

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	What attributes of patients affect their involvement in safety? A key opinion leaders' perspective
AUTHORS	Buetow, Stephen; Davis, Rachel; Callaghan, Kathleen; Dovey, Susan

VERSION 1 - REVIEW

REVIEWER	Ian Watt, Professor of Primary Care University of York Department of Health Sciences Area 4, Seebohm Rowntree Building York YO10 5DD
REVIEW RETURNED	16-May-2013

THE STUDY	<p>More detail would be helpful on how the safety experts that participated in the study were identified. Only a small number (17) experts were invited to participant in the study but no detail is given on how the accreditation "expert" was decided.</p> <p>It would be also helpful to have more detail on how the 10 preliminary domains for participants to rate in the first round Delphi questionnaire were obtained. We are told they were obtained from literature spanning health care and philosophy but this seems a little vague.</p>
RESULTS & CONCLUSIONS	<p>The Delphi study identifies attributes that patients are perceived by key opinion leaders to need to partner safely in health care. However, only a small number of individuals participated in the study and the relevance of the views of this group is unclear. In particular we have no information on why these individuals were approached other than what appears to be a subjective judgement of expertise. Furthermore as the authors themselves identify, there is no lay voice in the study and neither have the results been contrasted with relevant research into the views and experience of patients. In view of this I believe it is difficult to interpret the implications of the study and make any strong conclusions.</p> <p>Further concern I have is that some of the patient attributes identified as important in the study results maybe interconnected and not exist as discreet entities, for example, how much are some of the attributes inherent in "confidence" related to the ability to speak up which is classified under autonomy. Some discussion of these issues would be welcome.</p>
GENERAL COMMENTS	<p>The consideration of capability theory in the introduction to the paper is interesting but somewhat superficial and I am not sure it adds anything to the reporting of what is essentially a small Delphi study. The authors may wish to consider expanding on their ideas in more detail in a separate paper.</p>

REVIEWER	Ian Fletcher Lancaster University UK
REVIEW RETURNED	23-May-2013

THE STUDY	The participants were medical 'experts' not patients
GENERAL COMMENTS	This is a well written and timely contribution to the literature.

VERSION 1 – AUTHOR RESPONSE

Referee 1

<i>Referee comment</i>	<i>Our response</i>
More detail would be helpful on how the safety experts that participated in the study were identified.	We have added a phrase on page 10, which we hope will suffice.
Only a small number (17) experts were invited to participant in the study but no detail is given on how the accreditation "expert" was decided. ... only a small number of individuals participated in the study and the relevance of the views of this group is unclear. In particular we have no information on why these individuals were approached other than what appears to be a subjective judgement of expertise.	Appendix 1 now lists the panel by academic position (with the consent of each panelist). The names of the panellists are the best evidence of their expertise. On page 17, paragraph 1 elaborates on the concept of an "expert".
It would be also helpful to have more detail on how the 10 preliminary domains for participants to rate in the first round Delphi questionnaire were obtained. We are told they were obtained from literature spanning health care and philosophy but this seems a little vague.	Detail has been added at the top of page 11.
... as the authors themselves identify, there is no lay voice in the study and neither have the results been contrasted with relevant research into the views and experience of patients. In view of this I believe it is difficult to interpret the implications of the study and make any strong conclusions.	Please see page 17, paragraph 2.
Further concern I have is that some of the patient attributes identified as important in the study results maybe interconnected and not exist as discreet entities, for example, how much are some of the attributes inherent in "confidence" related to the ability to speak up which is classified under autonomy. Some discussion of these issues would be welcome.	See the bottom of page 16, top of page 17.
The consideration of capability theory in the introduction to the paper is interesting but somewhat	Feedback from Quality and Safety in Health Care (which encouraged us to submit our

<p>superficial and I am not sure it adds anything to the reporting of what is essentially a small Delphi study. The authors may wish to consider expanding on their ideas in more detail in a separate paper.</p>	<p>manuscript to BMJ Open) stated: "We found some aspects of your manuscript very interesting, including its theoretical emphasis on the capabilities approach." Accordingly, we do not wish to remove this part of the manuscript. We agree that there is scope to expand on our ideas in a separate paper; as part of a debate to which the reviewer himself is contributing in depth.</p>
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Reviewer 2: No revisions requested.

VERSION 2 – REVIEW

REVIEWER	<p>Professor Ian Watt Professor of Primary Care University of York Department of Health Sciences Area 4, Seebohm Rowntree Building, York YO10 5DD</p>
REVIEW RETURNED	25-Jun-2013

THE STUDY	<p>The revised manuscript addresses the issues raised in my previous review. Whilst some of the responses are a little superficial (e.g. I would argue that it is possible to give a better explanation of how the status of expert was decided upon rather than the statement..."the names of the panelists are the best evidence of their expertise") the issues are at least now explicit in the paper and the reader can make their own judgements.</p>
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