Reviewer’s report

Title: Healthcare Providers’ Experiences in Supporting Community-Living Older Adults to Manage Multiple Chronic Conditions: A Qualitative Study

Version: 0 Date: 03 Jun 2019

Reviewer: Efrat Shadmi

Reviewer's report:

This paper investigates an important topic which is still not widely enough addressed in the literature, i.e., the experience of primary care and home care providers from multiple disciplines who care for patients with MCCs. With the increase in longevity and associated MCCs, it is important to expand the current somewhat limited account of providers' perspectives on challenges of MCC care and explore the experience of various types of providers, as this study does. The varied group of health professionals, representing most if not all relevant professions, including personal health workers, is a significant strength of the study. The interview guide is especially suited to address the study's goals. Nonetheless, there is need for better clarification of some of the issues, as outlined below:

Major revisions:
1. P5 line 86: "Approximately 62% of older Americans who are aged 65 years or older have MCC" - this prevalence of MCCs significantly relies on how MCCs are defined and what types of chronic conditions are counted. Please address this point and provide additional references if/as needed. Similarly, stating that: "Older adults with multiple chronic conditions use healthcare services (e.g., primary care, home care, and acute care services) at much higher rates than older adults with no comorbidities [7,8]." - is also quite simplistic, as the dichotomy between "none" and "any" chronic condition is highly dependent on how CCs are measured and classified. Please rephrase in order to more accurately describe the connection between the number of CCs and the growing burden in terms of resource use and healthcare recommendations that need to be followed.

2. The introduction could be better organized to reflect the challenges related to MCC care. Please address the following specific examples: P 5 lines 95-97: the sentence starting with "however" is not a direct contradiction of the previous sentence, i.e., the fact that multiple providers are involved in patients' care could also be the case for single conditions and does not necessarily imply it is holistic (therefore, remove the "however"). P6 lines 107-111 - some of the details are repetitive of the description of challenges stated at the beginning of this paragraph. A more integrative account of the types of challenges (and perhaps specific examples?) would help the reader to understand the essence of what is currently lacking in the literature and better clarify the need for perspectives of additional providers, as this study aims to provide (i.e., rather than "lists" of challenges, as is also the case in lines 123-127, some more details and explanations could better clarify the main message re what is lacking in current knowledge in this area).

3. Please consider highlighting the contribution of the wide-array of provider perspectives that this paper offers. An important example is provided in the quote (line 340) "But they don't want to tell the doctor that." - this type of information brings to light the unique contribution of providers from various...
professions in acknowledging the wide array of challenges that patients with MCCs face and the potential important contribution which their perspective can add to medical decision making (and thus the importance of teamwork).

4. Discussion (lines 6262-627) - "Previous literature has focused primarily on deprescribing by family physicians as a way to optimize medication use [15]" - this is a bit simplistic account of the literature, which also addresses issues such as tailoring medications to "patient centered care" (see, for example Steinman et al, BMC Geriatr. 2018 or McMullen et al, Patient Education and Counseling, 2015).

Minor revisions:
1. P7 lines 150-151 - it is not clear what the authors mean by: "allowed the research team to honour the words of the participants .."
2. P8 lines 168-169 are a bit repetitive of lines 162-163 (though not all professions are mentioned above) - please indicate the type of providers included either on lines 162-163 or 168-169
3. P11 lines 207-208" please clarify "including participants from two provinces who had diverse roles in supporting older adults with MCC" - in the analysis / identification of themes?
4. Table 2 - please describe what are the "other" work settings.
5. Lines 659-661 - please provide references to support this (possibly aslo from the authors' previous publications).

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.

Yes

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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