Author's response to reviews

Title: An Approach to Measure Compliance to Clinical Guidelines in Psychiatric Care.

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Author's response to reviews: see over
Concerning the manuscript: An Approach to Measure Compliance to Clinical Guidelines in Psychiatric Care. MS:1300316886178997.

Dear Mr Kerr,

We thank the reviewers for the valuable remarks, which we have taken into account in the following ways:

Reviewer: James Rohrer

1. The reviewer remarked that we in the abstract reported t and df. This is now changed to the suggested means and p-value. The differences between the implementation and comparison are reported in result section, page 11, second line and page 12, the end of paragraph one.

2. We fully agree with the reviewer that there should be a description of how the overall compliance measures were calculated. This is now added on page 7, end of paragraph 1.

3. Regarding the statistic tests we apologize for some unclarity. Unfortunately an old version was submitted and we thank the reviewer for seeing this. We used Odds ratios with 95% confidence intervals. An Odds ratio adjusted for baseline score and age were computed to test differences. T-test was used to compare the total score before and after. The statistic part in the method section is now rewritten.

4. The reviewer pointed out that compliance was significantly better in the implementation group than the comparison group on 4 out of 11 depression GLs. However, the compliance was better in 8 of 11 depression indicators before the implementation and this have now been added in the result section, se page 10.

5. The reviewer asked about the low guidelines adherence (6.3). This is a mean value and not a percentage and this is now clarified in the tables and in the method section.

6. Regarding the question about percentages or mean values in the result section, page 10, second paragraph. This is a mean value see also previous answers. The word mean is now added in the result section, page 10.

7. Overall adherence to guidelines for treatment of patients with suicidal behaviour is reported as mean score and we agree that this was low, compared to the depression GLs mean score.
8. Concerning limitations mentioned in the cover letter versus manuscript, the issue of the long-term impact is added. Other limitations are already mentioned such as the need for replication and the possibility of selection bias.

9. Regarding the use of the term ‘controlled experiment’. The term controlled is now omitted. As the reviewer previously has pointed out the study is quasi-experimental involving measures before-and-after the intervention with a comparison group. This is now added in the discussion, page 14, second paragraph.

10. We have not fully understood the remarks concerning the comparison between groups. We have consulted a statistician and we have moved information from table 2 and 3 to table 1. Thus the total numbers of columns are reduced. We regard the information on percentage and n as important for the understanding of the odds ratios. The odds ratios are now adjusted for age and gender. For overall adherence means and p are values.

11. We have changed in the manuscript a couple of subject-verb agreement according to the reviewer’s suggestions.

Stockholm the 12 of June 2008

With best wishes,

Tord Forsner Yvonne Forsell
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