Reviewer's report

Title: The effectiveness of the Designated Research Team approach to building research capacity in primary care: A case study analysis

Version: 3 Date: 7 November 2007

Reviewer: Sara Shaw

Reviewer's report:

General

Following initial peer review, authors have done well to address comments and the paper definitely benefits in this respect. A few minor changes remain which are detailed below. Whilst authors have made considerable changes to the methods section, unfortunately these raise more questions than answers and hence considerable work is still required to warrant publication.

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

1) The methods section is currently confusing and hard to follow. Part of the reason for this seems to be that authors have written about case study methodology and their own study as somewhat separate. For instance, whilst the ‘defining features of a case’ (p7) are useful they really need applying to the study at hand – it is not until a page later that readers are informed that a case is a DRT with no information is provided about the defining features (e.g. how this is a bounded system, what are its working parts) that authors refer to previously. Perhaps a brief introductory section on the ‘case study approach’ followed by what this then means for the study in terms of ‘sampling’ (inc. what is a case), ‘data collection’, and ‘analysis and interpretation’ might help. This would also compel authors to provide detail about analysis and interpretation which they have so far failed to include.

2) Authors refer to the use of multiple sources of data (p7), the ‘use of interview, observation, archival or other data’ (p8) and ‘interviews, archival information, focus group data’ (p8) within case study research. They really need to make clear whether they then used these and, if not, why not? Currently readers are presented with information about the data collection template (also confusingly referred to as the ‘analytical template’ - is this the same thing?) incorporating ‘multiple sources’. At the moment this reads as if there was an informal process of routine data gathering rather than a formal evaluative process including interviewing, focus groups and archival data (though these might well relate respectively to ‘feedback from the leads of DRTs’; ‘reflexive sessions with the teams’; and ‘minutes of meetings, written reports…the RDSU literature database’?). This needs clarification.

3) The approach adopted draws on case study principles described by Yin (p7)
and Eisenhardt (p8). It is unclear exactly what these principles are and how they come together within the study. Unfortunately Box 1 does little to clarify this. For instance, grounded theory (on which Eisenhardt’s road map is said to be based) requires theoretical sampling but how does this relate to the inclusion of all DRTs? How does the combination of qualitative and quantitative data and the use of triangulation relate to the approach adopted within the study? Or what can authors tell us about the preliminary generation of theory? Box 1 needs clarifying as does associated text regarding theory, analysis and interpretation.

4) At the moment the aims of the study relate to evaluation of the DRT approach. However, in the methods authors now refer to their intention to ‘build theory’ (p8). If this is the case then this needs to be clearly stated in the aim/s of the paper and further drawn out in methods, findings and conclusions.

5) Authors have described a case study approach emphasising ‘understanding of the case within its wider context’ (p7); exploring ‘the logical flow of how events unfold and how they are linked to one another’ (p7); and the inclusion of ‘both process and outcome measures’. However; subsequent findings fail to provide readers with detailed analysis relating to these, focusing instead on the 6 RCB principles and whether or not these were achieved. This leads to an emphasis on questions of ‘what’ and ‘how many’ more characteristic of survey-type research, rather than ‘how’ or ‘why’ questions that are characteristic of the kind of case study research they allude to. This was raised in the first review process and authors have responded that they have ‘now covered this in the discussion’. Whilst this goes some way to addressing the point, it needs to be clearly demonstrated within the findings section and grounded in ‘data’. There are a number of examples of this that need addressing; for instance, the point that ‘team two’s success with ethnic minority communities and enabling user involvement is likely to be rooted in their motivation around inclusion and health inequalities’ (p16) is now included in the discussion. However (assuming that this is grounded in data and not supposition) examples such as this should be included within findings to elucidate ‘how’ and ‘why’ elements of RCB might be successful or otherwise.

---

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

6) In several places authors refer to ‘primary care networks’ and ‘primary research networks’. This needs checking throughout and should read ‘primary care research networks’

7) Authors need to check the paper thoroughly re grammar and spelling (e.g. p6, 1st bullet point – delete repetition of ‘by the’; 2nd para, line 4 – should be ‘a research idea’; p7, 1st para – should be ‘the effectiveness of the DRTs would be a case study approach’; p8 – need spacing between some of the text and references; p9, 2nd para – should be ‘indicators’ and ‘capture’ … and so on)

8) P4, para 2 – authors rightly cite an important policy document ‘Research and Development for a First Class Service’ but refer to this as ‘the previous NHS R&D Strategy’. The document simply describes the development of a programme
for the management of NHS R&D funding and did not form the previous Strategy.

9) P4, para 2 - I couldn’t quite work out what authors meant by the aim ‘to increase access of research to the primary care population’. Should this be accessibility? Or ‘participation in research by…’?

10) P7, 1st para, last line – I struggled to make sense of the phrase ‘does not require any control over the events, but allows a focus on contemporary events’. This needs unpicking.

11) P9, para 2 – the following needs clarifying ‘(see for example Re:cap)’

12) P10, para 1 – reference to ‘project lead’ needs clarifying – is this each DRT lead or the overall study lead?

13) P9 / 10 – authors refer to ‘examples of indicators used for the case study’ and ‘a number of indicators’ within Box 2. This seems to include all of the indicators listed in the tables – this suggests that the tables only include examples or Box 2 includes all indicators. Either way this needs clarifying.

14) P10 – authors refer to a ‘summary of results presented in Table 3’ –is this Table 3-9?

15) P17, para 3, last line – ‘Areas requiring further…’ - needs clarifying, further what?

16) Table 1: authors might want to make it clear within the table which team did not complete a research project and had their funding withdrawn.

What next?: Reject because scientifically unsound

Level of interest: An article of limited interest

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