Reviewer's report

Title: The impact of early emergency department allied health intervention on admission rates in older people: a non-randomized clinical study

Version: 1 Date: 7 September 2011

Reviewer: Julia Crilly

Reviewer's report:

Thank you for the opportunity to review this manuscript that describes the impact of early ED allied health intervention on admission rates in older people. The research presented within the manuscript adds the emerging literature regarding allied health utilisation and benefits within the ED environment. The research objectives and hypothesis is well defined. As requested, review comments are formatted based on three sections: major compulsory revisions, minor essential revisions and discretionary revision.

• Major Compulsory Revisions
1) Results: data collected (mentioned in the method section) included patient demographics, time of arrival, triage urgency, living arrangement, study site, comorbidities, admission, death. Given that these factors were adjusted for in the multivariate analysis, a table displaying numbers (and %) within these aspect would be useful to assist the reader in understanding the composition of each intervention and control group.

• Minor Essential Revisions
2) In the Methods section, please briefly describe whether the two tertiary hospitals were similar / different in nature in terms of presentation numbers (the combined total census is noted), type of patients treated (adults and children, or one or the other), admission rates, hospital services provided (e.g. spinal, burns, neonatal ICU, rehab etc), and community population size they serve. Did they both have similar staffing profiles (medical, nursing, nurse practitioners)? Did they both provide similar internal ED services (e.g. observation ward, fast track)
3) Please include date range in the Methods section (inclusion criteria) for which patients who presented to the ED were included in the sample.
4) Please indicate hours of availability for CCT. i.e. provided/ available 7 days a week, 24 hours a day; or Monday – Friday during business hours.
5) Please indicates whether CCT models operated similarly within both EDs
6) Please clarify whether CCT were able to self select patients to assess or were patients referred to CCT by a nurse or medical officer?
7) Please provide examples of what might constitute services initiated by CCT members
8) Please briefly describe how control patients were identified and selected? i.e.
was this a manual process undertaken with a retrospective review of EDIS to ensure resus patients and patients who didn’t have one of the 10 selected diagnoses were not included as controls for analysis.

Discretionary Revisions

10) Discussion: Regarding study limitations. It may be my interpretation of the wording, however it is not clear why you would assume that outcomes found from previous research apply to the study group described without specifically identifying whether the outcomes are actually reflective of previous work or not. Please consider rephrasing this sentence.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests