Reviewer's report

Title: A national survey of services for the prevention and management of falls in the UK

Version: 2 Date: 27 June 2008

Reviewer: Lillemor Lundin Olsson

Reviewer's report:

This paper is a national survey of fall prevention services in the UK.

1-2) The aim is well defined and the methods used are appropriate. The content of the survey is defined by two pre-existing important documents: a) guidelines for the assessment and prevention of falls in older people by NICE, and 2) a taxonomy developed by the Prevention of Falls Network Europe. To cover as many services as possible a cascade approach to sampling was used. Standardised telephone interviews with the lead clinician/ manager/ director. To get a clearer picture of the recruitment procedure it could be added to the survey response in figure 1.

3) The data are presented as numbers and proportions. In the analysis section the authors describe a comparison between service provision and setting (acute and community setting) which not is presented in the result section. And those results would have been very interesting. And also a rural-urban comparison. Another approach to get a deeper understanding of the services could have been a comparison between services with few and many new attendances. For example, what differences are there between services (staffing, assessments and treatment) with less than 200 new attendances compared to those with more than 600 (seems to be a threshold in number of services according to figure 2). How does the service provided relate to the evidence of effect? In the method section the routinely collected financial and outcome data were said to be collected but I could not find any result of this issue.

Have the authors considered presenting the data in table 2 as one or two figures instead? It would give the reader a quicker picture of the results.

In figure 2 the division in classes (211,311,411 and so on) looks odd and no reason is given why the upper and lower limits ends with “11”; why not 100,200…?

4-9) These aspect s are covered.

Major compulsory revision

None

Minor essential revisions
3-4. The comparison between settings described in the analysis section as well as the routinely collected financial and outcome data need to be changed either in the method or in the result section.

4) Change the division of classes in figure 2.

9. For readers unfamiliar with the health care system in the UK it is important to spell out what NHS means and to specify what “both bone health (osteoporosis) services means”. Other terms that might be unfamiliar for foreigners are Geratology departments as compared to geriatric departments; service compared to clinic.

Discretionary revisions
3-4) To get a clearer picture of the recruitment procedure it could be added to the survey response in figure 1.
3-4) Rural-urban comparison as well as comparison between services with few and many new attendances. It is stated in the result section that the median number of attendances was 180 but the great variety is not commented on.
3-4) present the data in table 2 in one or two figures

**Level of interest:** An article of importance in its field

**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 interest