

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Patients Perceived Value of Pharmacy Quality Measures: A Mixed Methods Study
AUTHORS	Shiyanbola, Olayinka; Mort, Jane

VERSION 1 - REVIEW

REVIEWER	Terri Warholak, PhD, RPh The University of Arizona USA
REVIEW RETURNED	22-Jul-2014

GENERAL COMMENTS	<p>General: I think this article will add significantly to the literature. Most sections are well written, descriptive, complete, and appropriate. In particular, I'm very impressed with the methodological rigor used in the study design and analysis. I think there are some items missing – but in general, I'm very pleased with what I see. Nice work! I look forward to seeing this article in print. Only those items in need of some editing or re-work will be mentioned below.</p> <p>Abstract</p> <ul style="list-style-type: none">• Methods: Information that I would like to see added include: how patients were selected and where the focus groups were performed.• Results: When 4.88 is mentioned, it is hard for the reader to know what this means... Is it a mean? Please specify.• Conclusion: Soften language. This seems too broad and far-reaching for focus groups in one state. <p>Article Summary</p> <ul style="list-style-type: none">• Results are too strongly worded for focus groups in one state. <p>Methods</p> <ul style="list-style-type: none">• It seems like information is missing here concerning the focus group procedures. For example, what was presented to the participants? Where were they told the metrics came from (i.e., who were they told would create ratings for each pharmacy)? Please add the focus group script and a summary of the presentation. <p>Results</p> <ul style="list-style-type: none">• Please add participant demographics to the manuscript. <p>Discussion</p> <ul style="list-style-type: none">• Make sure the discussion is worded such that it is clear that these are only focus group participants in one state (i.e., make wording less strong by changing patients to participants, change “are likely to” to “report being likely to”). <p>Conclusion</p> <ul style="list-style-type: none">• Results are too strongly worded for focus groups in one state.
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REVIEWER	Todd Brown Northeastern University Boston, MA USA
REVIEW RETURNED	22-Sep-2014

GENERAL COMMENTS	<p>The following items need to be clarified in the discussion and conclusion sections.</p> <p>Demographic info on patients interviewed.</p> <p>How many pharmacies were used by the patients who were interviewed.</p> <p>Did individuals who used more than one pharmacy have different views.</p> <p>Did the type of pharmacy (i.e., independent, chain, supermarket) influence the views of the patient.</p> <p>How well did the patients know and what type of relationship did they have with their pharmacist prior to this research.</p> <p>Well written and the topic should be of interest to a wide audience. The minor revisions suggested should clear up any confusion and make this research more useful to the readers.</p>
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REVIEWER	Marjan Faber, senior research fellow Radboud university medical center Institute for Quality of Healthcare Nijmegen, the Netherlands
REVIEW RETURNED	07-Oct-2014

GENERAL COMMENTS	<p>After reading the manuscript, I have to conclude that the paper is not suited for publication in BMJ Open. There are methodological concerns, and more importantly, there is no message for the readers of a general journal as BMJ Open.</p> <p>This paper presents an interesting piece of work regarding the patients' perspective in the field of public reporting. While patients are one of the stakeholders in an effective system of public reporting, their values and perceived usefulness of quality information are of tremendous importance.</p> <p>However, in the research presented, the authors fail to present a firm methodological approach and structured way of presenting the results. Many, many issues are presented, supported by long quotations. There seem to be no major and minor findings. It's unclear how themes were identified. Moreover, the authors acknowledge that a lot of work has been done around public reporting and the patient's role. The notion that "No one has considered if there are similar variations in importance among pharmacy-based quality measures" (page 7, line 53-56), does not legitimize the publication of this piece of work in a general journal like BMJ Open. It would perfectly fit into a pharmacy-oriented journal. Nevertheless, a critical look is needed to improve the data</p>
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	<p>synthesis and presentation of the results.</p> <p>For both reasons, the paper is not suitable for publication in BMJ Open.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer 1

Abstract

Methods: Information on how the patients were selected and where the focus groups was conducted has been added to the abstract.

Results: 4.88 is a mean and this information has been clarified.

Conclusion: The language in this section has been softened to reflect the findings being applicable to the study participants.

Article Summary

The results has been modified to soften the language and make it reflective of the focus groups being done in one state.

Methods

Missing information concerning the focus group procedures has been added to the paper. Focus group participants were presented with patient-friendly phrasings of each quality measure. The participants were not told where the ratings for each pharmacy would come from since this information was unknown to the moderator. The focus group script and information on the mock-report card presentation has been added as an appendix.

Results

Participant demographics has been added to the paper.

Discussion

We thank the reviewer for the suggestions to make the discussion better written. The discussion has been reworded to make it clear that the focus group participants were only in one state.

Conclusion

The concluding statements has been softened to reflect the focus groups being done in one state.

Reviewer 2

Demographic information on the focus group participants has been added to the paper.

Information on the number of pharmacies used by the participants is now included.

While we agree with the authors that it would be interesting to know if individuals who used more than one pharmacy had different views on the value and importance of these quality measures, we did not analyze the results based on these characteristics.

It is not known if the type of pharmacy used by the participant might have influenced their views. This would be an interesting hypothesis to explore in future research.

Based on the focus group discussions, it seems that the participants in the rural area knew their pharmacist fairly well. However, we did not explore the type of relationship they had with their pharmacist prior to this research.

Reviewer 3

Thank you to the reviewer for your critique of the article.

VERSION 2 – REVIEW

REVIEWER	Warholak, Terri University of Arizona USA
REVIEW RETURNED	23-Nov-2014

GENERAL COMMENTS	Thank you for addressing my concerns.
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REVIEWER	Todd Brown Northeastern University USA
REVIEW RETURNED	24-Nov-2014

GENERAL COMMENTS	Helping patients obtain needed medication is classified as an "adherence measure". While access to medication has been shown to improve adherence there are many other causes of non-adherence and many other interventions that can improve adherence. This should be stated somewhere in the article. Limited geographical area should also be added to the limitations section.
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VERSION 2 – AUTHOR RESPONSE

Reviewer 1

Thank you for your response.

Reviewer 2

Thank you for your suggestion.

The fact that there are many causes of nonadherence and there are several interventions to improve adherence has been stated in the discussion.

As suggested, limited geographical area has been added to the limitations.