Reviewer's report

Title: Psychosocial work load and stress in the geriatric care

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Reviewer: Jan Hyld H Pejtersen

Reviewer's report:

The paper is about the psychosocial work environment in geriatric care. It is import to study the psychosocial work environment in this occupation since it is expected that the need for geriatric care and home care will rise due to the demographic development. I do think that the authors could get much more out of the data and the manuscript. The aim of the study should be stated more clearly and the method should be explained in more details. All results should be presented, not only examples. Issues that are presented in discussion/conclusion should also be presented in aim/hypothesis, method, results and visa versa. In discussion, the limitations of the study and the method should be discussed more detailed. In order to improve the manuscript, I have the following specific suggestions and comments:

Major Compulsory Revisions

1. The aim of the study should be specified more clearly. In the formulation of the aim, it is only implicitly indicated that the study is about psychosocial work environment. Furthermore, some additional aims are presented in the result and discussion sections. These should be moved to the background section.

2. The study compares the results with results from quite a huge database. However, it is not clearly described how this database is obtained. The database is described as dynamic, so I guess users of the questionnaire provide data to the database. The advantage and disadvantage of using reference values from such a dynamic database should be discussed.

3. The selection of the home care and geriatric care facilities was based on a pool of facilities that were interesting in an employee survey. Could there be any bias in this selection? The limitation should be discussed.

4. The response rate of the study is low (average 33%). The implication and limitation of this should be discussed.

5. Why was a 5 points difference between means regarded as a relevant difference? Since the standard deviation varies from scale to scale the effect size (difference/standard deviation) will also vary. Please elaborate on why 5 points were used as a relevant difference.

6. The study compares the different psychosocial factors for home care and geriatric care with the mean values for the database. But even if the differences
for the various psychosocial factors are statistical significant and above or below 5 points compared to the mean values of the database (reference values) does it then necessarily mean that the psychosocial factors are negative or positive? Or in other words, why is a certain deviation from the mean of the database for a given dimension regarded as negative/positive score on the dimension? This should be explained and discussed in the paper.

7. I do not understand the method used for the comparison related to figure 2. In the manuscript, it is described as an example of comparison made for all scales. It seems that the values for home care and geriatric care are compared to the other job groups as well as to the reference values for the database. But are the values for home care and geriatric care for the single dimensions ranked according to the mean values for the different job groups or how was the comparison made to the job groups of the reference database? I think the description should be moved to the method section and the method described more clearly and in more details. The results of the comparison to the other job groups for all scales should be presented somehow, for instance in a table and not only as an example.

8. The subgroup analysis is not introduced in the aim, method or result sections, but it forms the basic for the conclusions in the abstract. The aim, hypothesis, method and results related to the subgroup analysis should therefore be included and described before the discussion section. Furthermore, only the results from demands at work are present in the paper. I think the results of the subgroup analysis are important for all scales and should be include. I think the paper should focus more on the stratified analysis according to work hours.

9. The conclusion of the study is that workers in geriatric care and especially in home care have a positive psychosocial work environment compared to other professions. I do not think that the data presented fully support that conclusion. Table 3 shows that the psychosocial work environment for geriatric care and especially home care are more positive than compared with the average value for the reference group. However, this does not necessarily mean that the psychosocial work environments for the two groups are better than for most other professions. I can see that this is true for quantitative demands, at least for home care, figure 1. As stated before, I think the reader needs the results of the comparison to other job groups for all scales, not only for quantitative demands.

Minor Essential Revisions

10. In the background section it is primarily German data and German studies that are reviewed. Of course this is natural in a German study. But the few international studies included are only referred to very briefly and in general. Are there no more international data or studies on home care and geriatric care or related areas that are relevant to include in this paper? At least the results of the international studies included should be specified more detailed and it should be specified more clearly if only few international studies exist within this field.

11. Some references are omitted or they are placed in the subsequent sentence.
12. How the employees was grouped according to KbB92 (page 11, last paragraph) should be moved from results to method.

13. The group of 164 persons with other professions is not used in the analysis and should therefore be excluded from the study group.

14. The tables 2 and 3 present almost the same results. Maybe they can be combined into one table. Furthermore, it would also be interesting to indicate which of the psychosocial dimensions for home care that statistically differ from geriatric care.

15. The first part of the discussion deals with expected and unexpected results from the study. I think the study would gain if these expectations were formulated as hypotheses in the beginning of the study.

16. The discussion with the subtitle ‘Subjectivity of survey data’ is very general and it is not clear which analysis it refer to in the manuscript.

17. The discussion with the subtitle ‘Adjustment for structural biases’ is also very general. I will recommend making analyses stratified on work time. Work time seems to have very large influence on the data presented.

**Discretionary Revisions**

18. Although I like that the differences should be both statistical significant and have a certain magnitude to be relevant, it may still be interesting to report the significance level in the tables even that the difference do not fulfil the relevant magnitude of 5 points.

19. I think that the subtitles could be omitted. For instance the subtitle ‘Two Concluding Remarks’ can be misunderstood as being the conclusion.

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

**Quality of written English:** Needs some language corrections before being published
**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