Author’s response to reviews

Title: Patient and family-initiated escalation of care: A qualitative systematic review protocol

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Author’s response to reviews:

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Dear Editor,

Thank you for returning comments on our paper, “Patient and family-initiated escalation of care: A qualitative systematic review protocol”. We have revised the manuscript in line with the comments received. We would like to thank you and the reviewers for the conscientious reading of the paper and advice given to us.

In what follows, we deal with all comments and queries included in the reports. For ease of reading, our responses are set out below under the comments from each reviewer. Where our
response has necessitated amendments to the paper, we show the section of the paper in italics and the changed text in red font.

We hope that we have addressed all comments satisfactorily.

Yours sincerely

Aidín McKinney

EDITOR'S COMMENTS:

Reviewer #1:

Thank you for your feedback. We hope we have addressed your two comments satisfactorily.

Comment:

An interesting topic and approach - combining qualitative synthesis without indicating a particular methodology and using this with CerQuol which has traditionally been associated with meta-ethnography. I am curious as to why you decided to not embed the synthesis approach within a particular methodological perspective.

Response:

We used the Cochrane Qualitative and Implementation Methods Group (CQIMG) guidance on data extraction, synthesis, and assessment of confidence (Noyes 2018). CQIMG recommends using GRADE CERQual to assess confidence in synthesised qualitative findings and can be used across a full scope of synthesis methods and types of review findings (Lewin et al. 2018). As a result we felt that our approach was embedded in a methodology. To clarify this we have revised the text:

We will use Thomas and Harden’s thematic synthesis approach [57] which is one of the approaches considered appropriate for use in qualitative synthesis [58] and the Cochrane
Qualitative and Implementation Methods Group (CQIMG) guidance on data extraction, synthesis, and assessment of confidence' [58].

Comment:

However, the main question I have is to ask for a point of clarification regarding the study participants. There is a diverse, inclusive description of types of participants, yet not all are included in each outcome. This raises the question of how you will manage the synthesis to keep the relevant population groups separate for the particular outcome? Will you be doing multiple synthesizes? Can you add some description of what will be done, and why?

Response:

We feel that this section may not have been clearly explained. As you highlight there are three groups of participants (patients, relatives and healthcare professionals) and we have stated in the objectives which outcome will be synthesised for each relevant population group(s). As a result we plan to synthesise themes/ outcomes for each relevant population group (patients, relatives and healthcare professionals) and report separately where data is available on experiences, facilitators and barriers. We also intend to highlight where differences / similarities exist between the population groups. To clarify this we have revised the text:

'Data synthesis will be undertaken with each relevant population group(s) for each outcome'. This will be conducted collaboratively by two authors (AMcK, JMcG) in three rigorous stages.

Reviewer #2:

Thank you for your positive feedback on the background and topic.

Comment:

(1) Methods/Data synthesis:

Authors state that they will thematically code data to develop relevant themes. However, this is confusing, as authors seem to be proposing to thematically code study-level themes. That is, this
A qualitative systematic review will involve qualitatively synthesizing study-level qualitative themes. Please clarify this, as the existing text implies that authors will be coding respondent-level data, which is not possible to do using existing published articles.

Response:

Thank you for the points raised in relation to the data synthesis. We have revised the wording in this section to make it clearer as to how we intend to carry out data synthesis. We chose to use a thematic synthesis approach by Thomas and Harden (2008) which involves capturing any reported participants’ interpretations of experiences (first order concepts) as well as the authors’ interpretations (second order concepts). As a result, the approach will synthesize all study-level findings. A more detailed explanation of this approach has been included, and we have revised the text:

The first stage will consist of the reviewers independently reading each relevant article in detail and conducting line-by-line coding of the study findings from each of the primary studies using an inductive approach. This initial line-by-line coding will therefore involve capturing any reported participants’ interpretations of experiences (first order concepts) as well as the authors’ interpretations (second order concepts) [59]. The codes will then be constantly compared between studies, and differences and similarities between papers will be considered [60]. The next stage will involve organizing or grouping these codes into related areas and constructing “descriptive” themes. The final stage of synthesis involves iteratively examining and comparing these descriptive themes across studies to refine the relationship between them and generate analytical themes in order to provide new insights related to the review question [57]. Study findings will be synthesized and presented narratively.

Comment:

(2) Methods/Data synthesis:

Authors state that they will summarize results narratively, but later, in the "Appraisal of certainty of review findings" section, authors state that they will use a "Summary of findings"-like table to summarize review themes. Please provide a table shell of this table in the Supplementary Materials so that the reader has a better understanding of how findings will be presented.

Response: The findings of the qualitative synthesis will be presented narratively in the text and in order to provide a transparent method for assessing confidence in qualitative evidence
syntheses a CERQual summary of findings table will be developed. This allows assessment of confidence in the evidence for each review outcome based on four components: methodological limitations, relevance, coherence, and adequacy of data. An example of a completed table used by Lewin (2015) is provided below and a CERQual summary of findings table template has been added to the Supplementary Materials to provide readers with an understanding of how the findings will be presented. To clarify this, we have revised the text to include:

The assessment of confidence in the evidence will be summarised by themes and will be presented in the form of summary statements derived from synthesis of qualitative evidence (Additional File 4).