

## **Reviewer's report**

**Title:** Developing the protocol for the evaluation of The Health Foundation's 'Engaging with Quality Initiative': an emergent approach

**Version:** 1 **Date:** 10 March 2008

**Reviewer:** john wright

### **Reviewer's report:**

I am in two minds about this paper. On the one hand, it provides an honest and open account of the messy real politic of evaluating new initiatives in health services. This includes a good description of the problems of evaluating apples and pears, the thorny issue of ethical requirements and the difficulties of researching a moving target. On the other hand I wondered how much interest there would be in an evaluation of a research programme beyond the funders (Health Foundation).

The main lesson that struck me was what a missed opportunity this was to add to the evidence base on quality improvement interventions. The authors mentioned Jeremy Grimshaw's systematic review in the introduction but it becomes clear that the results of their own evaluation are unlikely to fulfil the criteria for inclusion in any updates of this review.

This is a shame, as the field of quality improvement needs better quality evidence to inform what works. This is not a fault of the authors who have been left with the task of doing the best they can with what they have been given. The real missed opportunity seems to be by the Health Foundation in not giving a bit more thought into the programmes they were commissioning. These are all multi-site quality improvement initiatives and it would have been a fairly simple task to require applicants to build in some form of experimental control in their designs. In the end however, only one of the programmes included some form of randomised control. So the authors are left with a second best approach of realist evaluation which maybe helpful to the project teams in learning from the evaluation as it proceeds but will be bedevilled by compromises in independence and uncertainties about causality. The researchers may have an important role in supporting the projects and promoting reflection and learning but their more generalisable findings are likely to be limited to the usual conclusions from these sort of evaluations (e.g. facilitators of success include leadership, good communication, clinical ownership etc).

I thought the real lesson from this protocol was for the Health Foundation themselves in how they can improve commissioning of future initiatives through regular briefings, better communication and a bit more thought about more robust design were evaluations of quality improvement initiatives. However I appreciate that the authors maybe unwilling to bite the hand that feeds them.

If the paper is accepted then it would be good to see a broader introduction that moves beyond Jeremy Grimshaw's review to acknowledge the wider socio-political context of quality & safety improvement. It would be informative to have the criteria for selection of the projects from the original Health Foundation's call for bids. In the light of my comments above, I do not feel the last line of the conclusion is justified.

**What next?:** Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

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

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.