Reviewer's report

Title: A systematic review of different models of home and community care services for older persons

Version: 1  Date: 13 October 2010

Reviewer: Colleen Doyle

Reviewer's report:

Major Compulsory Revisions

As the authors acknowledge, a difficulty with such a wide ranging review is that it was hard to identify with any accuracy the interventions that were being clustered together. As the authors already point out, some integrated care studies may actually have been case management and vice versa. The paper needs careful discussion of what the models consist of. There is a large literature on case management and its effectiveness already, as well as a large literature on community care models. I would suggest tightening the focus of the paper by removing the consumer directed care discussion (this section does not adequately cover the large literature on consumer directed care) and including a new section with a careful discussion of what case management consists of. There is an excellent review of case management by Hutt, Rosen and McCaluey (2004) "Case managing long term conditions; what impact does it have in the treatment of outcomes?" published by the King's Fund, London. As the paper is international the summary of interventions also needs to cover international differences in definitions.

The authors also need to demonstrate, perhaps in the background section, how their review will differ from that recently published by Freund et al, 2010, BMC Health Services Research.

Minor Essential Revisions

I would suggest that the authors are a little more modest in their discussion. There have been many reviews of community care published already, including Elkan as referred to in their paper. The work of Challis in the UK is one body of many on case management and its effectiveness. While grey literature studies may not have been reviewed, it may be offensive to many well-established groups to suggest that such studies will necessarily be of poorer methodological quality. And the issues to do with identification of the intervention, international comparison of disparate health systems, the uniqueness of each case management program, making generalization difficult; programs targeting the wrong clients and so diluting any impact; difficulties in measuring client outcomes meaningfully in order to encompass the premise that case management delivers individualized interventions; wide variability of evaluation processes and techniques; and differing benchmarks for success of the programs are not to be underestimated. It is important to continue to improve research into community care, and the paper addresses an important topic, but in its current form this
paper may be a little ambitious and too wide ranging so I would suggest revisions as above before publication.

**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.