Reviewer's report

Title: Applying an extended theoretical framework for data collection mode to health services research

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Reviewer: Andrew M Garratt

Reviewer's report:

Major compulsory revisions
None

Minor essential revisions

Abstract summary
Health related research is quite different from market research where much of the research has been conducted relating to mode features and response quality. Therefore "...is of importance to health research" is perhaps better than "equal importance". The same applies to the Summary where "generally applicable" is perhaps more accurate given the current state of knowledge than "equally applicable".

Background
Starting the first sentence with 'subjective outcomes' is perhaps being too specific given the general nature of the article. Health related surveys of patient, practitioners and the public can include a range of issues from health behaviours and lifestyle through to health care and illness experiences, satisfaction and outcomes. An overview of the main types of health survey (study objectives/measurement and survey participants) might give the article greater context as well as being useful for considering the potential importance of the different mode effects in relation to the different survey types.

Background para 2. A reference is needed to support the statement that there is considerable evidence in relation to survey methods and response rates.

Page 13 ‘Taking the easy way out’
I am not sure what is meant here by 'satisfactory answer'. The sentence could simply end with "...in giving a response".

Page 19, para 1. I would also advise against using 'outcome measure' as it is not such an obvious example as health behaviours and lifestyle.

Page 19. Measurement construct. I am uneasy about the statement that QoL is increasingly assessed as an individually-defined subjective construct with an obscure reference from 1996. The vast majority of what are referred to as quality of life measures are standardised disease-specific measures and standardised
generic measures of health such as the SF-36 and EQ-5D. 'Instrumentation bias' is introduced here without an explanation of what it is.

Page 20. Respondent characteristics. Final para. An example from the measurement of patient experiences and satisfaction might be useful here. It is fairly well documented that patients completing questionnaires measuring satisfaction with care have higher rates of satisfaction if they complete the questionnaire at the clinic compared to at home (Crow et al, HTA 2002).

Page 21. Mode-feature effects in health

Given the importance of health outcomes measurement as a form of patient survey it might be worth mentioning Computer Adaptive Testing. CAT is arguably the most advanced method of administration available resulting in lower response burden and the tailoring of questions to the individual patient's health state. It can also be applied to other types of health survey.

P25 Summary. The Abstract has two recommendations relating to greater consideration of and clarification of mode features which are not included here. Greater consideration of how features of different methods of data collection affect responses is necessary but we also need further research into potentially important mode features of health surveys. Piloting of alternative mode features might be recommended when there is uncertainty relating to survey design.

Discretionary revisions

P 21 para 2. I suggest replacing 'emphasise' with 'have'.

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.