Dear Editorial Team,

Re: Disciplinary boundaries and integrating care: using Q-methodology to understand trainee views on being a good doctor

Thank you for your correspondence regarding our paper (MEED-D-17-00737R2), in this letter we outline our responses to editorial and reviewer comments and detail the amendments we have made. We submit both a ‘highlighted’ revised manuscript indicating amendments, and a ‘clean’ version.
Editorial requests:

1. We have now included email addresses for all authors
2. We have now added the following key words: medical generalism, professional identity, multidisciplinary, Q methodology, complex care, multimorbidity.
3. We have corrected our consent for publication statement as instructed.
4. We have added a clause to the funding acknowledgement as follows: ‘The funding body did not contribute the design of the study, the collection, analysis or interpretation of the data, or the writing of this manuscript.

Reviewer comments:

COMMENT 1: The introduction is lengthy and the purpose of the study is not clear to the reader until later in the manuscript. A purpose statement would be helpful.

RESPONSE 1: We have added the following statement at the beginning of the ‘background’ section: ‘This paper investigates medical trainees’ views on what ‘being a good doctor’ means in the context of calls for a more generalist approach to caring for patients with complex health needs.’

COMMENT 2: The methods section is long and rather confusing for those unfamiliar with Q methodology. The authors should try to explain the design in a more succinct and less detailed way.

RESPONSE 2: Thank you for this observation – we have altered the wording of the study design as follows, and hope that this makes our explanation more accessible to those unfamiliar with the method:
‘Q methodology allows for the systematic collection of individual’s relative opinions towards a phenomena, and is becoming increasingly popular within a range of applied and health related disciplines. Participants are asked to rank a set of statements (or items) relative to one another into a grid according to a scale (e.g. ‘most agree’ to ‘most disagree’), which usually takes the shape of a quasi-normal distribution. Collected together, these completed grids are subject to a dimension reduction technique, sometimes referred to as ‘inverted factor analysis’27. This analysis groups those with similar sorting patterns, indicating similar viewpoints, together. This approach is distinct from most other statistical techniques in which demographic factors, such as gender or age, are employed as controls or used as a basis to sort participants into groups. As Bang and Montgomery28 (p.346) put it: ‘the aim of Q is to utilize subjectiver views, opinions, and perception to capture general responses to a phenomena’.

In addition, we have also edited and slightly simplified the ‘Q-set’ and ‘study participants and data collection procedures’ sections to aid readability.

COMMENT 3: The discussion repeats some of the results. This contributes to the overall length of the paper.

RESPONSE 3: We have examined the discussion and recognise that the paragraph under the heading ‘do trainee perspectives vary according to specialty?’ reiterates our findings. We would argue, however, that the information is presented differently here: rather than describing the characteristics of participants loading into each group one by one, we are focussing on how participants on the BBT/conventional training pathways are distributed amongst these factors. We feel this same point applies to the short discussion of gender that follows next in the discussion. We have edited down the discussion point ‘do disciplinary boundaries mask underlying commonalities’ so that the focus is more on our interpretation of this finding.

In addition to the changes requested above, we have also taken the opportunity to update the ‘study context’ in line with recent developments:

‘Despite successfully recruiting two further cohorts and expanding the scope of the programme to most regions in England in 2015, the decision was made to cease further recruitment in 2016.28 Nevertheless, the recent review of Shape of Training indicates that interest in the generalist agenda shows no sign of dissipating.29'
We very much hope that the amendments described above will be satisfactory. If you have any concerns or queries please don’t hesitate to contact us.

Best wishes

Esther Muddiman (on behalf of all co-authors).