

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form ([see an example](#)) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below. Some articles will have been accepted based in part or entirely on reviews undertaken for other BMJ Group journals. These will be reproduced where possible.

ARTICLE DETAILS

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| TITLE (PROVISIONAL) | Explaining the barriers to and tensions in delivering effective health care in private UK care homes: a qualitative study |
| AUTHORS | Robbins, Isabella; Gordon, Adam; Dyas, Jane; Logan, Phillipa; Gladman, John |

VERSION 1 - REVIEW

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| REVIEWER | Dr Angela Kydd Senior Lecturer Research University of the West of Scotland Hamilton Campus, Almada Street Lanarkshire ML3 0JB Scotland UK I declare I have no competing interests in reviewing this paper |
| REVIEW RETURNED | 23-May-2013 |

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| THE STUDY | There are no statistics and the supplemental doc is well placed as an appendix. Pleas note p5 last sentence under recruitment states 'saturation was reached after 7 care homes' - but the study used 6 care homes |
| RESULTS & CONCLUSIONS | very little literature is referred to in the discussion - but this could be that there is a paucity of current literature. The client group in care homes with no on site nursing are different from residential clients say 10 years ago - when many were mostly self caring. The residents now are in care homes because they are unable to manage self care and this is a point that I think is missing from this interesting paper. Clients in nursing and in residential care have very similar medical and nursing needs because they are usually very old and have been admitted to a home due to their illness/frailty/capability |

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| REVIEWER | Dr Jackie Morris MB FRCP Honorary Research Associate Department of Primary Care and Population Health. UCL School of Life and Medical Sciences Royal Free Campus Rowland Hill Street London NW3 2PF My competing interests are that: I have worked doing similar work for Barchester Healthcare. I have also worked with Jewish Care on a project involving one of their Nursing Homes. |
| REVIEW RETURNED | 27-May-2013 |

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| THE STUDY | There are no checklists or information which should be better reported in the manuscript. |
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VERSION 1 – AUTHOR RESPONSE

*Recruitment paragraph: 'published elsewhere' is not helpful to a reader; please include a full reference.

We have now been able to reference this publication in full; Gordon et al (2013) reference 18. (Page 5)

*Please provide more detail in the methods. How were the 11/18 selected, for example?

Adapted in text (page 6).

*The recruitment process - can you say in the results how many were participated through which methods?

We have added a comment in the text (page 7); however we are uncertain as to whether this answers the reviewers comment. We can provide a table which provides additional information on the recruitment process; which also illustrates the grounded theory approach as recruitment of carers reduced as recruitment of the six care homes went on. If the editor decides that this table is required; in the current format of the paper it would mean that to include it, it will have to be an additional file because we have exceeded the number of tables allowed. I have been unable to insert this table into this letter because of formatting problems, therefore I have attached it as an additional file.

*Please note p5 last sentence under recruitment states 'saturation was reached after 7 care homes' - but the study used 6 care homes

This was an unspotted typographical error, we apologise, it has been corrected to 6 (page 5).

*Very little literature is referred to in the discussion - but this could be that there is a paucity of current literature.

We have now added more literature to the discussion and have used the BMJ's guidance on the discussion to steer this; we thank the reviewer for pointing this out (page 19).

*The client group in care homes with no on site nursing are different from residential clients say 10 years ago - when many were mostly self-caring. The residents now are in care homes because they are unable to manage self-care and this is a point that I think is missing from this interesting paper. Clients in nursing and in residential care have very similar medical and nursing needs because they are usually very old and have been admitted to a home due to their illness/frailty/capability.