Reviewer's report

Title: Family physician views about primary care reform in Ontario: a postal questionnaire

Version: 1 Date: 12 November 2003

Reviewer: Martin C Mahoney

Reviewer's report:

General

Discretionary Revisions (which the author can choose to ignore)

Minor Compulsory Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

MINOR

1) There is a typo in the word “enrollment” in the conclusion section of the abstract.

2) Table 2. Given the skewed distribution for select variables, some consideration should be given to presenting medians rather than means as a measure of central tendency for both age and years in practice.

3) Statement on the bottom of page 5, “11% of respondents worked in practices that resembled neither one nor the other type” is confusing. If the point is that most of the practices differ from that envisioned by the network the author should simply make that point. Further down in the same paragraph there is a sentence beginning “physicians in the sample….” This might be re-worded as “respondents to the present survey….”

4) Much of the results section is repetitive and simply describes information which is already presented in a tabular format. The authors might better focus on specific results by using a method of highlighting rather than a systematic description of data presented in the tables.

5) Table 2 needs a more complete descriptive title to identify the source of the data, number of respondents, year of survey etc.

6) Table 5 - some inconsistence in how the categories in the first column are paraphrased. Moreover the column headings appear not to agree with the categories presented in table two which is again confusing to the reader. Also related to this table summary table is the fact that some other sorts of comparisons might be modeled gender years in practice, etc.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

MAJOR

1) Authors state that they had two objectives for this paper: 1) to determine whether family physicians in Canada intend to participate in the Ontario Family Healthcare Network, and 2) to identify factors that are associated with that decision. The authors do a reasonable job describing
the characteristics of respondents in their sample, however they need to further develop the section describing factors influencing decisions to join this Network. If the number of physicians planning to join the family health care network is so small as to preclude analysis than the authors are advised to simply state this and make the appropriate revisions in the paper.

2) Methods - authors need to include the statement about the total sample from which the random selection of 1200 family physicians was identified. It is unclear what proportion of the eligible population this subset of 1200 individuals represents.

3) The authors state that they compared their respondents to respondents in a 2001 Ontario Nationa Family Physician Workforce Survey. This approach cannot assess respondent bias since 1) there is a subset of respondents who are included in both of these data sets and 2) both data sets include only respondents. Rather, respondent bias needs to be examined by comparing non-respondents in the current survey to those who responded.

4) Description of Independent Variables: Needs to be reviewed carefully; some of the categories are not mutually exclusive, in other cases different categories are presented. Additional categories are presented in the text which are different from that presented in the tables. These should be consistent. It is also unclear the author preformed a median split for some of these independent variables. If this was done it should be stated.

5) Page 5 of manuscript the authors refer to a “Practice Index”. It is not clear what is the propose of this “practice index” and why its important. This practice index did not seem to be included anywhere within the results. Can it be deleted.

6) Results: The authors report that 579 respondents out of 1050 eligible mailings were returned for a response rate of 50.3%, however this does not agree with calculations presented in the text which describe a sub-sample of 1200 individuals of whom 150 were eliminated for not being in practice -- out of the 1050 surveys that were sent, 567 were not returned. Of the 583 returned surveys, 8 were returned without a response yielding a total of 575 valid surveys. There numbers should be checked.

7) In the discussion the authors attempt to make a point that most respondents to this survey do not expect to join the Ontario health care network, it would appear that this would be important information if one considers the ramifications to patients and families seeking care. Will this impact on how service is delivered? Will this impact on adequate manpower in the coming years? Will it impact on family physicians currently in practice? It would seem that this information could be better developed in the context of these questions.

8) The authors correctly note limitations regarding generalizability in the sample as well as questions of validity. It is unclear weather any pilot testing was done on the survey. If so, this should be stated. Moreover, the authors are correct in stating that the way the survey items were phrased could bias responses. Of note the authors failed to comment on the fact that no neutral category was included among possible response categories.

9) On the top of page 10 the authors state 3 reasons for the reluctance of family physicians to join the network which they apparently tested in their survey. None of these three reasons were adequately examined in the context of the paper/analyses. All of the appear to be reasonable and need further examination and development.

10) It would appear that the models proposed by the authors are not clear in what they used as a dependant variable. Based on my interpretation of the information presented in this manuscript, my suggestion is that intent to join the network in 2004 be used as the dependant variable in the models An alternative dependant variable would be a plan to join either within the next calendar year or with
in the next several years. This could be developed at the discretion of the authors. Such a model might be a parsimonious strategy to integrating these confusing results.

12) Table 3 needs to be reworked to compare respondent characteristics with non-respondents. There is likely to be significant overlap between respondents in both of the two categories currently presented in table 3. Once respondents and nonrespondents to the present survey are appropriately presented they can be compared using chi-square and other statistical tests.

13) Regarding Table 4 it is not clear why this tabular format is important as descriptive information as presently described is potentially biased. Rather it would be potentially more informative to examine response categories by gender, practice type and/or by other independent variables. Moreover the authors had suggested in the methods section that they had collapsed some of these response categories and it makes it somewhat confusing to see these six response categories. Some consistency is recommended.

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

Declaration of competing interests: none