Reviewer's report

Title: 'Getting a grip on depression': implementing a stepped care approach in primary care. Results of a qualitative study.

Version: 1 Date: 30 May 2011

Reviewer: Linda Gask

Reviewer's report:

This is an interesting paper which adds to the literature on quality improvement in depression care.

Major Compulsory Revisions

None

Minor Essential Revisions

1. Please explain how the 'eight multidisciplinary primary care teams created for the purpose of the QIC' came about. Were these not functioning as teams prior to the collaborative? this is unclear.

2. The detail about member check of the findings from the analysis should have been included in the methods section.

3. 'Gunn' is mis-spelled with only one 'n' intermittently throughout the manuscript.

4. It is not particularly helpful to know only which team number the quotations included in the paper came from. What would be more helpful is that, in addition, the professional group of the person speaking might be included too- as this is clearly important given the findings relating to coherence around the concept of depression in particular. I am assuming that these were the multidisciplinary teams and they were not undisciplinary focus groups.

5. The paragraph beginning 'very few GPs' on page 14 does not make sense and I suspect that the meaning implied is actually the opposite to that which is actually conveyed. The English needs revising.

6. On page 18 the English in the first sentence of the discussion needs attention: 'perceptions of the model'.

7. It is not clear to the reader why the paper is called 'Getting a grip on depression'. This phrase is not included in any of the quotes- does it relate to the title of the collaborative? If so, that should be stated, and as colloquial English it should be in quotation marks whenever used in the text- which it is not (eg on page 18).

8. The authors should say more about why they could only interviews the teams
once. Repeated interviews would have strengthened the paper.

Discretionary Revisions

1. More information about the structural context of primary care and mental health in the Netherlands would help the reader to understand the nature and ramifications of the changes introduced in the collaborative.

2. The 'Breakthrough Quality Improvement' method is well known internationally but should probably be properly referenced (page 4).

3. Further discussion of the findings in relation to the international context of quality improvement initiatives in depression—particularly in the USA, would strengthen the paper.

4. Why did the collaborative choose to use utilize the BDI rather than the more widely used (internationally) PHQ-9? Some explanation or at least discussion of this point would be interesting.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I have published research in related areas.