Reviewer’s report

Title: Characteristics of unit-level patient safety culture in hospitals in Japan: a cross-sectional study

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Reviewer: Haytham Kaafarani

Reviewer’s report:

The authors ought to be congratulated for a gigantic effort to study patient safety culture in Japan, and for having an amazing response rate above 70%.

However, my main two concerns (Major Compulsory Revisions) are:

1) I am not sure about the subgroup division and analysis. Even though I understand that physicians are not necessarily linked to a certain specific unit, comparing groups that are divided based on role (e.g. physicians) to physical units (e.g. neonatal or intensive care unit) leaves room for unexpected errors. A crisper division of subgroups and delineation that avoids this problem is needed with two-level analysis, one at the unit level and one at the role level. An administrative director of ICU can thus be analyzed as part of "administration" but where physical location is ICU. Both matter.

2) The wide confidence interval for the "Obstetrics and gynaecology ward, perinatal ward or NICU [OR 9.71 (1.17–80.74)], when compared to all other OR from the same table 2, makes me very suspicious of a statistical error in analysis. Even though I could be wrong, I suggest rechecking the analysis, especially that the whole result/discussion section depends on this specific finding. If it is not a statistical error, how do the authors explain this unusual wide range for the CI, which makes the finding less certain?

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests: none