Reviewer’s report

Title: Preparedness of Hospitals in the Republic of Ireland for an Influenza Pandemic, an Infection Control Perspective: a cross sectional study

Version: 2 Date: 25 November 2014

Reviewer: Sophie Newitt

Reviewer’s report:

This was an important research question that would help Irish emergency planners design their preparedness plans but I feel the manuscript would benefit from some revisions particularly to the results and discussion sections to make the findings clearer.

- Major Compulsory Revisions

1. Abstract
The methods section of the abstract should state what time period the survey was undertaken.
The results section of the abstract should also indicate how many hospitals responded (response rate) before summarising the findings.

2. Background
The background information was well written and relevant as was the rationale for this study. However, I was missing a clear statement on whether there exist a gold standard against which Irish hospitals are being compared to assess their level of preparedness or was it simply a comparison against findings in other countries? If the latter is correct, then is the comparison valid as we do not know how these were assessed in the other countries (i.e. questionnaires, focus group, etc.).
Is the target a 100% for all variables?

3. Methods
It will be helpful if the methods section states how the questionnaire was developed – designed a novel questionnaire/adapted previous questionnaires/validated tool used and how this was piloted as this was only mentioned in the discussion.
Were any open ended questions included and if so how were these analysed?
Page 4, Line 110: Can you please indicate how many questions were included in the questionnaire
Page 4, line 126/127: can the authors please indicate how the hospital size categories were selected – was this arbitrary or based on existing classification used in Ireland.
Page 4: How were the hospital categories compared – this is not clear – please provide a description of the statistical tests used (e.g. Chi squared test used and 95% confidence intervals and p values calculated).

Page 4: Also make it clear which was the reference group in the analysis and whether you carried out this comparison for every questionnaire variable or just some.

Also need to note the time period being assessed e.g. 2013. The time period is only mentioned briefly in the results section of the abstract.

4. Results
Page 5, line 135/136: Please state the number and proportion of hospitals categorised as small/medium/large and those which were public or private. It would also be useful for interpretation for Table one to be expanded and additional columns included to show the break down by small/medium/large hospitals and other columns for the statistical test results with 95% CI and p values so we are able to see for all categories whether there was a significant difference.

The entire results section is somewhat difficult to read and it would be helpful to report actual numbers that responded positively to particular question rather than just the percentage (e.g. ## (##%) hospitals have a plan…….)

5. Discussion
There were some parts of the discussion which felt to be a repeat of the results e.g. p values do not need to be included in the discussion and the percentages do not need to be repeated again in full. Rather the overall meaning of these percentages should be discussed in context.

New results were introduced into the discussion which had not been previously been stated in the results section e.g. Staffing incentives to encourage HCWs to return to work, plans for obtaining additional staff and then stockpiling of supplies – ventilators, respirators, surgical masks, linen, medications. These should first be stated in the results section before being discussed.

6. Limitations of the study
The study did obtain a good response rate but it may be interesting to know some basic information about the 10 hospitals that did not respond e.g. large hospitals, private hospitals and any reasons known for non-response to assess any responder bias.

7. Recommendations
The recommendations mention standardised recognised tools – these hadn’t been mentioned previously in the background or discussion so the recommendations seem a bit disjointed to the rest of the paper. Are there standardised recognised tools in place? It would be useful to know what these tools refer to and the name of the tools etc. prior to mentioning in the recommendations.
Also were the hospitals assessed in the questionnaire to know whether they are using these tools to be able to recommend that they should use them?

A recommendation could be included about targeting the smaller hospitals as it appears in several areas they were ‘less prepared’ to larger hospitals but without seeing the full results I am not sure if this is true.

- Minor Essential Revisions

None

- Discretionary Revisions

These are recommendations for improvement which the author can choose to ignore. For example clarifications, data that would be useful but not essential.

8. It may also be interesting to know whether there were any differences found by public and private hospitals in preparedness.

- Minor issues not for publication

9. Several typographical mistakes and sentences that end mid-sentence, possibly due to editing to meet the word count which will need to be addressed E.g. methods - first paragraph, second sentence and third sentence.
10. The acknowledgements are a repeat of the author contributions so do not need to be included.

**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