Reviewer’s report

Title: Working with public contributors to improve the patient experience at the Manchester Clinical Research Facility: An evaluation of the Experience Based Design approach.

Version: 0 Date: 07 Feb 2017

Reviewer: Joanna Goodrich

Reviewer's report:

This paper will be of value to audiences interested in EBD as a method, and in ways of involving the public in both research and service improvement - thank you. Overall, my main comment is that it is important to make clear the difference between EBD as a method and what you mean by PPI - to help the average reader understand. The EBD method involves patients and staff working together - not the public, unless you count family/carers of patients. Your paper is about teaching members of the public how to use the method and how successful this was. This is the focus - and what makes it different. It gets confusing in places where EBD and PPI are used interchangeably- for example p. 4 lines 34-43 where you say 'when considering the success of PPI within the EBD approach....respondents who had completed an EBD project said that the approach had 'really engaged patients". The barriers and facilitators were considered (to EBD as a method) in this same survey, and in other evaluations of EBD or EBCD projects. Secondly, it's important to distinguish between Experience Based Design (by the way box 2 says evidence based design) and Experience Based Co-Design. Papers by Glenn Robert or The King's Fund are about EBCD. (As are refs 4,12,13) Glenn Robert added the 'co' to emphasise how patients stay involved after improvements have been identified and work with staff to design, prototype, test and finally implement the changes. Is your project going to continue to implementation with patients?

Reference 5 - is King's College London (not The King's Fund)

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