Author's response to reviews

Title: Facilitated interprofessional implementation of a physical rehabilitation guideline for stroke in inpatient settings: process evaluation of a cluster randomized trial

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Author’s response to reviews:

July 19, 2017

Re: Revision and resubmission of IMPS-D-16-00658R1 entitled: Facilitated interprofessional implementation of a physical rehabilitation guideline for stroke in inpatient settings: process evaluation of a cluster randomized trial

To the Editor and Reviewer:
Thank you for providing additional feedback on our manuscript. We have used track changes to highlight revisions in the manuscript that we have made to address the reviewer’s comments. We have provided a detailed response to each of the reviewer’s comments below and indicated the page number to locate the corresponding revision in the manuscript.

1. **Author affiliation change:** we have indicated on the revised title page, p1, lines 15-17, that the affiliation for Ian D. Graham has changed to:
   
a. School of Epidemiology and Public Health, University of Ottawa, 600 Peter Morand Cres. Ottawa, K1G 5Z3, Canada

2. **Abstract and Discussion revision:** wording of the conclusion in the abstract and a related sentence in the Discussion was revised to clarify meaning (p. 5, lines 90-92; p21, lines 445-447)

3. **Funding and Acknowledgements statements:** p23, lines 505-507, and 512-513 have been revised.

4. **Background:** On page 7, line 131 please explain how using a local facilitator ‘can have a positive effect on changing clinical and organizational practices’?
   
   Response: We have added examples of how using a local facilitator can have a positive effect on changing clinical practices on page 7, line 134-139.

5. On page 6 the authors use ‘interdisciplinary team’ but it would be better to use ‘multidisciplinary team’ for consistency, which they do subsequently on page 7 in the background section.
   
   Response: We would prefer to use the term ‘interdisciplinary’ when citing the Canadian stroke rehabilitation guideline recommendations as this is the term used in the guideline. Thus, we have replaced the subsequent use of the term ‘multidisciplinary’ with the term ‘interdisciplinary’ to stay consistent (Page 7, line 141).

6. Please could the authors define what they mean by ‘passive strategies’ on page 8, line 145.
   
   Response: We have provided examples of passive strategies on page 8, line 154.

7. The authors … would benefit from the inclusion of a summary of the main key findings from their previously published paper on the qualitative process evaluation, to add context, rather than simply stating on page 8, line 157 that this study has been ‘recently published’
   
   Response: A summary of the key findings from the published paper on the qualitative process evaluation has been added (Page 8, line 161-185).

8. Results: On page 15, line 319 could the authors describe also in the text the key characteristics of patient participants, rather than only referring the reader to Table 1 for this information.
Response: We have added a description of key patient characteristics to the results (Page 16, lines 334-339).

9. Rather than referring largely to the results listed in the tables, it would be better to discuss also in the text what are the main interesting results from tables II and III (page 16, lines 325-330).

Response: We have highlighted results in tables I, II and III in the results section as suggested (Page 16, lines 342-363).

10. On page 16, line 342 'the passive intervention' would seem to be better rephrased to 'the intervention utilising passive strategies (such as..)’ or something similar.

Response: We have used the term “passive KT intervention” as a brief label for the comparison group throughout the manuscript. In this instance, we have revised 'the passive intervention' to 'the passive KT intervention' (Page 17, line 375).

11. Discussion and conclusions: Can the authors please explain what they mean by ‘passive dissemination’ and give an example (page 20, line 416).

Response: We have revised this phrase to ‘passive dissemination of the stroke rehabilitation guideline’ to clarify the meaning (page 20, line 441). We are referring to the comparison intervention which is outlined in the methods section.

Sincerely,

Nancy Salbach