Reviewer’s report

Title: The quality of maternity care services as experienced by women in the Netherlands

Version: 2 Date: 9 January 2009

Reviewer: Christine East

Reviewer’s report:

This manuscript is much improved following revision.

MAJOR COMPULSORY REVISIONS

Methods

Page 7, 2nd paragraph – need a reference for the data presented in the sentence that commences “The response group is representative …” It is unclear whether these figures are from the survey or from the Netherlands overall.

Page 7, 2nd paragraph – last sentence. This needs to include the comment made in the response letter about GP data being unavailable (and presumably the reason why the data in Table 4 are missing 161 women). (See also note below re data source for Table 4 – if this is from the NPR it needs to be stated in the methods section.)

Page 8. The listing of the 5 composite measures with relevant Cronbach’s alpha is a big improvement. The use of the number and a bracket for each, often following another number with bracket is very confusing. It would be better to list these with both open and closed bracket and possibly as a letter, et (a), (b), (c) etc, rather than 1), 2), 3), etc.

Results

Page 8, para 1. It is not necessary to make the statement about the total exceeding 100% (see note below about Table 1).

Page 9, 2nd paragraph. Many of these results are in the tables. Only the most important results should be referred to here.

Discussion

Page 11, end of first paragraph. References are required for the data stated about intervention rates in the Netherlands, USA and England.

Tables overall

The author has not provided the detail requested in the previous review, of “When p-values are provided, the reader needs to know what groups have been compared”. This must be provided, as it is impossible to see what the p-value at
the end of the table actually means. A new column with the actual p-value for each comparison should be provided.

Table 1
It is not appropriate to add the percentages up in the second row. In the total space, put a symbol to direct the reader to the footnote of the table and revise the existing statement to confirm that overlap could occur.

Abbreviations – this may depend on the journal, but there is currently an asterisk in the table footer to explain the abbreviations from the title row – no asterisk is present when these abbreviations are used in that title row (have noted that it is in the table title – needs to be removed from there).

Table 2
Column headings need to include that the first number in the column is n, eg, add a row and put in n (%) for each major column

Table 3
Columns of data seem to be offset from the column titles, which makes it confusing to interpret.

Table 4
Title – replace the word “experiences” to a word that more appropriately describes the contents of the table, eg labour and birth interventions and outcomes (plus something to cover care provider)

All women (n=632) is a different number to that obtained when primiparae (n=280) is added to multiparae (n=341). This occurs for the data in the subsequent rows. If data are missing (eg not the full sample of 793, as well as the noted discrepancies), it needs to be clarified within a footer to the table.

Note the source of these data – if this is from the NPR it needs to be stated in the methods section, and possibly also in this table.

Figure – helpful
What does the code at the top refer to?
Needs a title.

MINOR ESSENTIAL REVISIONS

Background
Page 5, first paragraph, the word “valuate” should be “evaluate”

Methods
This section contains a mix of methods, results and discussion. I will leave it to the editor’s discretion as to whether this needs to be addressed at this late stage.

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.

**Declaration of competing interests:**

I declare that I have no competing interests