Reviewer’s report

Title: Integrated respiratory and palliative care leads to high levels of satisfaction: a survey of patients and carers

Version: 0 Date: 15 Nov 2018

Reviewer: Lisa Brighton

Reviewer's report:

The authors present a well-written cross-sectional survey study evaluating their integrated respiratory and palliative care service, with a commendable response rate. There are some areas where further information is needed to contextualise the study (e.g. around the service and questionnaire), and it could be strengthened by further reflections to bring out the novelty and implications of the work. Please see below for comments for each section.

Abstract

* As with the patient response rate, please specify the percent and number of eligible carers.

Introduction

* For transparency, the third paragraph in the introduction referring to the ALDS demonstrating improved outcomes may need to be tempered (e.g. saying 'associated' with improved outcomes or specifying that these are findings from an uncontrolled study).

* The introduction could be strengthened by being clearer on where the authors feel this work sits in terms of gaps in the current evidence base around these integrated services. For example, do the authors see this as preliminary work to work towards an effectiveness trial of their service, or do they think the evidence of effectiveness from similar models is sufficient and are looking to refine the service components (as the most important components is something that is still not well understood).

Methods

* Although I understand there is a separate article that describes the service in more detail, I think it would help the reader to have some more information within this paper to put the findings in context (maybe summarised in a box to keep it out of the main word count). In
particular it would be useful to understand how people are referred into the service and when they are discharged, average wait time, the minimum/typical number of contacts with different professionals, including core and optional components, and if carers are always seen with patients (rather than on their own) - as these relate to some of the findings.

* It is really helpful that the authors include the complete survey as a supplement. In addition to this, I still think a little more detail is needed in the methods section to help the reader interpret the findings. At the moment without looking at the questionnaire, it's unclear what sort of things come under 'general views' and 'overall opinion' and the balance of multiple choice and free text responses.

* Please provide further detail on the analysis of the free text comments, as it is not clear what method was used (e.g. content analysis, thematic analysis), who completed this, and how rigour and validity were ensured.

Results

* Please clarify in how many instances a dyad of carer and patient responded, to give an idea of how many cases are represented.

* It's helpful to understand the number of episodes of contact - please could this be provided for the patients as well as carers?

* Throughout the results, please indicate when findings are a summary of free text comments as opposed to pre-determined options (e.g. for ALDS clinic management).

* In the last paragraph on ALDS clinic management there is a missing a percentage sign, and the last sentence of the ALDS respiratory nursing service staying "nearly all participants" is missing an N and percentage.

Discussion

* Stating a large number of participants at the moment seems a little subjective on its own - it might help if the authors elaborate on this (do they mean in comparison to other studies in this field, or considering these are people who are quite unwell with advanced disease, etc).

* It may strengthen the discussion to add further reflections on the novelty of this study and how it adds to the previous literature. I think it's important to acknowledge that in the Reilly
et al. paper the service components felt to be helpful to patients are included, drawing on the free text comments. Although the authors of this project do ask about service components participants' found helpful, it is still tricky to link all of these to the 'integration' aspect of the service, and many of the key findings (e.g. importance high quality communication and feeling cared for, role of education) are reflected in previous work.

* The sentence at the end of paragraph four of the discussion re. increased access to palliative care is missing a reference.

* It might strengthen the discussion around home visits to consider the cost implications of this.

* Please could the limitations section also note the exclusion of non-English language speakers, unknown representation of people from different ethnic and socio-economic backgrounds (as these can often affect care experiences), and that the tool used has not been validated.

* The discussion may benefit from reflection on the implications of these results for future research - particularly thinking about whether high satisfaction and value seen in these elements of care is sufficient to prioritise them, or whether we need further work to understand the impact of these components on outcomes and cost-effectiveness.

* Please consider adjusting the conclusion to keep the focus on the results of the current study around high satisfaction and the valued components, rather than the results of the previous piece of work.

**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.

Yes

**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.

Quality of written English
Please indicate the quality of language in the manuscript:

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