Reviewer’s report

Title: Assessing and improving organizational readiness to implement substance use disorder treatment in primary care: Findings from the SUMMIT study

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Reviewer: Elizabeth Cottrell

Reviewer’s report:

This is a generally well written paper detailing organisational readiness for change for delivering substance use disorder interventions. This will have wide international interest as this is a big problems causing physical, mental and public health difficulties. Below are comments relating to each section - the most significant of which relate to analysis

Background

- It would be helpful to explicitly state the setting for the care being described in the background

- I assume California - see comments in discussion - there will be issues regarding generalisability of opinion/findings depending on the context

- Further to the first point, it would be good to detail in brief, for international readers, the 'usual' care of such patients/what other options are there currently and why these other models of care are not being used (i.e. what is the gap that is being filled by this implementation work) and also what 'usual' primary care looks like (e.g. Therapists are part of this intervention - are they part of a primary care team or outside service that patients are signposted to etc)

Methods

- Under Process Category 1 > Strategy 1 > there is a problem in the first line with ref [56] within the word "from"

- p11 - "receipt of the X-waiver for buprenorphine prescribing" is described what is an "X-waiver"

- p14 "a two item scale for each EBP" is mentioned - I am not clear what the two things are 1) The two pharmaceutical approaches, 2) pharmaceutical and psychological approaches or something else - please clarify on first use as this term is used frequently throughout the paper and implied meaning changes slightly throughout.

- I have some concerns about the analysis - using means (SD) to report Likert scale responses and statistical analysis on quite small numbers may be inappropriate - I wonder
if more descriptive analyses may be more appropriate - I have suggested a statistical opinion on this

Results

- Nil specific comments however - this all relies on comments relating to analysis

Discussion

- While it is correct that primary care is in a good position to deliver such interventions due to the opportunities presented by patients attending - there needs to be some discussion about the capacity of primary care to undertake this activity. The "feasibility" examined in this study seems to relate to beliefs about identifying patients and discussing the relevant issues - not so much about capacity of the organisation to take on this additional role. For example, UK primary care is under significant pressures from increasing aging population with complex multiple chronic diseases, workforce shortages and economic uncertainty - therefore the generalisability of this is likely to be limited - you may find other contexts in other countries that limit this. Therapists are highlighted in the background to provide the 6-session psychotherapy - how available are these - again - not so much in UK setting for example.

- While multiple potential barriers are highlighted in the background - is there a risk of unspoken prejudice against such patients - perhaps include some reference to that (e.g. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2965619/ Bitarello do Amareal-Sabadini Drug Alcohol Rev but there are many others)

- While it was positive that the implementation team consisted of clinic medical director and behavioural health director - meeting weekly is a big undertaking - this was just in one site - is this feasible across other sites? Further there is a day's worth of training for prescribers etc - please comment on what is know about these issues themselves as barriers to implementation.

- Anecdotal findings are quoted in the discussion but not in the results and methods for obtaining these were not put in the methods - ?if appropriate to therefore include

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Yes

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

Unable to assess

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I recommend additional statistical review

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