Reviewer's report

Title: Nurse-led Home Visitation Programme to Improve Health-Related Quality of Life and Reduce Disability Among Potentially Frail Community-Dwelling Older People in General Practice: A Theory-Based Process Evaluation

Version: 2 Date: 23 May 2014

Reviewer: Bettina Buecker

Reviewer's report:

Thank you for this well structured manuscript and the amount of information: For the evaluation of complex interventions like the one described in the manuscript it is essential to use mixed methods and report all stages of development and implementation, what the authors did. However I would suggest some major revisions on this paper as following below.

- Major Compulsory Revisions
  
  Title:
  1. “a theory-based” Please specify your theory and refer to it in the discussion.

  Abstract:
  2. The conclusions should be derived from the results. „General practices successfully…” (59) – I can’t really find that in the results. Why successfully?

  Background:
  3. What means „potentially frail“ (87)? I can’t find in- and exclusion criteria. Perhaps this is mentioned in the references, but it should also be defined in this paper. How are the 1972 eligible older people from 13 practices are characterized (Figure 2)? All patients above 74 years? Are they all classified as „potentially frail“? That would be an insufficient definition. Please specify.

  4. „The extent to which general practices successfully redesigned…” (108): In which way this could be measured? What was the cut-off for success? Please specify.

  Methods:

  5. In general:

  a. Please use a checklist for reporting your qualitative study parts, e.g. the COREQ checklist for explicit and comprehensive reporting of qualitative studies (TONG A., SAINSBURY P. & CRAIG J. (2007) Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups: International Journal for Quality in Health Care; Volume 19, Number 6: pp. 349–357).
b. Please use quotes to illustrate the themes and to allow estimation of the relation between evidence and conclusions.

6. „Practices redesigned their care“ (137): You know they did? Or should they? All managed to do?

7. I‘d like to know the characteristics of the GPs and PNs (140). Gender? Age? etc.

8. Why did you use semi-structured interviews (197) to collect data and why „a general inductive approach“ (273) and „conventional content analysis“ (279) to analyse data? Please give reason for your decision to use these methods.

9. „Only 7,1% ... filled out the... care diary...the information was not used for process evaluation purposes.“ (251-253): Why not? It´s a useful information: a diary seems to be not helpful! Explain why this could be the case: too complicated for the older people?

10. „Two members of the research team“ (270): Which discipline do they belong? GPs? PNs? A multidisciplinary team would be beneficial in the procedure of analysis. Who performed the interviews? Relationship between them and the participants?

11. „A general inductive approach was applied... guided by the process evaluation objectives.“ (273): Isn´t it more deductive, if you let yourself guide by so many objectives?

12. „to identify categories or new themes“ (279): Please mention the new themes. Does a coding tree exist?

13. „Descriptions of procedures“ (280): Which procedures are addressed here? Please specify the procedures.

Results:

14. In general: It would be helpful, if the statements of the results had a closer relation to the questions of table 1 (which question number is answered?) and from which data collection tool the statements are derived (e.g. „Narrative report by project team showed that....“).

15. „In the general practices ... meetings took place...“ (314): Are these new meetings or did they already took place before beginning of the study?

16. „The percentage of formulated care and treatment plans ...varied widely from 4,0% to 95,2%." (344): How do the authors explain these differences? In how many cases „problems or risk situations“ (Figure 1) were identified? All these cases should get a treatment plan. With that it is (also) possible to measure a successful implementation.

17. „PN did not have a concrete plan for monitoring.“ (350): Wasn´t such a plan provided within the intervention?

18. Recruitment of General Practices (441-446): give numbers/percentages

19. „lack of adequate reimbursement“ (468): Did the GPs or PNs get incentives to take part in the study?
- Minor Essential Revisions
310: delete the first or the second „with“

**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.