Reviewer's report

Title: Process-related factors associated with complaints board's discipline

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Reviewer: Roland Friele

Reviewer's report:

This study is rather straight forward. Although strictly speaking no research question is posed, the aim of the study is clear. Methods are appropriate and data are sound. It is reported in a clear and comprehensive way. The discussion is rather long, considering the straightforwardness of the data. Authors state that little previous research is done in this specific field, and subsequently they include only a limited amount of references in this paper. Title and abstract convey what has been found and I find the writing acceptable. There are some remarks I would like to add.

Please number your comments and divide them into

- Major Compulsory Revisions

1. I was puzzled by the concept of ‘complainant’s point of view/perspective’ and ‘GP’s point of view/perspective’. These perspectives are relevant when studying complaints handling. But in this study these perspectives are assessed only in a very narrow sense. It is more the perspective of the researcher, looking at either the data as coming from 1 complainant (and possibly dealing with more GP’s) or data dealing with 1 GP. In this study these concepts are used for two different analytical approaches of the data and not as two different perspectives on complaints handling. The patient’s perspective on complaints handling (as is the GP’s perspective) is a far more complex and multidimensional concept. Several publications, also in Biomed Central Health Services Research, deal with this concept. I would like to suggest authors to use more exact wordings when dealing with these two analytical approaches or to explain how the use of this concept in this publication relates to the use of the same concept in other publications.

2. In the discussion and introduction authors state that this type of study is relevant in the context of preserving the legal rights of parties involved. I do agree that these rights are important. But, I fail to see how this specific analysis helps in preserving these rights.

- Minor Essential Revisions

3. In the study one source of information is lacking: the content of the complaint.
This becomes a problem in the discussion, where authors are forced to speculate on the causes for certain relationships. For instance, authors discuss why complaints against more than one GP are less likely to lead to a disciplinary action. They speculate that such complaints could relate to ‘system matters’ or ‘blurring of responsibility’. If information on the content of the complaints would have been available, speculation could be replaced by the analysis of facts. I would like to suggest authors to add this as a limitation of the study and also to refrain from this (and other speculations) when corroborating data or literature is not available.

(If the speculations of authors would be true, this would point to a serious problem with this type of complaints handling. Complaints relation to ‘Blurring responsibility’ or ‘system matters’ may point to serious safety problems in health care. If a complaints board is not able to handle such issues and in relevant cases lead to a disciplinary action, the legal rights of patients are harmed.)

- Discretionary Revisions

4. I would suggest authors to include the % of cases in which a GP was disciplined in table 1 and invite authors to seek in the international literature for similar data on the outcome of complaints procedures. Is 27 %, internationally seen, a high percentage or not?

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