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#### 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)	A Qualitative Interview with Mothers of Moderately or Late Preterm
	Infants in the United Kingdom; Where are the care gaps?
AUTHORS	Laverty, Catherine; Surtees, Andrew; Sutherland, Daniel;
	Richards, Caroline

#### **VERSION 1 – REVIEW**

REVIEWER	Pratomo, Hadi
	Universitas Indonesia, Health Education & Behavioral Sciences
REVIEW RETURNED	11-Jan-2024
GENERAL COMMENTS	In my opinion it is an interesting and simple study conducted
	during the Covid19 pandemic. However it is lack of of detail
	information of the study therefore I would like to give the following

- suggestions:

  1. Where was the study conducted such as name of country and place of the study (hospital or community).

  2. What was the content of instrument of the study (who made the
- 2. What was the content of instrument of the study (who made the instrument, was it pretested before the study with the same informant in terms of clearness and comprehension of the informant?)
- 3. Who were the interviewers who were doing the data collection via zoom? What criteria or qualification of the interviewer? In what language the interview took place?
- 4. Is there any triangulation of the data and what type such as source or data.
- 5. What were the limitation of the study or weaknesses?
- 6. What was the suggestion for future similar study? Thank you

REVIEWER	Yue, Jieya
	Peking University First Hospital
REVIEW RETURNED	23-Jan-2024

GENERAL COMMENTS	Thank you for the opportunity to review this article regarding care gaps for mothers of moderately or late preterm infants. I found the article was well-written and well-organized, and it's very meaningful to explore the experiences of mothers of children born MLPT and what kind of care support they need.
	However, the organization of the article must be modified to be published. We see 3 modifications that must be introduced in the presentation of the article. My comments below are mostly suggestions.  INTRODUCTION

As one of the objectives of this study was to explore whether the care services needed by mothers of moderately and late preterm infants are in line with the care services currently provided, and what needs to be improved, it is recommended to add some current implementation of care for moderately and late preterm infants to the introduction section. And it is also recommended to describe the medical status and the treatment of premature infants in the region of this study, because different medical levels varies in different regions.

#### STUDY DESIGN

In this study, 6 mothers of moderately and late preterm infants were recruited as interview subjects, and the infants were 18-36 months old when the interviews were conducted. After a longer period of time, the mothers' feelings or memories about the birth of preterm infants might be weakened, and in addition, the status of the moderately and late preterm infants, whether they enter the NICU ward, whether the prognosis is good, and whether they are the first child may affect the mother's experience and need for care. How to analyze these influencing factors? Whether the sample size is sufficient?

#### DISCUSSION

Discuss in terms of the objectives of the study and compare with other similar studies and add information about limitations.

#### **VERSION 1 – AUTHOR RESPONSE**

Reviewer: 1

Dr. Hadi Pratomo, Universitas Indonesia

# Comments to the Author:

In my opinion it is an interesting and simple study conducted during the Covid19 pandemic. However it is lack of of detail information of the study therefore I would like to give the following suggestions:

1. Where was the study conducted such as name of country and place of the study (hospital or community).

The location of the study has been added to the title of the manuscript and the methods section (page 1 & 7).

- 2. What was the content of instrument of the study (who made the instrument, was it pretested before the study with the same informant in terms of clearness and comprehension of the informant?) The semi-structured interview schedule was generated by the authors from inspection of qualitative research conducted with parents of children born at earlier gestations, and consideration of aspects of National Institute for Health and Care Excellence (NICE) guideline recommendations. A copy of the interview schedule is included in full within the supplementary materials, submitted alongside the manuscript. Given the schedule was developed from prior qualitative research, the questions were not pretested.
- 3. Who were the interviewers who were doing the data collection via zoom? What criteria or qualification of the interviewer? In what language the interview took place?

  All interviews were conducted remotely using Zoom video conference software by the first author (CL) and took place in English (page 7 of the manuscript).

4. Is there any triangulation of the data and what type such as source or data.

Thank you for your question, the current study adopted investigator triangulation with the final framework of themes and subthemes discussed and evaluated by independent researchers (AS & CR).

5. What were the limitation of the study or weaknesses?

Thank you for your comment, a paragraph detailing the limitations of the current study has been added to the discussion section of the manuscript (page 21).

## 6. What was the suggestion for future similar study?

Future research should explore to what extent prior knowledge and discussion of preterm birth during pregnancy is helpful. Being mindful of the current circumstances health visitors are operating in and in the interest of more timely change in support, clinical services should explore the use of educational information that can be distributed alongside current developmental follow ups. Arguments made around 'early intervention' by the research community should perhaps shift to be discussions around more timely support for those identified as being most vulnerable to the effects of moderate and late preterm birth (page 21 & 22).

### Thank you

Many thanks for your time spent reviewing our manuscript, we feel it has been greatly enhanced as a result of your suggestions and thoughts.

Reviewer: 2

Ms. Jieya Yue, Peking University First Hospital

#### Comments to the Author:

Thank you for the opportunity to review this article regarding care gaps for mothers of moderately or late preterm infants. I found the article was well-written and well-organized, and it's very meaningful to explore the experiences of mothers of children born MLPT and what kind of care support they need. Many thanks for your kind comments and time taken to review our manuscript.

However, the organization of the article must be modified to be published. We see 3 modifications that must be introduced in the presentation of the article. My comments below are mostly suggestions.

### INTRODUCTION

As one of the objectives of this study was to explore whether the care services needed by mothers of moderately and late preterm infants are in line with the care services currently provided, and what needs to be improved, it is recommended to add some current implementation of care for moderately and late preterm infants to the introduction section. And it is also recommended to describe the medical status and the treatment of premature infants in the region of this study, because different medical levels varies in different regions.

Many thanks for your comments and helpful suggestions. Additional information has been added to the introduction section of the manuscript to detail the current service provision within the United Kingdom for infants born preterm (page 4). Given the regional differences of premature infants you helpfully highlight, the location of the study has been added to the title of the manuscript for clarity.

## STUDY DESIGN

In this study, 6 mothers of moderately and late preterm infants were recruited as interview subjects, and the infants were 18-36 months old when the interviews were conducted. After a longer period of time, the mothers' feelings or memories about the birth of preterm infants might be weakened, and in

addition, the status of the moderately and late preterm infants, whether they enter the NICU ward, whether the prognosis is good, and whether they are the first child may affect the mother's experience and need for care. How to analyze these influencing factors? Whether the sample size is sufficient?

Many thanks for your very helpful thoughts, indeed these were many of the considerations the research team had at the point of pre-registration of the study design. We have responded to each of your helpful points below to provide clarity on decisions made within the study design process. With regards to the inclusion criteria of participants' infants (aged 18 -36 months) this was a strategic decision though we do acknowledge a significant amount of time will have elapsed since mother's birth experience. It is widely accepted that for children born moderately or late preterm there is an apparent reduced medical need. This means avenues for potential intervention may perhaps focus more on developmental needs that become apparent in conjunction with developmental milestones or the beginning of educational enrolment such as nurseries or pre-school. It was decided that the time period of 18 - 36 months post the birth of a child would be sufficient to capture both avenues for support regarding immediate medical intervention and developmentally. Given this was the first study of its kind with an under-researched group of participants, it was the research team's aim to collect a breadth of experience and thus the scope of the current research study was as described. The relevance of the 'preterm label' for parents of infants aged 18-36 months born moderately or late preterm, as well as prognosis and birth order were themes that were explored within the current study. The semi-structed interview schedule reflects the acknowledgement of the research team that these are important areas to investigate to comprehensively understand the experience of participants. The current study is the first study to explore such themes for parents of moderately or late preterm born infants and therefore provides conclusive evidence of the importance of the areas you highlight when considering the development of infants and support needs. The research team therefore adopted the position of documenting experiences within the current study (such as the preterm label, impact of birth order or NICU stay) rather than analysing these influencing factors in any quantitative way. Though perhaps we may assume some of the experiences of the mothers described, we believe best practice is to first document experience without assumption, and that these data can then inform quantitative approaches to assess the influence of the identified variable. Therefore further exploration of influencing factors was outside of the scope of the current study. The current study concluded data collection at a point of data saturation as decided by the lead author conducting the interviews (CL). We believe this study therefore acts as an important stepping stone for future research to analyse these concepts in greater detail.

### **DISCUSSION**

Discuss in terms of the objectives of the study and compare with other similar studies and add information about limitations.

Thank you for your comment and helpful suggestion. This is the first qualitative interview study to explore in detail the experiences of mothers of moderate or late preterm born infants therefore there are no direct studies to compare findings to with the same population group. There is a comprehensive explanation of the most relevant literature within the introduction of the manuscript (page 6). A paragraph detailing the limitations of the current study has been added to the discussion section of the manuscript (page 21).

# **VERSION 2 - REVIEW**

REVIEWER	Pratomo, Hadi
	Universitas Indonesia, Health Education & Behavioral Sciences
REVIEW RETURNED	12-Mar-2024

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GENERAL COMMENTS	Thankyou for revising the manuscript based on previous
	comments. It has been improved substantially. However, I would
	like to give the following suggestions:
	Primary subject heading it was written Obstetrics and
	Gynaecology I would like to suggest more small scope:
	Neonatology which focus on Perception of preterm mothers
	2. The substance of the study was about Newborn and delivery but
	the subject of the study i.e. the informants were interviewed when
	their baby was between 21-36 months. In my opinion ideally, the
	mothers were interviewed right away coming home from the
	hospitals. So there was a potential memory bias of the experience
	I would like suggest to add in the "limitation of the study".
	3. There were 3 informants with vaginal delivery and 3 informants
	with sectio cesaria.
	The authors did not describe any major issues of results of the
	study considering two different methods of delivery. Please
	address this issue both in the results, discussion or
	recommendations.
	4. I would like to suggest the manuscript should be English
	professionally edited for clearness and clarity.
	Thanks

#### **VERSION 2 – AUTHOR RESPONSE**

Reviewer: 1

Dr Hadi Pratomo, Universitas Indonesia

Comments to the Author:

Thank you for revising the manuscript based on previous comments. It has been improved substantially.

Thank you for the time taken to review our manuscript, it is greatly appreciated, and we welcome your thoughtful feedback.

However, I would like to give the following suggestions:

1. Primary subject heading it was written Obstetrics and Gynaecology I would like to suggest more small scope: Neonatology which focus on Perception of preterm mothers

Many thanks for your thoughts, the heading of 'obstetrics and gynaecology' was selected as the most relevant from a pre-defined list of primary and secondary subject headings (where 'neonatology' was not an available option). We do feel that this heading is indeed the most appropriate given the broad scope of the paper and conclusions drawn, we believe these are of relevance to a wider audience (such as professionals involved in the care of pregnant women) than solely those who work with premature babies.

2. The substance of the study was about Newborn and delivery but the subject of the study i.e. the informants were interviewed when their baby was between 21-36 months. In my opinion ideally, the mothers were interviewed right away coming home from the hospitals. So there was a potential memory bias of the experience I would like suggest to add in the "limitation of the study".

Thank you for your comment, though the age range and timeframe within the current study was a purposeful throughout out choice, we do appreciate asking participants to recall earlier periods of time is indeed in part a limitation. A bullet point has now been added to the limitations section of the paper.

3. There were 3 informants with vaginal delivery and 3 informants with sectio cesaria. The authors did not describe any major issues of results of the study considering two different methods of delivery. Please address this issue both in the results, discussion or recommendations.

Methods chosen within the current study (semi structured qualitative interviews) lend themselves particularly well to populations where there is a primary linking characteristic with additional variety of experiences. Participants in the current study were all mothers of a moderate or late preterm born infant, their birth experiences varied considerably with method of delivery being one of many points of difference highlighted within the manuscript. We do not feel that this is a limitation of the current study, nor feel there were any issues when collating experiences during data exploration given the variety in overall personal experiences. The authors aim to detail participant characteristics and potentially relevant information for contextual and open science purposes which is why method of delivery is presented in Table 1.

4. I would like to suggest the manuscript should be English professionally edited for clearness and clarity.

Thank you for your comments, the manuscript has been thoroughly checked and edited by all authors ahead of submission for clearness and clarity. We welcome highlighting if there are any specific sections of the manuscript where clarity could be improved.

**Thanks** 

Reviewer: 1

Competing interests of Reviewer: None