Reviewer's report

Title: Overcoming ‘terra nullius’ in the patient journey from acute care to rehabilitation

Version: 2 Date: 6 April 2011

Reviewer: Angela Colantonio

Reviewer's report:

Thank you for the opportunity to review this article entitled “Overcoming terra nullius in the patient journey from acute care to rehabilitation”.

Major Compulsory Revisions:

Abstract: The authors should specify in the abstract and indeed throughout the manuscript that the focus is on “inpatient” rehabilitation. The last line of the methods section should specify subset “…of Patients”. The results paragraph should specify episodes of care.

I think that readers may be able to search for this paper if they replace “terra nullius” in the title with “alternate level of care”.

The questions posed by the authors are relatively well defined. The authors address an important topic that is relevant for many countries.

Methods: The authors should be explicit in describing the study design in the methods section. There needs to be more detail on the variables measures and the data collection instrument overall. There is a reference provided but this is too limited. The properties of the instrument needs to be provided. The variables and methodology need more description.

The data are clearly presented but again more information is needed. Standard deviations should be provided where mean scores are reported. Tables could be better labeled eg Table 1 could read, 'Descriptive characteristics of patients by episodes of care'.

Also, the authors could provide some description of the health care system in Australia to better inform the international reader. For instance, to what extent is acute and inpatient rehabilitation publicly funded? Federally funded programs are described in the discussion...is this true for all care? Are there any systematic barriers that we need to know about?

Limitations are listed but I believe that the work described is mostly descriptive/exploratory. There may be other factors that can be considered to predict alternate level of care days. Are there conceptual models that could be used to better understand alternative levels of care? There is no discussion of how community supports may affect community care; this should be considered.
The authors present relevant information in the introduction and discussion.

Overall, I believe this paper merits consideration for publication because it presents important information on a very relevant topic. However, that I am unable to decide on acceptance until the following major revisions are in place:

1. Provision of more detail in the methods section, including the data collection instrument, and more information on the design and variables; an explanation of the justification of the time frame for the more detailed review of patient charts. Please include more information regarding what was gathered in this “more detailed review”; Also, more information is needed on how qualitative data was gathered. Was qualitative information gathered or were closed-ended questions used? If open-ended, how were patterns identified? Was the validity/consistency of judgement on qualitative information confirmed? More information is required regarding the process of obtaining patients ready for rehabilitation.


Other minor essential revisions include:
1. Revisions to the abstract listed above
2. More information on the tables i.e., standard deviation
3. Clarification of age ranges in the study
4. Consistency in use of terminology regarding alternate level of care
5. In the discussion, the authors need to address the limitations of following the ‘other rehabilitation’ group for a different amount of time during their acute stay. Does this limit the comparison ability? Is there a way to track these people back from their admission time, rather than referral to rehabilitation time?
6. The 5th and 6th paragraph of the background have some awkward sentence structure.
7. The discussion could be expanded to include nature of future research
8. The issue of community based care and how that may affect ALC should also be discussed within the system of care

Discretionary comments:
A recent paper that may be helpful was published in Journal of Rehabilitation Medicine 2010, 42,773-779.

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

Quality of written English: Needs some language corrections before being published

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