ARTICLE DETAILS

TITLE (PROVISIONAL)	A systematic review protocol for facilitators and barriers to integrating health services for traumatic brain injury and mental health or addictions
AUTHORS	Chan , Vincy; Toccalino, Danielle; Colantonio, Angela

VERSION 1 – REVIEW

REVIEWER	Nick Garrett PhD Auckland University of Technology, Auckland, New Zealand
REVIEW RETURNED	05-Feb-2019

GENERAL COMMENTS	The article is well written and process well laid out. The only gap is the lack of recognition of the potential impact of unpublished results or publication bias especially when examining a non-specific treatment such as integrated therapies.

REVIEWER	Marie-Christine Ouellet Université Laval, Québec, Canada
REVIEW RETURNED	13-May-2019

GENERAL COMMENTS	This paper presents a very sound and well presented protocol for a systematic review of facilitators and barriers to the integration of services for mental health/addictions and traumatic brain injury (TBI). This area is still very poorly researched. Indeed, while there are a plethora of studies published on the significant prevalence of mental health/addiction issues in the TBI population, very few studies document whether individuals are adequately diagnosed and treated for these conditions, and how. Even less studies describe the gap in services that these patients unfortunately face or propose solutions to increase access to appropriate services. The present systematic review will help start documenting and addressing this gap, although I imagine the search will not reveal much literature specific to "integrated healthcare" (perhaps consider widening the question to "access to mental health services" ?). The authors seem realistic about this as they plan to identify articles which to not necessarily address integrated healthcare directly. The methods for the review are rigorous and plan to encompass not only individual interventions, but also programs and policies. I believe the literature will provide material for interventions which the authors will consider "integrated healthcare" yet the identification of barriers and facilitators will probably be quite rare but will set the stage for future studies and constitutes a great strength of the proposed work. However, I anticipate this will be quite a muddier process than the protocol suggests. Indeed, regarding the data extraction for points 7-10, the "description of integration activity",

	results of this integration activity, as well as for facilitators and barriers, these will be the main results of the study, yet these will probably often present in a very unclear manner in the literature. The independent reviewers will probably need to work hard to dig up this material, and might not identify, extract, and interpret this material in the same way. Could a systematic procedure be introduced much like in qualitative research where the reviewers independently review a limited number of papers at first, meet to establish a common extraction/interpretation technique and reach consensus, then re-check at specific and regular time-points if their extractions method remains consensual ?

VERSION 1 – AUTHOR RESPONSE

Reviewer(s)' Comments to Author:

Reviewer: 1

Reviewer Name

Nick Garrett PhD

Institution and Country

Auckland University of Technology, Auckland, New Zealand

 Please state any competing interests or state 'None declared':
None declared

Please leave your comments for the authors below

The article is well written and process well laid out.

The only gap is the lack of recognition of the potential impact of unpublished results or publication bias especially when examining a non-specific treatment such as integrated therapies.

Thank you for your feedback. We added these limitations to our limitations section of the protocol. Please see page 8. Specifically we acknowledged, "of note is that unpublished results will not be identified in our systematic review, further limiting the comprehensiveness of this review. Recognizing the value of results of integrated activities that are not published in peer-reviewed journals, this protocol includes the process to systematically identify reports and theses to maximize the capture of findings related to integrated care for the TBI and MHA populations".

We further added that "recognizing that some non-specific treatments and interventions, such as screening for a TBI among individuals with MHA, may not be described as a form of integration and would be missed in the primary search. This additional search will ensure that non-specific treatments and integrated care are captured in this review".

Reviewer: 2

Reviewer Name

Marie-Christine Ouellet

Institution and Country

Université Laval, Québec, Canada

 Please state any competing interests or state 'None declared':
None declared

Please leave your comments for the authors below

This paper presents a very sound and well presented protocol for a systematic review of facilitators and barriers to the integration of services for mental health/addictions and traumatic brain injury (TBI). This area is still very poorly researched. Indeed, while there are a plethora of studies published on the significant prevalence of mental health/addiction issues in the TBI population, very few studies document whether individuals are adequately diagnosed and treated for these conditions, and how. Even less studies describe the gap in services that these patients unfortunately face or propose solutions to increase access to appropriate services. The present systematic review will help start documenting and addressing this gap, although I imagine the search will not reveal much literature specific to "integrated healthcare" (perhaps consider widening the question to "access to mental health services" ?). The authors seem realistic about this as they plan to identify articles which to not necessarily address integrated healthcare directly.

Thank you for your positive feedback. We are hopeful that our systematic review will form the foundation for future research on integrating care and support for individuals with TBI and MHA, and that findings can support initiatives to improve integrated care for these populations.

We have expanded our research question to the following – please see page 4:

"Building on this vision, this protocol is for a systematic review that (1) describes the current types of integrated care for TBI and MHA, including access to MHA services for the TBI population and access to TBI services for the MHA population, and (2) identifies the barriers and facilitators to integrating health services for individuals with TBI and MHA."

The methods for the review are rigorous and plan to encompass not only individual interventions, but also programs and policies. I believe the literature will provide material for interventions which the authors will consider "integrated healthcare" yet the identification of barriers and facilitators will probably be quite rare but will set the stage for future studies and constitutes a great strength of the proposed work. However, I anticipate this will be quite a muddier process than the protocol suggests. Indeed, regarding the data extraction for points 7-10, the "description of integration activity", results of this integration activity, as well as for facilitators and barriers, these will be the main results of the study, yet these will probably often present in a very unclear manner in the literature. The independent reviewers will probably need to work hard to dig up this material, and might not identify, extract, and interpret this material in the same way. Could a systematic procedure be introduced much like in qualitative research where the reviewers independently review a limited number of papers at first, meet to establish a common extraction/interpretation technique and reach consensus, then re-check at specific and regular time-points if their extractions method remains consensual ?

Many thanks for this recommendation. We have updated our protocol on page 6 – "Recognizing that reviewers may interpret the above pre-determined inclusion criteria differently, a random selection of abstracts and titles will first be selected for independent review so the reviewers can meet to establish and document a common extraction and interpretation technique. The reviewers will then meet regularly to review the abstracts that are included/excluded to ensure consistency in the interpretation of the pre-determined inclusion criteria".

We will follow the above suggestion for the full-text review – "Similar to the title and abstract screen, the reviewers will first review a random selection of articles to establish a common extraction and interpretation technique, and will meet regularly to ensure consistency in the interpretation of the inclusion criteria". Please see page 6.

Finally, we will follow the above suggestion also for the data extraction process – "Similar to the study selection process, the reviewers will first conduct data extraction on a select articles to establish a common interpretation and extraction technique, and will meet regularly to ensure consistency in the data extracted". Please see page 7.