Author's response to reviews

Title: Impact of referral templates on the quality of referrals from primary to secondary care: a cluster randomised trial

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Author's response to reviews: see over
Cover letter

This manuscript is a revised submission of the manuscript MS: 3718151071468432. It has been reworked in accordance with the advice from editors and reviewers. We wish to thank the reviewers and editors for their feedback. Below each aspect of the reviewers comments are discussed, together with a short section concerning editorial issues.

With best wishes

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Response to referee 1 (Marianne Storm):

1) The last paragraph of the introduction has been reworded to try and more clearly indicate how this publication fits in with the larger study. Hopefully this is no more clear, but further advice on how to rephrase this is, of course, welcome.

2) Sections about the Norwegian Health Care system has been moved under the “Methods” section with its own subheading “Study setting.”

3) A sentence has been added trying to show why the inclusion phase ran a bit longer than the use of the templates. If more detail is needed this can, of course, be added. The authors, however, feel that the information now provided present an accurate picture of the study.

4) To better explain the term “GP surgery average score” the entire paragraph has been rephrased to try explain both the concept of internship in Norwegian general practice and also explain why the average list size for the surgery was used.

5) To discuss some of the variation in the referral scores depicted in Figure 2 a paragraph has been added to the ‘Discussion’ section (line 398-408 in the new manuscript). Reference has also been added to other Norwegian studies showing wide variation in clinical practice for another aspect of the referral process, namely the referral rates.

6) Discussion line 358-359 in original document: The wording has been edited to show that the phrasing “current literature” was intended to relate to the Cochrane report referenced.

7) Regarding the varying quality between the different clinical areas a sentence has been added to show that we have not found similar differences in other studies, but no directly comparable studies were found. We have considered other reasons for the difference than the explanation used in the article (shorter and more scientifically accepted referral guidelines for the conditions with highest score) but the data does not seem to suggest any other clear explanation. Further work in the larger referral project this publication is a part of, hopefully, indicated whether this higher referral quality translates to better quality care.

8) Regarding difficulties with uptake on the intervention the paragraph discussing this has been slightly extended to include a short description of barriers to uptake and what seemed to be the largest barriers in the current project.

9) Last paragraph on page 17 in the submission (middle paragraph page 18 in the revised text) has been reworded to more clearly convey its meaning. It was meant as a way to show that the medical community is not always certain of what information is needed in referrals to produce high quality care.
Response to referee 2 (Ann Dadich):

Minor essential revisions

1) The first paragraph in the section “Intervention” has been reworded (simplified) to try and optimise reader clarity.
2) Reasons why GP surgeries declined to take part have been added to the section “Participants”.
3) In the second paragraph of the “Discussion” section the wording was changed to try to clarify why it was surprising that years of experience in the hospital did not predict referrals of higher quality.
4) At the end of the “Discussion” section a paragraph was added to further highlight the implications for health services managers/policymakers. In reality, however, this paragraph has been worded quite cautiously, as further work is necessary to assess whether improved referrals will lead to better care.

Major compulsory revisions

1) Title: The authors are slightly unsure which ‘reviewer guidelines’ the referee is referring to when suggesting a change in the title. As it stands the authors feel the title fulfill the criteria listed under “Author instructions” on the BMC Health Services Research website, and also fulfill the criteria in the Consort Statement for Cluster Randomised trials. However, given more guidance on how the title is to be reworked we will of course consider this.
Additional notes

1) Text has been formatted according to authors instructions on www.biomedcentral.com/authors/medicine_journals

2) Figure 2 has had title and legend edited where the word ‘Average’ has been removed. The data points plotted are the actual values (% scores) and not the average, with the average value represented by the horizontal line in the graph. We apologize for this error and thank reviewer 1 for drawing our attention to it.

3) The article has been edited by Edanz to ensure the style of written English is appropriate.

4) The reference list has been generated using Reference Manager and a style file downloaded from Biomed Central. The references do, however, appear different from those listed as examples on the website. If the references are not edited correctly I would appreciate a new style file that will edit them appropriately.