Author's response to reviews

Title: Micro-costing the provision of emotional support and information in UK eye clinics

Authors:

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Version: 3 Date: 10 September 2013

Author's response to reviews: see over
10th September, 2013

Dear Dr Ya-Seng Hsueh,

Thank you for overseeing the review of our manuscript, “Micro-costing the provision of emotional support and information in UK eye clinics”. We would also like to thank the reviewers again for their helpful comments on the revised version of the manuscript. As requested we have provided a point-by-point response to Referee 2 only, as Referee 1 did not request any additional changes.

Kind regards,

Ms Hanna Gillespie-Gallery
Dr Ahalya Subramanian
Dr Miriam Conway
Reviewer's report

Title: Micro-costing the provision of emotional support and information in UK eye clinics

Version: 2 Date: 12 August 2013

Reviewer: Philip Alexander

Reviewer's report:
With the revisions that have been made, this manuscript is now acceptable for publication.

Level of interest: An article of importance in its field

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
Reviewer’s report
Title: Micro-costing the provision of emotional support and information in UK eye clinics

Version: 2 Date: 19 August 2013

Reviewer: Joanna Charles

Reviewer’s report:
The manuscript is much improved following response to reviewers’ comments. The reviewer is satisfied with
the responses to previous comments and only has two further minor revisions following review of the revised
manuscript.

Minor Essential Revisions

1. Page 9 third paragraph of Discussion section; include a few sentences discussing the implications and
feasibility of increased number of patients per day by ECLOS. Though the cost per day will reduce as the
number of patients seen per day increases, there will be a limit to the capacity of the service. This needs
consideration along with geographical distribution already discussed in this section.

   • Thank you very much for this comment. We agree that it is very important to include the points
     regarding feasibility and have done so in the third paragraph on page 9:

   • “Although there are advantages to increasing the number of patients seen per day by an ECLO in
     order to decrease the cost per patient, there is a limit. Previous research has indicated that on
     average, face-to-face contact takes 30 minutes and subsequent administration 15 minutes per patient
     [17], resulting in almost 7 hours of work per day for the average of 9.1 patients being seen. The
     amount of time required per patient will vary based on the individual’s requirements and situation,
     such as prior knowledge of their eye condition, changes in health or circumstances and the availability
     of emotional support within their social network. Ultimately, an eye clinic will need to take these
     factors into account to determine how well utilised the service will be, without exceeding capacity.”

2. In order to re-clarify and provide consistency with text provided in the “role of ECLOs” section of the
   Results section (Page 7) please add the word “Total” to the final column label of Table 1, Page 16, so it reads
   “Total number of respondents”.

   • This amendment has been made.

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.