Author's response to reviews

Title: Purchasing and Using Personal Emergency Response Systems (PERS): How Decisions are Made by Community-Dwelling Seniors in Canada

Authors:

Alexandra C McKenna (mckenna.alexandra@gmail.com)
Marita Kloseck (mkloseck@uwo.ca)
Richard G Crilly (richard.crilly@sjhc.london.on.ca)
Jan Polgar (jpolgar@uwo.ca)

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Author's response to reviews: see over
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Dear Dr. Pugh,

Thank you for your recent email providing reviewer feedback for our manuscript:

MS: 134251131212496 ‘Purchasing and Using Personal Emergency Response Systems (PERS): How Decisions are Made by Community-Dwelling Seniors in Canada’

We confess we are somewhat disappointed in the quality of the reviews. Of the three referees, only one (Dr. Sofia Kjellstrom) appears to have understood the qualitative methodology and provided constructive feedback to help strengthen the paper.

Referee 1 (Dr. Paula van Wyk) has concentrated her review on a line by line analysis of our use of the English language, with little other constructive feedback. We are all native English speakers with plenty of experience in writing successful manuscripts. Dr. Van Wyk’s comments focus primarily on our use of the English language and her perception of our inadequacies. We disagree with many of the language improvement suggestions and are a little offended by the suggestion that we need “a copy editor to improve the style of written English . . . to use a professional language editing service or . . . . to have our manuscript edited by a native-English speaker”.

Many of Dr. van Wyk’s comments were non-specific and we really could not see what the reviewer was concerned about. We tried to respond to specific comments as much as they impacted the meaning and content of the manuscript. Itemized comments, to which we felt a response was appropriate, are those indicated by the letters l, v, x, hh, ii under ‘major revisions’ on page 2 and 3, and under ‘minor revisions’ numbers 3, 6, 7, 8, 11, 12, 15, 20, 24, 25 and 28.

The review by Dr. Pierre Rumeau has us puzzled. Reading his comments, it is evident that Dr. Rumeau is not familiar with qualitative research. He concludes that “by my point of view, this work should be taken as qualitative”. This is somewhat surprising given the work is quite clearly totally qualitative. Given the qualitative nature of this study, to refer to our work as ‘experiments’ is also inappropriate. We did take his suggestion in comment 1 and have altered the abstract as he suggests. We have also better explained how focus groups findings were used to refine interview questions and probes. We think the tables are self-explanatory and we are reluctant to duplicate the information by repeating it in the text. Dr. Rumeau seems to have difficulty with understanding the NORC, but we felt we have adequately explained under the ‘Participants’ section under Methods.

It is difficult to know what to do when Dr. Rumeau rejects our model as not being a model at all, while Dr. Kjellstrom considers it essential for the understanding of the paper.

Referee 3, Dr. Kjellstrom, is clearly familiar with qualitative methodology and we very much appreciate her constructive feedback to strengthen the paper. Although Dr. Kjellstrom did not identify any major compulsory revisions, we have responded to all her minor and discretionary suggestions as we, too, believe these will strengthen the paper. We thank Dr. Kjellstrom for
brining the two extra references to our attention. We have included these as suggested. In addition, as suggested, we have:

§ under comment 2 - made clearer the procedure for collection of the socio-demographic data
§ under comment 3 – we have made changes to Figure 1 as suggested
§ under discretionary revisions – we have added the statement confirming that our study was approved by our local ethics board and that informed consent was obtained

In addition we have made the following revisions:

Abstract – revised the abstract to include the statement ‘The purpose of the study was to investigate the experience of seniors living with and using a PERS in their daily lives, using a qualitative grounded theory approach.’

Page 3 – para1, sentence 1 – we have added “may” as requested – ‘As seniors age, they may face more . . .’

Page 3 para 2, sentence 4 – we have removed the acronym ‘ERC’

Page 3 – para 2, sentence 5 – we have added ‘. . . but no extra cost for activating the system’ to the sentence

Page 3 – para 2, sentence 6 – we have added ‘. . . but the PERS is not considered a medical device and is paid for by the subscriber.’

Page 4 – para 1, sentence 2 – the reviewer is correct (it is fear of falls, not falls); we have revised the sentence ‘Falls are cited as . . .’ to read ‘Fear of falls is cited as . . .’

Page 4 – para 2, sentence 3 – we have removed ‘The authors found that’

Page 4 – para 1, methods – Dr. Rumeau states that the ‘discussion of the method is lean verging on inexistent . . . (less than 4 lines) – the methods section, in fact, goes on for several pages; given Dr. Rumeau’s comment – we have provided more clarity to support our grounded theory approach

Page 6 – para 2, sentence 1 – data collection – individuals interviewed were different from those participating in the focus groups

Page 7 – para1, sentence 1 – we have added a ‘d’ to emerge

Page 7 – para 1, sentence 4 – clarity has been provided regarding the running of the focus groups. We have added a sentence stating ‘The primary researcher conducted the focus groups with a member of the research team taking notes regarding such things as tone and body language.’

Page 8 – para 1, sentence 3 – we have removed ‘. . . in writing this thesis, . . .’

Page 8 – para 2, sentence 4 – data analysis section - we have added a sentence to clarify that coding conducted by the primary researcher was compared to independent coding conducted by research team members
Page 9 – para 3, sentence 3 – yes, for the participants who pressed the button 25 times, this determination was made from retrospective memory.

Page 10 – para 1, sentence 3 – all buttons were pushed for medical emergencies.

Page 10 – para 2, sentence 2 – we have removed ‘. . . subscribing themselves . . . ’; the sentence now reads ‘Most participants reported they had decided independently to subscribe to a PERS, but . . . ’.

Page 11 – para 1, sentence 1 – in labeling participant quotes we have added clarity as requested ‘M(male)21’; para 2, sentence 4 ‘F(female)22’

Page 11 – quotes – it is standard practice to embed short quotes in the text and indent longer quotes.

Page 13 – para 2, sentence 4 – we have place a ‘period’ after ‘heart attack’; the next sentence begins ‘She recounts, “Listen, the button didn’t . . . ”’.

Page 14 – para 2, sentence 1 – we have revised the sentence to read ‘. . . performing a self-diagnosis and evaluating the seriousness of the situation.’

Page 16 – para 1, sentence 1 – we have changed ‘added’ to ‘adds’; we have also removed ‘etc.’ from sentence 2.

Page 18 – para 2, sentence 1 – we have revised the sentence to read ‘PERS use is influenced by an individual’s level of perceived risk and who initiated the subscription to the device, for example, . . . ’.

Page 18 – para 4, sentence 3 – we have added the word ‘physical’ to environment as requested.

Page 18 – para 4, sentence 3 – the terms ‘unexpected’ and ‘unpredictable’ are not synonymous and we prefer ‘unexpected’ in this context.

Page 19 – para 2, sentence 3 – we have revised ‘. . . unpredictability of daily life as an individual of advancing age.’ to read ‘. . . unpredictability of daily life of the individual in advanced age.’; also ‘push’ and ‘press’ has been changed to ‘activate’.

Page 19 – para 1, sentence 2 – study limitations – we have added ‘in an urban setting’ as requested.

Again, we would like to thank the reviewers for their comments and we have used the constructive feedback to strengthen our paper. We hope these revisions address reviewer concerns and very much look forward to publication of this paper.

Sincerely,

Marita Kloseck, PhD
Faculty of Health Sciences
Western University