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)	How do National Health Service (NHS) Organisations respond to
	patient concerns? A qualitative interview study of the Patient
	Advice and Liaison Service (PALS)
AUTHORS	Shepard, Keegan; Buivydaite, Ruta; Vincent, Charles

VERSION 1 – REVIEW

REVIEWER	van Beuzekom, M Universiteit Leiden
REVIEW RETURNED	13-Jun-2021

GENERAL COMMENTS	Method
	We asked to interview the PALS Lead or Manager, and for them to
	nominate a PALS Officer and clinician familiar with their work.
	it is possible that this influenced the results, the advice is to
	mention this by the limitations of the study
	The study explores: (1) The role of the PALS team (2) the nature
	and response to concerns brought to PALS; (3) barriers and
	facilitators of concerns resolution and (4) how PALS data is used
	for wider learning within the host organisation.
	for which fourning within the floor organisation.
	The themes are in a very general manner discussed in the results.
	Advice is to discuss this by managers, officers and clinicians.
	For instance on page 6: Pals staff reported, this are managers and
	officers?
	At the end of this page: PALS team members, who are these
	members?
	Finally, the study would gain more body if the experiences of
	patients with the PALS are also included
	patients with the FALS are also included

REVIEWER	Boeckxstaens, Pauline Ghent University, Department of public health and primary care
REVIEW RETURNED	14-Jul-2021

GENERAL COMMENTS	Dear authors Thank you for the opportunity to review your work. You have studied an important topic and I believe you have foudn interesting results that expand the role of PALS teams to patient navigation and possibly also to supporting patient engagement in the health system. However, the quality of the paper is insufficient to be published. I hope my comments will help you to revise your paper.
	Sincerely Pauline Boeckxstaens

ABSTRACT
Patient Advice and Liaison Service (PALS) – a description of this service and what it's about would be of interest in the abstract. Four mental health trusts and four acute trusts in the English NHS
- for an international the word trust is unclear/provides too little
context PALS Managers, eight PALS Officers -> if you mention the difference between managers, officers and hc staff working within PALS teams in the abstract I think the reader needs some background on these different roles. If you don't have the wordcount to include this information in the abstract I would chose another way of reporting for the participants. (shorter and use more words earlier in the abstract?)
Please explain the framework method. I am not sure all the topics of your interview guide need to be mentioned in this part. Many PALS staff also act as navigators of services, mediators between families and staff and on occasion appear to act as patient advocates in supporting them to raise concerns> you mention this in the discussion but these seem to be new results Is the fact that these teams have broadened their remit and responsibilities over time a result? It feels as if some of the results part belongs in the discussion and vice versa and involved acute, mental health and community organisations-> so suddenly you also mention community? Why is this different then the setting part?
INTRO You mention 4RQ. (1) The role of the PALS team (2) the nature and response to concerns brought to PALS; (3) barriers and facilitators of concerns resolution and (4) how PALS data is used for wider learning within the host organisation. The results of the abstract are not structured accordingly
METHODS Qualitative study with narrative research approach – please use references to underpin your study design. The framework method is not referenced either. There is no figure or table supporting the reader to understand the methods
RESULTS. The number of participants is usually mentioned under results? I have found it in the methods and in the abstract but there is no clear overview of who has been interviewed. A table describing participants characteristics is lacking
DISCUSSION I think the paper is ill referenced. For instance, the topic of patient navigation is introduced as one of the roles of the PALS teams but it is hardly being explored in the discussion nor is it related to the body of literature on patient navigation and its importance in an increasingly complex health system. Same for topics as health advocacy and patient engagement in policy. For an international reader the paper is too NHS focused. These two comments limit the overall learnings of this work

VERSION 1 – AUTHOR RESPONSE

Reviewer 1 comments	
We asked to interview the PALS Lead or Manager, and for them to nominate a PALS Officer and clinician familiar with their work. it is possible that this influenced the results, the advice is to mention this by the limitations of the study	Additional limitations added in strengthens and limitations of the study section.
The themes are in a very general manner discussed in the results. Advice is to discuss this by managers, officers and clinicians.	Thank you, we agree that the differences in views between managers, PALS officers and clinicians is potentially important. During the writing of the paper we examined these different viewpoints and contrasted the findings. However, in practice there was considerable agreement and overlap between these different groups and consistent themes emerged from all participants, as detailed in the text. We therefore decided to report the results thematically from all participants, and simply to note where one particular group highlighted a particular point. We also realised that the paper would become long and unwieldly if we had to repeat all the findings three times. We have therefore maintained the original thematic structure, but highlighted any differences between groups to ensure that any important differences in perspective are brought out.
For instance on page 6: Pals staff reported, this are managers and officers. At the end of this page: PALS team members, who are these members?	Apologies, when 'PALS staff' or 'PALS team members' were discussed, it implied that there was a consensus across PALS Managers and Officers, as well as Trusts. We have clarified the language on this point throughout the paper
Finally, the study would gain more body if the experiences of patients with the PALS are also included	We agree that the perspective of patients on PALS is of great interest and should be the topic of a future study. There is considerable scope to examine PALS from a number of different perspectives. However, a full paper is needed to simply report the staff perspective. We believe that a separate paper is required to examine patient perspectives.
Reviewer 2 comments	
Thank you for the opportunity to review your work. You	Thank you for your appreciation of the paper and its relevance.

have studied an important topic and I believe you have found interesting results that expand the role of PALS teams to patient navigation and possibly also to supporting patient engagement in the health system. Patient Advice and Liaison	Detailed information about PALS and their responsibilities are
Service (PALS) – a description of this service and what it's about would be of interest in the abstract.	given in box 1, we think writing description in abstract would be a repetition of the box 1.
Four mental health trusts and four acute trusts in the English NHS – for an international the word trust is unclear/provides too little context	We realise that Trust is a difficult word for international readers, but it is the most appropriate word for the UK NHS. We have therefore added a short definition of how the word Trust is used in this context, for reference see box 1
PALS Managers, eight PALS Officers -> if you mention the difference between managers, officers and hr staff working within PALS teams in the abstract I think the reader needs some background on these different roles. If you don't have the word count to include this information in the abstract I would choose another way of reporting for the participants. (Shorter and use more words earlier in the abstract?)	Thank you, we have shortened and rewritten in abstract and simply stated that there were 24 participants from PALS staff across 8 healthcare organisations. Further information on staff is given in the methods section. We agree that it would be difficult to describe the roles in the limited space of the abstract.
Please explain the framework method	We have described and referenced the Framework approach, so that readers can follow up and find a detailed description. However, we have now added a table to set out the various stages as well. We would be happy to add more detail if need be, but the paper is already quite long and we are mindful of space limitations.
I am not sure all the topics of your interview guide need to be mentioned in this part.	This has been edited and removed from abstract.
Many PALS staff also act as navigators of services,	Thank you for pointing out this discrepancy. These themes did emerge in the findings, but we probably gave them too much

mediators between families and staff and on occasion appear to act as patient advocates in supporting them to raise concerns> you mention this in the discussion but these seem to be new results.	emphasis in the Discussion and not enough in the Results. We have now adjusted this statement in the Discussion, and expanded the references to these issues in the 'the role of PALS' theme', we added a quote to illustrate our findings.
Is the fact that these teams have broadened their remit and responsibilities over time a result? It feels as if some of the results part belongs in the discussion and vice versa	Yes, this is a good point and difficult to assess. Certainly PALS staff take on responsibilities beyond what is specified in the primary NHS description, but they didn't specifically describe this as broadening their remit. So, this is really simply an observation on our part and why we thought it most appropriate in the Discussion. We have tried to clarify this point in the Discussion.
And involved acute, mental health and community organisations-> so suddenly you also mention community? Why is this different then the setting part?	Thank you for pointing this out. Some NHS organisations describe themselves as 'mental health and community'. We have edited across paper and clarified that it is mental health and acute organisations, deleting community throughout the paper.
You mention 4RQ. (1) The role of the PALS team (2) the nature and response to concerns brought to PALS; (3) barriers and facilitators of concerns resolution and (4) how PALS data is used for wider learning within the host organisation. The results of the abstract are not structured accordingly.	We restructured abstract a bit to better reflect this comment.
Qualitative study with narrative research approach – please use references to underpin your study design.	We have added some additional studies to explain this research approach. For example Merriam, S., 2009. Qualitative research: A guide to design and implementation. 1st ed. San Francisco: Jossey Bass.
The framework method is not referenced either.	We have used the reference of Gale (2013), which gives a good description and is a source document for many studies using this approach.
There is no figure or table supporting the reader to understand the methods	We have added a Table 2 of steps to further explain the steps of Framework analysis.
The number of participants is usually mentioned under results? I have found it in the	We have added a table that describes the participants. For further information please see Table 1.

methods and in the abstract but there is no clear overview of who has been interviewed. A table describing participants characteristics is lacking	We have not collected any demographic information about participants as it was not relevant for our study. In addition, because teams are small in these PALS services, we reduced information to make it as anonymous as possible.
I think the paper is ill referenced. For instance, the topic of patient navigation is introduced as one of the roles of the PALS teams but it is hardly being explored in the discussion nor is it related to the body of literature on patient navigation and its importance in an increasingly complex health system.	PALS staff certainly do help patients navigate the system, but they did not always describe it in these terms. We agree though that it is an important observation and have added some references to reflect the links with the wider literature. We have also clarified in the Discussion that this kind of activity is something that PALS staff occasionally engage in, rather than the main activities of providing support, advice and information.
Same for topics as health advocacy and patient engagement in policy.	
For an international reader the paper is too NHS focused. These two comments limit the overall learnings of this work.	This is true in the sense that PALS is very particular to the NHS and not found in this form in other systems, or at least not with that particular description. However, many of the challenges patients face that PALS staff deal with, and common to many healthcare systems. Communication problems, problems with staff attitudes and long waiting times are found in every system. The NHS is perhaps unusual in having a special service to deal with these problems, but hopefully the way the NHS approaches these issues will be of interest to international readers.

VERSION 2 – REVIEW

REVIEWER	van Beuzekom, M
	Universiteit Leiden
REVIEW RETURNED	17-Sep-2021
GENERAL COMMENTS	It was a little tricky figuring out which changes were made because some changes were in red and underlined and some in blue. I still have a problem with the interpretation of the results because they are very generally described, the word some occurs frequently. For instance the role of PALS : some teams were very visible The four defined themes are mixed in terms of the results described

For instance: page 32 Some Pals officers rather than waiting for concerns to come to them, would proactively engage with patients How does this relate to a piece of text about Barriers to resolutions of concerns. In the discussion is written that PALS staff adopt multiple different roles. I think the article would gain in clarity and readability if these roles were worked out more in the results.
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For instance the role of PALS : some teams were very visible
The four defined themes are intertwined.

VERSION 2 – AUTHOR RESPONSE

Reviewer 1 Comments: I still have a problem with the interpretation of the results because they are very generally described, the word some occurs frequently. For instance the role of PALS: some teams were very visible

Author Response: We completely agree – I changed the description to frame it according to majority or minority opinion. For instance, 'A minority of PALS teams felt...', as we feel it would be irrelevant and unhelpful for the reader if it was written that '5 of 8 PALS managers reported...', as that's not useful in the presentation of data in a small qualitative study.

Reviewer 1 Comments: The four defined themes are mixed in terms of the results described. For instance: page 32 Some Pals officers rather than waiting for concerns to come to them, would proactively engage with patients. How does this relate to a piece of text about Barriers to resolutions of concerns?

Author Response: As themes emerge in qualitative work, it's more than likely that there are interlinking concepts and crossover. However, we did our best to separate these themes within the word count permitted. We have taken note about your comment concerning the barriers to resolution and have made sure to check the remaining themes to ensure that they are adequately separated with limited and unnecessary crossover.

Reviewer1 Comments: In the discussion is written that PALS staff adopt multiple different roles. I think the article would gain in clarity and readability if these roles were worked out more in the results.

Author Response: Great point and this was we think due to the limitations on word count initially – However, I have now expanded on the role of PALS in the findings and discuss how they are used more as a switchboard to handle everything within their trusts that others won't do.