

## 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>	Patients' perspectives on integrated oral health care in a northern Quebec Indigenous primary health care organization: a qualitative study
<b>AUTHORS</b>	Shrivastava, Richa; Couturier, Yves; Kadoch, Naomi; Girard, Felix; Bedos, Christophe; Macdonald, Mary Ellen; Torrie, Jill; Emami, Elham

### VERSION 1 – REVIEW

<b>REVIEWER</b>	Barry Gibson University of Sheffield, UK
<b>REVIEW RETURNED</b>	23-Apr-2019

<b>GENERAL COMMENTS</b>	<p>For reference I have followed the following guidelines when conducting this review.</p> <p>O'Brien, B., Harris, I., Beckman, T., Reed, D., &amp; Cook, D. (2014). Standards for reporting qualitative research: a synthesis of recommendations. <i>Academic Medicine</i>, 89(9), 1245-1251.</p> <p>This paper is cited by the framework for reviewers used by BMJ Open.</p> <p>This is a good paper that is on the whole well-written, clear and concise. The authors draw on appropriate theoretical frameworks and are guided by an important question for First Nations communities In Canada. The following comments are focused on improving the details of the reporting in the paper. Overall though I should say I enjoyed reading this piece of work.</p> <p>Reflexivity the authors provide very brief details of reflexivity, they very briefly mention that their study followed the developmental evaluation method but do not really give more details about how this was actually worked out. For example, who were the members of the research team? To what extent does the research team include people from the Cree communities involved? If it does not include members of the Cree community then to what extent did the developmental evaluation method help resolve challenges with the inclusion of the voices of the Cree community. The authors might find the BMJ open's guidelines on Patient Public Involvement useful (though not totally the same thing as the developmental evaluation method!).</p> <p><a href="https://bmjopen.bmj.com/pages/authors/#reporting_patient_and_public_involvement_in_research">https://bmjopen.bmj.com/pages/authors/#reporting_patient_and_public_involvement_in_research</a></p> <p>I would expect more details on how the Cree community was involved and some consideration of the points in the checklist above for reporting this. It is good that nominated community members were involved in the thematic analysis but how this happened is very important for this study.</p>
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	<p>When it comes to the Units of study it is good to hear that the communities were the units of analysis. But to what extent is this true? When we look at the participants they are broken down purely by age, sex, ethnicity and employment. Could we also have location either as A, B, C, D or East to West or something more specific? In addition - to what extent has the unit of analysis - being the community actually shaped the findings? I struggled to see how this had actually informed the analysis. I am not sure it mattered?</p> <p>It might be worthwhile reflecting on the patient involvement checklist and reflecting on how far the voices of the Cree community have been involved as part of the reflections on the limitations of the study (if there are any limitations in this respect). It would also be worth pointing out that there were very few males involved and what this might mean in relation to the findings.</p>
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<b>REVIEWER</b>	Leonard Crocombe Centre for Rural Health School of Health Sciences College of Health and Medicine University of Tasmania Australia
<b>REVIEW RETURNED</b>	24-Apr-2019

<b>GENERAL COMMENTS</b>	<p>This is a well written and interesting paper.</p> <p>There a couple of minor issues you may like to address:</p> <ul style="list-style-type: none"> <li>- Was data saturation reached?</li> <li>- You twice mention (in the strength and limitations and the discussion sections)that, "To our knowledge, this study is the first to evaluate patient-centered integrated oral health care from the patient lens in an Indigenous primary health care organization". This reads as as the only study world wide into any Indigenous community. If so, then it is correct as is, but I suggest you add the term worldwide to the sentnces. If you mean of any Canadian or North American Indigenous community, then I suggest these sentences should be suitably adjusted.</li> <li>- Your sample is only of Indigemnous people who actually visited the dental services and excluded Indigenous people who do not visit dental services. I suggest that people Indigenous people who do not visit dental services may have a different outlook to those who do visit dental services. You do mention as a limitation of the study that the "Results are based on small sample size of patients recruited from Cree community hospitals", but I suggest the group I mention should be specifically mentioned.</li> </ul>
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### VERSION 1 – AUTHOR RESPONSE

Reviewer(s)' Comments to Author:

REVIEWER: 1

Comment 1:

This is a good paper that is on the whole well-written, clear and concise. The authors draw on appropriate theoretical frameworks and are guided by an important question for First Nations communities In Canada. The following comments are focused on improving the details of the reporting in the paper. Overall though I should say I enjoyed reading this piece of work.

Response: We would like to thank the reviewer for the time and constructive comments.

Comment 2:

Reflexivity the authors provide very brief details of reflexivity, they very briefly mention that their study followed the developmental evaluation method but do not really give more details about how this was actually worked out. For example, who were the members of the research team? To what extent does the research team include people from the Cree communities involved? If it does not include members of the Cree community then to what extent did the developmental evaluation method help resolve challenges with the inclusion of the voices of the Cree community. The authors might find the BMJ open's guidelines on Patient Public Involvement useful (though not totally the same thing as the developmental evaluation method!).

Response: We appreciate this comment. We have added a section on developmental evaluation process in our project (Page 9, Lines 3-11). Additional details have been provided with newly added paragraph on 'patient and public involvement' under methods section. Please see the highlighted areas on page 11 (Line numbers 11-13).

Comment 3:

I would expect more details on how the Cree community was involved and some consideration of the points in the checklist above for reporting this. It is good that nominated community members were involved in the thematic analysis but how this happened is very important for this study.

Response: Thanks for the comment. We have addressed this comment with the previous response. With respect to community member's involvement in the data analysis, we have added a description to data analysis section on page 11 (Lines 9-10).

Comment 4:

When it comes to the Units of study it is good to hear that the communities were the units of analysis. But to what extent is this true? When we look at the participants they are broken down purely by age, sex, ethnicity and employment. Could we also have location either as A, B, C, D or East to West or something more specific? In addition - to what extent has the unit of analysis - being the community actually shaped the findings? I struggled to see how this had actually informed the analysis. I am not sure it mattered?

Response: Thanks for this comment. As described in the methodology, this study is part of a major project that considers 'community' as the units of analysis. But in pertinence to this study, we conducted analysis considering individual as unit of analysis. We have now deleted this statement.

Comment 5:

It might be worthwhile reflecting on the patient involvement checklist and reflecting on how far the voices of the Cree community have been involved as part of the reflections on the limitations of the study (if there are any limitations in this respect). It would also be worth pointing out that there were very few males involved and what this might mean in relation to the findings.

Response:

Thank you for the comment. We have included this point in the paragraph on patient and public involvement under Methods section. Please see the highlighted area on the page 11 (Lines 11-13). As far as reviewer's comment regarding very few males is concerned, we have added this point as one of the limitations of the study. Please see the highlighted area on page 17 (lines 21-22).

REVIEWER 2:

Comment 1:

This is a well written and interesting paper. There a couple of minor issues you may like to address:

Response: We would like to thank the reviewer for the time and valuable comments.

Comment 2:

Was data saturation reached?

Response: Thank you for your comment. We have now added additional statement to address the reviewer's concern about data saturation on page 10 (Lines 12-14).

Comment 3:

You twice mention (in the strength and limitations and the discussion sections) that, "To our knowledge, this study is the first to evaluate patient-centred integrated oral health care from the patient lens in an Indigenous primary health care organization". This reads as the only study worldwide into any Indigenous community. If so, then it is correct as is, but I suggest you add the term worldwide to the sentences. If you mean of any Canadian or North American Indigenous community, then I suggest these sentences should be suitably adjusted.

Response: We have added the term 'Worldwide' in both the sentences (in the strength and limitations and the discussion sections) as well as reworded the sentence for better explanation. Please see the highlighted area at pages 6 (Lines 3-5) and 15 (Lines 19-21).

Comment 4:

Your sample is only of Indigenous people who actually visited the dental services and excluded Indigenous people who do not visit dental services. I suggest that people Indigenous people who do not visit dental services may have a different outlook to those who do visit dental services. You do mention as a limitation of the study that the "Results are based on small sample size of patients recruited from Cree community hospitals", but I suggest the group I mention should be specifically mentioned.

Response: Thanks for this comment. This point will help in better explanation our limitations. We have specifically mentioned this point to the manuscript. Please see the highlighted area at Page 17 (Line 19-21).

#### VERSION 2 – REVIEW

<b>REVIEWER</b>	Barry Gibson University of Sheffield, Sheffield UK
<b>REVIEW RETURNED</b>	16-Jun-2019

<b>GENERAL COMMENTS</b>	This is a very well written paper on an important topic and on an under researched community. I agree with the authors - there is very little in the way of research on integrated care from the perspective of indigenous communities. This paper therefore fills an important gap in the literature. I felt the study was very well conducted, the authors used an appropriate theoretical framework and relay the results clearly and concisely. They also spell out the limitations of the data as well.
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<b>REVIEWER</b>	Leonard Crocombe Univbersity of Tasmania Australia
<b>REVIEW RETURNED</b>	02-Jun-2019

<b>GENERAL COMMENTS</b>	The paper is an important one looking an American Indigenous group.
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