Reviewer’s report

Title: What do primary care physicians and researchers consider the most promising patient safety improving strategies?

Version: 1  Date: 11 November 2010

Reviewer: Fiona Campbell

Reviewer’s report:

Thank you for inviting me to comment on this paper by Gaal et al.

Major compulsory revisions

1. The question underpinning this research is, ‘what are the promising strategies in improving patient safety in primary care’? This was clear and well defined. I do however have some doubts about the methods used to answer this question. The study was limited to primary care physicians and researchers – which seems a very limited sample to ask for such a broad question. Furthermore 51 (out of 58) the respondents had a medical training – not a particularly balanced sample. This may have led to additional bias and this was not explored. Other health professionals, managers, policy makers and service users may have had valid views but these were not sought.

2. The methods used to design the survey do not appear to be sufficiently rigorous. The selection of salient points for the survey; for example, were validated by whom? The researchers should have considered methods such as Delphi to ensure that consensus agreements were made in a more rigorous manner.

3. The use of qualitative statements was helpful but there did not appear to be any method of analyzing the qualitative data that had been collected. The statements did not always illuminate well the point they were illustrating.

4. The research methods and the discussion did not appear to take into account evidence regarding the effectiveness of different types of strategies in improving patient safety – this surely is important when seeking to determine where further improvement and development could occur. Are the strategies primary care physicians most want to see and ones where least implementation has occurred the ones that will be most effective? What are the cost implications of the recommended strategies? The balance of costs and benefits was not mentioned.

Discretionary Revisions

5. What I did like was the illustration of the gap between physician’s perceptions of the most important strategies and those that are least often implemented. It would have been interesting if the authors could have explored that further – or could pursue this in further work. To assume that these are areas that should be further developed is perhaps not the right assumption, they may not be
implemented for sound reasons (not effective for example) – but nonetheless it does highlight an interesting gap between physician views and current practice and is a new and useful finding.

Minor essential revisions
6. The title and abstract are clear but the text includes a considerable number of grammatical errors that need to be addressed.

**Level of interest:** An article whose findings are important to those with closely related research interests

**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.