Reviewer's report

Title: Meeting the Home Care Needs of Disabled Older Persons Living in the Community: Do Integrated Services Delivery Make a Difference?

Version: 1 Date: 7 September 2011

Reviewer: Mitchell P LaPlante

Reviewer's report:

My impression is that this study is well designed and the research is well described, providing an excellent contribution to the field regarding the impact of integrated service delivery systems (combing acute and long term services and supports) to reducing disability and especially unmet needs in older persons. There are limitations to the study that are addressed well, yet there seems to be a clear and substantial impact of integrated services in reducing unmet needs.

I have only a few suggestions that I feel require attention.

1. Please change handicap to unmet need throughout. The handicap term is regressive terminology—the WHO ICF and other agencies have stopped using that term.

2. Can you add a sentence or two about the psychometric properties of the SMAF? Is it an IRT validated scale or validated by some other latent variable technique? The inclusion of seeing, hearing, and speaking in IADLs is unusual. Can you add a sentence to justify that (based on the literature already cited)? Also, the same for the unmet need measure.

Specific comments:

1st paragraph on page 7: please describe the time elapsed between first and second waves. Also, the timing of all the waves should be described.

The 2nd paragraph on page 7 appears to be addressing an aspect of the validity of the SMAF. It might be helpful to introduce that as the purpose here. Then start a new paragraph when the discussion turns to perceived health and combine that with the next paragraph.

Could you include the mean unmet need score in Table 1? That is of interest, since you are comparing the mean score in the statistical analysis. Please also note in Table 1 that the disability and unmet needs variables are for Wave 2.

Page 13. Please state here specifically how much is what you refer to as the “modest” amount of variance explained. Is that the 65% of the change over time that the model accounts for?

On page 14, it is stated “Other studies, like ours, included people with dementia and used a proxy as respondent. Having a proxy was associated with a reduced likelihood of unmet needs [6, 13].” If need and unmet need are both assessed by
professionals, then this seems contradictory or at least confusing. Please clarify.

**Level of interest:** An article of outstanding merit and interest in its field

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests.