Reviewer’s report

Title: Evaluating patient experiences in decentralised acute care using the Picker Patient Experience Questionnaire; methodological and clinical findings

Version: 0 Date: 29 Jun 2017

Reviewer: Øyvind Bjertnes

Reviewer's report:

Research on MAWs is important including patient experiences with such services. I have some comments and questions to the authors:

- Consider changing the title: 479 is the response n; is it an evaluation of patient experiences or MAWs?

- There's no mention on the MAW literature in the Introduction, neither general literature nor patient satisfaction/experiences. A paragraph on this would be useful, in addition to a little bit more information about this particular health service.

- Introduction: I wonder if psychometric testing is one of the goals of the article? There's a range of tests, but no mention of this as one of the aims of the study.

- Methods: Please describe the reasons for choosing the PPE-15.

- Methods: Please include more information about the translation process and results.

- Methods: why did you not test the PPE-15 with cognitive interviews? How can you document that this instrument consists of important aspects for MAW patients? The questionnaire was developed and validated in a hospital setting in another country.

- Methods: Neutral answers=non-problem - please explain why this is not handled as missing.

- Methods: Please elaborate on the face validity testing with 10 patients - Methods and results.

- Methods: please include total n and response n for the test-retest, and clarify what variables was tested in the test-retest (only total score?).

- Results: what was the reasons for only giving 1235 patients (of 2182) the questionnaire?

- Results: Why is the ICC between wards negligible? The results in table 3 shows quite large differences on single items. Did you test the ICC-wards for the total score?

- Results: Please explain "face validity revealed no problematic issues".

- Results: Test-retest ICC: total score? Response rate?
Discussion: Needs more discussion on the validity of the PPE-15 for this service/patient group; more discussion of possible causes to low ICC-wards (low n for instance); more methodological discussions on the reasons for not finding any expected predictors of patient experiences (age, self-perceived health), which is in contrast to almost all literature in this field; clarify recall bias under limitations; what does the literature say about differences between responders and non-responders in this field?; how many patients would you have liked to include in the test-retest?

- Tables: the tables occurred two times, which was a little bit confusing.

All in all, an important topic, but many questions and comments to address. The aims are related to MAW experiences and predictors of these experiences, but the manuscript is full of psychometric results and comparisons of MAW units, making it hard to find a "red line" throughout the manuscript (in a way it looks like four aims, not two). Personally I would have liked a separate validation paper on the PPE-15 in this setting, then additional analysis in other papers. Has the instrument been validated in a separate paper or is this the validation?

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.

I am able to assess the statistics

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Please indicate the quality of language in the manuscript:

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I declare that I have no competing interests. I am leading the national function for the measurement of patient experiences in Norway, but do not believe this is a conflict of interest.

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