Author’s response to reviews

Title: Understanding the supports needed for policy implementation: a comparative analysis of the placement of intermediaries across three mental health systems

Authors:

Heather Bullock (bullochl@mcmaster.ca)

John Lavis (lavisj@mcmaster.ca)

Version: 1 Date: 04 Jul 2019

Author’s response to reviews:

To whom it may concern,

The authors wish to thank both reviewers for their very thoughtful and detailed feedback. We appreciate the time and effort it took the reviewers to complete these reviews. We considered each comment carefully and how we might address both sets of comments in the new draft. The result is a fairly extensive overhaul of the first two sections of the manuscript (Background and Methods), which were the focus of many of the reviewer comments. We also cut several sections (including the Policy Puzzle) but added others (including much more detailed descriptions of the intermediaries that were sampled). We also cut one of the two tables (based on Reviewer 2’s suggestion). We attempted to highlight the changes in the new draft, but these do not reflect where sections have been cut. Below we outline in detail each of the reviewer comments and our responses to them. We also included this as a table in the uploaded files (which is much easier to read and track). We hope these efforts will meet the criteria for acceptance.

Sincerely,

The authors

Reviewer Comments & Author responses

1 Title

- Needs to be more specific in terms of what the paper is about, methods used and where. A suggestion would be something like: "Understanding structural supports for policy implementation: a comparative analysis of the placement of intermediaries across three mental health systems" (Reviewer 1)
Response: Revised as per suggestions to: “Understanding the supports needed for policy implementation: a comparative analysis of the placement of intermediaries across three mental health systems”

Title/Introduction

- You mention "structural supports" in your title, however, this is not introduced anywhere in your introduction or the rest of the manuscript. Can you mention what does it mean and how it is related to intermediaries? (Reviewer 1)

Response: Revised title and removed reference to “structural supports” in title and elsewhere for clarity as per Reviewer 1’s suggestions

2 Introduction

- The problem and research gap need to be more explicit. One suggestion would be to present your definition of the concept of intermediaries and the added value of studying it at the top of the introduction/background as described in the literature of public policy. Then, clarify your rationale of using it in the context of health systems and mental health services in particular, in addition to your specific interest in understanding why there is variation in terms of the placement of intermediaries in mental health systems. (Reviewer 1)

Response: The introduction has been re-organized as per Reviewer 1’s recommendations. An additional “study context” sub-section was also included to clarify why there is interest in this particular question and for further study context.

4 Introduction

- In health policy and system research, there is a mention to the role of community mobilizers/community-based organizations in addition to patients' coalitions/organizations. They also have a role as mediators between patients, providers and policy makers. It would be good to explain where they fit within the intermediaries role, if any. (Reviewer 1)

Response: We could not find any specific literature on this (although we completely agree!). To respond to this, we have added the following sentences to the Introduction:

“As the word suggests, intermediaries interface with a diverse array of organizations and coalitions that collectively comprise the ‘implementation infrastructure’ for a particular issue and
are sometimes referred to as ‘backbone support’ in the collective impact literature [11]. Beyond direct service providers and policymakers, these partners and stakeholders may include: community coalitions, peak organizations, patient or citizen groups, professional bodies, researchers and research programs, unions, among others.”

5 As such I am not convinced by the initial premise that intermediaries are a recent phenomenon (line 81). Would there not have always been some efforts made to convert policy goals into a series of programs, and communication in some way, with those programs. Even if this is in terms of expectations, funding, and, crucially staffing? A historical element is missing in the paper in the set-up of the puzzle. (Reviewer 2)

Response: We acknowledge that implementation supports are not new. We have removed this statement. We also revised a sentence in the first paragraph to acknowledge the ongoing implementation activity happening in governments and by public administrators: “While governments and public administrators have clearly been interested in, and committed investments toward, implementation supports as part of the usual policy-making processes, most scholarly works have focused on designing policy to be implementable or describing the factors that are important in the implementation process [2].”

What is new(er), is the research interest on intermediaries and the rapidly growing literature in implementation science and knowledge translation on implementation strategies (that intermediaries may employ). The revised introduction clarifies this.

6 Objective

- Your main objective/research question is mentioned in Line 148. However, in other parts of the article you have some objective-like statements. It is not clear - at least based on a first read - if these statements are things that you would like to clarify in your research, results from your research, or are hypothesis derived from analyzing literature to find the research gap? If results, then they are not needed in the background. If hypothesis, then they need to be explicitly mentioned as part of the research rationale. Here are some examples:

Line 68: As part of a broader program of research, we are interested in understanding the role of policy-oriented intermediaries in mental health systems who support the implementation of EIPPs at scale.

Line 96: We examine each of these explanations in turn below and argue that there are too many similarities in the articulated values and policy directions in these jurisdictions to explain the variation in the placement of intermediaries in their mental health systems. We suggest that these
factors may be necessary for intermediaries to arise, but not sufficient to explain the variation in their placement in mental health systems.

Turning to why values were ruled out, we first explored whether there were differences in the types of values at play in mental health in New Zealand, Ontario and Scotland (selection of which is explained in detail in the methods section).

Lines 152-157: Through this analysis, we argue that the placement of intermediaries supporting policy implementation in these three mental health systems can be explained primarily using an institutional framework. More specifically our analysis indicates that the placement of these intermediaries can be explained through an understanding of the policy legacies leading to the current public/private mix of mental health service delivery, and the differing administrative capacities of mental health systems. (Reviewer 1)

Response: The use of “foreshadowing” has been reduced the restructuring of the methods and re-framing as a comparative case study should be sufficient to address this concern.

7 The puzzle

The authors should include a better description of the intermediaries that were of interest in the three countries chosen and describe their placement within that system. This is the phenomenon that the authors want to understand. We learnt little about the intermediaries in the paper, and have no process tracing of when, how or why they emerged. As such, the puzzle is still unclear. (Reviewer 2)

Response: The puzzle section has been removed and the results now focus on longer and more detailed descriptions of the intermediaries.

8 A good description of the puzzle to be solved becomes even more important without a strong sampling frame. The initial observation that intermediaries seem to been found at a range of different places within mental health systems is listed, but not described convincingly.

The authors should include a better description of the intermediaries that were of interest in the three countries chosen and describe their placement within that system. We learnt little about the intermediaries, and have no process tracing of when, how or why they emerged. As such, the puzzle is unclear.

The study design, trying to determine cause and effect between independent and dependent variables, by comparing three instances therefore falls over. It is simply not convincing that the intermediaries chosen are comprehensive, or typical. (Reviewer 2)
Response: The puzzle section has been removed and the results now focus on longer and more detailed descriptions of the intermediaries.

9 Conceptual Clarity

The definition on an intermediary needs to be tightened - specifically what is NOT included as an intermediary within the scope of this study. Other terms need to be defined more tightly (especially if an reductionist approach is taken and the variables need to be defined). (Reviewer 2)

In its current form, it does not clearly set up the puzzle that it seeks to explain. This problem seems to have emerged from the weakness of the early part of the study. The series of interviews with key informants seems to have produced a nearly useless table (Table 1) outlining a small number of intermediary organisations which probably show no close resemblance to the landscape of intermediary organisations in the 8 countries in the initial scope. I know of a plethora of other intermediary organisations, including mental health commissions, academic centres that support service delivery following policy reform, and academics-turned-policy makers-turned consultants that do this work in my own country. (Reviewer 2)

Response: The definition of an intermediary has been tightened and the following sentence has been included “Intermediaries that focus on a single evidence-based program or intervention, do not focus on a whole socio-political system (e.g., only work in particular communities within a socio-political system and do not operate at a state or national level in partnership with the government at that socio-political level), or that do not focus explicitly on the implementation of particularly policy objectives, are not included in the scope of this study.

The revised Introduction, including the intermediary definition and the study context as well as the revised Methods section (including the sampling) should address this concern

10 Conceptual clarity

* Other terms need to be defined more tightly (especially if an reductionist approach is taken - and the variables need to be defined. These include: "proximity to government" “public/private mix” (Reviewer 2)

Response: “proximity to government” removed; “public/private mix” explained (services that are publicly delivered versus those that are delivered by private for-profit or not-for-profit entities)
Line 249 - not clear what 'fulsome' means. How comprehensive is this list in Table 2?

(Reviewer 2)

Response: “Fulsome” removed

12 Conceptual clarity

Line 290 - 293. It is unclear whether these are hypotheses (can be disproven) or conclusions.
(Reviewer 2) Response: Removed the word “can” from the sentence to clarify it is a statement rather than a hypothesis. It now reads: “The public/private mix of health and mental health service delivery creates different incentives or disincentives for system actors.”

13 Conceptual clarity

You seem to suggest that intermediaries are 'placed' (line 325) rather than emerge from organisational initiative, to fill a gap. Is this necessarily the case? Again, a historical institutionalist approach would provide a richer explanation here. (Reviewer 2)

Response: “emerged” is more accurate, as per Reviewer 2’s suggestion. Wording has been adjusted. The institutional conversion section also addresses this. “What is interesting about these three jurisdictions is that their intermediaries are not new organizational forms. Rather, the function of policy implementation support has been built into existing institutional infrastructure. This can be best described as a process of institutional conversion, which, according to Thelen occurs when “existing institutions are redirected to new purposes, driving changes in the role they perform and/or functions they serve.” [35]. In these cases, the conversion process is only partial in nature, since all of the initial institutional functions continue to be filled.”

14 Conceptual clarity

The paper does not provide the "rich comparative descriptions of intermediaries in three different jurisdictions" that is suggest it does (on page 470) (Reviewer 2)

Response: We agree with this and have inserted a new section providing better descriptions of the intermediaries

15 Methodological approach
It is not clear whether the authors are taking a reductionist approach - although parts of the paper suggest this. It is also valid to approach this research topic with a constructivist methodology - which for this study could be translated as a comparative case study approach - whereby institutionalist theories could be used to guide thinking. The author should make the approach clear and revise the paper accordingly. (Reviewer 2)

Response: The Methods section has now been re-framed and more clearly describes the comparative case study design (which is accurate and aligned with the ethics protocol) and that the analysis is informed by institutional theories (specifically, historical institutionalism)

16 Methods

A broader statement on the type of analysis is needed as an introduction to the Methods section between lines 162 and 163.

Response: A “Design” sub-section has been added to address this concern. “We used a comparative case study design [19] to explore the placement of intermediaries. To be congruent with our definition of an intermediary, each “case” was defined as a socio-political system (either province/state or national) that had policy authority for mental health and the intermediary or intermediaries within.”

17 Methods

- My understanding is that you have conducted the analysis at two phases. In the current description, there is a mix of results and methods across both sections and even the introduction. One suggestion would be to clarify (as part of the broad statement) that your research has been conducted in two phases: 1) qualitative interviews and 2) literature and policy review. Then describe the methods (data collection and analysis procedures) for each of the two phases individually. This would shuffle around the different sections within Methods.

- First subheading under Methods could be Qualitative Interviews:

Start with its objective from Line 164 (also from Lines 194-202) looked for the presence of intermediaries in the mental health systems of eight high-income countries. … etc.

Data collection for the qualitative interviews which includes: Sampling (who?); Data collection tools and procedures (interview guides, interview procedures); and data management and analysis (data handling and analysis).

- Second subheading under Methods could be Literature and Policy Review
Start with "Selection of settings", then Data sources and finally, Data analysis

Reviewer 1

Response: Thank you for these very helpful suggestions. The Methods section has since been restructured and should now address these concerns.

18 Results

- Besides description of intermediaries, I would suggest to add a separate sub-section after that on "description of the placement of intermediaries in the health system" (Reviewer 1)

Response: The second sub-section title has been revised and now reads “II – What explains the placement of intermediaries in these mental health systems”

19 Results

- Line 284: You mention the use of an institutional framework which is only mentioned in Line 154. This needs more clarification. What is this framework? How did you use it? Was it part of your conceptual background? Then it should be discussed in the introduction. Was it part of your data collection and/or analysis process? Then you can add the framework to your methods where appropriate.

Right now, you only mention the use of institutional theory (Line 241). This is vague and need clarification. What theory, and how was the theory or framework used in analyzing the data and identifying the two factors in your results?". (Reviewer 1)

Response: The use of institutional theory, and historical institutionalism in particular, was the lens through which the analysis was conducted using directed content analysis (after examining the placement through the lens of values and based on the policy directions and dismissing both explanations as part of the previous Policy Puzzle section – now eliminated) . This should now be more specific and clear.

20 Results

- It would be interesting to add a third table where you compare the cases against the two factors that you identified as main results. This would help in taking some details regarding the cases out of the results to present them in an easier to read way. Also to focus your results on the similarities/differences instead of describing individual cases.
Response: Thank you for your suggestion. With the amount that has been added to the manuscript based on reviewer feedback, we are limited for space and did not develop this table, although we do see the value of it.

21 Table

It is not clear whether the results in Table 1 are from the limited knowledge of intermediaries on behalf of the interviewees. Or whether this might have come about due to a lack of clarity about what an intermediary is. (It would be helpful if the authors outline what does NOT count as an intermediary organisation). A web-based search might have been a better method here and I think the article needs to place stronger caveats around this list. Better, yet, remove the table all together and simply confirm that the results of the interviews were that intermediary organisations do exist in all of the countries. The fact that Scotland was then included in the final sample, despite not even having a key informant interviewed, renders this part of the study even more futile.

Removing the table would also remove other problems, such as the classification of Welfare State Regime Type (unclear/inaccurate). And the problem of giving undue weight/importance to the specific intermediaries identified in the table. (Reviewer 2)

Response - Thank you for this feedback. Table 1 has been removed and replaced with descriptions of the intermediaries in text.