

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form ([see an example](#)) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below. Some articles will have been accepted based in part or entirely on reviews undertaken for other BMJ Group journals. These will be reproduced where possible.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Barriers and Facilitators to Change in the Organisation and Delivery of Endoscopy Services in England and Wales: a focus group study
AUTHORS	Frances Rapport, Anne Seagrove, Hayley Hutchings, Ian Russell, Ivy Cheung, John Williams and David Cohen

VERSION 1 - REVIEW

REVIEWER	Roland Valori Gloucestershire Royal Hospital My competing interest is that I have lead a transformation of endoscopy in england
REVIEW RETURNED	09/03/2012

GENERAL COMMENTS	<p>I have had a look at this paper but cannot complete the checklist which has no methodological relevance to the study. I am not an expert on focus group methodology but I can comment on the context and would like to make some observations about the methodology.</p> <p>The English perspective in this paper rests on five individuals. Knowing the variance in perspectives in the English endoscopy service this is completely inadequate. Another five might participate and provide completely different views. These were views of mainly doctors and some specialist nurses. There are other professionals with equally valid views not included in the groups. For example there did not appear to be any endoscopy nurses in the focus groups.</p> <p>The study was done five years ago. A vast amount has changed since then (a complete transformation of the service) and the conclusions would be very different now. I suspect a current day focus group would still voice frustrations with management, especially when planning future capacity, but endoscopy teams, particularly nurses have been much empowered in the intervening years and service line leadership is established throughout the service in England.</p> <p>In summary this paper provides an interesting historical perspective but is almost certainly biased by the very small sample, especially of the English group, and choice of individuals in the groups.</p>
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REVIEWER	Dr Kate Bullen, Head of Psychology Department, Aberystwyth University, Aberystwyth, Ceredigion.
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	UK. SY23 3UX
	No competing interests
REVIEW RETURNED	20/03/2012

THE STUDY	The participants are HCPs not patients.
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VERSION 1 – AUTHOR RESPONSE

Manuscript ID:

bmjopen-2012-001009 entitled “Barriers and facilitators to change in the organisation and delivery of endoscopy services in England and Wales: a focus group study”

Rapport et al.

May 14th 2012

Dear Mr Sands,

Thank you for the opportunity to respond to your and the reviewer’s comments, which were valid and helpful. The changes made are in red in the paper so you can more easily see what has been changed, with a number of references rearranged in the bibliography, in blue.

The changes to the comments are as follows:

1) Abstract - is clearer now about the date when the study took place, which is also identified in the ‘Strengths and Limitations’ bullet pointed section towards the beginning of the paper, and the ‘Limitations’ section which has been included at the end in the discussion section. The abstract and paper is also clearer that endoscopy nurses were present at focus groups in England and Wales (before they had been referred to incorrectly as specialist nurses), and that the sample was opportunistic.

2) Discussion – this section has had a major re-write, and there is now much more about the limitations of the study, including the time lapse and the disproportionate number of focus group attendees from English Units compared to those attending from Welsh Units. The limitations section indicates that whilst equivalent numbers of people signed up to this study and consented, those arranged to coincide with the BSG annual conference (English Unit attendees) were affected by last minute changes to timetabling. The paper now makes a case for the value of the views of the English focus group attendees, be it a small group of attendees, and highlights the mix of attendees (including endoscopy nurses, surgeons and consultants in GI), the spread of English Trusts represented (5 different endoscopy units in England and 9 in Wales), and opportunities that this focus group data provides for useful comparative material about modernisation in the two countries.

The paper emphasises, as you rightly point out, that we cannot claim generalisable findings. However we would defend the data’s reliability and being of a qualitative nature we stress our aim for depth of understanding over breadth, around the issues raised, rarely indicated in quantitative papers or expressed in this way. As far as our findings are concerned, R. Valori has commented that he is happy with the reporting of the results section.

The time lapse in reporting, in ‘Limitations and Strengths’ of the paper, now makes a case for the unique historical perspective that this paper affords. It emphasises the relevance of the findings in terms of the continued differences between English and Welsh units in terms of progress and formal accreditation. It highlights a trajectory of change that was initiated by the MES at a time when the Global Rating Scale was just being implemented, and the links between the challenges managers of gastroenterology were facing in 2007 and those faced today, as we embark on yet another period of modernisation. The discussion section emphasises that changes in Wales have been slower than

changes in England, pointing to differences in the number of units accredited with JAG in both countries. It also emphasises the importance of continuing to pay heed to the mood of the people in leadership roles working in GI which is as relevant today as it was when this work was undertaken.

3) Introduction - the first sentence of the 'Introduction' section has now changed, as suggested, to now read: "This paper describes a focus group study that was undertaken five years ago as part of a wider project designed to assess the impact of the Modernisation Agencies' Modernising Endoscopy Services (MES) Programme." There is further elucidation: "The focus group study was included as an important element of the mixed method study as it was recognised that it could offer a detailed understanding of how changes to GI service organisation and delivery were affecting professionals' work life and practices, their relationships with others within their units and with patients."

4) Methods – the sampling strategy has been stated as 'convenience sample', following your recommendation to be clearer about this. It is explained that this was due to difficulties of bringing GI specialists and endoscopy nurses from across the UK together to attend focus groups, and our decision to aim for those events where these groups of professionals would be most likely to meet up, the WAGE and BSG conferences. Consequently, we targeted senior people holding positions of leadership in GI attending those events, (those most likely to be involved in decision-making around modernisation and innovation in Units).

I hope these changes sufficiently address the queries raised and look forward to hearing from you if anything further needs doing.

Yours sincerely,

Frances Rapport

Professor of Qualitative Health Research
Swansea University College of Medicine