Author's response to reviews

Title: Why a successful task substitution in glaucoma care could not be transferred from a hospital setting to a primary care setting: a qualitative study

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Author's response to reviews: see over
Dear Professor Rogers,

Thank you for the opportunity to revise our manuscript entitled “Why a successful task substitution in glaucoma care could not be transferred from a hospital setting to a primary care setting: A qualitative study” (MS: 4953235007555858). The comments of the reviewers were positive, stimulating and very helpful to further improve the manuscript.

Enclosed, we send you a revised version of the paper with changes marked in the text. A reply to the editor in which the comments of the reviewers are addressed, is added. We are sorry for sending the revision quite late, but due to the maternity of the first author it was not possible to send it earlier.

The most important change made is the addition of relevant references and the deletion of repetition. These and further changes are addressed in the point-by-point reply to the comments.

Yours sincerely,
Kim Holtzer-Goor

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Enclosed: response to editor (see below), revised manuscript with changes marked
Dear editor,

Please find the point-by-point response on the concerns of the reviewers in this letter.

The first reviewer remarked that a greater emphasis might have been given to the explanatory force of the sociological theories, but that the paper draws sufficiently from this base. We agree with this reviewer that we could have given greater emphasis to the explanatory force of the sociological theories, but we choose not to do so as this would require a quite detailed description of the (historical) developments in the field of sociology. In our opinion would that change the article and its readability drastically while there are good books available that describe these developments. We therefore choose to add the references to these sources (Larson, Macdonald and Bolton).

The only minor revisions that he mentioned consider the tendency to have two words together. We screened the complete document to identify the missing separations and added them.

The second reviewer felt that the clinical paper format was not the most appropriate format for this article resulting in unnecessary repetition. As also asked by the editor, we removed unnecessary repetition within the current format and rewrote some parts to create a better flow.

This reviewer would like the quotations to be summarized and incorporated in the text. Although we think that grouping all quotations per theoretic perspective gives a nice overview, we are prepared to incorporate the quotations in the text if the editor would like us to do so. As we are not sure what the reviewer meant by “more appropriately summarized”, we would like to argue that it is important to us that the quotations remain intact as this shows that our results and conclusions are underpinned by the interviews.

He suggests that the uncertainty of the consultant staff about the capabilities of the primary care optometrists vs. the desire of some optometrist for more specific training could be emphasized. We added two sentences in the discussion to further emphasize this topic.
His last comment is that it the 3-model approach is awkward because there is no space to fully describe each of them for naive readers.

We acknowledge that there is not enough space to fully describe each model; however we believe that the most important aspects of each model / theory are explained in lay terms. References have been added to provide more information for the interested naive reader.

We have also referred to broader work on demand management for health services and to work on delegation of work to others.

Yours sincerely,
Kim Holtzer-Goor