Reviewer's report

Title: Cross sectional study of Performance Indicators for English PCTs: Testing Construct Validity and Identifying Explanatory Variables

Version: 1 Date: 17 March 2006

Reviewer: Onyebuchi A. Arah

Reviewer's report:

General

This is an important and timely paper that investigates the interrelationships among commonly used performance indicators in English primary care. The authors indeed take us into a poorly charted area. However, the authors need to address a number of important issues before considering publication.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

For a rather short paper, the authors use way too many acronyms. Understandably, they give a list at the end of the article. Nonetheless, the article can read better without some of these abbreviations; the phrases tend to be small enough that repeating them may not obstructive.

p.3, 2nd paragraph: Non-specialist readers will appreciate a brief overview of the methodological attributes of an ideal indicator.

p.3-4: The authors need to discuss the theoretical and methodological interpretations of what it might mean for a pair of indicators to be correlated. Since we have no gold standard and can hardly ever observe true quality independent of measurement tools/indicators, have the authors considered the scenario that such (un)correlated indicators may or may not be necessarily related to quality? The lack of correlation may also be due to the underlying PCTs' performance where, for instance, PCTs' attainment on one indicator may not be related to its attainment on another supposedly related indicator. This may not be far-fetched if one considers that the beneficiaries of the one performance indicator need not be the same underlying patient population for the other indicator (especially if there is under-performance or an unsuspected organizational delivery reason for such anomalies). This sort of careful reasoning and search for alternative explanations will quickly reveal that a cockpit of indicators need not lend itself simple and intuitive comprehension, as Arah and Westert (BMC Health Services Research 2005; 5:76) recently highlighted, a study not referred to the authors.

p.5-6: The authors should give some more descriptions of the indicators used (may be in Tables). There is discussion of the functional forms of the indicators used (where they transformed for rate-based measures, for example?).

p.7-10: The regression results are not displayed.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
Discretionary Revisions (which the author can choose to ignore)

Which journal?: Appropriate or potentially appropriate for BMC Medicine: an article of importance in its field

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I declare that I have no competing interests.