Author’s response to reviews

Title: Volunteers in a biography project with palliative care patients – a feasibility study

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Authors´ response:

We would like to thank the reviewers for their comments and suggestions for improvement. We are very happy that Catherine Walshe did have no further comments or criticism. However, having revised the paper according to her feedback, some of the comments of the second reviewer Joe Low now targeted these revised passages, and we find ourselves caught between a rock and a hard place. Thus we were not able to follow some of his points of criticism.

Reviewer reports:

Catherine Walshe, Ph.D., MSc., BNurs., RGN (Reviewer 1): Thank you for your revisions to this manuscript.
Joe Low, Ph.D., M.Sc., B.Sc (Reviewer 2): In the last review, Reviewer 1 made useful suggestions for the authors to consider. The authors appeared to have modified their aims in the light of these comments to specifically focus on the feasibility of volunteers delivering a biographical intervention. However, the presentation of the data does not particularly support the three aims that the authors propose and some further work is needed by the authors to ensure that their data reflects the aims of their study.

1) The authors need to ensure the aims reflect the data they present in the results such as acceptability of delivering the intervention, motivation for undergoing training for the training. They present data in the results not reflected not their aims, so authors need to reflect whether they need to add more specific aims to this study and whether this data contributes to evaluating the feasibility of the biographical intervention they describe.

The data presented in the results comprise resources, outcome, and risks as main items of feasibility. Your suggestions to structure the aims along i) the feasibility of training and engaging volunteers as a psychosocial intervention, ii) explore potential issues around organization, resources and challenges; iii) evaluate potential effectiveness in improving patient outcome; were very helpful and we have just specified due to the suggestions of Reviewer 1. “Resources for training, coordination, and supervision” corresponds to the feasibility of training and engaging volunteers and issues around organization, and resources. “Can the volunteers finish the intervention” corresponds roughly to issues around resources and effectiveness. “Indications for distress” correspond to challenges.

We added the domains of feasibility:

The overall aim of this study is to examine if a biographical intervention provided by skilled hospice volunteers is feasible regarding the following domains: i) resources: do we have the resources for training, coordination and supervision; ii) outcome: can the volunteers finish the intervention comprising the interview and the writing in an appropriate time, and iii) risks: are there indications for distress in patients or volunteers.

2) In the new aims of the study, the authors discuss that the following: 'Do we have the resources for training, coordination and supervision'. However, following from Reviewer 1 previous point about the delivering the intervention safety and appropriately, nothing is mentioned about how volunteers were assessed in their competency of delivering the therapy, although we are told that volunteers received 14 hr of training. What checks did your supervisory team do to ensure that they were happy that the volunteers were competent to deliver the biography intervention?
All volunteers were skilled hospice volunteers (as this was an inclusion criterion) and had experience accompanying a dying patient. Training in biography work was an additional training for those who wanted to enlarge their range. The training curriculum ensured that volunteers were enabled with knowledge and skills for the biography work. All volunteers had supervision and briefing and debriefing before the interview. Please see page 7, line 164ff.

We added the following sentence:

Adherence to the training content was checked by supervisor.

3) Results - resources. very limited data to answer the questions about whether there are sufficient resources for training, coordination and supervision'

Please see page 8, line 182f. We needed 28 hours for training, coordination and supervision in nine months; this comes down to 3 hours per interview. Our ward has two part time social workers with together 40 hours per week for eight patients. This means that staff capacity is available to provide this intervention. In consequence, we have established the biographical intervention for patients on our palliative care ward after this study.

Specific issues:

1) p5 l.104-107 - why is there a subheading 'Aims' is the methods section? This should be integrated into the previous section.

The methods section was organized along the TIDieR guideline. Subheadings were inserted following the TIDieR sections. The Aims subheading represents one of the TIDieR sections. The manuscript was not changed.

2) p5, l.112-113 - technically, it is wrong to say that there will no exclusions, if all volunteers used needed to have completed their training as a hospice volunteer.

We changed the text accordingly.

3) p5, l.122-125 - you talk about collecting this quantitative data, but do not discuss this in the results.

Please see page 8, line 195-205.
4) p6, l.1333 - 'à' - do you mean 'at' or 'to'?

It is a French à, meaning that each workshop lasted 4 hours. The manuscript was changed to 'lasting'.

5) p6-8, l.150-176 - I am sure that the authors modify this part in response to comments from the previous review, but I am not sure whether the 'evaluation' section needs to be sub-divided. Some of the information presented can be incorporated into earlier sections.

Again, this was due to the revisions of the methods section, which was organized along the TIDieR guideline following the reviewers` comments. The subheadings were inserted according to the TIDieR sections. The manuscript was not changed.