Reviewer’s report

Title: Hospital ethics reflection groups: a learning and development resource for clinical practice

Version: 0 Date: 06 Aug 2019

Reviewer: Katherine Wasson

Reviewer's report:

The manuscript is well-written and clearly articulates the aims and purpose of this qualitative research study. The research contributes to the literature and knowledge about using ERG in multiple hospital settings. Thank you for your work.

There are a few minor revisions to be made.

Spelling and Grammar:

Page 4, line 37-38: using not "uing"
Page 4, line 49: should read - training of the ethics facilitator…
Page 5, line 57-58: should be "…one exception was the number of retrospective and prospective…” not amount.
Page 7, line 14: Don't end the sentence with a preposition (of).
Page 8, line 5-6: Should read "Another argument about/regarding patients in general…"
Page 9, line 17: should read "One person/participant described himself…"

Methods:

The first author is described as the only author to review and code all the data. Typically in qualitative research, multiple researchers read and code the data. Is there a reason it was done by one person? Is this methodologically sound? Please describe.

It might be worth adding a sentence or two to define what a "participant observer" is for readers who are unfamiliar with these methods.

Why were the ERGs not recorded?

Organization of the manuscript:

The discussion section summarizes and repeats some of the concepts and implications already covered in the results section (example - significance for patients section, Significance for clinicians - the case of the nurse confronted by the patient wanting to decrease his medications). What is new to the discussion of this example in the discussion? Why is it here? Sharpen the point and reduce the repetition. While it is understandable that there will be some overlap, the authors should reduce the repetition significantly and focus on the implications of the research. The reader has read and understood the results. The discussion is the place to broaden the discussion and brainstorm about the implications and other applications of their findings. Why is this research significant - for this
population and others? Are the ERGs ongoing? Will they be implemented elsewhere? Why or why not?

The authors touch on EGRs and links to addressing moral distress. Elaborate on how it has been shown (or might be shown) to address moral distress.

How might physicians be encouraged to present cases in other ERGs? What strategies were attempted and lessons learned for others?

What recommendations do the authors have for hospitals in Denmark (and elsewhere possibly) given these largely positive results of ERGs? Should multiple hospitals implement or pilot this approach?

**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.

Not relevant to this manuscript

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

Acceptable
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