Reviewer's report

**Title:** New quality regulations facing the established nursing home practice-an ethnography

**Version:** 1  **Date:** 24 March 2012

**Reviewer:** Mary H Palmer

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This is an important topic for researchers, healthcare providers, and policy makers especially in long-term care. The ethnographic approach is a novel method to better understand why regulations guiding practice are difficult to implement into practice.

The question posed by the authors is well-defined and methods are well-described. The authors note that the regulations for improving nursing home care require all nursing home residents, “receive individual and fundamental care, meaningful activities and the right to participate in decisions concerning their own daily life situation.” They concluded that regulations are challenging to implement because practices are so embedded. I enjoyed reading this paper and applaud the authors’ hard work in attempting to understand an issue that has eluded other researchers.

**Major Compulsory Revisions**

1. Please reconsider your interpretation of your results. Your major findings “Significance of daily routines” and staff “always knowing what to do” seem to infer that the nursing staff ignore residents’ rights to plan their everyday life in the nursing home. The field notes shared in the manuscript appear to differ. Also on p. 10 (sixth paragraph under The significance of daily routines) the authors note that when staff falls short in their schedule, it is their break that gets cut short.

2. Later on p. 10, (second paragraph under Always knowing what to do )the authors note that “for residents who are able to say what they want, many minor requests were met..” then on p. 11 (fifth paragraph under Always knowing what to do) the authors’ field notes state,” It’s because we know them very well,... every resident has things they like or not, and many of them like to have routines.”

3. The authors found that the staff members had little knowledge about new regulations and that it is unclear why. One explanation you pose on p. 13 (Discussion second paragraph) makes sense and conclude: “Thus, in a way, the staff were meeting..” What do you mean by “in a way?”

4. On p. 15 the authors state that, “it appears that habitus and routines form a powerful team that new regulations are unable to overcome.” Was there a need in this situation to overcome them?

5. (Discussion fourth paragraph)

In the first full paragraph in What can we learn from our findings on p. 15, the
authors note that in the specific nursing homes they studied evidence existed that good care was provided but went on to generalize that change was needed to improve quality of care in nursing homes. What evidence was this observation based upon?

6. In the section, What can we learn from our findings, third paragraph on p. 16 in the discussion about changing habits, actions were proposed in order to share new values. There is an implication that "old" values were bad. The discussion makes it appear staff actions were bad or insufficient for quality care and that may not be the case and could cause demoralized staff. The problem, in short, appears more nuanced that the authors’ discussion.

7. Under Strengths and Limitations section, the authors’ rightly note that the data were based on the observations of one person and earlier in the paper the authors’ noted that this researcher became more practiced and comfortable in the second nursing home than the first one. Did this process affect data and their interpretation? The assumption seems to be that automatic is bad and mindfulness is needed all the time, but is that true? The authors should discuss what staff should do in situations where residents cannot (for whatever reason) state their desires or participate in decision making.

8. The concluding statements imply that working to regulation (it is not clear how regulation is evaluated as good or bad and does not spawn unintended consequences) improves the quality of care but they authors did not provide evidence to support it.

Minor essential changes

1. The title doesn’t seem to reflect the paper’s content:
What does “facing” mean? Would it be better to use the words: “versus” or “confronting”?

2. Context third paragraph: p. 5 poor health or increasing dependency instead of saying “bad” health?

3. Data collection, second paragraph:. 6 change “new” with “knew”

4. Data collection, third paragraph: p. 6 either expand or delete the sentence about government papers collected for analysis. It didn’t seem to manner to the conduct of the study or its discussion.

5. Measures taken to ensure trustworthiness second paragraph: p. 8 paragraph before Ethics section. It seems out of place and may fit better in the Discussion.

6. Results, first paragraph: p. 8 consider adding the word “direct” between little and influence in the sentence that states: Therefore the regulations had little influence on the staff’s work.”

Level of interest: An article of importance in its field

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.