that this manuscript would make a strong contribution to the literature.

Specific comments include the following:

References

Many of the references are old (e.g., Brook 1997, Jelenick 1999)). While this is suitable for seminal articles or for articles that are focused on describing a historical aspect of quality measurement, in many places more recent articles might be more appropriate. For example, on page 13 the authors cite Jelenick 1999 to support the concept that "interventions to reduce ED overcrowding are a common focus for ED and hospital based QI activities." For example, the authors may want to look at the oft cited article -- Hoot, Nathan R., and Dominik Aronsky. "Systematic review of emergency department crowding: causes, effects, and solutions." Annals of emergency medicine 52.2 (2008): 126-136. The citations for how to implement quality improvement in low income countries are all over a decade old (refs 5-7) and a useful place to start for more recent information may be Scott, Kirstin W., and Ashish K. Jha. "Putting quality on the global health agenda." New England Journal of Medicine 371.1 (2014): 3-5 as well as the many articles that cite this one.

Methods

It would be useful to have more details about the methods such as the timing (year) of data collection. In addition, while the authors note (page 15) that the study was "mixed-methods" it seems that it is an entirely qualitative study, even though there was quantitative analysis of the interview transcripts.

Results

The information on the bottom of page 5 and top of page 6 about the respondents might be more suitable included in the methods section. It would be useful to know the categories (e.g., nurse, doctor, security guard) of the two persons who were excluded. In addition, it is not clear how representative the respondents were of the overall Emergency Department staff. One suggestion is to explain the total staffing in the Emergency Department and how voluntary participation might bias results. Also, while is it valuable that the authors included a broad spectrum of types of personnel, it seems as though doctors may be under-represented given the large hospital size and clinical staff. It may be interesting to report which category of respondent said which quote, but that may cause an issue of identifiability of the respondent.

Discussion

It would be useful to have a mention of whether the results are unique to the one hospital studied or are generalizable to other hospitals in Ghana. The presentation of key themes along with quotes from the interviews is a strong way to convey the information in this manuscript.

The authors state (page 12) that "Our results demonstrate that staff understood and related the WHO dimensions of quality to concrete aspects of their work” However, that assertion is not explicitly demonstrated in the manuscript.

The authors also mention that the hospital Emergency Department initiated a quality improvement effort. It would be useful to note that this effort is focused on aspects that they can control (such as triage, bed manager role). However, it also would be good to note that this effort will not necessarily influence any of the larger structural issues of the healthcare system such as lack of insurance coverage at all, insurance that does not cover key types of tests, or inpatient bed shortage. Also, it may be useful to point the reader to the announcement of a
broader quality improvement initiative in the Korle Bu Teaching Hospital. We note that one of the authors is part of the team. http://www.kbth.gov.gh/latest-news/2017/02/22/quality-improvement-receives-a-boost/

On page 13, the authors note routine failures such as clean water, furniture etc. It may be useful to point out that in a standard Donabedian quality framework, that these are structural measures. In addition, the authors write "The implication is that standard ED performance indicators will need careful adaptation for meaningful use here." It would be helpful to offer some examples of which measures might be adapted and what those adoptions might be.

**Are the methods appropriate and well described?**  
If not, please specify what is required in your comments to the authors.

No

**Does the work include the necessary controls?**  
If not, please specify which controls are required in your comments to the authors.

Unable to assess

**Are the conclusions drawn adequately supported by the data shown?**  
If not, please explain in your comments to the authors.

Yes

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**  
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

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Please indicate the quality of language in the manuscript:

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