Author's response to reviews

Title: Perception of evidence-based practice and the professional environment of Primary Health Care nurses in the Spanish context: A cross-sectional study

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Author's response to reviews: see over
Dear Simon Harold,

We proceed to answer your suggestions about paper MS: 6406832536175188 "Perception of evidence-based practice and the professional environment of Primary Health Care nurses in Spanish context: A cross-sectional study".

We have highlighted the changes in the manuscript in red. We also attach the responses and comments to the reviewers.

Thank you very much,

Miguel Bennasar

Response to reviewers

Reviewer #1: Sally Kendall

This is a well-constructed paper reporting on a ubiquitous issue in nursing. It is of course imperative for the delivery of high quality nursing care and improvement in practice that the ability to translate evidence into practice is considered. The authors have examined this in relation to primary care nursing, arguably the most important workforce in nursing for future health care systems. They use the EBPO that has been validated in Spain. The setting is the PHC system of the Balearic Islands. This is surely an important consideration, as whilst the response rate was high at 60%, one would infer that the Balearic Islands have their own culture and health care environment that differs from the rest of Spain and Europe.
R: This has been included in the limitations section

Therefore these findings may not be generalizable to other communities and this should be commented on more robustly. Also Gerrish et al 2007 did undertake a study of community nurses in England which merits some reference as there has been very little research undertaken on community/PHC nurses. Whilst direct comparison is not appropriate, it may be useful to consider whether in fact there are any similar trends or major differences.
R: The Gerrish’s study is cited in the manuscript and used along the discussion.

The authors remark on the findings that nurses with less experience are apparently more skilled/knowledgeable about putting evidence into practice, perhaps context is important here and should be examined more closely. Was any qualitative data collected that may help to explain some of the findings further?
R: A qualitative phase is being developed now in order to have a deeper knowledge about these results, that it will be reported once finished.

There are a number of small errors in the use of English throughout the paper that the
authors should seek professional proof reading on.

R: The entire manuscript has been reviewed.

Reviewer #2: Clarie Goodman

The background section needs to consider the evidence on EBCP in primary care and community settings. The results need to be more explained in more detail and linked to the questions asked by the instruments used.

R: This has been changed.

The discussion and conclusion need revision for clarity and finding should be critically discussed in relation to what is already known about EBCP in primary care.

R: This has been changed.

Reviewer #3: Marilyn Kirshbaum

1. The question is posed as an aim, which is understandable, but could be improved if set out as several objectives, rather than a long sentence before the Methods section.

R: This has been changed.

2. The methods are well justified – perhaps a few more details about distribution would increase transparency of the study.

R: This has been added.

3. The data seem sound. They are reported clearly, but I have not scrutinised the numbers. I have assumed that the mathematics is correct and that there are no errors.

R: We think that there are no mistakes in the tables.

4. The article uses a standard reporting structure. Seems valid and reliable. Reporting the results in the Abstract should be only factual. I would suggest removing the extraneous words that add a human tone here. The place to do this is in the Discussion.

R: This mistake has been corrected.

4a. The paragraph on respondents is confusing in the way ‘n:’ is include. Either use just a number if it comes after a percentage e.g. 50% (50) [referring to 50 people in the sample of a total of 100] or later on ‘n=x’, if referring to a group, such as male/female.

R: This has been changed.

5. The discussion and conclusions have adequate depth. Conclusion in the abstract does not make sense and needs to be rephrased ‘lack of skills...increased experience’.

R: This has been changed.

6. Limitations of the work are clearly stated.

R: The limitations have been extended.

7. No acknowledgment of work they are building (this is in the criteria for review, although I do not see how this is essential).
R: Primary health care nurses provide care that includes teaching people about health care solutions, preventive health strategies, lifestyle education and general health care. They provide education and services for men, women and children, and are typically considered the first point of contact in many community or health care settings. They also provide general health care for illness and injury, cure, rehabilitation, screen for the presence of chronic disease and monitor patients with stable chronic disease.

8. Title and abstract convey the results.
R: This has been changed.

9. The writing can be improved, but just in terms of editing for the English language. Overall, I believe it is well written. The entire paper has been carefully constructed.
R: The entire manuscript has been reviewed.

10. The reference to Magnet Theory is incorrect, I believe. Hospitals in the US were assessed according to their retention rates of nurses. The better hospitals which were able to retain staff were given recognition as Magnet Hospital. I am not aware that there is a theory attached to this. Please clarify in the paper.
R: This has been changed.