Reviewer’s report

Title: Doctor and practice characteristics associated with differences in patient evaluations of general practice

Version: Date: 9 May 2006
Reviewer: John Campbell

Reviewer’s report:

I was delighted to have the opportunity to read this interesting paper. It is clear that this is a high quality piece of work, with a variety of new findings which are of direct relevance to international primary care, particularly informing the organisation and delivering of primary care services. I very much hope that this paper can be published as soon as possible, but I am afraid I have a major constraining problem!

The principle problem lies in the presentation of the work. The authors are highly respected international primary care researchers with a substantial track record of excellent publications. However, the paper as presented is not in their mother-tongue, and inevitably, the English proves to be a problem. I say this despite the delivery of what must be regarded as a high quality manuscript from such authors. However, the nuances of English are lost in many places in the text, and therefore, I believe that the manuscript requires major revision with careful proof reading and editorial support, perhaps from an experienced and senior primary care researcher whose first language is English.

As far as the work itself is concerned, I found it of real interest. The authors have undertaken an extensive survey of patients of a large number of Danish general practitioners, and achieved a most acceptable response rate to this primary care survey. A few specific comments:

- Background (paragraph one) “The wording of the second sentence is not clear exactly what is being adjusted?”
- Paragraph two “duration of listing requires rewording.”
- Paragraph four “patients evaluation of what?”
- Paragraph four last sentence requires rewording “less positive evaluations of what?”
- Paragraph five “Add reference at the end of sentence one.”
- Material and method Study Population “It would be useful to include a brief summary of the Danish primary care system for international readers.”
- Missing “after 16% 34%.”
- “signed in” needs rewording.
- It was interesting that this survey was completed by patients seen either in the surgery or at home visits “I don’t think the authors have subsequently presented any data relating to this distinction, and that might be of interest.”
- How do you know individuals were able to read and write Danish “it would be better to say patients were at least eighteen years of age, were registered with the practice, and accepted a Danish language questionnaire.”
- Last sentence paragraph one Suggest “All questionnaires not distributed within two weeks were returned to the research office.”
- Last sentence paragraph one “The implication that all GPs filled in a form about the GP and the practice implies that there was only one GP completing information per practice I doubt this was the case this needs clarification.”
Material and Method. The questionnaire should read: “frequency of attendance” (if patients are registered with a specific practice) or “at a” (if patients can use any general practice).

Paragraph three. The patients were asked to assess the GP’s but this is not what was done I think; were patients not also invited to assess practice variables?

Page four, paragraph one. This is not clear who sent out the reminder. If it was sent by the GP it breaks anonymity and introduces a strong potential for bias. If in fact it was sent out by the research office, this may be acceptable please note what was done.

Page four, paragraph one. GPs recorded the names...

Page four tables one and two are out of sequence this is frustrating, and also applies to the early presentation of results.

See my above comments regarding summary of Danish General Practice for example what is a shared single-handed practice.

I appreciate that sophisticated statistics have been used, but why not calculate an intra-cluster correlation coefficient?

Page 5. What is the significance of reference 23 in paragraph two?

Page 5 (paragraph two). I feel there is some potential for confusion in the presentation of results and method in this paragraph, although I accept that this may be difficult to present in a different way stating we found statistically significant correlations really suggests that this is a result rather than a method or an analysis undertaken.

Page 6 (paragraph one). Tables out of sequence.

Page 6 (paragraph one). I suggest you might say: “valid responses were obtained from 28,260 (77.3%) of individuals”.

Page 6 (paragraph four). We saw no association with practice urbanisation no association of what? In fact this is not true see data on information.

Page 7 (paragraph two). Care needs to be taken with the use of only influenced this implies cause and effect.

The discussion suffers badly from English presentation, and I very much hope the authors can provide senior editorial support in redrafting this section. Many of the results are of real interest and importance.

Paragraph two of the discussion is one such example where the first three sentences simply don’t read well in English.

The issue of generalisability of this sample of general practitioners is important we need to see presentation of information regarding the representative nature of the sample of GPs who contributed to the study compared with those who did not, and with those other Danish GPs as a population.

Minor typo page eight (paragraph three). be able to have to categories.

Page eight (paragraph three). The presentation and consideration of seniority is an example of an important and interesting discussion point arising from this study.

Page 9 (first line). Substituting GPs are locums.

The authors might find the results presented in a UK paper of some interest to their own work (Ref: QHC paper).

Page ten (paragraph 4). The size of the staff implies a measure of obesity rather than the numbers
of staff in the practice!

â€“ Page ten (paragraph 4) â€“ attend consultations should be conduct consultations.

â€“ The observation of single-handed practices is very important, and the authors are correct to highlight the political importance with a challenge to smaller and single-handed practices within Western Europe.

â€“ Page 11 (last sentence) â€“ As the last sentence, this is important itâ€™s entirely incomprehensible!

â€“ I think the paper would benefit from a concluding paragraph.

â€“ Tables three to seven present the bulk of the findings. I think these tables could be simplified by removal of some of the columns in fact most of the conclusions are based on the adjusted prevalence ratio and perhaps the authors could consider removing some of the other columns.

â€“ In addition, there are only two places in these five extensive tables where the presentation of data relating to poor assessments (0-49) is not predicted by the inverse of the positive assessments. I accept that there may be importance determinants of poor performance which are not the inverse of determinants of acceptable/good performance, but these tables donâ€™t seem to present it, except for example in table four staffing (1.5+) or table six, practice organisation (part-time partnership). I therefore think that these tables could be substantially simplified without loss of any of the interesting findings.

â€“ Whilst I appreciate the authors care in the presentation of tables three to seven, I feel that the wording could be simplified to proportion reporting good/excellent performance, and (controversially) one might even resort to some reference to satisfaction. Although I have provided extensive comments, I did find this paper of real interest, and I very much hope the authors will revise it with a view to resubmission as soon as possible.

------------------------------------------------------------------------------------------------------------------------

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

------------------------------------------------------------------------------------------------------------------------

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)

------------------------------------------------------------------------------------------------------------------------

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

Level of interest: An article of importance in its field

Quality of written English: Not suitable for publication unless extensively edited

Statistical review: Yes

Declaration of competing interests:

None