Author’s response to reviews

Title: Exploring the space for task-shifting to support nursing on neonatal wards in Kenyan public hospitals

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Author’s response to reviews:

Dear Editor,

Thank you very much for sharing the reviewers’ comments with us. We are encouraged to see positive and supportive comments from the reviewers. Additionally, we have taken action on all the points raised and, as a result, are confident that the paper is stronger and clearer.

We enclose a significantly revised version of the paper. We note below how we have responded to each of the reviewers’ comments.

Reviewer: 1

1- Page 1-line 11: Do not use abbreviations in the abstract.

This has been revised and no abbreviations appear in the abstract

2- Page 1-lines 31-32: Please rephrase the following sentence to improve readability "Achieving Sustainable Development Goal 3 by substantially reducing neonatal mortality requires delivery of available high impact, low cost interventions."

This line has now been revised (Lines 32-33)

3- Page 2-Lines 65-67: Can you provide references for this information? Alternatively, please specify if the arguments made in lines 65-67 were based on anecdotal evidence.
The arguments made here are based on information provided by our interviewees. We have amended this section to reflect the source (Lines 80-83)

4- Page 7-lines 153-154: I do not think the adverb "ironically" added to the meaning or to the importance of the information you communicated. Please remove said adverb.

The word ironically has now been removed

5- Page 11- lines 273- 274: "These are reinforced in the NBUs by the routines nurses religiously keep" Please remove or change adverb (see comment 4). Moreover, you have described nurses' work environment as chaotic and you have argued that their task delegation strategies were managed via subconscious triage, and therefore the use of said adverb did not seem to fit the clinical approach followed by nurse participants in your study.

The adverb 'religiously' has now been removed

Reviewer: 2

1. Throughout the work, the authors seem to use the terms task-shifting and task-sharing interchangeably which confuses the reader as to which one was their main focus. In practice, task-shifting focuses on delegation of duties whereas task-sharing incorporates workplace strategies in order to build collective input of the team. Picking one of the themes under which results were written as "task delegation in practice" suggests that authors were dealing with task-shifting instead of task-sharing so authors need to clarify that and maintain focus.

This is a very useful comment. Throughout the paper we have replaced ‘task-sharing’ with ‘task-shifting’ and made it clear in the introduction (line 59-60 that although most nursing tasks were shifted, nurses were supervising some of the delegated tasks albeit in an ad-hoc manner

2. In exploring the space of task-sharing, the authors should balance their review of literature to help readers appreciate the pros and cons in task-sharing as a policy, since a lot of studies have also concluded on task-sharing inability to resolve the HRH challenges, as alluded to by authors that, it is not a "fix all" concept.

We now provide a more balanced review of the effects of task shifting and task sharing, highlighting the known difficulties of implementation, linking to relevant literature that reinforces these issues (see lines 63-70).
3. Methodology looks a bit scanty, authors should elaborate more on their methodology to cover the scientific reasons for selecting respondents who had worked in NBU for just two weeks, whether the interviews were structured or semi-structured and the reasons for that decision, how long each interview lasted and the number of questions asked.

The methodology section has been reviewed to provide more detail about participant sampling and selection with details on how interviews were conducted now provided.

4. Under results, nurses interviewed expressed scepticism (Agnostic) about the formal institutionalization of task-sharing because of some legitimate concerns but authors in their conclusion stated the feasibility of formal institutionalization without recommending any practical implication or policy direction as to how it can be implemented. It is suggested that authors should add recommendations on formal institutionalization of the topic studied. Again, with this contradiction, based on what did authors make such conclusion?

Again, we are grateful for this comment – we believe this was a weakness, and have now remedied the text by clarifying that the existence of informal task-shifting may suggest targets for a more formal programme, but we go on to clarify that there remains other challenges in implementing task shifting (Lines 278-280). This point is reinforced in our new ‘Limitations’ section where we recognise that our study should not be seen as a test or proof of task-shifting.

5. Authors should add the limitation(s) of the study so it informs generalization and also future studies.

A limitation section has now been added (line 319-329).

Others

i. In line 228, authors made reference to the views of senior nursing officers interviewed but did not provide any evidence to that effect.

We have reworded this section to point readers to the evidence provided by senior stakeholders on their views about task shifting in table 4 which will appear in the appendices.

Furthermore, this sentence is linked to a reference introduced earlier in the piece (line 199-201): ‘This contrasted with findings of an expert meeting conducted as part of our broader programme of work [38] where attendees firmly expressed consensus on tasks that should be formally conducted by nurses and on tasks where and to whom any delegation might occur.’

ii. In line 161, authors question on what guides respondents when they have shortages and the response given do not match.
The quote provided to support what nurses do when they have shortages has now been replaced with a more appropriate quote.

iii. Proof reading should be done to correct some errors.

We have made substantial edits to the paper to improve both clarity and grammar.

We hope we have now addressed the reviewers’ concerns with the previous version of the paper, but we are very much willing to make further edits if required. We thank you for your time and effort.

With best wishes,

Jacinta Nzinga.