Author’s response to reviews

Title: Assessing factors militating against the acceptance and successful implementation of cloud based health center from healthcare professionals' perspective: A survey of hospitals in Benue state northcentral Nigeria

Authors:

Patience Idoga (20153744@student.ciu.edu.tr)
MEHMET TOYCAN (mtoycan@ciu.edu.tr)
Halil Nadiri (hnadiri@ciu.edu.tr)
Erbuğ Çelebi (ecelebi@ciu.edu.tr)

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Author’s response to reviews:

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Manuscript Title: Assessing factors militating against the acceptance and successful implementation of cloud based health center from healthcare professionals' perspective: A survey of hospitals in Benue State, North-Central Nigeria.

General remark: The authors would like to thank the editor for the prompt response and guidance throughout the review process of the manuscript and the provision of valuable comments.

We have given the comments serious consideration and altered the manuscript according to the suggestions. Below, we address all comments point-by-point, discussing the changes.

We hope that the revised manuscript will meet your expectations and we are willing to answer any other questions you might have.

Editor’s comments
1. Textual overlap:

We note that the current submission contains some textual overlap with other previously published works. In particular, Idoga, P.E., Toycan, M., Nadiri, H. and Çelebi, E., 2018. Factors affecting the successful adoption of e-health cloud based health system from healthcare consumers’ perspective. IEEE Access.

This overlap mainly exists in the Methods sections.

While we understand that this is work that you have previously published, and some of the same ideas are contained in these publications, please be aware that we cannot condone the use of text from previously published work. If this study uses methodology from a previously published work, please provide a summarizing statement in the methodology together with a citation to the original paper.

Please re-phrase these sections to minimize overlap.

We would like thank for this observation and suggestion. The sentence in the method section has been rephrased to read: “The study adopted a quantitative research approach to collect data by using a close-ended questionnaire with a seven-point Likert-scale measurement. While in the questionnaire the demographic information of participants were collected, as could be seen in table 4, the questionnaire was also designed in accordance to extended UTAUT2 constructs. The study presented novel concepts particular to health care information technology acceptance and specific to the area under consideration by the study; while considering the statement by Venkatesh et al., [10] that, it is important to widen the extended UTAUT2 model by the addition of novel variables, relations and mediators in situations warranting technology to be biased on some distinct factors. The key variables used in the research model is summarized in Table 2”.

(Page 13-14, line 325 - 333)

2. Availability of data and materials:

Thank you for providing a statement regarding the Availability of data and materials. However, we would like to request that you amend this statement. Submission of a manuscript to a BMC journal implies that materials described in the manuscript, including all relevant raw data, will be freely available to any scientist wishing to use them for non-commercial purposes, without breaching participant confidentiality.

Please detail where the raw data supporting your findings can be found (including information found in any supplementary files). If the raw data is publicly available or can be requested, please state that this is the case, and where the data can be found/requested from. Alternatively,
if you do not wish to/cannot share your data, please state (in the ‘Availability of data and Materials’ section) that data will not be shared, and state the reason.

Thank you very much for this suggestion. The dataset supporting the conclusions of this article are included within the article. However, it can also be made available on request to the corresponding author. (Page 28, line 618-619)

3. Funding:

We note that you have currently stated the funding is 'not applicable'. If no funding was obtained for this study, please clearly state this.

Thank you very much for this suggestion. The funding statement has been changed from “Not applicable” to “There was no funding for this research” (page 28, line 622 - 623).

4. Author's contributions:

Please include a statement in the Authors' contributions section to the effect that all authors have read and approved the manuscript, and ensure that this is the case.

Thank you very much for this suggestion. Author's contribution statement has been changed from “All authors contributed immensely to the success of the research. While PEI and MT were responsible for the acquisition, analysis and interpretation of data, HN and EC were responsible for the proposed model development, conceptual design and manuscript revision.” to “All authors contributed immensely to the success of the research. While PEI and MT were responsible for the acquisition, analysis and interpretation of data, HN and EC were responsible for the proposed model development, conceptual design and manuscript revision. The whole manuscript was read and approved by all the authors”. (Page 28, lines 624 - 627)

5. Figure legends:

a. Figure files should contain only the image/graphic, as well as any associated keys/annotations. If titles/legends are present within the figure files, please remove them.

Thank you very much for this recommendation. Titles/Legends have been removed from all figures (figure1, figure2, figure3, figure4 and figure5).
b. Please provide figure titles/legends under a separate heading of 'Figure Legends' after the References.

A separate heading titled: “Figure Legends” has been created for figure titles/legends in the manuscript after the Reference section. (Page 35, lines 843 - 848)

6. Image attributions:

Please state in the cover letter whether the graphics in figure 2 (woman at desk, phone, laptop, man, woman, doctor, wall, server) are your own or taken from other sources.

If taken from another source please acknowledge the source in the figure legend, and if it is under copyright also state the written permission given to use and adapt it.

If the above conditions are not met these icons need to be removed. Please note the editors may request proof of permission at any time.

Thank you very much for this suggestion. The ownership of figure 2 has been stated in the cover letter. (sir, please write a cover letter)

7. File inventory:

Thank you for providing a detailed response letter to the reviewers' comments. We kindly ask that you please remove your response letter from the File Inventory as it is no longer required at this stage in the editorial process.

Thank you very much for the suggestion. The response letter has been removed from the File Inventory.

8. Clean manuscript:

At this stage, please upload your manuscript as a single, final, clean version that does not contain any tracked changes, comments, highlights, strikethroughs or text in different colours. All relevant tables/figures/additional files should also be clean versions. Figures (and additional files) should remain uploaded as separate files.

Thank you very much for this suggestion. All tracked changes, comments, highlights, strikethroughs and colours has been removed from the manuscripts. (All pages)
9. For the 'Availability of data and materials' section, please provide information about where the data supporting your findings can be found. We encourage authors to deposit their datasets in publicly available repositories (where available and appropriate), or to be presented within the manuscript and/or additional supporting files. Please note that identifying/confidential patient data should not be shared. Authors who do not wish to share their data must confirm this under this sub-heading and also provide their reasons.

Thank you very much for this suggestion. The dataset supporting the conclusions of this article are included within the article. However, it can also be made available on request to the corresponding author. (Page 28, lines 618-619)

10. Declarations

Ethics approval and consent to participate

Prior to the distributions of questionnaires, a written ethical consent specifying that participation in the survey is voluntary and that information given in the survey would be treated as confidential was given to the participants and they all agreed to take part in the survey. Also, an ethical approval from the National Health Research Ethics Committee of the Federal Ministry of Health in Nigeria: A body mandated for the stipulation and enactment of rules and regulation governing the administration of all healthcare services in the Federal Republic of Nigeria was given with the reference number MOH/STA/204/Vol.1/28. The consent statement is shown below:

“Your participation is voluntary and you are free not to participate or refuse to answer any question. Are you willing to participate in this survey? Agreed [    ] Refused [    ]” (page 28, lines 607-615)

Consent to publish

Not applicable (page 28, lines 616-617)

Availability of data and materials

The dataset supporting the conclusions of this article are included within the article (and its additional file) (page 28, lines 618-619)
Competing interests

The authors declare that they have no competing interest. (Page 28, lines 620-621)

Funding

There was no funding for this research. (Page 28, lines 622-623)

Authors' contributions

All authors contributed immensely to the success of the research. While PEI and MT were responsible for the acquisition, analysis and interpretation of data, HN and EC were responsible for the proposed model development, conceptual design and manuscript revision. The whole manuscript was read and approved by all the authors. (Page 28, lines 624-627)

Acknowledgements

Special thanks to the management and staffs of Benue state ministry of health for their assistance and corporation. (Page 28, lines 628-629)