

## 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 SYSTEMATIC REVIEW OF TELEPHONE DELIVERED PSYCHOSOCIAL INTERVENTIONS ON RELAPSE PREVENTION, ADHERENCE TO PSYCHIATRIC MEDICATION AND HEALTH RISK BEHAVIOURS IN ADULTS WITH A PSYCHOTIC DISORDER
<b>AUTHORS</b>	Beck, Alison; Baker, Amanda; Turner, Alyna; Haddock, Gillian; Kelly, Peter; Berry, Katherine; Bucci, Sandra

### VERSION 1 - REVIEW

<b>REVIEWER</b>	Armando Rotondi, PhD VA Pittsburgh, University of Pittsburgh, USA
<b>REVIEW RETURNED</b>	04-Oct-2015

<b>GENERAL COMMENTS</b>	<p>The manuscript is well written and the purposes for the proposed systematic literature review are well described. The topic of the review is of great important to the treatment of severe mental illness. I think that the results of the proposed review will be of great importance to this field of research.</p> <p>This manuscript only describes the background and nature of the work that will be performed. No work has been done to date. I do not believe that this presentation, though it is quite well written, adds to the field. The results are needed for this to make any, not just a significant, but any contribution to this area of science. I look forward with great enthusiasm to the result of this review!!</p>
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<b>REVIEWER</b>	Cathleen J. Appelt. PhD Duquesne University Pittsburgh, PA U.S.A.
<b>REVIEW RETURNED</b>	06-Oct-2015

<b>GENERAL COMMENTS</b>	<p>This is an important and timely review. including studies of persons with additional psychotic disorders (i.e., beyond schizophrenia) creates a nice addition to knowledge of telehealth interventions for persons with severe mental illness. Further, I believe that the examination and reporting of CVD risk factors in this population addresses a serious clinical need. My suggestions for revision center around the organization/presentation of study design, definition of telehealth, and some minor edits.</p> <p>Organization and Presentation of Information</p>
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	<p>As a reader, I struggled a little bit in the section headed, "Eligibility Criteria." It would be easier to follow (and potentially replicate your review analyses) if you could separate, distinctly, your inclusion and exclusion criteria for published studies. Perhaps the use of subheadings for 'Inclusion' and 'Exclusion' would be helpful here. Based on reading the introductory paragraph to this section, it looks at first as if you are only excluding qualitative studies, but in subsequent sections, you indicate that you will exclude some studies that do not use telephone as primary vehicle for intervention. I think that by separating the inclusion from the exclusion criteria (and grouping all of each type of criteria together), you can more clearly communicate this important aspect of your design.</p> <p>Within this same section, under "Types of Participants," the language used refers to individual participants (as if they were to be your study participants). I think that it would be clearer to indicate that reported findings from studies with these types of participants will be included in your analyses. (On a very minor note, the first statement of this section is incomplete.)</p> <p><b>Definition of Telehealth</b> I think that is important to more clearly define telehealth in the context of your review. You have been very clear about the amount of "tele" contact and with whom the contact must be (for inclusion criteria), but it is not entirely clear what 'modes' of telephone contact count as telehealth and will be included in your sample of articles for analyses. Will studies that utilize text-base interaction be included? If so, will you only include text-based communication taking place in real time chat with the individuals you mentioned or will it include SMS-like communication that could include delayed responses? There are also a number of interventions that include cellular-phone based applications -- and even a few 'desktop devices' that transmit data over a telephone line (e.g., HealthBuddy) -- into which patients report behaviors and their responses are reviewed by providers, who provide communication back over the same telephone-based system. It is not clear whether you intend to include these types of interventions. Further, if these types of intervention studies are to be included, should similar web-based applications accessed via laptop or desktop computer also be included?</p> <p><b>Minor Edits</b> I found the following typos: 1) Under "Objectives" section, in item #1, you will want to include a space between "behaviors" and "result;" and 2) Under "Clarification of Studies" section, in Step #1, you will want to include a space between "the" and "titles."</p> <p>I hope that this feedback is helpful to your group in not only your preparation of this current manuscript for publication, but in the conduct of your systematic review. This promises to be an important contribution to the literature on interventions for persons with severe mental illness.</p>
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## VERSION 1 – AUTHOR RESPONSE

### REVIEWER 1

Reviewer Name: Armando Rotondi, PhD

Institution and Country: VA Pittsburgh, University of Pittsburgh, USA

Please state any competing interests or state 'None declared': None declared.

1. The manuscript is well written and the purposes for the proposed systematic literature review are well described. The topic of the review is of great important to the treatment of severe mental illness. I think that the results of the proposed review will be of great importance to this field of research.

This manuscript only describes the background and nature of the work that will be performed. No work has been done to date. I do not believe that this presentation, though it is quite well written, adds to the field. The results are needed for this to make any, not just a significant, but any contribution to this area of science. I look forward with great enthusiasm to the result of this review!!

Thank you for your comments. We too look forward to the results of the upcoming systematic review. Although the current paper is a protocol for a systematic review, and as such does not present results, we would disagree that this negates any contribution to the field.

Peer review and subsequent publication of systematic review protocols represent an important mechanism for increasing research transparency and quality. For example, peer review provides an opportunity to improve the proposed research methods and reduce duplication of efforts (if reviewers are aware of similar reviews already conducted), while publication allows for replication of review methods and enables others to compare the completed review to the protocol (i.e. identify selective reporting).

### REVIEWER 2

Reviewer Name: Cathleen J. Appelt. PhD

Institution and Country: Duquesne University, Pittsburgh, PA, U.S.A.

Please state any competing interests or state 'None declared': None declared.

This is an important and timely review. Including studies of persons with additional psychotic disorders (i.e., beyond schizophrenia) creates a nice addition to knowledge of telehealth interventions for persons with severe mental illness. Further, I believe that the examination and reporting of CVD risk factors in this population addresses a serious clinical need. My suggestions for revision center around the organization/ presentation of study design, definition of telehealth, and some minor edits.

#### 1. Organization and Presentation of Information

As a reader, I struggled a little bit in the section headed, "Eligibility Criteria." It would be easier to follow (and potentially replicate your review analyses) if you could separate, distinctly, your inclusion and exclusion criteria for published studies. Perhaps the use of subheadings for 'Inclusion' and 'Exclusion' would be helpful here. Based on reading the introductory paragraph to this section, it looks at first as if you are only excluding qualitative studies, but in subsequent sections, you indicate that you will exclude some studies that do not use telephone as primary vehicle for intervention. I think that by separating the inclusion from the exclusion criteria (and grouping all of each type of criteria together), you can more clearly communicate this important aspect of your design.

Thank you for your feedback. In order to more clearly convey that inclusion and exclusion criteria will be applied across multiple criteria, the following statement has been added to the beginning of the methods section:

Eligibility of papers for inclusion in the review will be informed by inclusion and exclusion criteria applied to each of the following domains: types of studies, types of participants, types of interventions and comparison conditions, and the outcome measures assessed. Inclusion and any exclusion criteria within each of these domains is described in turn below:

We feel that this statement will help to guide the reader, and increase clarity regarding eligibility criteria, while allowing us to structure this section according to the "PICO" elements of a systematic review (thereby increasing the ease with which the PRISMA-P criteria can be applied to the current protocol).

2. Within this same section, under "Types of Participants," the language used refers to individual participants (as if they were to be your study participants). I think that it would be clearer to indicate that reported findings from studies with these types of participants will be included in your analyses. (On a very minor note, the first statement of this section is incomplete.)

The language of this paragraph has been updated accordingly to reflect that we will include studies with participants who meet the inclusion criteria listed. The initial sentence is also now complete.

### 3. Definition of Telehealth

I think that is important to more clearly define telehealth in the context of your review. You have been very clear about the amount of "tele" contact and with whom the contact must be (for inclusion criteria), but it is not entirely clear what 'modes' of telephone contact count as telehealth and will be included in your sample of articles for analyses. Will studies that utilize text-base interaction be included? If so, will you only include text-based communication taking place in real time chat with the individuals you mentioned or will it include SMS-like communication that could include delayed responses? There are also a number of interventions that include cellular-phone based applications -- and even a few 'desktop devices' that transmit data over a telephone line (e.g., HealthBuddy) -- into which patients report behaviors and their responses are reviewed by providers, who provide communication back over the same telephone-based system. It is not clear whether you intend to include these types of interventions. Further, if these types of intervention studies are to be included, should similar web-based applications accessed via laptop or desktop computer also be included?

Thank you for your comments. We have now clarified that for the purposes of the current review that the telephone interventions of interest need to be person delivered, and will not include web/ text/ automated systems. We have added the following clarification under "To be included, the telephone support must:"

1. Be administered over the telephone using person delivered (professional or layperson) spoken word (i.e. text, web-based and/ or automated systems collecting or transmitting data will not be included)

### 4. Minor Edits

I found the following typos:

1) Under "Objectives" section, in item #1, you will want to include a space between "behaviors" and "result;" and

2) Under "Clarification of Studies" section, in Step #1, you will want to include a space between "the" and "titles."

Thank you - these have now been corrected.

I hope that this feedback is helpful to your group in not only your preparation of this current manuscript for publication, but in the conduct of your systematic review. This promises to be an important contribution to the literature on interventions for persons with severe mental illness.

We hope you find the above responses and the edits satisfactory.