

## 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

<b>TITLE (PROVISIONAL)</b>	A protocol for a scoping review study to identify and classify patient-centred quality indicators
<b>AUTHORS</b>	Jolley, Rachel; Lorenzetti, Diane; Manalili, Kimberly; Lu, Mingshan; Quan, Hude; Santana, Maria-Jose

### VERSION 1 - REVIEW

<b>REVIEWER</b>	Caitlin Grenness University of Melbourne, Australia
<b>REVIEW RETURNED</b>	19-Aug-2016

<b>GENERAL COMMENTS</b>	<p>This article is written a very high standard. The proposed project is well formulated and justified given the current healthcare climate and literature. Each stage of the proposed project appears to be well considered and planned.</p> <p>My only comment is that I would like for the decision to include only the Picker's Institute principles and the British Columbia's PCC framework as relevant PCC domains (given the numerous existing frameworks). I would also like to see a bit more of a rationale/back as to how why the Donabedian's model is considered the gold standard.</p> <p>Well done and thank you.</p>
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<b>REVIEWER</b>	Julia Frost University of Exeter Medical School, UK
<b>REVIEW RETURNED</b>	22-Sep-2016

<b>GENERAL COMMENTS</b>	<p>Thank you for asking me to review his interesting protocol.</p> <p>I would like to know more about the stakeholder process, the detail of which I suspect has been left out for blinding: Has a stakeholder process been conducted? And if so were patients involved in this process? Was there any other relevant PPI work at this stage.</p> <p>Regarding a data extraction tool, the National Centre for Health Outcomes Development, Unit of Health-Care Epidemiology at Oxford University <a href="http://nchod.uhce.ox.ac.uk/conspec.html">http://nchod.uhce.ox.ac.uk/conspec.html</a> has produced a series of structured reviews of patient outcome measures which may prove useful, e.g. the selection of candidate indicators.</p>
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## VERSION 1 – AUTHOR RESPONSE

Reviewer 1

“This article is written a very high standard. The proposed project is well formulated and justified given the current healthcare climate and literature. Each stage of the proposed project appears to be well considered and planned. My only comment is that I would like for the decision to include only the Picker's Institute principles and the British Columbia's PCC framework as relevant PCC domains (given the numerous existing frameworks). I would also like to see a bit more of a rationale/back as to how/why the Donabedian's model is considered the gold standard. Well done and thank you.”

We thank the reviewer for these comments and are pleased the manuscript was well-received. In response to the comment on using only the Picker's Institute principles and the British Columbia's PCC framework as relevant PCC domains, we are currently in the process of developing a framework for measuring patient-centred care that incorporates relevant domains reflecting patient-centred care themes, specifically reflecting potential measurement and evaluation areas that will include but not be limited to both the “Picker's Institute's Eight Principles of Patient-Centred Care” and the British Columbia PCC Framework. Because this work is not yet published, we have included the caveat statement as shown below, and we plan to utilize and reference this newly developed framework in future publications of the results of this scoping review.

Page 9 – paragraph 2: “A second dimension of indicator classification that will be applied, in conjunction with the Donabedian model, will include patient-centred care-relevant domains taken from existing frameworks and evidence of domains in patient-centred care, for instance (but not limited to) the Picker Institute's Eight Principles for Patient-Centred Care [17] and the British Columbia Patient-Centered Care Framework [18].”

As well in addressing the second comment; a rationale as to how/why the Donabedian's model is considered the gold standard, we have revised the manuscript as shown below:

Page 9, First paragraph:

“Although Donabedian's model does not take into account specific patient factors [16], we have selected it because this model is perhaps the most widely used and considered a “gold” standard for guiding quality improvement activities in healthcare. Specifically this model has been used to outline the potential mechanisms of variation in quality and been applied across a spectrum of healthcare settings and disease diagnoses, as well as being used to operationalize other types of health care quality measures (ie: Agency for Healthcare Research and Quality-AHRQ Quality Indicators). [17]”

Reviewer 2

Thank you for asking me to review his interesting protocol.

I would like to know more about the stakeholder process, the detail of which I suspect has been left out for blinding: Has a stakeholder process been conducted? And if so were patients involved in this process? Was there any other relevant PPI work at this stage.

Regarding a data extraction tool, the National Centre for Health Outcomes Development, Unit of Health-Care Epidemiology at Oxford University <http://nchod.uhce.ox.ac.uk/conspec.html> has produced a series of structured reviews of patient outcome measures which may prove useful, e.g. the selection of candidate indicators.

We thank the reviewer for their comments. In developing the overall research program for developing patient-centred quality indicators, we have multiple phases in which public/patient involvement is

incorporated. We have consulted patients and family representatives in the design and implementation of the qualitative components of our study, and will be engaging diverse communities through focus groups and interviews., The information collected from this qualitative data collection will be analyzed alongside the information gained from this scoping review, with respect to what is important to patients and family representatives in developing measurement and evaluation tools. The culmination of this work will be a forum, which will aim to engage key stakeholders, including members of the community, policy makers and knowledge users, researchers, and healthcare practitioners.

In regards to this scoping review in particular and the stakeholder process, we have consulted with our patient-partner and other organizations as outlined on page 15 of the manuscript. The patient-partner consultation, resulted in the contribution of specific search terms regarding patient-centred care for the aspects of measurement for the grey literature search. In particular, she was blinded to the search terms developed by our research team so as to not institute any bias. The following changes have been made to the manuscript to highlight this.

Page 11 (paragraph 3- continued to page 12)

“Search terms will be determined with input from the research team, research collaborators and knowledge users. The search strategy will be developed by an experienced research librarian and co-author (DL), and will be revised pending input from stakeholders. Specifically, our patient-partner will be consulted for contribution of specific search terms regarding patient-centred care for the aspects of measurement to search the grey literature, as we suspect there will be more relevant existing grey literature on this topic. To ensure no bias occurs, the patient-partner will be blinded to the original search strategy developed by the research team.”

With respect to the data abstraction tool, we thank the reviewer for highlighting this information source which we will incorporate when finalizing indicator selection. At this point, as this is a scoping review, we intend to report on the existing published indicators, rather than select candidate indicators.

Again we are grateful for the reviewers' comments. We thank you for considering our manuscript for publication and look forward to your reply.

## VERSION 2 – REVIEW

<b>REVIEWER</b>	Julia Frost University of Exeter
<b>REVIEW RETURNED</b>	14-Oct-2016

<b>GENERAL COMMENTS</b>	Thank you for the opportunity to further review this protocol for a scoping review to identify and classify patient-centred quality indicators - which is both a timely and important piece of work. I am satisfied that the authors have responded well to my earlier questions, and wish them all the best with their scoping review.
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