

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)	Addressing Rural and Indigenous Health Inequities in Canada through Socially Accountable Health Partnerships
AUTHORS	Markham, Ray; Hunt, Megan; Woollard, Robert; Oelke, Nelly; Snadden, David; Strasser, Roger; Betkus, Georgia; Graham, Scott

VERSION 2 – REVIEW

REVIEWER	Penner, Charles University of Manitoba, Brandon Satellite Campus
REVIEW RETURNED	22-Jul-2021

GENERAL COMMENTS	<p>The article seeks to describe an innovation in "doing" social accountability in a complex health care environment. I found the article interesting and informative. The innovation is based on some previous theoretical model that has been modified. I found the meeting of peer tables and then partner tables along with some space to process an interesting part of the process. This is novel in my experience. This should be of interest to a broad group of readership.</p> <p>Specific feedback</p> <p>My main feedback is that some of the sentence structure is poor. An example is the sentence that starts on line 57 page 8/18, line 47 and line 51 page 5, and line 10 page 7/18. Figure 3 bullets three and four are other examples. The headings style was not consistent.</p> <p>I think some time should be spent discussing what two-eyed seeing is for the broader audience for who this will be a novel term.</p> <p>Deliberative dialogue principles and appreciative inquiry should have been briefly described.</p> <p>I recommend spending some space discussing the challenges of doing this process. How was this explained to the partners etc.</p> <p>The presentation of the case studies could be improved. The micro/meso/macro cases are referred to very early on. This could be delayed to later in the article. The Application Care Expanded seems to come out of nowhere referencing a follow-up gathering but I am not sure what the index gathering was.</p>
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REVIEWER	Hanley, A University of Toronto
REVIEW RETURNED	02-Aug-2021

GENERAL COMMENTS	<p>Comments to Editors</p> <p>Although the topic covered in this manuscript is outside my area of expertise, I have worked in Indigenous health research for many years. From that perspective, I believe that this is an important article that will be of substantial interest to the readership of BMJ Open.</p> <p>The manuscript reports on a novel and innovative collaborative approach to addressing complex, long standing and seemingly intractable issues in healthcare delivery in rural and remote settings in Canada, and especially for First Nations (FN) communities. The relationships between FN and the healthcare system in Canada have been complicated by high turnover, limited resources, and mistrust that has arisen from the legacy of colonialism. Many of these issues will be relevant, to a degree, for other regions and countries where there is complex health care delivery to rural and remote settings and to Indigenous communities.</p> <p>The authors report on a process that takes a non-confrontational collaborative approach (the other side is not “the enemy”) to addressing gaps and challenges in health care delivery. I believe that this is going to be a very important way to move a number of these complicated issues forward.</p> <p>I have a few minor comments for the authors to consider.</p> <p>Comments to Authors</p> <p>Very nice manuscript!</p> <p>I have a few minor comments for the authors to consider. Can you comment on the role (if any) of the federal government in this model, given that level of government’s responsibilities and relationships with First Nations?</p> <p>The authors conclude that “The PPP has been effective in applying socially accountable change in the BC health system, with tangible outcomes”. While some excellent examples were provided, I was not entirely clear whether there are criteria for determining when an outcome has been successfully achieved via this process. Or is this more of a dynamic construct? Are there examples of when this process has not worked, and any lessons learned from that scenario?</p>
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VERSION 2 – AUTHOR RESPONSE

Reviewers Comments	Response
My main feedback is that some of the sentence structure is poor. An example is the sentence that starts on line 57 page 8/18, line 47 and line 51 page 5, and line 10 page 7/18. Figure 3	We have completed an overall edit of the manuscript including attending to the examples outlined.

<p>bullets three and four are other examples. The headings style was not consistent.</p>	
<p>I think some time should be spent discussing what two-eyed seeing is for the broader audience for who this will be a novel term.</p>	<p>We have further described a “two-eyed seeing” approach, “In partnership with First Nations Health Authority FNHA facilitated our ability to focus on the rural scale. Wwe used a “two-eyed seeing” approach thatwhich stresses the importance of viewing the world through both Western (what is considered to be mainstream) and Indigenous worldviews and ways of knowing.”</p>
<p>Deliberative dialogue principles and appreciative inquiry should have been briefly described.</p>	<p>We have added descriptions of both concepts. “This takes participants through a journey, (Discover-Dream-Design-Deliver) looking at amplifying what is working and demonstrating practical outcomes. The exploration determines why this aspect is working and how we can expand its influence.</p> <p>“Deliberative dialogue principles aim to foster particular kinds of structured conversation that feature informed and reasoned discussion, attentive listening to understand the values underlying different views, weighing of reasons for and against a proposed action or policy (deliberation) and a desire to build towards common understanding and co-creation of action.”</p>
<p>I recommend spending some space discussing the challenges of doing this process. How was this explained to the partners etc.</p>	<p>We have added a lessons learned section, under practical progress and lessons learned which goes through some of the challenges, and have amplified on the explanation to partners.</p>
<p>The presentation of the case studies could be improved. The micro/meso/macro cases are referred to very early on. This could be delayed to later in the article. The Application Care Expanded seems to come out of nowhere referencing a follow-up gathering but I am not sure what the index gathering was.</p>	<p>We have moved the reference to these case studies in a more appropriate location. Re edited them to read easier More graphical. We have also renamed and adjusted the Application Care Expanded section to practical progress and lessons learned, and worked in making it flow better.</p>
<p><i>Reviewer: 2</i></p>	

Can you comment on the role (if any) of the federal government in this model, given that level of government's responsibilities and relationships with First Nations?	First Nations healthcare governance has shifted from federal to provincial/regional levels in BC. We have added an explanation of the same in the background section.
The authors conclude that "The PPP has been effective in applying socially accountable change in the BC health system, with tangible outcomes". While some excellent examples were provided, I was not entirely clear whether there are criteria for determining when an outcome has been successfully achieved via this process. Or is this more of a dynamic construct? Are there examples of when this process has not worked, and any lessons learned from that scenario?	It is a more dynamic construct, we are taking a developmental evaluation approach. We have highlighted some practical outcomes such as the first Nations Virtual Doctor of the Day, Real time virtual Supports and the Virtual Health and wellness collaborative. These were not predetermined before the event as success but have been demonstrated to have occurred out of this and are generating positive impacts in the system. These have been added in the lessons learned section.

VERSION 3 – REVIEW

REVIEWER	Penner, Charles University of Manitoba, Brandon Satellite Campus
REVIEW RETURNED	10-Sep-2021

GENERAL COMMENTS	<p>The manuscript has been improved. Formatting issues are still a problem. Paragraphs use different indent styles. Headings are not uniform. Some of the English is still poor. An example is on page 8 line 6 (isn't a sentence fragment). page 8 line 15 has the inappropriate use of a colon. The paragraphs starting on page 8 line 6 and 15 aren't very clear and could use revision.</p> <p>Page 9 headings use different styles, some use periods, some no punctuation and some colon's.</p> <p>Page 9. Lessons learned. The headings could use more work. For instance "time well spent". The main point is that this innovation needs significant time investment to work. A heading could be "Time intensive" for example.</p> <p>The attribution paragraph is not clear. What is trying to be said here? I think you are saying that with this process it is difficult to attribute success to any one feature. However I am not sure.</p> <p>The phrase "polyanna in hell" should probably be removed.</p> <p>The whole section entitled lessons learned needs to be rewritten for clarity of titles and content.</p>
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REVIEWER	Hanley, A Univesity of Toronto
REVIEW RETURNED	18-Sep-2021

GENERAL COMMENTS	All of my comments from the initial review have been addressed.
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VERSION 3 – AUTHOR RESPONSE

Thanks for taking the time to review and for your helpful comments which have really helped crystallise what we are trying to communicate. We have brought in a colleague (Ashley Medwid) with an English major and fresh eyes to help us with the punctuation formatting and grammar. You will see her input on the track changes.

Regarding your specific comments:

Formatting issues are still a problem. Paragraphs use different indent styles. Headings are not uniform.

Punctuation addressed through-out by bringing fresh eyes and an English degree to bear in the form of Ashley

Some of the English is still poor. An example is on page 8 line 6 (isn't a sentence fragment). page 8 line 15 has the inappropriate use of a colon. The paragraphs starting on page 8 line 6 and 15 aren't very clear and could use revision.

Revised

Page 9 headings use different styles, some use periods, some no punctuation and some colon's. Addressed as above

Page 9. Lessons learned. The headings could use more work. For instance "time well spent". The main point is that this innovation needs significant time investment to work. A heading could be "Time intensive" for example.

Amended

The attribution paragraph is not clear. What is trying to be said here? I think you are saying that with this process it is difficult to attribute success to any one feature. However I am not sure. I have worked on clarifying the intent which is as you outline.

The phrase "polyanna in hell" should probably be removed.

Done

The whole section entitled lessons learned needs to be rewritten for clarity of titles and content.

Rewritten

With much appreciation for your consideration of the reviews we have submitted.