

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Complex programme evaluation of a 'New Care Model' Vanguard; a shared commitment to quality improvement in an integrated health and care context
AUTHORS	Fowler Davis, Sally; Hinde, Sebastian; Ariss, Steven

VERSION 1 - REVIEW

REVIEWER	Katherine Diaz Vickery Hennepin Healthcare Research Institute and University of Minnesota, USA
REVIEW RETURNED	18-Jun-2019

GENERAL COMMENTS	<p>The authors make a laudable attempt to describe a failed evaluation and to translate it into meaningful reflections for the NHS. This is an important contribution that has the potential for high impact and relevance across the country given the significant funds invested in this nation-wide programme. I particularly liked the four improvement areas under the section "Improving capacity for complex programme evaluation."</p> <p>While admirable in its goal, I find there to be several areas of critical improvement to allow for a better understanding of what authors did and what improvements they suggest. These include:</p> <p>1) I recommend a clearer organization to the entire paper. This would include an explicit objective statement (like that in the abstract) to follow the "Background" section. I think this comes now as par. 2 on pg. 4 but it's lost with the headings as currently used.</p> <p>While respecting the anonymity of the participating site, I need some more context introducing when and where authors are reflecting on their specific experiences at a single site. I believe this begins on pg. 4, but I am unsure.</p> <p>2.) I need clearer language and context especially with regard to use of terms. On pg. 4 "the Programme team," "the evaluation team," "the management team," "the Vanguard Board," "the Vanguard programme team," and the "delivery team" are all referred to in close succession. None of these are defined nor used consistently throughout the paper. This is important to help orient readers who may be unfamiliar with this initiative. This could be done in a context-setting paragraph in conjunction with point (1) above.</p> <p>3) I find many examples of missing words or incorrectly used punctuation. Sentences are often four to six lines long. All this makes reading quite difficult. Some examples include: Pg. 2, bullet</p>
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	<p>one of the Strengths and Limitations, unneeded semi colon in the final sentence of the full paragraph on pg. 5 (approx. line 40), inappropriate comma on pg. 7, par. 3, approx. line 43/44, and pg. 9 par. 3, apprx. line 35, "Whilst evaluations can be rapid-cycle..." 4) I find the "Economic evaluation" heading on pg. 10 to be incongruent with the other headings in this final section. I suggest editing to more closely align with the language used in the conclusion paragraph.</p> <p>Overall, while valuable, I find this paper to represent a one-sided story of evaluation failure that lacks perspectives from the operational partners. There's a presumption of superiority to the science of evaluation and not enough perspective represented from the leaders with the challenge of building and running these programmes. Could an author from the participating area be recruited to bring such insights? This is most evidence on pg. 10, par. 1 where a deep philosophic divide is described by the authors but worded as a deficit and "need for programme managers to understand the metrics by which population health improvements are being assessed." This is the crux of the problem--poor alignment and planning between academic and operational groups throughout this evaluation.</p>
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REVIEWER	Jamie Murdoch University of East Anglia, United Kingdom
REVIEW RETURNED	25-Jun-2019

GENERAL COMMENTS	<p>This is an interesting and important contribution, although I am not familiar with the literature on Vanguards. It highlights some fundamental challenges of conducting robust evaluation in the NHS and within any organisation where competing priorities, institutional structures both constrain and obfuscate the implementation-evaluation-change cycle. The article draws attention to how pressures to demonstrate success are intimately connected to control and trust over process and outcome, in definitions and choice of outcomes, access to data, cost and ultimately what kind of knowledge is produced.</p> <p>I only have recommendations for minor revisions. I think a bit more description about what a vanguard is and examples of vanguard models would be helpful in the opening paragraph. I found it took me a while to work this out and I wasn't sure how this made sense in terms of integrated teams.</p> <p>In terms of improving planning for evaluation I wonder if the team have ideas about methodological innovation that could be added to the article. For example, if it is difficult to obtain health outcome data then rather than attempting to statistically measure a relationship between vanguard models and health outcome, then perhaps evaluators could work out how to achieve theoretical generalisability, examining relationships between different contextual features, implementation and observable features of service delivery. The concept of 'disruptive innovations' is helpful in this regard if translated into methodological tools which empirically expose those disruptions. This can sometimes be achieved with relatively small quantities of qualitative observational</p>
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	data that function as 'telling cases' of the wider context in which it is being delivered.
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VERSION 1 – AUTHOR RESPONSE

Response to Katherine Diaz Vickery

Thanks for your comments that remind us of the need to make the paper accessible to an international audience.

While admirable in its goal, I find there to be several areas of critical improvement to allow for a better understanding of what authors did and what improvements they suggest. These include:

1) I recommend a clearer organization to the entire paper. This would include an explicit objective statement (like that in the abstract) to follow the "Background" section. I think this comes now as par. 2 on pg. 4 but it's lost with the headings as currently used.

Additional detail has been added and paper re-organised

While respecting the anonymity of the participating site, I need some more context introducing when and where authors are reflecting on their specific experiences at a single site. I believe this begins on pg. 4, but I am unsure.

Additional comment about the Vanguard has been added

2.) I need clearer language and context especially with regard to use of terms. On pg. 4 "the Programme team," "the evaluation team," "the mangement team," "the Vanguard Board," "the Vanguard programme team," and the "delivery team" are all referred to in close succession. None of these are defined nor used consistently throughout the paper. This is important to help orient readers who may be unfamiliar with this initiative. This could be done in a context-setting paragraph in conjunction with point (1) above.

Agreed, we have clarified the terminology

3) I find many examples of missing words or incorrectly used punctuation. Sentences are often four to six lines long. All this makes reading quite difficult. Some examples include: Pg. 2, bullet one of the Strengths and Limitations, unneeded semi colon in the final sentence of the full paragraph on pg. 5 (approx. line 40), inappropriate comma on pg. 7, par. 3, approx. line 43/44, and pg. 9 par. 3, apprx. line 35, "Whilst evaluations can be rapid-cycle..."

4) I find the "Economic evaluation" heading on pg. 10 to be incongruent with the other headings in this final section. I suggest editing to more closely align with the language used in the conclusion paragraph.

Agreed, the grammar has been amended and headings changed

Overall, while valuable, I find this paper to represent a one-sided story of evaluation failure that lacks perspectives from the operational partners. There's a presumption of superiority to the science of

evaluation and not enough perspective represented from the leaders with the challenge of building and running these programmes. Could an author from the participating area be recruited to bring such insights? This is most evidence on pg. 10, par. 1 where a deep philosophic divide is described by the authors but worded as a deficit and "need for programme managers to understand the metrics by which population health improvements are being assessed." This is the crux of the problem--poor alignment and planning between academic and operational groups throughout this evaluation.

It was our intension to learn from the difficulties encountered and the Vanguard have also published a 'lessons learned' paper. However we have carefully addressed the issue you raise about the need to present the methodological challenges without implicitly criticising the process.

Reviewer: 2

Jamie Murdoch

This is an interesting and important contribution, although I am not familiar with the literature on Vanguards. It highlights some fundamental challenges of conducting robust evaluation in the NHS and within any organisation where competing priorities, institutional structures both constrain and obfuscate the implementation-evaluation-change cycle. The article draws attention to how pressures to demonstrate success are intimately connected to control and trust over process and outcome, in definitions and choice of outcomes, access to data, cost and ultimately what kind of knowledge is produced.

Thanks for the comments- we are committed to presenting the methodological challenges of evaluation, including economic evaluation within improvement and implementation practices

I only have recommendations for minor revisions. I think a bit more description about what a vanguard is and examples of vanguard models would be helpful in the opening paragraph. I found it took me a while to work this out and I wasn't sure how this made sense in terms of integrated teams.

Agreed, additional detail is added

In terms of improving planning for evaluation I wonder if the team have ideas about methodological innovation that could be added to the article.

References include comment about the need for economic evaluation to incorporate measures that are relevant to the implementation

For example, if it is difficult to obtain health outcome data then rather than attempting to statistically measure a relationship between vanguard models and health outcome, then perhaps evaluators could work out how to achieve theoretical generalisability, examining relationships between different contextual features, implementation and observable features of service delivery. The concept of 'disruptive innovations' is helpful in this regard if translated into methodological tools which empirically expose those disruptions. This can sometimes be achieved with relatively small quantities of qualitative observational data that function as 'telling cases' of the wider context in which it is being delivered.

This is helpful and we have amended in line with this idea

VERSION 2 – REVIEW

REVIEWER	Katherine Diaz Vickery Hennepin Healthcare Research Institute and University of Minnesota Minneapolis, MN
REVIEW RETURNED	23-Oct-2019

GENERAL COMMENTS	<p>The edits in response to initial reviewer feedback have sufficiently clarified this article. I find it clear, compelling, and interesting. I am hopeful the focus on specific strategies to improve capacity for complex programme evaluation will be a guide for the NHS and other health care delivery organizations. Thank you for this important work!</p> <p>I still find a number of punctuation choices that confuse me. Rather than offer my own opinions, I'd recommend review by a UK-based editor with a strong rooting in grammar before publication.</p>
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REVIEWER	Jamie Murdoch University of East Anglia, UK
REVIEW RETURNED	04-Nov-2019

GENERAL COMMENTS	The authors have responded well to my comments and is acceptable for publication.
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VERSION 2 – AUTHOR RESPONSE

Dear Reviewer

Many thanks for your comments and as suggested the paper has been subject to rigorous grammar check.