Reviewer's report

Title: The making of local hospital discharge arrangements: specifying the role of professional groups

Version: 2
Date: 19 December 2014

Reviewer: Robin Urquhart

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A well written article, using case study methods, to understand the implementation and routinization of discharge arrangements in hospital settings. The organizational and professional group perspectives are useful contributions to this area.

Major compulsory

1. I believe the Methods section itself would flow better if subsections were used: e.g., Participants, Data Collection, Data Analysis, etc. Also, the development of the generic model for discharge should also be included as a sub-heading, quite possibly at the beginning of the Methods section (I am uncertain it this would be the best place for it, but I think it needs to appear earlier in text than it does now).

2. Please provide more details related to the participants and data collection procedures, specifically:

   a. The authors state that they held 18 focus groups in total, with 3-4 participants per group. Could they provide the precise number of individuals (in total) who participated?

   b. Did each participant participate in 2 focus groups (i.e., did each participant participate in both the mid- and post-project focus groups)?

   c. Who conducted the focus groups? Was it the same person for all focus groups?

3. Additional details related to the analysis is also needed, including more details re: the “classic thematic approach.” E.g., What/whose approach did they employ (references would helpful here)? What did the analysis process entail? Who undertook the analysis? If more than one individual, how did they individuals reconcile their analyses and come to agreement on the findings?

4. Page 12, quote from Doctor, Hospital A: I find this quote difficult to follow/understand. Is there some way to improve its clarity or is there another representative quote to illustrate the finding?

5. Page 24: When discussing the embedded local model in Hospital B, the authors state that “the discharge arrangements are piggybacked onto existing professional practice.” When discussing Hospital A, a few sentences later, the author state that “the discharge arrangements are simply added onto existing professional practice.” These statements seem to be saying precisely the same things but I do not believe this is the authors’ intention. I would recommend the
authors change the wording accordingly to clarify their meaning.

6. I quite enjoyed reading this article. At the end of the day, I wonder how do these findings help others who are trying to implement and routinize similar changes in their organizations (what are the specific implications for others?)? I do see the authors begin to address this in the Conclusion section. I think it would be useful if this discussion can be moved to the Discussion section and then expanded on.

7. It would be useful for the authors to discuss strengths and limitations of this study in the Discussion section.

Minor essential

1. Page 5, Line 16: the “of” between “process” and “as” should be removed.
2. Page 7, Lines 7-10: the sentence that begins with “The resources available…” is not a complete sentence. Please revise accordingly.
3. Sometimes the authors use the term “interview” to refer to the focus groups. Please revise this accordingly.
4. The findings are largely written in present tense. I believe consistent use of past tense might be more appropriate.
5. Page 18, quote: Please identify which participant provided this quote (e.g., Doctor, Hospital B).
6. Page 21, Line 22: Remove the “is” between “This” and “has”.

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.