Author’s response to reviews

Title: Weathering the Rural Reality Delivery of the Nurse-Family Partnership Home Visitation Program in Rural British Columbia, Canada

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Author’s response to reviews:

February 17, 2019

Dear Dr. Tovah Honor Aronin,

Thank you for reviewing our manuscript titled, Weathering the Rural Reality: Delivery of the Nurse-Family Partnership Home Visitation Program in Rural British Columbia, Canada. We have carefully reviewed the thoughtful feedback provided in the peer review process. We have addressed the reviewers’ concerns and their suggestions have strengthened this manuscript. Please find below a point-by-point response to each of the concerns identified by the reviewers.

Reviewer # 1 (Jacqueline Barnes, Ph.D)

1. Regarding the method, I do find it frustrating when one is expected to refer to other papers by the authors to gain all the relevant details and slightly more could be included about the particular style of qualitative analysis.

Thank you for the opportunity to provide more information about interpretive description. Additional detail was added to the Methods, specifically to the design, sample, data collection, and data analysis sections. We believe that this clearer description of the interpretive description approach will also help address issues raised regarding the presentation of the findings. All additions are captured in tracked changes on the submitted revised manuscript.
2. Regarding the results, the first part of the 'results' section (page 11 lines 232 to 238) is in actual fact part of the method, describing the participants and should be moved.

We agree with the reviewer that the description of the participants can be reported in the Methods sections. Our research team decided to present this information in the Results section because it was collected as part of a demographic questionnaire. For clarity, the following statement was added to page 10:

A demographic questionnaire was completed at the time of the initial interview.

We reviewed multiple recent qualitative studies published in BMC Nursing whereby participant demographics were reported in the Results sections (see the following studies)
https://bmcnurs.biomedcentral.com/articles/10.1186/1472-6955-12-21

Therefore, while we appreciate that both conventions are used, our preference is to present in the Results section.

3. I would like more information about how the six themes were identified, and also, more importantly, how relevant they were to the study participants. Ideally, I would like to see a table with the six themes and how many participants made comments relevant to each theme.

We added significantly more detail to the data analysis section to provide further explanation regarding the development of themes using the interpretive description qualitative approach. Providing a table and tabulation of participants’ quotes is highly problematic and inconsistent with the nature of interpretive description. In the interpretive description tradition, the research is required to provide an informed interpretive judgement and present ideas and quotes that represent the whole data set. The interpretive nature of this work is not something that is numerically evident. Our hope is that bolstering the data analysis explanation helps the reader to understand how themes were determined and deemed relevant.

4. Going through the results I found that there was at least one statement, or longer quote, from 9 of the 10 nurses, but only from 4 of the 11 supervisors which led me to think that they did not make comments that linked so well with the six themes. Thus I would like the table proposed above to indicate how many nurses and how many supervisors made relevant comments. Also some of the nurses (PHN 3, PHN4, PHN9) are cited three or more times, so more balance is better with respect to giving examples and I would like to see quotes from many more of the supervisors.

Thank you for considering the proportional representation of participant quotes. The supervisors were used to triangulate the data answering the question of how public health nurses experience delivering the Nurse-Family Partnership® in rural communities. For clarity, the following statement was added to page 10:
To provide further insights into the experiences of rural delivery of NFP, the immediate supervisors of NFP PHNs were also invited to participate as to triangulate data.

Additional supervisor quotes were cautiously added into the results. We have reflected on and decided to retain the original quotations from the public health nurses. We feel that the chosen quotes were selected because they best represent the interpretive claims we are making on behalf of the sample. However, we have carefully reviewed the narrative to ensure that the quotes were selectively illustrative of the claims for which we were building a case.

5. The discussion is good but could be improved by making delivery and policy recommendations more succinctly.

Minor adjustments were made through the discussion to make it more succinct and are captured through tracked changes in the revised manuscript.

Reviewer # 2 (Lynne S. Nemeth, PhD)

1. However, there were some sections of the background in particular that were lengthy, that would benefit from tightening up to make more concise. Specifically, I would reduce a good bit of the parent study background, and extensive discussion of the rural PHNs. It is important to state the aim of this paper before page 8.

The purpose of this analysis first appears on page four. To make this clearer, we removed the redundant statement on page eight. We also removed some excess information about the parent study and rural nurses.

2. Under the methods: please discuss more specifically what is distinct about interpretive descriptive design, and how the analysis was conducted--understanding that many readers do not know the language of qualitative analysis and it may sound vague. Explain what is meant by conceptual leap. What was the background of the qualitative analysts, and how did this influence or bias the findings?

As mentioned previously, more detail has been added to the methods section with considerable attention paid to describing the analysis. A description of the qualitative analysts and the importance of their disciplinary positioning was added on page 12.

Technical comments:

1) COREQ guidelines

A completed COREQ checklist is submitted as an additional file.

2) Please include in this declaration the statement on consent that is in the Methods section. Please also document whether the consent obtained was written or verbal.
The consent information is included in the declaration. On page eight and in the declaration, a statement was added to indicated that written and verbal consent was obtained.

3) Please indicate in the declaration the role of the funding bodies in: the design of the study; the collection, analysis, and interpretation of data; and the writing of the manuscript.

The following addition was made to the funding declaration:

PHAC had no input into the design of the study but did have an opportunity to provide high-level feedback on topics and concepts to be explored in the interviews and focus groups across each wave of data collection for the BCHCP process evaluation. PHAC had no role in the analysis or interpretation of data. PHAC had the opportunity to review and provide high-level feedback on the final version of the manuscript but had no editorial influence or control.

We are grateful for the insightful comments made by the reviewers and appreciate the time and effort that was given to our manuscript. We look forward to hearing from you regarding our resubmission and to respond to any further questions and comments you may have for us.

Sincerely,

Karen Campbell, RN, PhD Student, McMaster University