Reviewer’s report

Title: The impact of governance in primary health care delivery: a systems thinking approach with a European panel

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Reviewer: Angus Ramsay

Reviewer's report:

Many thanks for the opportunity to review this paper - a mixed method study (combining a lit review and a 3-stage Delphi process, analysed quantitatively and qualitatively). I have relatively few comments on what I think is an interesting paper with a potentially important contribution.

BACKGROUND:

Useful descriptions of different frameworks through which PHC might be understood, and outlines nicely the complexity of delivering PHC, given multiple stakeholders with different drivers.

Strong justification for 'systems-thinking' perspective taken in this project, given limited understanding of the interactions between financing and regulation of PHC.

Minor point - I struggled to follow the chronology set out between the fall of communism, the global economic crisis (am guessing this refers to 2007-8?), then in the last 10 years an increased interest in development of PHC. It seems to me that the last two points don't quite marry up.

METHOD

Design seems a sensible approach - building a framework from a lit review, then adapting in response to Delphi feedback and additional literature.

Sample seems well chosen, and snowballing approach likely to increase likelihood of good inclusion of experts in the field.

A question (prompted by Figure 2): it looks as though the UK was treated as a single entity: do the data suggest full UK-wide alignment on all of the characteristics studied? Given that the devolved nations of the UK govern healthcare somewhat differently in some cases, there may be value in considering these systems (and associated data submissions) separately.
RESULTS

Overall, the relationships described seem to make sense, and the paper draws together clearly the published evidence and responses to the Delphi process. The use of worked examples - especially in relation to Table 4 - is a useful way of communicating the results.

However, given the amount of information, I felt the authors might consider mapping out the results section a bit more explicitly, and consider signposting where we are up to more regularly.

I found myself wondering whether the authors might find it useful to consider framing the work in terms of different 'modes' of governance s (e.g. as set out by Davies C, Anand P, Artigas L, Holloway J, McConway K, Newman J, et al. Links between governance, incentives and outcomes: a review of the literature. Report for the National Co-ordinating Centre for NHS Service Delivery and Organisation R & D (NCCSDO) London: NCCSDO 2005)

A few minor points -

Table 1: final row - presume this should be '>4 years'?

Figure 2: This is an extremely helpful resource, giving a sense of how PHC varies across European states. Minor suggestion: it would be helpful to avoid abbreviations in the legends. There might also be a need for a note indicating that these are fairly broad characterisations (e.g. UK still has single GP practices)

DISCUSSION/CONCLUSIONS

The authors make a clear, persuasive case for taking a systems view of factors influencing structure, process, and outcomes of PHC. They present a huge amount of information, which is well-organised and illustrates likely relationships between key levers for quality in the healthcare systems.

They are open about limitations and their sensible efforts to mitigate these.

The implications for future use of this framework - by researchers and policymakers - seem sensible to me. I suspect there is also potential utility for people who lead and manage services at local or regional levels.

**Level of interest**

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