Author’s response to reviews

Title: A proof-of-concept framework for the preference elicitation and evaluation of health informatics technologies: the online PRESENT patient experience dashboard as a case example

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RESPONSE TO REVIEWER
Thank you for your further comments which give us the opportunity to further improve the paper. Our responses are below.

Presentation of data collection activities before the DCE:
We have further clarified this and tried to make it easier to navigate in the section: Prior work and context. It is of course a challenge to report this work when the report is not about these phases and does not need detail on them (that is being reported elsewhere). This is why originally we omitted discussion of the other phases. However we hope through the peer review process that we have now developed something useful in this section.

Can we provide evidence of a lack of work?
That is of course impossible, as you can only prove what is, and we do not want to provide the full details of our review here – which is perhaps what the reviewer therefore means - as we are publishing it elsewhere. However the article suggested by the reviewer does not provide a challenge to anything we have stated in the paper.
The reviewer-suggested article provided an ‘evaluation of the use and impact of quality or clinical dashboards’, and mentioned some attributes in a descriptive way in so doing, but it did not provide a rigorous evaluation of the attributes themselves or any comment as to how these impacted on dashboard impact or quality.
For the removal of all doubt we have added the phrase ‘evaluations of’ to our sentence: ‘But the review findings were limited, due to a lack of previous work in the field of evaluations of healthcare dashboard feature preferences….’
However we did not originally add this phrase as here we were talking in terms of preferences in the DCE sense where there is certainly a lack of previous work.

On p 5 we had already described the following: “This stage involved a scoping literature review on clinical digital toolkit design (see Table 1 for findings) which found little relevant literature; what there was, focused on design principles rather than applied use.” This further exemplifies our focus.
The unclear sentence on p3
Changed to “We confirmed an unfulfilled need in collaborative meetings between research teams developing similar systems and funded, as we were, by the UK National Institute for Health Research (NIHR).”

The statement about contribution is not helpful or convincing.
We have deleted this.

Cognitive feedback – more details needed.
This was just a standard process used in questionnaire development and not a formal method therefore normally what we have written would be good enough. Perhaps the reviewer believes this causes confusion with an informatics method where their comment would be valid so we have added ‘in the questionnaire development use of the term’. We have added a similar statement to the paragraph on structured walkthroughs:
‘This approach, which was different to the unstructured cognitive interviews used in our questionnaire development, meant we evaluated the quality of the user interface and system behaviour, not the actions of participants.’

Synthesis section unhelpful.
Thank you for pointing this out – we had forgotten to actually describe the synthesis approach and have now added the following:
‘At the end of this stage we used a triangulation matrix to compare findings across the different parts of the study as a synthesis of study findings on dashboard attributes. Methods were the columns and attributes the rows. We used this matrix to examine convergences and divergences, which included a return to the raw data, to gain a deeper understanding of the requirements of our potential end users and the different types of data afforded by the different methods used.’

As we used the marked up copy from before, given that some of the comments remained relevant, we have attached both our May and October responses as supplementary files. Please let us know if you need this presented differently.

Best wishes

The authors