Reviewer's report

Title: Quality Standards for child and adolescent mental health in primary care

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Reviewer: Kirsten Lykke

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This is an important study. The results are built on a systematic, lucid, and comprehensive method. It is recommended for publication. Before publication, however, the writers must commit themselves to the things mentioned below.

It is a difficult text to read, especially the predominant chapter on methods. The target group for the article must be assumed to also be general practitioners.

To make the article more reader-friendly, my suggestion is that the writers in part provide the reader with a “reading guide” for the chapter on methods, in part assess if not the two first phases of the study are really the “material” of this article. This would mean that the present chapter on methods should be split up into a chapter on materials and a chapter on methods. The contents of the exposition of phase one should be reduced significantly. (Discretionary Revisions)

There is a lack of argumentation for the choice of method. The method seems valid in relation to the development of the Quality Standards, but far less so in relation to the Quality Indicators. (Discretionary Revisions)

Throughout their presentation, it is important that the writers are aware of the fact that the results of the study are standards of quality that build on the assessments of experts (parents, practitioners, and interest groups). They are not standards about which it has been proven that focusing on them would result in more children receiving a better treatment and thus feeling better. It is also not a study that shows the lacks of the present structures and practice. An instrument has emerged, the usefulness of which still needs to be shown in practice. (Discretionary Revisions)

In the chapter of discussion, for example, too far-reaching conclusions are drawn as for the clinical implications. This study does not show that there is a “need for better systems of communication between primary and secondary health care services.” It shows, rather, that a good system of communication between primary and secondary health care services is an important quality standard. (Discretionary Revisions)

1. Is the question posed by the authors well defined?

The question posed by the authors is well defined, but there is a discrepancy between the aim of the article and the aim of the abstract. In the background
chapter of the article, the aim is described as follows, “Based on parental views, we aimed to develop parent/caregiver derived quality standards for primary care child and adolescent mental health and to explore the utility of these quality standards within primary care. In the abstract, on the other hand, it is described, “Based on parental views, we aimed to create quality of care measures for child and adolescent mental health in primary care and develop consensus about the importance of these quality standards within primary care.”

In my opinion, the article is about “developing consensus about the importance of these quality standards within primary care.” It would demand another study to find out whether the developed quality standards are useful in practice. (Major Compulsory Revisions)

2. Are the methods appropriate and well described?

The methods are appropriate, but the description is too detailed. The chapter on methods takes up 1,673 words out of the 3,770 words of the article. Though it is understandable that the chapter on methods must be more comprehensive in this study than it usually is, the chapter is too detailed, particularly with regards to the first phase. (Major Compulsory Revisions)

I want a short introduction to the chapter on methods. Here, each of the four phases could be mentioned, and the purpose of each phase could be outlined (=“reading guide”). (Major Compulsory Revisions)

The description of the first phase is too comprehensive and too detailed. For example, the selection of the participating parents is too lengthily described. On the other hand, I want a description of the participating parents. In the article in reference 9 it is told that the parents come from a depressing area in London with a high share of psycho-social problems. This is a relevant piece of information. (Major Compulsory Revisions)

I want a description of the themes in the focus group interview. I want the writers to mention that the present data comes from an interview with a broader purpose, and that some of the results have been reported elsewhere. (Major Compulsory Revisions)

On the other hand, the description of the coding process and the analysis are too lengthy. In reference 9, it is described how the techniques of the Grounded Theory have been used. Perhaps this could be stated, and for additional information, the reference could be referred to. (Major Compulsory Revisions)

Phase 2 – Was it in connection with the focus group discussions that “the four parents with experience of using both primary and secondary care services (…) for each Quality Standard, (…) suggested several practical ways in which this could be measured in practice i.e. Quality Indicators [12]”? (Major Compulsory Revisions)

Could anything be said in general about the preliminary standards that have been deselected? Is there anything characterizing them? (Discretionary
3. Are the data sound?

The development of Quality Standard has been thoroughly described, and it has been conducted with repeated validation. As the writers suggest themselves, the indicators are far less scientifically grounded. It is not too clearly described how they have been developed, and in phase four, there are fewer consensuses about their relevance. (Minor Essential Revisions)

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?

The reporting does not adhere to the relevant standards for reporting. The results from phase one and two are reported in the chapter on methods, presumably because they are thought of as a kind of material, since the focus in this article is the Delphi Consultation. Thus, only the results of phase three and four are described and discussed in the chapter on results. As the writers state about the purpose: “Based on parental views, we aimed to develop parent/caregiver derived quality standards”.

5. Are the discussion and conclusions well balanced and adequately supported by the data?

The discussions are well balanced and adequately supported by the data. The conclusion is relevant and adequately supported by the data (but please see my earlier comments).

6. Are limitations of the work clearly stated?

Yes. But a few comments:

“In terms of methodology, the feasibility and the validity of the proposed Quality Indicators were only assessed once during the Delphi survey and should be considered less robust than the corresponding Quality Standard.” I want a reflection on the creation of the Quality Indicators. It has not been clearly described in the chapter on methods. Perhaps the lack of consensus on several of these is determined by the fact that they have not been developed in the same meticulous manner as the Quality standards. (Minor Essential Revisions)

"The study was conducted in one geographical area and the generalisability of the findings to other countries and healthcare settings is uncertain”. This statement is too general. I want the writers to compare with the existing literature and describe to what extent they see similarities (and differences). Apart from that, I miss the writers’ comments on the process and description of the extent to which it could be used by others. Do the process need to be so complicated. (Discretionary Revisions)

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
I believe so.

8. Do the title and abstract accurately convey what has been found?

The title conveys accurately what has been found. The last part of the conclusions in the abstract is a new hypothesis not based on the results but a pre-understanding (“Primary care practitioners should be aware of parental perspectives about quality of care as these may influence help-seeking behaviours”). (Minor Essential Revisions)

9. Is the writing acceptable?

Yes.

Minor comments

• In the first line of the chapter “Methods”, the authors introduce the four phases with a reference to the flow chart. But the flow chart only has the first three phases on it. (Minor Essential Revisions)

• The sentence, “following which sufficient data were collected for saturation to occur” are unnecessary, empty words. (Discretionary Revisions)

Level of interest: An article of importance in its field

Quality of written English: Acceptable

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

Declaration of competing interests:

'I declare that I have no competing interests' below