Reviewer’s report

Title: Exploring barriers and facilitators to integrated hypertension-HIV management in Ugandan HIV clinics using the Consolidated Framework for Implementation Research (CFIR)

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Reviewer: Trisasi Lestari

Reviewer's report:

This is an interesting study about neglected hypertension screening and monitoring that should be implemented in all HIV clinics. The paper is generally well written and structured. My main comments is related with interpretation of CFIR domain and constructs, i think several evidences do not fit with the selected domain.

Line 218 and 224. The author describe about how they measure influence in line 218 and how to interpret it in line 224. I think you can put them together.

Result.

Line 281, 288, 326, 331. Lack of preparation and initial training, lack of local SOP/guidelines, lack of supervision, could be more related with implementation process

Line 294. In my opinion patient's load is not part of intervention, and doesn't describe intervention complexity. I would use it as part of inner settings.

Line 301. I think patient needs and resources were not the barriers but rather a challenge that should be overcome by implementing integrated care of HIV and HTN. If the HTN care is not available in low implementing unit, patients were referred to other health facilities, not much is being done in the implementation unit, I think they're more related with adaptability of the intervention in the organization and implementation climate. Patient were not aware about the service, probably it is more related to implementation climate or access to information and knowledge. Generally the outer setting also includes the economics, political, social, cultural context in the area where the study took place.

Line 356. Availability of equipment and other supplies to manage HTN, I think, is more related with domain intervention or readiness for implementation, this includes leadership engagement, available resources, and access to information and knowledge.

Line 363 - 364. In my opinion, the barrier is not available resources, but, for example: lack of functional equipment for measuring blood pressure, delay in medical logistics.

Line 373. BP machine in the clinic breaks down and takes time to get another. This statement I think is more related with inner settings, particularly organization culture.
Line 376. I think it should be "lack of access to information and knowledge was a barrier…"

Figure 1. CFIR domains, you can use the original framework from Damschroeder et al., 2009 as reference. And I think it would be very helpful if you plot the constructs found in this study to the framework.

Figure 2. It is not common to present a cascade like your figure. Usually you will need to show a lower or similar bar after each indicators. So for example 56.6% were screened, and then 87.6% of 56.6% was diagnosed, 89.6% of those who diagnosed was initiated treatment, 95% of those initiated treatment were retained, 97.8% of those who retained were monitored, and 98.1% who were monitored have their blood pressure under controlled. And to compare achievement for each facility you can use separate vertical bar.

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