Reviewer's report

Title: Perceptions of Doctor-Nurse Collaborative Practices by Patients with Multimorbidity: A Qualitative Study

Version: 3 Date: 11 June 2010

Reviewer: Patricia Hill H Bailley

Reviewer's report:

Thank you for the opportunity to examine the revision of this manuscript. The authors have made some helpful alterations, however, a number of concerns remain that limit the suitability of this work for publication in its present form.

Major Compulsory Revisions:

1. Is the question well defined?
   a. The authors’ failure to ground their work in a theoretical context remains concerning (see Morse 2002, 12, p.295). The claim that the identification of a theoretical orientation was not possible leaves the assumptions upon which their work was based outside of the available body of literature and beyond examination by the reader. The values and assumptions of the researchers remain hidden.
   b. The added context data though helpful, does not adequately address the context of the nurses’ role in this research.

2. Are the methods appropriate and well defined?
   a. The authors’ decision to limit the description of the analysis process and hence auditability of this work remains problematic.

3. Are the data sound?
   a. Although the authors have included more information about the participants, it is still unclear whether the data presented are representative of participants across the data base.
   b. The authors’ perception that the specific experience of nurses' roles (actions) in the various settings is not central to their interpretation of the data is mystifying. I would argue that the context (specific experiences of nurse/physician interaction) is the essence of the question being asked and therefore an essential component of the context that requires description. I am not suggesting that the authors explain the collaborative realities that exist, but rather clearly define them.
   c. Description of the themes: My major concern with the manuscript as it is presented is the authors’ decision not to move the data from a descriptive to an interpretive level. Qualitative research is an interpretive process; seeing what we do not already know.
With the utmost respect, I would suggest that the authors consider Thorne and Darbyshire’s (2005) perspective on “letting the data speak for themselves” (p.1109). These qualitative researchers contend that an approach that failure to analyze the data in this way is an unacceptable “abdication of interpretive responsibility.” As Morse argues: “the interpretive analysis is the creative contribution of our methods, identifying the meaning in what we all see, making the trivial profound and the obvious significant” (Morse, 2009, p. 579).

Failure to interpret the data makes your work simply a description of your context. This has I’m sure been an important and useful undertaking for the planning of services in your region. Interpretation of the data, although time consuming and perhaps “risky,” however, is necessary for the transferability of your findings to other similar setting and add to the substantial body of literature in this area.

The current thinking about sample size is also bound up in the development of theoretical interpretation. Transferability of knowledge in qualitative research occurs at a theoretical level, making interpretation essential.

Again, thank you for the opportunity to review your work.

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**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.