Reviewer's report

Title: Implementation strategies to improve the organisation of palliative care: recommendations of expert opinion leaders

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Reviewer: Eric Widera

Reviewer's report:

I applaud the authors on an reporting results on potential best practices of how best to implement quality improvement research in palliative care. This topic is important and of potential interest to readers, as well as timely given the emphasis on quality improvement in palliative care.

The main issue that I have with the study is that the results are not nearly specific enough to be helpful. While the 5 themes are important, none of them are particularly novel and all can be found elsewhere. Furthermore, the descriptions under those themes are discussed in such generalities that it loses any impact. As an example, the dissemination section under results states “Participants considered conferences, and in particular publications tailored to specific audiences, important.” Given that the authors told us earlier in the intro that we currently are doing a poor job in “implementing” knowledge from research, and that we have been presenting research at conferences for decades, are we not just doing the same thing that hasn’t worked? Publishing it in different sources is good, but actually having the participants discuss how to do this would be more helpful then a general statement. Do the authors have this level of detail? If so, it the manuscript would be made much stronger.

Specific Comments

Title: “Implementation strategies to improve the organization of palliative care”. I find this title confusing as to what the authors mean by the “organization” of palliative care. Is this referring to models of palliative care, how health care systems incorporate palliative care, actual palliative care organizations (i.e. AAHPM). For the readership who may be unfamiliar with IMPACT, I would recommend different wording.

Page 3, abstract “The aim of this study therefore was to identify strategies to implement improvement activities into daily palliative care practice.” Based on the question given to participants in this study, the aim seems to be more specific then this: “strategies for implementing the results of the IMPACT project in daily practice”. Is this not the case or were other improvement activities included that were not part of the IMPACT study?

Page 3, abstract: “Data was analyzed using a quantitative (by summing 53 the individual scores) and qualitative (by inductive coding) approach.” If the
authors are discussing a quantitative analysis here in the abstract and in the methods, why no reporting of it in the results?

Page 3, abstract: “Strategies to improve the organisation of palliative care were combined into five common themes.” Again, I am confused what the authors mean by organization of palliative care. Reading the paper it seems like the results are focused on implementing quality improvement activities from the IMPACT study (which may be generalizable to other QI studies). If this is true, can the authors just say that?

Page 5, Intro: “Palliative care is an approach that aims to improve the quality of life of patients and relatives with life-limiting illnesses.” I believe the authors are stating that patients have the life-limiting illness, not the relatives. The way it is written is reversed.

Page 6: “The aim of this study was to identify strategies that can facilitate the implementation of scientific output to improve the organisation of palliative care after a large research project like IMPACT has finished.” The methods section of this article would argue that the aim was more specific - to identify “strategies for implementing the results of the IMPACT project in daily practice.” The way the aim is written would make readers believe that IMPACT is an example of the type of project that the participants conciders in their discussions? Were the participants asked about IMPACT as an example of an implementation project (as the aim suggests) or specifically how to better implement the results of IMPACT (as the methods suggest).

Page 11, discussion: “For example, social media are increasingly being used to communicate with patients, but not yet to disseminate new evidence to healthcare professionals.” I would strongly disagree with this. There are many examples (including discussions published in medical literature) of the use of social media to disseminate new evidence to health care professionals, whether it be blogs (pallimed, geripal, or EAPC’s blog - https://eapcnet.wordpress.com) or platforms like twitter (through individual accounts or tweetchats), or wikis.

Page 13: “Our findings emphasize the importance of using a stepwise implementation approach when introducing new evidence into daily practice.” This emphasis wasn't clear to me reading through the results section. If this is true, may want to revise the wording in the results to make this clearer.

Page 14: “The absence of these stakeholder groups has been addressed in the actions resulting from the nominal group technique, for example in the Palliative Care 2020 Conference in which patient representatives took a key role.” I don't understand. What are the actions that resulted from the nominal group technique? Also, how does a conference change the limitations of the paper? Was there another group there that discussed the results?

**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