Author’s response to reviews

Title: Nurse-identified Patient Care and Health Services Research Priorities in the United Arab Emirates

Authors:

Nabeel Al-Yateem (nalyateem@sharjah.ac.ae)
Muna Al-Tamimi (mtamimi@sharjah.ac.ae)
Maria Brenner (Brennerm@tcd.ie)
Hanan Altawil (tawil@sharjah.ac.ae)
Alaa Ahmad (alaa@seha.ae)
Sharon Brownie (sharo.brownie@aku.edu)
Shameran Slewa-Younan (S.Younan@westernsydney.edu.au)

Version: 1 Date: 19 Dec 2018

Author’s response to reviews:

Technical Comments:

1. Requesting for Title Page

- Please include a title page at the front of your manuscript file. It should contain, at minimum, the names, institutions, countries and email addresses of all authors, and the full postal address of the submitting author.

Response: As requested, a title page has been added to the main document.

2. Please supply Figure 3.

Response: Thank you for highlighting this point. There is only one figure and two tables in the manuscript. However, there was a typographical error, which has been corrected to “Table 2.”
Reviewer 1

Page 2. Line 41. "UAE?"
Response: The full name has been spelled out the first time it appeared in both the abstract and the text, and then abbreviated consistently thereafter.

Minor grammar corrections needed
Response: Thank you for noting this. We have completed English and editorial review of the manuscript to improve grammar and syntax.

Major concern in discussion:

The study sample included nurses with Masters degree was only 4.2%. While this study highlights the importance of research priorities for the nursing profession, it lacks in identifying nurses education and training in performing evidenced-based research. Does research knowledge has any impact on the priorities? I would like to see some discussions of this limitation and strategy to address this barrier for nurses in research.

Response: Thank you for noting this point. The authors acknowledge the potential association between level of education and performing/implementing research and evidence-based practice. However, thoroughly exploring this aspect was beyond the scope of this study. Our primary objective was to identify agreed clinically relevant research priorities from the perspective of nurses delivering frontline healthcare. Therefore, the selection of the study design, and data collection and analysis procedures were geared toward achieving this aim. Investigating such correlations with the dataset that we have was therefore not feasible. However, this point has been included as a limitation of the study.

Reviewer 2

What was the criteria used based on?
Can you explain more about the cutoff point used?
Response: Thank you for your questions. More details were added to the manuscript, especially in the data analysis section. The rationale for the criteria used to classify research priorities and the cut-off points have been described.

I think you should move the aim of the study to the background

Response: The aim of the study has been moved to the Background section, as suggested.

Reviewer 3

General comment: It seems to me that this study is very similar as other studies on nurses (e.g., Bäck-Pettersson S, et al. Research priorities in nursing - A Delphi study among Swedish nurses. J Clin Nurs. 2008) given the same research question and the same methodology. I would suggest that the authors highlight the uniqueness of this research (expectation of being conducted in a different country) with a focus on how this study will add additional value to the existing literature on research priorities in nursing.

Response: Thank you for noting this. The following paragraph has been added to the Background section to address this point (lines 117–123).

Health research priorities are highly context-dependent. They vary according to factors such as: geographic location or country; prevalent culture; and the nature, status, and focus of the healthcare system. Variations in these factors mean that it is necessary to replicate studies on identifying research priorities in different countries. Consistent with this trend, the present study aimed to give voice to nurses across the entire UAE health system and capture their views about/ranking of nursing and broader health service research priorities (All-party Parliamentary Group on Global Health, 2016; Deloitte, 2017).

Background: I would suggest that the authors provide an overview of UAE healthcare systems, especially the difference compared to other countries, which will help address the question – whether or not the findings of this study provide new information to the existing body of literature regarding this same topic (if yes, in what way?).

Response: In the Background section, paragraphs 3–4 describe the healthcare system and context in the UAE, including health priorities and issues specific to the country. These details should help to contextualize the present study for readers. In addition, the last paragraph in the
Background section highlights the rationale for performing the study in the UAE (please see our response to the previous comment).

Method:

On Page 5, Line 102 “The calculations were based on ...” Please add a reference for the formula used for the sample size estimate

Response: Thank you for noting this. The relevant reference has been added.

Please clarify if this survey was approved by IRB

Response: Yes, this study was approved by two IRB committees. We have included the relevant details regarding IRB approval in the ethics statement, which is included in the Declarations section as per the journal guidelines (lines 306–311).

Please specify how the round 2 survey was distributed, to how many sites, what is the overlap in terms of the number of sites between round 1 and round 2.

Response: The same procedure was followed for questionnaire distribution and data collection in both rounds of the study. A statement clarifying this has been added to the Data Collection section (line 180).

Results:

On Page 7, “In total, 1,032 participants completed and returned the round 1 questionnaire, … There were 1,339 participants in round 2” What percentage of round 1 participants were enrolled in round 2? Would this impact the survey results? If yes, how?

Response: We collected anonymous data, meaning no details identifying participants were available. Therefore, we could not track participants through the rounds of the study. The most important factors that were adhered to were adequate participation in the study and the inclusion of large representative sample from the population.
The highlighted paragraph below has been included in the Data Collection section to explain the increase in the sample size in the second round of the study (lines 167–172).

Typically, round two participants would be a subset of those from round one, but the variable length of hospital administrative procedures necessary to gain permission for data collection meant that more hospitals were able to participate at the time round two started. The addition of these hospitals meant that demographic information was not available for some round two participants. However, it was anticipated that demographic data collected in round one would provide adequate general information about the study population.

Table 1 – “Demographic data of participants in both rounds of the study”. As indicated in the method section, “Demographic data were not collected in round 2”. Please clarify how the authors identified study subjects who participated both rounds of survey.

Response: Thank you for noting this. The table caption was modified to “Demographic data for round one participants”

Discussion:

Please discuss the implication of this study, especially how this study could help improve the knowledge of research priorities in nursing given it was conducted in UAE.

Response: Thank you for noting this. A section about the implications of the study results has been added (lines 281–289).

Please add a section of study limitations.

Response: Thank you for noting this. A section about study limitations has been added (lines 290–296).