Author’s response to reviews

Title: What do patients and family-caregivers value from hospice care? A systematic mixed studies review

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Author’s response to reviews:

Thank you to the Editor and reviewers for their feedback on our manuscript. A point by point response is outlined below.

Editor Feedback

The reviewers have expressed significant enthusiasm for this manuscript. Provided the authors can adequately respond to the suggestions of the reviewers, it should be acceptable for publication thereafter. Thank you for submitting your work to BMC Palliative Care.

Author response

We are pleased to see that the reviewers are very positive about the manuscript. Their feedback outlining the minor revisions is however contradictory. Reviewer 1 requests to expand the introduction and discussion and to reduce the methods and findings, whereas reviewer 2 requests that we expand the methods and they consider the rest of the manuscript to be excellently reported. The key issue is that if we followed the steer of Reviewer 1 (to expand the introduction and discussion and to reduce the methods and findings), manuscript reporting would then not adhere to internationally agreed reporting guidelines for this type of complex mixed-method review. Given that one of the co-authors of the current review wrote the reporting guidance (published in 2018 in the Journal of Clinical Epidemiology and co-badged with Cochrane) for this type of review, and the method-specific reporting guidance for reporting qualitative evidence
syntheses, which is endorsed by Cochrane, we feel that it would be remiss not to adhere to this internationally agreed and peer reviewed reporting guidance. We appreciate that Reviewer 1 might not be aware of this guidance as it was only published in 2018. We have therefore continued to adhere to the reporting guidance for this type of review and provided an explanation to the reviewer 1 as to why we have not followed their steer.

As additional context, we specifically selected BMC palliative care as the journal could accommodate reporting of this type of complex mixed-method review. We have not published the protocol containing a detailed explanation of the methods elsewhere, and by definition this type of review contains more than one synthesis method (three in the current review), and therefore requires more words to adequately describe the methods in a transparent way, and which could be reproduced from the information provided. We have also introduced another new systematic review process to BMC palliative care readers- application of GRADE CERQual to assess the confidence in qualitative synthesis findings. One of the co-authors of the current review is the originator of this method, which was published as an 8 paper series in Implementation Sciences in 2018. This is (hopefully) the first review to include GRADE CERQual in BMC palliative care and we therefore feel that readers require a clear explanation of the methods in order to understand these new review processes.

References


Reviewer 1 comment

A very interesting article on the important topic of what adult patients and family caregivers value about their experience of using UK hospices. The article is thorough and presents relevant findings that hopefully could lead to improvements in hospice care in the UK.

Author response

Thank you for this very positive feedback.

Reviewer 1 comment

The article is much too long and needs considerable tightening. The methods and findings can be significantly shortened while the background, introduction, and discussion could be expanded some. Having a better concise explanation of the previous work on this topic would help.

Author response

We acknowledge that different types of readers have different systematic review reporting needs. We also note that reviewer two requested the opposite of reviewer 1 (ie more information on the methods and judged the remaining review reporting to be excellent). As explained to the Editor above, in reporting this review we have followed agreed reporting guidance for mixed-method reviews published in 2018. There are three complex synthesis processes in this review and we apply GRADE CERQual to assess the confidence in qualitative synthesis findings. This is the first review to do so in BMC palliative care and we feel that readers require a clear explanation of the methods in order to understand and replicate review processes. We have therefore opted to stick with current reporting mapped against the relevant reporting guidelines (PRISMA, ENTREQ, EMERGE) as outlined in our Cochrane guidance for reporting mixed-method reviews and published in the Journal of Clinical Epidemiology in 2018.
Reviewer 1 comment

I was sorry the authors limited their review to only UK literature as there is a rich literature on this topic outside the UK that is relevant to the findings of this study. In particular Karen Steinhauser's seminal article "In search of a good death: Observations of patients, families, and providers."

Author comment

We acknowledge this observation. This however is already a very large review as noted in other observations made by reviewer 1. Hospice care also varies considerably by country context and mode of delivery and funding. In these circumstances, it is common practice for additional reviews of context-specific evidence to be undertaken and subsequently compared with the findings in the current review. There is also an increasing direction of travel to undertake systematic reviews of systematic reviews to address the issue that reviewer 1 raises.

Thank you for signposting this reference, which we were aware of. In response to this comment, we have included this reference in the discussion as a brief comparator to UK findings. Thank you for the suggestion (Page 24, line 10-13).

Reviewer 1 comment

Hospice care is evaluated against other providers in some sections but in others there is a direct comparison to evaluations of experience of care in the hospital. Would be good to identify the 'other providers.'

Author response

Thank you for highlighting this. This observation has now been addressed throughout the article (page 13 line 3-4, 11) and in the inclusion/exclusion criteria table (table 2, page 5) where the ‘other providers’ have now been named (Hospital and care homes).

Reviewer 1 comment
The tables and additional information are excessive and unnecessary. Table 5 is perhaps the largest table I've ever see in a manuscript. The Journal might want to include it on-line or note it's availability from the authors.

Author response

Please can the Editor give a steer as to whether BMC palliative care can accommodate this table as a link within the manuscript or as an additional online only file. We do not favour separating this table from the manuscript as it contains essential reporting information.

Reviewer 1 comment

Thank you for this contribution.

Author response

Thank you – we enjoyed producing this very complex review and hope that it makes a major new contribution to what is known.

Reviewer 2 comment

Excellently written, clearly presented systematic review of current literature and a valuable contribution to the field.

Author response

Thank you for this very positive endorsement of our complex mixed-method review.

Reviewer 2 comment

Minor quibble regarding the lack of acknowledgement of using Thomas and Harden approach in initial (first few pages) of manuscript, leaving the question in the introduction regarding what "type" of systematic review is being conducted (e.g., using Corcoran or Briggs methods) and no description of what Thomas and Harden's method/approach encompasses.
Author response

We have inserted additional mention of the Thomas and Harden approach earlier in the manuscript (page 4, line 18-19).

In the methods section a more detailed explanation of this 3 stage synthesis approach can be found.

Reviewer 2 comment

Overall, this is an important piece of work

Author response

Thank you.