Reviewer’s report

Title: General practitioners' views and preferences about quality improvement feedback in preventive care: a cross-sectional study in Switzerland and France

Version: 0  Date: 10 May 2017

Reviewer: Sylvia Hysong

Reviewer’s report:

Thank you for the opportunity to review this paper. The authors aimed to examine general practitioners (GPs)' views on the usefulness of feedback and their preferences regarding how feedback is provided, through surveys of a random sample of 1100 GPs in Switzerland and France. Results indicated less than 1/2 the sample found feedback to be useful; more favorable perceptions of feedback utility were associated with younger age and greater clinical emphasis on preventive care. GPs reported preferring feedback via a brief report, and a report with specific information regarding prevention best practice, whereas less than 1% would like to discuss the results face-to-face with the study investigators.

The idea of examining practitioner feedback preferences is a sound one, as it improves the likelihood of feedback acceptance and thus the likelihood of feedback effectively changing behavior. The international nature of the sample is a strength of this work. Nevertheless, there are several methodological details that require attention before this manuscript is more publication-ready:

BACKGROUND:

1. The intro spends a long time discussing clinical practice guideline adherence, yet this is a study about feedback preferences. The effectiveness of feedback is well established in health care, including preventive care; I would have liked to see more detailed information about the psychology of feedback perceptions and feedback usefulness; it would have couched the research question far more effectively.

2. It is not clear what is different about preventive care that would lead the authors to believe that feedback perceptions about preventive care would differ from feedback perceptions about any other type of the care that GPs deliver.

METHOD:

1. Participants were recruited to the study by postal invitation; it is not clear, however, how the questionnaire was administered: in person? by phone? mail? Online?
2. How were the specific preventive practices selected? Along similar lines, the authors state "The selection of the feedback interventions was based on a consensus within the study team following a review of the literature." The resulting list seems rather random; or at least, it does not seem consistent with the domain of available varieties of feedback interventions. This requires more explanation as to how they arrived at the 6 specific forms of feedback delivery in the questionnaire.

DATA ANALYSIS:

1. Why was logistic regression used when a continuous Likert scale was available as the outcome measure? By dichotomizing the outcome variable to fit the data requirements of logistic regression, valuable information may have been lost.

2. The use of stepwise regression seems unnecessary when sufficient literature exists to make educated theoretical hypotheses about the most likely predictors of usefulness perceptions, which would avoid the error inflation normally characteristic of automatic variable selection procedures like stepwise regression.

3. With a 53% rate of non-response (which is not inherently a fatal flaw), I would have liked to see some manner of non-response analysis, even a cursory one.

DISCUSSION/CONCLUSION:

1. The authors state on p. 13: "We found that younger GPs and those being more adherent to guidelines were more likely to consider a feedback useful. This suggests that they are probably more open to criticism and more receptive to feedback seen as a way of improving their practice." Though certainly a logically reasonable supposition, this conclusion needs support from the literature, as it is too big of a leap from what the results indicate.

2. Given the methodological details that need attention, I am not certain that the results and conclusion reached by the authors teach us anything particularly new or novel.

Minor changes:

1. p. 24, line 278 -- I presume the authors meant to say "odds ratio" rather than "odd ratio"

2. There are various grammatical errors sprinkled throughout the manuscript; it may be useful to have the manuscript proofread and/or copy-edited by a colleague or a technical writer.

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