Reviewer’s report

Title: Gaps in governance: Protective mechanisms used by nurse leaders when policy and practice are misaligned

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Reviewer: John Campbell

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Abstract

2/19 - needs to state “identification of five themes”

But methods incorporates results – this needs to be moved

2.22 - what is the focus of the “clinical guidance”?

Background

3/20 - why is there a reference to “informal” nursing practice – in what sense is it “informal”? Telephone consultation is now widespread in nursing practice and in primary care more generally – and is a formalised process of care.

3/25 - on a similar vein, there is a further reference to “formalised telephone nursing services”, which I think the authors suggest are either major regional or national services in contrast with the idea of “rural people calling their local health service for care”. This could be clarified and presented in a more accessible way.

4/5 - identifies a key element of this paper and is indeed worthwhile. The issue of governance and safety in respect to telephone consulting is highly relevant and remains contested – for this reason, this paper is of significance.

5/15 - (sorry!) once again, the introduction of “formal/informal practice” creates a sense of uncertainty in respect of this paper. This is a recurring (minor) concern, but one which needs to be addressed throughout the paper.

6/11 - a clear aim for this research and for the paper is necessary at the end of the background section. Specifically, why was this study carried out?

7/7 - section provides a useful summary of health service provision in Victoria.

7/24 - the study sample comprises eight Directors of Nursing – a relatively small number but still possibly of wider interest

8/1 - the telephone interviews were conducted in 2009 – this therefore represents a six-year gap to reporting – is this study still relevant to current practice?

9/1 - a systematic approach has been taken to the analysis of existing policy documentation, and an adequate summary of the approach used, including the assessment of rigor, has been provided.

Results

10/14 - introduces an aim rather than presenting results – it is important to keep
these individual sections “watertight” within the document. Aims are best presented prior to the methodology.

10/18 - the summary of data analysis and five themes is presented correctly here but in the wrong place in the abstract

10/24 - it’s not clear to me why the analysis of policy documents is reported under the first theme – surely it is simply a freestanding element of the paper?

11/11 - refers to table 2 – table 2 is broadly satisfactory but I have a series of empty cells in the version which is downloaded – is the table complete? The empty cells relate to the principal domains under “document calls”, “clinical protocols” and “quality evaluation”. (Incidentally, what does “document calls” mean?)

15/17 - the authors introduce the issue of accessibility of out of hours care – this may be something of a confusion and opens up a very large and conceptually distinct literature, ie the use of telephone consulting for routine, as compared to urgent/emergency type care.

In general, I found the use of quotations and the summarisation of the data helpful and of genuine interest. This is an important area to consider and the authors are to be commended on undertaking and reporting some potentially useful work.

Discussion

17/5 - the summary of two important findings is of interest and relevance.

In general, I found the discussion to be relevant and well presented. What were the strengths of the study – limitations are presented, but no strengths identified. The reference to Canter’s work is interesting – the current widespread interest in the use of normalisation process theory might also be of relevance in this particular setting.

There is a reasonably comprehensive review of the relevant literature. The authors might be interested in a recent paper in The Lancet which addresses the issue of telephone triage in primary care settings (Campbell et al 2014).

In general, the work is well presented and of relevance. The issue of the safety of triage, especially of nurse triage in primary care settings, is currently relevant and the use of qualitative methodologies to explore this is worthwhile and potentially of wide general interest.

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