Reviewer’s report

Title: Perception of quality of care among residents of public nursing-homes in Spain: a grounded theory study

Version: 2 Date: 22 April 2013

Reviewer: Anna Renom Guiteras

Reviewer’s report:

Thank you for giving me the opportunity to re-review the manuscript "Perception of quality of care among residents of public nursing-homes in Spain: a grounded theory study".

The topic under study is indeed interesting and the results of the present study are not without interest. The manuscript has improved, in comparison to the previous version. The results are clearer and much better structured. Most of the main concerns I reported about in the last report have been taken into account and most aspects have improved, some of them considerably. However, some of them are not satisfactorily solved.

There are still two major aspects in the manuscript which should be deeply reworked, according to the opinion of this reviewer:

1- Methodological aspects. Some methodological aspects (i.e. theoretical sampling, triangulation) have been reported from a theoretical point of view, while an explanation of what really was done in the practice is still missing. This information would be valuable for the readers. The method "grounded theory" used is appropriate for the research question. However, when using this method it is not obligatory that a theory always emerges. Theories should emerge only if results are deep enough, and if several concept can be developed and linked with each other in order to develop an integrated framework (as the authors state at page 5 of the manuscript). This is not the case in this study: results obtained are very interesting but, in my opinion, not deep enough to develop a theory. Authors should report and interpret the results within the discussion section but no theories should be drawn. The results obtained from this study can help the research community to get a good insight into this topic, and to provide data on a (limited) sample of one area.

2- Language check, writing style. First, although I am not a native English speaker, I have recognised several grammatical mistakes which make the lecture of the manuscript often difficult. This aspect was already mentioned in the last report of this reviewer. A language check by a native speaker would be helpful and necessary in my opinion. Second, although the writing style might be a matter of opinion, I would recommend the authors to try to avoid redundancy, and to communicate the ideas more concisely. The lecture of the text is not smooth enough, and the connections/flow between paragraphs is not always
clear (mainly at the Background and Discussion sections). Finally, some of the categories/concepts emerged from the study are confusing. For example, the second main category receives two terms: "good service" and "quality of the care delivered"; both terms are used in the text alternatively, and the reader gets confused. Furthermore, the second of the terms is very similar to the main topic under study "quality of care", which is also confusing.

Detailed comments are reported below and organised according to the sections of the manuscript.

Abstract
• The first sentence under "Background" is confusing. When the authors mention "comparison of facilities", which aspects of the facilities do they mean have been compared?

• The section "Results" is not easy to understand for the reader, I'd recommend to structure it in a more simple way. For example, why do the authors include the last sentence ("Insofar as the quality of the care ... in their posts"), if they do not include any examples of the main category "kind and considerate care"?

Background
• The information provided at this section is interesting and sufficient. However, the text is long and redundant and the message could be more shortly and clearly communicated and the connection between paragraphs improved. In the last report I prepared on this manuscript, I already commented that the writing style was rather redundant and gave the following example: "At the "Introduction" section, the text contains three paragraphs explaining (in different ways) the idea that perspectives of the residents have been rarely taken into account." This issue has not satisfactorily improved.

• In the opinion of this reviewer, the following sentences could be deleted:
  - First paragraph: "...and is rarely analyzed from the client's stance, despite this being considered ..... cognitive impairment". (redundant as it is mentioned two more times at the "Introduction")
  - Last paragraph: "... using qualitative techniques based on.... without cognitive impairment" (redundant as it is mentioned at and corresponds to "Methods").

• Language check:
"Moreover, no study has included relatives of cognitive impairment persons in the sample...". (please write "cognitively impaired persons" or "persons with cognitive impairment").

"In addition, integrate the point of view of persons with cognitive impairment in quality assessments it's really difficult, and therefore are usually absent".

Methods
• Please check again the language of the sentence "The study sample comes from a nursing home where were living 180 older people with several degrees of disability".
At this new version, it is more clear the relationship between the present study and the study published elsewhere by the same authors. However, the name of the broader research project to which the present study belongs should be mentioned.

The authors specify better at this version the fact that theoretical sampling was used, from a theoretical point of view. However, I'd like to ask the authors to better describe what was done and maybe to provide an example on one of the study phases when they decided to enlarge the sample and for which reason they did it. This could be reported at the section "results" as well.

You have used the term "residence" in the section "Data collection". If I understand it right, the authors do not differentiate between "nursing home" and "residential facility". If it is so, I'd recommend that you use "nursing home" throughout the manuscript, as the term "residential facility" can have another connotation, in the international literature. Therefore, using "residence" or "residential facility" (Table 3) might be confusing for some readers.

Under "Data collection" the authors do not explain if the interviewer stimulated that all topics emerged during the interview. This might be interesting to know, as I also mentioned in the previous report.

In the opinion of this reviewer, at the sentence under "Data analysis" "According to grounded theory principles, our analysis identified specific concepts that explained and made sense of how informants", the information added by "and made sense" is very unspecific, or its meaning is unclear.

This reviewer would not introduce Table 4 (Results) under "Methods".

Under the section "Rigour" the authors have theoretically explained the concept of triangulation. However, it is not clear what was exactly done, could you please explain it better and maybe provide an example of researchers' triangulation? (e.g. different methods used, etc).

Results

This section has considerably improved. Results are better structured and now the association between the subcategories, the codes, and the citations of the participants is more clear. Table 4 is also much more helpful than the previous figure. However, I have the following concerns:

(p. 9) You mention that "for most of participants kind and considerate care had a greater importance than the quality of the care delivered". Could you mention how you drew this result? (for example: participants always mentioned these aspects first and put more emphasis on them rather than...etc).

The terms chosen for the main categories ("quality defined as kind and considerate care" and "quality of the care delivered/good service") are confusing. The first category includes the word "kind", which actually is repeated as a code (kindness); this reviewer cannot fully understand why the authors chose this term for the main category. I have the impression that a term such as "aspects related to the persons providing care" could fit better, but this is only an opinion and the authors should of course decide on this and eventually improve the rational why
one term was chosen.  
- The second category is in part redundant with the main topic under study (quality of care), it does not give any new information, or at least it is not clear (what is good service?). I have the impression that a term such as "aspects related to the institution" or "organizational aspects" could better fit. 
- Regarding the subcategory "technical skills", the term "skills" could be substituted by "competences", in order to simplify the general wording (like for first subcategory). A term such as "interaction competences" could be considered instead of "technical competences/skills", but this is only an opinion and the authors should of course decide on this. 
- (p. 9) The sentence "Section heads reflect the most representative verbalizations" is not clear for this reviewer. What does "section heads" refer to? 
- (p. 9) I think it is a good idea that you specify if the participant was a next-of-kin after the citations. However, I'd recommend that you explain this at the second paragraph after "... the number assigned to each participant following (should be "follows") each quote". 
- (p. 11) The following two sentences are interpretations which could be deleted from the results section (and added at the discussion if considered necessary) or formulated in a less interpretative way: "In a setting as singular as a nursing home, residents can encounter many problems stemming from coexistence or from their own aging process." "Residents display certain functional limitations and at times find themselves unbalbe to do things at the same rhythm as they were accustomed to in the past. Consequently,...". 
- (p. 12) The citation "At these ages, they start being a little like children again" does not fit with the previous sentence ("residents wish that professionals.. cease to ... treat them as if they were children"). 
- (p. 12) The citation "It is extremely important..." should be better accompanied by an explanation, otherwise its meaning is not very clear. 
- (p. 12) "Family members were observed to attribute..." (better "family members attributed...") 
- (p. 13). "I have 93 years, what am I going ask here". Please check the language. 
- (p. 15). "They are attentive.... so that she wouldn't feel the cold". Please check the language. 

Discussion 
This section has improved. However, I still have two major concerns: the content of the theories and the difficulties in following the text (i.e. organisation of the information/clarification of concepts/writing style). 

- In the opinion of this reviewer, the 4 theories presented at the discussion can be interesting conclusions of the study, but do not correspond to any theories. I recommend to formulate this differently. 
- Authors should try to better link each of the conclusion with the explanations.
provided at the text, otherwise it is difficult for the reader to understand. In summary, improve the flow of the text as recommended at the beginning of this report.

- The sentence under theory 2) (p. 16) is formulated in a confusing way. The theory mentions "professional competences", which according to table 4 belong to the category "kind and considerate care", and compare it to "interpersonal competences", which is a term not used so far in the manuscript (probably meaning emotional competences). The authors say that interpersonal competences are more important than technical aspects, and add the concept of "institutional work culture", also a new term which this reviewer could not understand. In summary, very confusing. When reading the explanation at page 17 (paragraph starting with "In contrast with survey-based studies,..." the confusion persists. I would recommend the authors to better define the terms used (for example, what are "technical issues") and to refer always to the terminology and concepts in the same way as in the section "results" (for example, in the section "results" authors reported that for most participants the category "kind and considerate care" had a greater importance than the quality of the care delivered, but did not report that subcategory a) was more important than b)).

- Theory 3). This is an interesting aspect which might influence the concept of quality of care of the participants. But again this reviewer does not see this as a theory. At the explanation at page 18, the meaning of the part of the sentence "such as the USA, where care is more consumer-oriented" is not clear to me. Why the fact that care is consumer oriented means that institutionalisation is not the last option? Maybe this is a language matter.

- (p. 19) At the second paragraph "These differences in conceptualization..." the differences referred to are not introduced at this paragraph. Adding this might help the reader to understand the sentence.

- (p. 19) The sentence "In contrast, even if the residents..... prevailing standards" is too long and complex, which makes it difficult to read. A language check could improve it.

Limitations

- This reviewer does not see the fact of having used qualitative methods as a limitation which should be mentioned.

- The reviewer does not see why the second paragraph should be included (To ensure...).

Conclusion

- Conclusions should not contain the opinion of the authors but the most important findings of the project.

Table 2

- Please homogenise "interviewee relative" into "next-of-kin"
- Please modify "resident's emotional level" into "resident's educational level"
Level of interest: An article of limited interest

Quality of written English: Not suitable for publication unless extensively edited

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