Author's response to reviews

Title: Primary care clinician preferences for working with a collaborative support team

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Author's response to reviews:

Dear Dr. Mittman,

We wish to resubmit the manuscript, "Primary care clinician preferences for working with a collaborative intervention team" for consideration for publication in Implementation Science. We have found the reviewers' comments to be very helpful and have revised the manuscript accordingly to reflect their concerns. Responses to the reviewers' comments are below.

We have not published this manuscript elsewhere, and would be happy to make any further revisions necessary.

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Thank you for your consideration.

Sincerely,

Steven K. Dobscha, MD

Responses to Review Comments--Reviewer #1

1. The second sentence of the second paragraph in the results is confusing. The authors note that PCPs are "evenly split" for brief verses in depth discussions about patients as time permits, wanting to be alerted to and cosigning all intervention team notes (verses what alternative), and wanting nurses to be automatically included in all conversations (verses what alternative)?

Response: We agree and have revised the wording of this section (page 6, paragraph 4).

2. The authors should consider exclusive use of "collaborative support teams" rather than mixed use of that label and "decision support teams." The latter implies a team of technical staff providing advice and "support for" (or "input into") clinical decision-making, rather than a team of fellow clinicians who provide support and shared care. Although advice and input are an important role for support team members, the term "decision support team" suggests that this is their exclusive role. The authors' use of "collaborative support teams" elsewhere in the manuscript seems preferable to me.

Response: We agree and have made these changes throughout the manuscript as suggested.

3. The Conclusion paragraph in the abstract does not reflect the text in the main body. Adding the authors'
point regarding the need for further research would strengthen the abstract.

Response: We agree and have changed the abstract, and the conclusion (page 10, paragraph 2) to address this.

4. The main empirical findings are presented in narrative format. The authors should consider whether they wish to place the key results in a table, following conventional practice for longer papers. This is optional and the manuscript will remain clear and useful whether or not a table format is employed.

Response: The results regarding the clinicians' preferences are included in Table 1 along with clinician characteristics. We considered listing the other results regarding correlations into table format, but don't think it can be done efficiently or in a way that might not cause confusion. We have therefore decided to leave these results in narrative format.