Reviewer's report

Title: IDENTification of patients in need of general and specialised PALLiative care (ID-PALL©): item generation, content and face validity of a new interprofessional screening instrument.

Version: 1 Date: 25 Nov 2019

Reviewer: Mary Ryder

Reviewer's report:

The topic is to produce a much needed assessment tool to assist healthcare professionals working in areas outside of specialist palliative care. This is an excellent project.

This is a complex research to read merely due to the number of stages involved and the various healthcare professionals. The Delphic Process flow chart (Figure 1) is uninformative. Can you please add to your flow chart which stage included specialist palliative care healthcare professionals and disease specific healthcare professionals?

Line 117: A committee of interdisciplinary clinical experts: Please clarify that they are experts in palliative care.

Line 125: Qualitative part and quantitative part: Please specify each part, it is difficult to see the qualitative section, were there interviews or focus groups or was this just examining the written comments? The manuscript does not identify the number of written comments or the themes that were identified in the qualitative section, despite stating that they were to conduct thematic analysis using Braun and Clarke.

Line 140-141: Keeping items with a mean of ≥3.5 or those selected by more than half of the participants. Please explain the purpose of using a mean score if items potentially had a mean score of 1.8 yet were selected by more than half, what was the purpose of using a mean score?

Line 142: Reference to qualitative analysis: There is no qualitative analysis presented in this paper. See comment re line 125.

Line 145: A questionnaire sent to all participants: This should be included in the manuscript. Were the questionnaires sent after the selection of items and more importantly, what was the purpose of the questionnaires? This is not explained in the manuscript.

Line 149-152: Round 2. Why were additional items added for round 2? Is this the specialist palliative care expert panel? Is this the same panel described in step 2, with 4 people? Please clarify which of the CICE conditions had to be met and why.

Line 202: Table 1: Why are steps 1 and 2 excluded from this table? This provides more information than the flow chart (figure 1)
Line 207: See table 2 for professional and demographic characteristics: This is not presented in table 2. Table 2 states Item selection.

I feel a table outlining what items were eliminated following each step and round would be beneficial. It would provide the reader with a lot of clarity.

Line 218-219: The original criteria of a mean ≥3.5 seems to be completely ignored in the document, can you please address this in the manuscript?

Line 237: Table 2: See comments re line 207. I find this table 2 confusing. Line 140 states you keep items with a mean of ≥3.5, and selected by more than half of the participants, yet the table suggests that nearly all items were retained despite reporting a mean ≤3.5. What is the purpose of defining a selection criteria and not adhering to it? If you are not adhering to the selection criteria then please explain this in the manuscript.

Line 239: Why is step 4 not included in table 1?

Line 262: Qualitative comments: There were no qualitative comments analysed in this manuscript, how does the reader know whether they were relevant or not? Who analysed them and why is the analysis hidden?

Line 263: You mention data saturation in the discussion, yet there is no mention of thematic analysis in the results section. You cannot discuss data saturation without presenting results.

Line 264: "Each expert thought about their choices and comments in terms of what they saw as logical": How do you know this is fact? Where did the experts record their thought processes? Were they requested to keep notes on this? How did you interpret the experts thoughts?

Line 267-271: There was no mention of 'intensive discussions' by the CICE in the methods or results sections of the manuscript. What was the outcome of the intensive discussions and why is this not discussed in results and corresponding tables? What was it about the interprofessionality of the group that was a central element?

Line 279: The results of the face validity phase: This phase you mention is not defined in the methods or results.

Line 305: face validity only performed with hospital healthcare professionals? This was not stated in the methods or results. It should not be presented for the first time in the limitations section of the manuscript.

Some clarity is required for the methods and results

**Are the methods appropriate and well described?**

If not, please specify what is required in your comments to the authors.

No
Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

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.

Not relevant to this manuscript

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

Acceptable

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