Reviewer's report

Title: Embedding effective depression care: using theory for primary care organisational and systems change

Version: 1 Date: 7 May 2010

Reviewer: Linda Gask

Reviewer's report:

Major Compulsory Revisions

1. It would be very useful to have a clear statement of the aims of the project that is reported here. It is not easy for the reader to work out exactly what these are—although they are inferred I think in the last paragraph of the background. But I am still not really clear...

This lead on to my other points

2. I had difficulty in fully understanding whether the project was concerned with identifying a model and system of practice (first paragraph on page 7) and/or how to implement the model developed in the previous published work. Given that the sampling was from research aware practices, the inference is that they will be able to inform the model (there a specific reference to this point of 'illustrating best practice' at the top of page 7), but surely they may not be the best practices in which to fully appreciate the complex issues involved in implementing best practice?

3. I therefore think it is essential that the aims of re-order and also specifically of the study reported here (only this project—not the earlier work?? or was the earlier work part of re-order??) are clarified. The problems of working with these practices also need to be addressed in the 'limitations' on page 19.

4. Suddenly at the top of page 9 we are introduced to 'participatory action research' and the sessions sound a little like a quality improvement initiative with mention of PDSA cycles. This comes as a bit of a surprise to the reader. Hence the need for clarity of aims and objectives and perhaps a little more about the range of methodological approaches utilised under the first paragraph of 'methods'.

Minor Essential Revisions

Box 1 is not easy to follow—could it be laid out in a little more user friendly way?

Discretionary Revisions

1. There is a clear parallel between the activities of reflexive monitoring and the literature on clinical governance which could be drawn. (I have also carried out
an analysis using the related NPM which might be helpful here on the difficulties of implementing clinical governance in primary care mental health Gask et al BMC HSR 2008).

2. Do tables 1 and 4 need to be reformatted to make them easier to read?

**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 have also used the NPM and NPT in my research into implementation of best practice in primary care mental health.