

## PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

### ARTICLE DETAILS

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| <b>TITLE (PROVISIONAL)</b> | Improving the perception of respect for and the dignity of inpatients:<br>A Systematic Review |
| <b>AUTHORS</b>             | E. P. Dutra, Pablo; Quagliato, Laiana; Nardi, Antonio   |

### VERSION 1 – REVIEW

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| <b>REVIEWER</b>        | Matthew Modini<br>Concord Centre for Mental Health |
| <b>REVIEW RETURNED</b> | 02-Dec-2021  |

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| <b>GENERAL COMMENTS</b> | <p>I have a few overarching comments</p> <ol style="list-style-type: none"><li>1) The introduction needs to be expand upon. One paragraph doesn't feel sufficient to explain the existing research in this area nor does it paint a picture for why a review in this area is needed.</li><li>2) The quality assessment needs to be presented before the results, and the findings needs to be incorporated into the results (re studies with moderate quality given less emphasis than those with high quality...or if you decide to treat all moderate/high quality studies this should be made explicit and reasons why provided)</li><li>3) The result section should be broken up into sub-headings (re specific populations, specific interventions recommended, etc)</li><li>4) What analysis did you use to combine the results? It appears mostly a summary which can be okay. But would it have been appropriate to consider qualitative methods (e.g., thematic synthesis) or even statistical analysis for any that reports effect sizes?</li><li>5) A table with detailed information of the included studies needs to be included</li></ol> <p>This is an important topic, and I commend the authors for conducting research in this area.</p> |
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| <b>REVIEWER</b>        | Helena Kisvetrova<br>Univerzita Palackeho v Olomouci, Faculty of Health Sciences |
| <b>REVIEW RETURNED</b> | 06-Dec-2021  |

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| <b>GENERAL COMMENTS</b> | <p>The aim of this systematic review was to find international evidence to determine which strategies are effective for improving hospitalized patients' perception of respect and dignity. The methodology was described in detail. Systematic review of the international literature was conducted in accordance with PRISMA 2020 guidelines and registered at PROSPERO. The results were described clearly. The authors could add to the text on p. 8 (lines 49 – 52 ..."dignity and autonomy are intertwined and can positively impact the quality of care from the patients' point of view (62)") another citation of current research studies (e.g. Kisvetrová H, et al. Dignity and Predictors of</p> |
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## VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Dr. Matthew Modini, Concord Centre for Mental Health

Comments to the Author:

I have a few overarching comments

**-Reviewer 1 comment 1: The introduction needs to be expanded upon. One paragraph doesn't feel sufficient to explain the existing research in this area nor does it paint a picture for why a review in this area is needed.**

-Authors' response 1: The introduction was expanded and rewritten.

**-Reviewer 1 comment 2: The quality assessment needs to be presented before the results, and the findings needs to be incorporated into the results (re studies with moderate quality given less emphasis than those with high quality...or if you decide to treat all moderate/high quality studies this should be made explicit and reasons why provided)**

-Authors' response 2: BMJ Open has a limitation of the number of tables and figures included. So we decided to include larger tables with the results of the critical appraisal and the results found as supplementary material. We thought this way would be easier to find all the all the information about each article.

**-Reviewer 1 comment 3: The result section should be broken up into sub-headings (re specific populations, specific interventions recommended, etc)**

-Authors' response 3: The result section was divided into sub-headings and rewritten.

**-Reviewer 1 comment 4: What analysis did you use to combine the results? It appears mostly a summary which can be okay. But would it have been appropriate to consider qualitative methods (e.g., thematic synthesis) or even statistical analysis for any that reports effect sizes?**

-Authors' response 4: The articles were submitted to a critical appraisal, according to standardized instruments available: **CASP Qualitative Studies Checklist (CRITICAL APPRAISAL SKILLS PROGRAMME) for qualitative studies; Specialist Unit for Review Evidence (SURE) - Questions to assist with the critical appraisal of cross-sectional studies for the cross-sectional studies;** CASP Cohort Studies Checklist for the cohort study included; and Critical Appraisal according to Mays & Pope (2000) Criteria for the last two studies. Due to the heretogeneity of the studies, it was not possible to perform a meta-analysis.

**-Reviewer 1 comment 5: A table with detailed information of the included studies needs to be included. This is an important topic, and I commend the authors for conducting research in this area.**

-Authors' response 5: Included all the results. Tables were too large, so I included as supplementary material, because they did not fit the manuscript. We are already conducting research in this area. This article is the first part of my Master's degree studies.

Reviewer: 2

Dr. Helena Kisvetrova, Univerzita Palackeho v Olomouci

**-Reviewer 2 comment 1: The results were described clearly. The authors could add to the text on p. 8 (lines 49 – 52 ... "dignity and autonomy are intertwined and can positively impact the quality of care from the patients' point of view (62)")**

-Authors' response 1: Included.

**-Reviewer 2 comment 2: another citation of current research studies (e.g. Kisvetrová H, et al. Dignity and Predictors of Its Change Among Inpatients in Long-Term Care. Clin Nurs Res. 2021 Aug 8:10547738211036969)**

-Authors' response 2: Reference included.