Reviewer's report

Title: Facilitating adherence to physical activity: exercise professionals' experiences of the National Exercise Referral Scheme in Wales. A qualitative study

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Reviewer: Sarah Sowden

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The title and research questions are clear and relevant to research in this field. A qualitative method is appropriate as the aim is to explore experiences and obtain professionals’ views. The background section cites a wide range of previous literature and gives a good account of the history of research and practice in ERSs and provides justification for how this research fills a current gap in the knowledge base. The research offers some interesting insights, is thought provoking and suggests some useful areas for future research and policy development.

• Essential Revisions

Line 52 of abstract. “Effectiveness of emerging activities to support the emergence”. I wasn’t clear what ‘emerging activities’ are. Also the use of emerging and emergence in same sentence would be best avoided.

Line 50 of abstract. The authors conclude that “training should pay sufficient attention to providing the skills to meet patients’ interpersonal support requirements.” This implies that this currently is not the case. However, I could not see too clearly how this conclusion arose from the qualitative data. Lines 509-510 explain that ‘some expressed a need for further training’ but this didn’t seem to be supported by a direct quote in the results section. From the quoted extracts provided I didn’t get the sense that the professionals were struggling to be able to support patients interpersonal support requirements or that they felt ill-equipped to do this. The examples provided showed on the contrary that the professionals were good at recognising and supporting patients’ interpersonal support requirements even if they found this challenging / found it uncomfortable. If this conclusion is indeed grounded in the data, quotes from the data demonstrating that there is felt to be a gap in current training / skills deficit should be included.

Line 171 and 172 explain that 1 professional missed 2 appointments whilst 2 did not reply. Was any attempt made to follow up those who chose not to participate to establish why? Is it likely they would have divergent views to the majority?

Data collection line 177 – semi-structured interview schedule. It would be good to include the interview schedule as it would help the reader to understand the extent to which the discussion was guided / left open ended. For example, in
results section line 268 ‘more than a third of professionals also identified perceived socioeconomic variations’ – was discussion of socioeconomic variations prompted by the interview schedule or only spoken about if it arose spontaneously from the interviewee? The fact that some respondents didn’t identify socioeconomic variations was this because they didn’t think it was a factor in uptake and adherence when prompted to consider it, or because they just hadn’t thought to discuss it because it wasn’t prompted by the interviewer?

Soundness of interpretive approach. It might be best to get the view of an experienced qualitative researcher here as to whether the description of the methods used is sufficient. Whilst the process of analysis appears sound and the ‘inductive thematic approach’ appears to be followed the analysis section is quite brief. The detailed process for how each transcript was explored to draw out the emergent themes isn’t expanded upon in detail.

Lines 478-479 in discussion and lines 270-273 in results lists the reasons given my respondents for lower engagement in poorer areas. It would be good to see how these points were grounded in the data. For example, the quote from respondent 6 (lines 274-278) doesn’t mention financial resources, which is one the factors listed, so a quote to support this statement would have been useful to demonstrate how the finding is grounded in the data. For example, was there a view that the £1 charge was too much to attend, or that limited financial resources meant people were unable to buy the necessary clothing / travel to the venue / or lack of financial resources had an influence by some other mechanism?

The participants selected are the most appropriate to provide access to the type of knowledge sought by the study. The sample strategy was also appropriate. However, it wasn’t made clear why all 41 professionals were asked to take part – did the authors feel a smaller number would not ensure a cross-section of views? Did they have grounds to believe the respondents would give very different views across the 12 health boards? I query this because, given the in depth nature of qualitative analysis 38 transcripts is a large number and there may have been a trade off between the depth of analysis afforded to each transcript vs the breath of responses given by analysing a large number of transcripts.

There was one example in the analysis and presentation of a negative or deviant case (lines 216-221). Did this mean that the views expressed were generally very consistent across respondents in the main? Another example of a negative/deviant case not highlighted as such in the text would be a direct contrast of the views of many, represented by respondent 8 (lines 250-252) who is explaining mental health patients are more likely to drop out of the programme compared to respondent 25 (331-334) who explains, with support, mental health patients are more likely to stick at the programme. This divergence of views is mentioned in the discussion (line 508) but not laid out explicitly in the earlier section.

A few suggested changes to the written English:
Line 26 of abstract – this is first mention of NERS so this is where the abbreviation of the term should first appear in brackets, instead of on line 29 of abstract.

Line 35 of abstract and line 222 suggest adding word ‘responses’…”Hence professionals, [responses] sometimes focused upon the need …’ I was unclear on first reading whether ‘professionals sometimes focused’ referred to the responses they gave to in the semi-structured interview of actions they took when working in the field.

Line 145 – MI – needs to be written in full before abbreviation.

Line 156 – take out ‘however’

Line 554 – should be ‘emphasise’ not ‘emphasises’

• Discretionary Revisions

Results lines 197-204 would be clearer summarised into a table of themes and subthemes (the sub-themes labeled 1a, 1b, 2a, 2b, 2c and 2d).

Line 29 in abstract – ‘12 local health board areas’ – is this all the health boards taking part in the NERS? Later in line 163 in methods seems to suggest 12 is the total number. Therefore, to stress breadth of sample coverage might be good in abstract to emphasise e.g. ‘38 exercise professionals across all 12 local health board areas in Wales delivering NERS took part in a …’

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests