Author’s response to reviews

Title: The consultation of rugby players in co-developing a player health study: feasibility and consequences of sports participants as research partners

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Author’s response to reviews:

Response to reviewer comments for RIAE-D-16-00028 "The consultation of rugby players in co-developing a player health study: feasibility and consequences of sports participants as research partners”

We would like to thank the editor and all of the reviewers for their comments, which have helped us to greatly improve our paper.

Please note all changes to the main manuscript text have been highlighted in bold highlighted text.

Responses to editor and reviewers’ comments are also in bold highlighted text below.
Reviewer reports:

Reviewer #1: An interesting paper - thank you. I hope these comments are helpful:

Notes:

Abstract: consider consistency of terms to describe people involved - terms used in the abstract include 'public', 'patients', 'players' and 'sports participants'. Either of the latter two make sense to a lay reader but need to be used consistently to avoid potential confusion between 'participants' in research, sport and activity to involve people.

Thank you for this suggestion. This has now been modified, with ‘patient and public involvement’ specified as ‘involvement’ early in the abstract and referred to as ‘involvement’ from then on, and ‘players’ used consistently.

Use of the word 'fora' throughout is arguably not plain English (it is a Latin plural of forums) and I had to look it up to check I was correct. Similar to common uses of 'data' or 'agenda', although technically incorrect in Latin, in the vernacular, 'forums' would probably be more readable (one does not write agendum for a singular form of agenda). Sorry if this sounds picky - this may just be me. If defined it may be ok to use it in the paper, but I would suggest not in the plain English summary.

The use of ‘fora’ in the abstract has been changed to ‘group’, and ‘fora’ defined early in the manuscript.
Consider rewording 'unique population' to describe rugby players as this is the final sentence but is not qualified elsewhere. It is explained in line 187 but without this important reference it seems an incongruous comment.

This has been revised.

Line 120: typo - 'researcher(s)' or 'research'?
This has been revised.

Line 133: 'Sports people' consider 'people who play sports' or use a consistent term (see abstract comments). Later on (153) 'athlete involvement' is used. This is perhaps the best term?
This has been revised to ‘sports participants’.

145: 'elite athletes' - consider 'professional' - this may be an accepted term but could be misinterpreted? 'Professional' is more of an objective description.
This has been revised to ‘professional’.

147: 'first-class injury management' is this an appropriate way to describe healthcare? Perhaps 'best-practice' or something less colloquial sounding? I may be wrong and this may be an accepted term in sport - but to a lay reader this potentially sounds elitist?
This has been revised.
198: 'been impactful' - 'had impact'? This is a plain English rewriting
This has been revised.

209 'Collaborative study management roles on the project steering group' I had to read this three times to understand it - it might just be me (!) but if there's a simpler way to write this maybe consider that
This has been revised.

210: 'Scoping discussions with individual current and former' comma missing?
This has been revised.

222: typo?: 'members of the [for a] involved in the design stages
This has been revised.

304: a more detailed example might be of interest to some readers
This has been revised.

356: 'PPI activities' I would write this as 'involvement' and use the consistent term you have decided on - e.g. athlete/sports person (see other comments) and consider not using this acronym as it is only the UK that uses this term - and in fact many people (including NIHR staff) now write it as PPIE (engagement)
This has been revised.

Reviewer #2: I liked this article. I thought it was thought provoking - I hadn't really considered sports people in this way before - and presumably neither has anyone else. I thought the examples of how the questionnaire had changed after speaking to the players were fascinating and I would have liked to see more discussion of these. Perhaps another article/more work?

Thank you for your comments. Discussion of these comments has been increased, and we will seek to further expand on this in future studies.

Reviewer #3: Review of "The consultation of rugby players in co-developing a player health study: feasibility and consequences of sports participants as research partners."

The topic of the article is interesting as it seems the authors are arguing the uniqueness of sport players in the role of the person ultimately affected by research on his/her group's own health - making the reader interested in whether or not this is actually unique or could be stated to be very much similar to the role of a patient with a specific disease. This is however never unfortunately discussed, which is a shame as it would be interesting to read what similarities or differences the authors may have found had it been a comparative study.

Thank you for this suggestion, which we are keen to explore with further studies. The fora were aimed at informing this specific questionnaire and study design, and therefore players were not compared to patients with specific diseases, however we wholly agree a comparative study of this would be very interesting.

Nevertheless, and perhaps more from a research and research funding perspective, it is an interesting topic especially from a pragmatic perspective, i.e. given the identified benefits and difficulties - is there something we can do about it?

No specific comments to address.
A General comment: Throughout the paper the authors make no difference between public (i.e. citizen) or user (i.e. in this context player, but patients are also mentioned as well as users), anyway those who are directly concerned. There is a lack of a clear distinction between these two different perspectives in this paper and I would strongly suggest this to be added and early on in the manuscript, not as now when it is not until on p.11 it is being discussed and even then without clearly making the distinction between the two perspectives.

Thank you for your comment. This distinction has been clarified earlier in the manuscript (line 90).

Instead as a reader I am now under the impression that the authors are talking about the user perspective and not so much the public - i.e. citizen/tax-payer's perspective although this is never clearly stated. This should be covered as soon as the authors write about public involvement, just to make it clear for the reader.

This distinction has been clarified in the manuscript as mentioned above.

Currently it is unclear to the reader throughout the document exactly who is the public when referring to "members of the public", "public involvement", "public accountability". Unclear use of the term, sometimes used in the sense of the users, sometimes in the sense of the citizens.

This has been clarified.

Other comments: In the conclusion section of the abstract, it is stated that "…but will more importantly improve the experience of players participating in this study", not explaining for the reader in what way or why that is? So the important thing is the experience of the survey, replying to the survey?

This has been clarified.
This seems a bit weird, why should that be important if not to improve either the response rate or the reliability for example? Surely the most important criteria must have to do with the quality of the research and not the experience of the survey?

The authors strongly believe that players need to inform data collection procedure, in order to ensure their experiences are encompassed, and thereby ensuring reliable information is received in self-report surveys. The phrasing of this paragraph has been revised.

In Plain English summary p.3, the authors state that "it has not been implemented equally across all study areas" but they do not explain why that is, any reasons for it or even if that is a problem?

This has been clarified.

In the 2nd paragraph it is stated that "…the questionnaire would collect their experiences and answer questions that players' want answered". First of all this makes it sound as if there are major discrepancies between the questions that players want answered as opposed to those that researchers or funders want answered - which may be correct - if so, it would be interesting if there could be examples provided on this.

Thank you for this comment. This has been revised.

Secondly, if this is not the case, it sounds as if only those questions that players want answered are relevant/important and should there be questions that researchers or funders are more interested in answering, then those are not as important - which may be correct as well - but again, if so, please provide examples of this or reformulate the sentence.

This has now been revised.
In the last paragraph it is stated that "...a useful activity that will benefit the research..." but nothing is said on how or in what way this should be done.

This has been now been expanded.

Under the heading Background p.6, 3rd paragraph has a line which is impossible to understand: "alongside concerns of avoiding conscious or unconscious tokenistic involvement". What does this phrase mean? What does this phrase add? Why is that important to mention?

This has been clarified.

On p.7 it is unclear if the authors are referring to a UK perspective or an international/global perspective when saying that public involvement traditionally has been undertaken more in the areas of mental health, indigenous population health and cancer. Then they go on to say that it may be the chronic nature of these conditions that is the reason for why these areas are more involved in research and healthcare, but if this argument was the case, then shouldn't that apply to other areas of chronic diseases as well, for example diabetes and asthma?

This has been clarified and expanded, as diabetes is also recorded within this review, but less reported than involvement within mental health, indigenous population health and cancer (Boote J, Wong R, Booth A: ‘Talking the talk or walking the walk?’ A bibliometric review of the literature on public involvement in health research published between 1995 and 2009. Heal Expect 2012, 18:44–57).

At the end of page 7 (and on several other places as well) it is argued that potentially the recruitment will be increased and/or improved, but it is never explained how this should be done or in what way the recruitment will be increased or improved.

This has been clarified (line 138). More accessible patient-facing documents and interfaces will assist potential respondents in understanding the study aims and procedures, and also encourage completion of fields within surveys and research.
Later on p.11 it is stated in bullet point no.3 that recruitment methodology was being consulted upon, but it is not explained how.

This has been clarified.

Finally in the Discussion on p.21 the authors state that interpretations of the responses has influenced methods of recruitment. But how? This is interesting, Please explain/elaborate on this.

This has been clarified from line 463.

The authors end the paper with stating that they anticipate that the process will strengthen the recruitment of this study but it is unclear to the reader how or in what way this would be achieved.

This has been clarified as above.

On p.8, end of 2nd paragraph, the authors bring up "the low-level of compliance surrounding return-to-play procedures". This is hard to understand. Does it mean not following rules of when to return or what does it mean? I would like an explanation.

This has been further expanded, from line 158.

The whole first section under the heading Rugby players as experts of their own experience and environment on p. 9 does not belong to this heading, the text is really more of background or introduction and would belong better there.

This has now been revised, with an alteration in the title of this section, two paragraphs moved into the background section, and an alteration in the order of the introduction and background.
Nowhere in the manuscript is it described how long the fora lasted - was it 10 minutes, an hour, two hours? Just mentioned as "a relatively short session" in the Discussion on p.21, but what is relatively short?

This has been further expanded.

Nor are the readers told how many participants attended the two different foras, only that 11 persons attended altogether. But the context is quite different if 9 people attended the first one and only 2 attended the 2nd one, compared to a more even spread of e.g. 5 at the 1st one and 6 at the 2nd one.

This has been clarified (line 304).

I am also wondering about the attendance rate, i.e., how many players were invited to participate to begin with? And why was there only one female - does this reflect the general participation of women in rugby, is the gender participation proportional or is there another explanation?

We thank the reviewer for this consideration. We have specified that the male and female University teams, and two male College teams were invited. As both of these contact methods involve social media and mailing lists, and are subject to regular revision, we did not feel that we would be able to provide an accurate denominator for membership, as this would involve deriving the potential overlap between social media membership and that of club mailing lists which were not accessible to researchers. We feel mentioning the number of clubs is the most accurate way that we are able to report this. The discussion of gender participation has been added to the discussion (line 380).

On p.13 under the heading The fora, the player-lead is described, but at this point it is not explicitly stated that this person also is or was a player him or herself with own experience. This
is described at the end of the paper on p.20, but would be good to have here as well as the reader is wondering about that at this point.

This has been revised as suggested.

The first two sentences under the heading Results on p.14 are not results - they provide information that belong in the previous section.

This has been revised as suggested.

Final sentence p.14 "…in a cyclical manner" - not sure what that means in this context? Please explain.

This has been modified.

In the 2nd section on p.19, the last sentence states "…as enabling members of the public to critique the research cycle more effectively and improve their confidence" - whose confidence and in what? The public's (users'?) confidence in research or what?

This has been clarified.

On p.23, last sentence before the heading Key reflections on process, it says that players did not formally evaluate the process. OK, so they were not asked to do so, but did they voice it themselves, that they would have wanted to?

This has been clarified. Players did not voice that they had wanted to do this, but researchers felt that the opportunity to do so should have been formally provided (line 520).
Also on p.23, under Key reflections on process, it says that players willingly gave their time - I take it they did so without any pay or benefits given? Would be good to state that here.

This has been clarified (line 525).

I note that under Difficulties on p.24, nothing is listed in the bullet list on gender and what possible implications - if any - this could have when interpreting the results of the study.

Gender has now been added as a consideration in terms of response, but we are hesitant about further commenting on potential gender differences in players’ involvement as this manuscript is focusing on the the feasibility and consequences of this process, rather than seek to discuss similarities and differences in those involved in the study and the generalisability of this.

Nor is there anything on the participation rate - 11 participants of how many and how did the authors reason about the numbers of participants?

This has been clarified as mentioned above.

Minor remarks: Only a few (four) abbreviations are used in the article, and most of them are well-known, even for an audience outside the UK as well, such as the "UK" and "NHS". Given that there are so few abbreviations I suggest these to be taken out and the whole words instead to be written out, especially the BME which is confusing for the reader in the current form as it is not explained when first used (on p.7). There is a list of abbreviations, but this is presented at the end of the document which is too late.

This has been revised as suggested.

Language generally very good, but needs to be checked as on several places what should be fora is now written as for a (two words) etc.

This has been revised.
Reference missing to the statement on p.9, first paragraph after "...partly due to their relatively short admissions."

This has been revised.

Difficult word for non-native English speakers on p.18 - phraseology - please explain or change this word.

This has been clarified.