Reviewer's report

Title: Study protocol Efficacy of immediate patient feedback in emergency: A randomized controlled trial in a Crisis Intervention & Brief Therapy Team

Version: 1 Date: 15 January 2013

Reviewer: Bruce Wampold

Reviewer's report:

The design of this feedback clinical trial is basically sound. The application to a naturalistic setting with crisis intervention is novel. The use of outcome measures other than that used for feedback is commendable and necessary.

Major Compulsory Revisions

1. The literature review suffers from a number of problems.
   a. It is much too long and needs to be more focused on the essentials. Many trials of feedback have been conducted. Focus on how this trial extends the literature.
   b. The review omits discussion of a major feedback study by K. de Jong recently published, which is notable because it was conducted in the Netherlands and because it found no effect, for either signal or non-signal cases.

2. Design
   a. As indicated above, it is commendable that multiple outcome measures were being used. However, insufficient psychometric information was given relative to several of the measures. More importantly, it was not indicated when the measures would be given (pretreatment, posttreatment, periodically?).
   b. The patients are randomly assigned to condition, but it was not mentioned how the patients were randomized to therapists. There are two ways to do this. First, and presumably the way in which this study proposes to assign patients, is that patients are randomly assigned to therapists so that therapists will have patients for whom they will receive feedback as well as have patients for whom no feedback will be received. This is the typical feedback design, but is problematic because there is a contrast effect. Therapists simply may attention more to patients in the feedback condition simply because these patients are more salient to them. The alternative is to randomly assign therapists to conditions and then randomly assign patients to therapists. This design has its own disadvantages (therapists are different in the two conditions, but the differences are accommodated in design by random assignment of therapists), but because it is rarely used it has the advantage of ruling out the contrast effect, a perspicuous threat to other studies. Of course, depends on there being sufficient number of therapists.
   c. In any event, patients are nested within therapists and this must be accommodated in the analysis. Good examples of studies that have done this
correctly are the de Jong study and the Anker study. Consequently, in the study therapists effects can and should be examined. This study may be able to answer one question that has not been addressed in the literature—does feedback improve outcomes for all therapists equally or are do some therapists (perhaps the better therapists) benefit more from feedback than others?

3. Analysis. The authors do not fully describe the analysis to be conducted. What is the structure of the data? What analysis will be conducted and what tests of hypotheses will be used? What are covariates. The authors talk about examining how feedback works, by collecting information on the alliance. This suggests a mediation model, but he model must be set up and the analysis described (if alliance is conducted every session, then a longitudinal design could be used, but much needs to be said about this).

Minor Essential Revisions

4. The authors seem to confuse an effect with a complete causal model. The authors state, “For example, Whipple et al. [41] found that all patients who are not ‘on track’ benefit from feedback” (p. 8); this is not so, on average patients benefitted, but not ALL patients.

5. The term “unrestricted randomization” on p. 19 is not a standard one and it is not clear what is meant.

6. What proportion of patients are referred to other services, historically at this clinic.

Discretionary Revisions

7. Whether the design involves randomly assigning therapists to condition or not (see 2b) is discretionary. However, this reviewer recommends it.

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

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

Declaration of competing interests:

No competing interests