Reviewer’s report

Title: Frameworks for Embedding a Research Culture in Allied Health Practice: a Rapid Review

Version: 0 Date: 08 Feb 2018

Reviewer: Sharon Mickan

Reviewer's report:

There are important questions at the centre of this comprehensive systematic review. The background is well explained and the reason for this review made explicit. There are multiple aims and it is not clear whether this manuscript is the first of a two part series. The eventual objective is not achieved by this article and the first 2 steps of this review are well met. As a reader, this paper seems to synthesis the key and essential elements from other frameworks, which most probably is the beginning of building a framework to inform policy, which is the over-riding purpose of the bigger project.

The methodology is well described, but could be improved in places. A clearer delineation between inclusion and exclusion criteria would be helpful, and a justification of why you focus on allied health, yet you have included broad health and policy frameworks, models and programs. Please also explain from figure 1 how you identified 5 government reports. Please clarify if the focus of your thematic analysis was to meet the second aim; synthesise existing evidence to identify key and essential elements for embedding a culture of research OR for the broader aim of building research capacity. It is not clear how you summarised the strengths and limitations of existing frameworks (the third aim). This was partly met by the quality appraisal of 4 frameworks and 1 tool - but you have not used this information in differential interpretation. As this is an inherent part of a systematic review, it does not really need a separate aim.

The content and thematic analysis and synthesis well described with results text, tables and figures. Key messages are clearly described with reference to their source model, framework or program. This discussion seems wandering and somewhat repetitive. I am surprised that there is only one allied health specific model. The distinction between systems and organizational factors
was another surprise. I had difficulty aligning this with the themes identified in table 4. I did not feel that this was located back in the broad literature and by this stage of the article the concept of frameworks and models was lost - it seemed like a different level of thematic analysis of key components. In your practice implications, it seems again that you are taking this data to develop another framework, this time for clinicians rather than policy. Why? The conclusion is not conclusive.

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