Reviewer's report

**Title:** Evaluating the systematic implementation of the 'Let Me Decide' advance care planning programme in long term care through focus groups: A user's perspective.

**Version:** 2  
**Date:** 1 April 2015

**Reviewer:** Tamara Sussman

**Reviewer's report:**

**Major Compulsory Revisions**

The author must respond to these before a decision on publication can be reached. For example, additional necessary experiments or controls, statistical mistakes, errors in interpretation.

1. Overall the results as currently presented are rather descriptive. For example the categories which currently represent sub heading in the findings are those initial categories that corresponded with the interview guide (e.g. category 1 implementation; category 2 benefits) and not as it is suggested those that emerged from the data. It may be more beneficial to highlight the code names and tie them together a bit (which appear to me more at the thematic level and are more interpretative). This first theme for example could be called Advance Care Planning Essential for Current and Future Practice (Or as I read further Advanced Care Planning Facilitated Deeper More Meaningful Relationships between Family, Staff and Residents) instead of implementing advance care planning as it is currently labeled. The next theme could then be Apprehensions and Fears Evaded by support and usable materials which is currently labelled as a subcategory under implementation and again this could include the emotive responses i.e. while hard and emotionally draining support and tools helped overcome this for many. We see the same issue in category 2 currently labelled benefits (which corresponds directly with the initial interview guide on advantages). The example under benefits with the quote about how the guide helped ease people into the conversation (lines 198-200) appears to me to connect with some of the issues that I relabelled Apprehensions and Fears Evaded by Support and Usable Materials. Separating this affirms that the analysis reached thus far is extremely descriptive and would benefit from a bit more analytical thought. That said the material itself is extremely rich and interesting making an important contribution to the literature. Please take this feedback into consideration for other categories as well as the same issue arises. For example perhaps a Questionable capacity and difficult family dynamics warrant further training and support (this could cover the issues of partial capacity and of disagreements within families. Knowing what staff did when these arose would be extremely helpful).

**Minor Essential Revisions**
• (1) in the concluding comments of the abstract the tense changes from past to present. It should be consistent. Relationships deepened, communication became more open and honest end of life became focused on symptom management, comfort and spiritual issues rather than crisis decision making.

• (2) under introduction line 56 (11 lines into the intro) should be if and not of

• (3) under introduction line 75 should read from family and staff perspectives (it is currently written in the singular)

• (4) under introduction line treatment decision should be decisions

• (5) there is some awkward wording in the paragraph explaining the larger study (line 96 under introduction). I may say the larger study on which this paper is based examined both quantitative and qualitative…… The way it is worded it sounds like the authors are talking about the current paper until one gets to the next paragraph. The authors may pay attention to this throughout the introduction as well as it was only when reading that paragraph that it was clear this paper was only about staff (even though staff and families were both mentioned earlier on) (see line 75 in introduction which refers to the current study

• (6) under results line 152 (under the wordle) refers to the main focus groups. Were there other focus groups that were not main or does this refer to the three reported on? Perhaps remove main if it is the three as this is confusing.

• (7) under discussion line 503 should be workshops and not the singular workshop.

(8) the discussion raises for a first time staff questioning about introducing the ACP process earlier (at admission). It also suggests staff ‘knew” when to implement it. Throughout the paper it is unclear when this process begins (is there a protocol for when to offer a first meeting). If there is it would be useful to share this information. If it is up to judgement it would be useful to unpack for readers how staff decided when to introduce the subject. The discussion suggests staff ‘knew’ when to have these conversations so sharing how they knew make an important contribution to uptake in practice as these are some of the apprehensions LTC home staff face regularly.

Discretionary Revisions

• These are recommendations for improvement which the author can choose to ignore. For example clarifications, data that would be useful but not essential.

• (1) In the abstract it may be beneficial under methods to describe briefly how the data was analyzed.

• (2) Under methods it could enhance the paper to tell the readers a bit more about the sites (e.g. there is mention of a smaller site and larger sites so how many beds in each and how typical are they of nursing homes in the region).

• (3) under methods I would also be useful to discuss why a focus group method
was elected over individual interviews (a ‘focus group’ of two is quite small and some might argue that focus groups should have three or more participants).

Level of interest: An article of importance in its field

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.