

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)	Building patient capacity to participate in care during hospitalization: A scoping review
AUTHORS	Goodridge, Donna; McDonald, Meghan; New, Lucia; Scharf, Murray; Harrison, Elizabeth; Rotter, Thomas; Watson, Erin; Henry, Chrysanthus; Penz, Erika

VERSION 1 – REVIEW

REVIEWER	Diane Lorenzetti University of Calgary, Canada
REVIEW RETURNED	20-Jan-2019

GENERAL COMMENTS	<p>This is a very well written manuscript on a topic of broad interest.</p> <p>General Comments</p> <p>The manuscript includes a few minor typos. The authors should review before resubmitted. For example, in the results section of the abstract The majority of studiesreported reported one or more positive outcomes from the reported intervention.</p> <p>The PRISMA-SCr checklist for scoping reviews does not appear to have been included in the pdf submission. http://www.equator-network.org/reporting-guidelines/prisma-scr/</p> <p>Specific Comments</p> <p>Section 2.2 Identifying the Research Question. As this manuscript is intended for an international audience, the authors should specify the country and province in which the Health Quality Council and health region referenced are located.</p> <p>Section 2.3 I wonder why the authors did not choose to also search the Cochrane Library for relevant studies.</p> <p>Section 2.4 Were all study designs included, provided the studies themselves adhered to inclusion/exclusion criteria? The reason that I ask is that EMBASE indexes a number of conference abstracts (and similarly letters to the editor and review articles) which, while reporting outcomes, are not always included in scoping reviews.</p> <p>The inclusion criteria list should be re-ordered – currently reads as: a, b, d, e</p> <p>Unclear if all titles/abstracts were screened in duplicate and, if so,</p>
-------------------------	--

	<p>how discrepancies were resolved.</p> <p>Section 2.5 Were data charted in duplicate or otherwise verified? While the pilot charting appeared to have been completed in duplicate, it is unclear to me if the remainder of studies were similarly assessed.</p> <p>Section 3.3 Table 1 would be a bit easier to read if the table headers were present on each page of the table.</p> <p>Section 4.0 paragraph 2. Another limitation of this review that should be acknowledged is the pragmatic decision to limit studies to English language. The inclusion of other languages may have identified additional studies of relevance. Similarly, a search of the grey literature may have also yielded additional research.</p> <p>Flow Diagram. The 2018 PRISMA Scoping Reviews reporting recommendations suggest that the flow diagram include reasons for article exclusion. http://annals.org/aim/fullarticle/2700389/prisma-extension-scoping-reviews-prisma-scr-checklist-explanation</p>
--	---

REVIEWER	Shaun Lee Wen Huey Monash University Malaysia
REVIEW RETURNED	23-Jan-2019

GENERAL COMMENTS	<p>I only reviewed the methodological section of the article as requested by the editors and have left the clinical implications / discussion to the other reviewers. Briefly, the paper is a scoping review of interventions which were used to build patient capacity in care during hospitalisation.</p> <p>The paper has several strengths</p> <ol style="list-style-type: none"> 1. The authors performed a systematic search on databases using a standardised manner 2. They had training to ensure that the reviewers were similar and standardised in terms of inclusion, exclusion and also coding 3. Provided a sample search strategy to ensure replication <p>Some additional details to be included</p> <ol style="list-style-type: none"> 1. Please kindly provide the agreement levels between coding of groups since the coding were done in 7 groups. This can be an issue if the coding was inconsistent and how these were ensured. 2 Was there a protocol for this study? If yes kindly provide 3. The lack of search in grey literature 4. I would not consider engaging in one author to reflect the whole patient group opinion. I suggest that they remove this section or engage in patient groups
-------------------------	---

REVIEWER	Siobhan Brown University of Washington, United States of America
REVIEW RETURNED	08-Feb-2019

GENERAL COMMENTS	The study question is well defined, and the methods employed appropriate to answer it. The study methods are clearly described, and the statistical summaries are straightforward and suitable choices.
-------------------------	---

VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Reviewer Name: Diane Lorenzetti

Institution and Country: University of Calgary, Canada Please state any competing interests or state 'None declared': None declared

This is a very well written manuscript on a topic of broad interest.

General Comments

The manuscript includes a few minor typos. The authors should review before resubmitted. For example, in the results section of the abstract The majority of studiesreported reported one or more positive outcomes from the reported intervention. This change made; overall edit review carried out

A thorough review has been done and edits completed throughout

The PRISMA-SCr checklist for scoping reviews does not appear to have been included in the pdf submission.

As noted above the PRISMA-SCr check list has been completed and attached.

Specific Comments

Section 2.2 Identifying the Research Question. As this manuscript is intended for an international audience, the authors should specify the country and province in which the Health Quality Council and health region referenced are located.

Revised with additional information in section 2.2

Section 2.3 I wonder why the authors did not choose to also search the Cochrane Library for relevant studies.

We had already searched MEDLINE, Embase, and CINAHL, and felt the most important work would be indexed in one of those 3 databases. The librarian author did a preliminary search of the Cochrane Library and found little of interest there.

Section 2.4 Were all study designs included, provided the studies themselves adhered to inclusion/exclusion criteria? The reason that I ask is that EMBASE indexes a number of conference abstracts (and similarly letters to the editor and review articles) which, while reporting outcomes, are not always included in scoping reviews.

Conference abstracts were excluded at the screening stage, not in the searching stage.

The inclusion criteria list should be re-ordered – currently reads as: a, b, d, e

Revised

Unclear if all titles/abstracts were screened in duplicate and, if so, how discrepancies were resolved.

As noted in Section 2.4, “titles and abstracts were screened by two reviewers, one of whom was the PI (DG). 26” A sentence has been added: Discrepancies were resolved through consensus between the reviewers.

Section 2.5 Were data charted in duplicate or otherwise verified? While the pilot charting appeared to have been completed in duplicate, it is unclear to me if the remainder of studies were similarly assessed.

The following clarification has been added: “Key characteristics extracted by the two reviewers for each article included...”

Section 3.3 Table 1 would be a bit easier to read if the table headers were present on each page of the table.

The revised table includes the table headers on each page.

Section 4.0 paragraph 2. Another limitation of this review that should be acknowledged is the pragmatic decision to limit studies to English language. The inclusion of other languages may have identified additional studies of relevance. Similarly, a search of the grey literature may have also yielded additional research.

These have been added in section on Limitations (and also repeated in text)

Flow Diagram. The 2018 PRISMA Scoping Reviews reporting recommendations suggest that the flow diagram include reasons for article exclusion.

<http://annals.org/aim/fullarticle/2700389/prisma-extension-scoping-reviews-prisma-scr-checklist-explanation>

A revised flow chart indicates the reasons for exclusion.

Reviewer: 2

Reviewer Name: Shaun Lee Wen Huey

Institution and Country: Monash University, Malaysia Please state any competing interests or state ‘None declared’: None declared

I only reviewed the methodological section of the article as requested by the editors and have left the clinical implications / discussion to the other reviewers. Briefly, the paper is a scoping review of interventions which were used to build patient capacity in care during hospitalisation.

The paper has several strengths

1. The authors performed a systematic search on databases using a standardised manner 2. They had training to ensure that the reviewers were similar and standardised in terms of inclusion, exclusion and also coding 3. Provided a sample search strategy to ensure replication

Some additional details to be included

1. Please kindly provide the agreement levels between coding of groups since the coding were done in 7 groups . This can be an issue if the coding was inconsistent and how these were ensured.

During the training, we did not formally measure agreement levels. This has been noted as a limitation in the revised manuscript.

2 Was there a protocol for this study?

The original protocol for this scoping review was published in Systematic Reviews and this has been noted in the paper.

3. The lack of search in grey literature

This limitation has been defined in the limitation section and referenced again in discussion/conclusions

4. I would not consider engaging in one author to reflect the whole patient group opinion. I suggest that they remove this section or engage in patient groups

As requested this has been addressed and defined as a limitation and then discussed further in discussion/conclusion section also noted a recommendation of patient focus groups in further studies.

Reviewer: 3

Reviewer Name: Siobhan Brown

Institution and Country: University of Washington, United States of America Please state any competing interests or state 'None declared': None declared

The study question is well defined, and the methods employed appropriate to answer it. The study methods are clearly described, and the statistical summaries are straightforward and suitable choices.

VERSION 2 – REVIEW

REVIEWER	Diane Lorenzetti University of Calgary, Canada
REVIEW RETURNED	29-Apr-2019

GENERAL COMMENTS	Thank you for revising/updating your manuscript.
-------------------------	--

REVIEWER	Shaun Lee Wen Huey Monash University Malaysia
REVIEW RETURNED	21-Apr-2019

GENERAL COMMENTS	Overall, the authors have addressed the concerns but these maybe an issue in terms of interpretation due to these significant limitations noted.
-------------------------	--

	My only other suggestion which I believe should be included is that the authors also list down the study designs as these would significantly limit the interpretation of the study as the designs included were very diverse ranging from RCTs to observational studies.. As such, the strength of evidence listed would be weak to very weak thus limiting the interpretation and application for wider clinical practice
--	---

VERSION 2 – AUTHOR RESPONSE

In response to the second reviewer's comments, the following sentence has been added to the limitations section.

"The strength of evidence was generally weak to very weak, thus limiting the interpretation and application for wider clinical practice."