

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	VOICES: the Value Of six-month Clinical Evaluation in Stroke - The protocol for a planned qualitative study to ascertain the value of stroke follow-up to people affected by stroke
AUTHORS	Jenkins, Colin; Price, Fiona

VERSION 1 - REVIEW

REVIEWER	Jo Gibson University of Central Lancashire UK
REVIEW RETURNED	15-Sep-2014

GENERAL COMMENTS	<p>This is a clearly written protocol, which could be improved by attention to the following:</p> <p>The inclusion of stroke survivors with aphasia is welcome, but could be better addressed by designing aphasia-friendly study materials (e.g. information and consent forms, modified interview schedule) rather than relying on the interpretation of a relative or friend.</p> <p>It appears that initial coding will be performed only by one researcher (FP). I would normally expect to see at least a sample of the transcripts being coded by a second researcher for reliability purposes.</p> <p>The authors reference the Stroke Needs Survey (McKevitt et al), but it is unclear to what extent the study draws on this and other literature on post-stroke needs. The eventual findings will be greatly strengthened by integration with the existing literature.</p>
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VERSION 1 – AUTHOR RESPONSE

We have amended the title in order to clarify that this submission is a protocol of a planned study. In addition, we have removed the lay summary since these are not published in BMJ Open.

The comments from the second reviewer about aphasia-friendly materials were particularly helpful; we have created new versions of those documents for the study itself and referred to these in the amended protocol. An additional reference has also been added to support this change.

We have clarified the section about coding analysed data since it was never our intention to have only one researcher examine coded text. It was beneficial for us to see that we had not made this as explicit as we had thought.

Finally, when we publish the findings from this proposed study, we aim to evaluate existing literature and integrate our findings within the national picture of stroke follow-up care.