Reviewer's report

Title: Community pharmacy integration within the primary care pathway for people with longterm conditions: a focus group study of patients', pharmacists' and GPs' experiences and expectations

Version: 1 Date: 18 Dec 2018

Reviewer: Nicola Hall

Reviewer's report:

I would like to thank the authors for their detailed and helpful responses to my initial review. The changes have improved the clarity of the paper and I am happy that the authors' responses adequately address all the issues raised. There are just two points I feel may still benefit from reconsideration at the discretion of the authors:

1) In my opinion, what is meant by "integration within the primary care pathway for LTCs" is still not well defined and in most cases is referring principally to "integration with primary care or primary care services" or more specifically to "collaboration with GPs" (rather than to specific primary care pathways for long term conditions). The authors may wish, at their discretion, to reconsider their wording/definitions in light of this being an essential element of the aims of the study?

2) I accept the authors' response in relation to my comment about the discussion/interaction within the focus groups. However, I would still recommend that they reconsider this issue in relation to the way the results are reported for clarity purposes. The results do not always provide a very clear description of the level of shared understanding or disagreement within the groups. (The following examples are just to try and illustrate this point: p10 line 8: "public health services were not usually discussed by any of the stakeholder groups" - does this mean they were discussed or not? Was there agreement within/between the groups on this issue or not? P13 line 31 "some patients were wary of pharmacists workload pressures" Is the quote provided as an example of a shared understanding/beliefs or was this just the opinion of one person? Was this issue discussed in both patient focus groups or just one? Is the fact that some patients were wary of this, an indication of a lack of shared understanding? What were people's opinions about this once the topic was raised? )

In addition, there are just a few minor points of accuracy in relation to the proposed changes that the authors may also wish to amend:

p.3. line 26 - the inclusion of the definition of signposting is a useful addition, however how the sentence is structured does not make it clear that the definition relates to 'signposting'. Could the addition of i.e. help clarify this?
P4 - line 10 - the revised contract is mentioned - however there is no explanation as to what this is.
P4 line 14 - should this be "within primary care" (rather than "within the primary care")?
P5 line 3 - patient's should read patients'
P7 line 6 - the revised sentence does still not read clearly
P20 line 25 - "the pharmacy" - would it be clearer to say "their usual pharmacy" or "the pharmacy/pharmacies they had previously used"? It is unclear what "the pharmacy" refers to.
P27 - line 7 - should this read: "the study is applicable" or "the findings are applicable"?

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

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Please indicate the quality of language in the manuscript:

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