Reviewer’s report

Title: Sustainability in Health care by Allocating Resources Effectively (SHARE) 8: developing, implementing and evaluating an Evidence Dissemination Service in a local healthcare setting

Version: 0 Date: 02 Oct 2017

Reviewer: Lori M Rhudy

Reviewer’s report:

Reports on implementation of evidence based practice are desperately needed. This report, although referred to at times as a study, really is a report of an EBP initiative.

The paper is challenging to interpret primarily because of its organization and the many, many models discussed within it. The premise is that two models are proposed to implement the evidence warehouse to make evidence more readily available to decision makers. In fact, as the manuscript moves along it becomes more clear that the intent is not so much to answer individual PICO questions but to ensure that policies and procedures are evidence based (at least by my interpretation). But then a multitude of models that inform evidence based practice are discussed. In addition it seems as if the term models is also used to describe the actual proposed interventions. I suggest carefully examining the terminology to ensure your meaning is clear. There is quite a bit of redundancy in the paper as first the principles and steps of each model is addressed, then a very brief overview of what was done, then the specific findings. If possible, I suggest combining all of this into one concise description. Many sections are written with quite general or even vague content which is then provided in more detail in the supplemental files. I found it frustrating to have to go to the supplemental files to find things like who the participants are. If you can condense some of the theoretical parts of the paper you could beef up the content in terms of the actual intervention which seems to have 2 parts, planning and implementation/evaluation. Also, I am not sure that ‘resource allocation’ is defined so that it is clear the types of decisions you are interested in. It is very challenging to identify what the two models are (models here meaning the two interventions) because the first is discussed with much discussion about it and the second model follows many pages later. In fact, two models were not really advanced...one strategy was implemented and evaluated and using a quality improvement approach, refined. This is perhaps complicated by an effort to describe each part of the program theory that drove the process but I think it just makes it all the more confusing to ascertain what was accomplished. Consider adding examples or case vignettes to describe the type of work that was done using the evidence provided.

The notion of pushing evidence to the user is not a new idea and trying to determine how to do that is an important task in moving EBP along. The amount of prescreening and choosing the evidence (even limiting it to systematic reviews) poses limitation that important evidence might be overlooked, thank you for addressing this in the limitations section--how the EDS could be used to help answer a specific PICO question is not articulated and in fact, at one point you describe how the evidence in the EDS didn't really suit many of the questions of administrators looking at long term planning initiatives that didn't have a clear clinical link--this seems an
important finding to highlight as evidence on these kind of topics is often either lacking or of poor quality. Does the organization have an EHR with evidence already embedded?

This is an interesting report on one organization's attempt to push evidence to decision makers for policy development. Some reorganization and streamlining of content to improve flow and clarity are needed as noted above. Thank you for the opportunity to review this paper.

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If not, please specify what is required in your comments to the authors.

No

**Does the work include the necessary controls?**
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Unable to assess

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Yes

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