Author's response to reviews

Title: Appropriateness of acute admission and in-patient stay for patients with long term neurological conditions

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Author's response to reviews: see over
Date: 1st Feb 2009

Re: MS: 9292106332091268

Dear Natalie Pafitis

We have attached a revised copy of a paper entitled ‘Appropriateness of acute admission and last in-patient day for patients with long term neurological conditions’. We have amended the manuscript to address the minor revisions requested, and have commented below on the issues and suggestions the reviewers have raised:

**Reviewer: Jee-In I Hwang**

*Discretionary revisions*

1. The description of the results have been amended to ensure consistency, when the frequency and percentage is given, the frequency appears first followed by the percentage.

**Reviewer: Jon Glasby**

*Comments:*

1. A sentence explaining that a number of studies are non UK and that the date at which they were conducted pre-dated a number of policy developments has been inserted.
2. In the methods section a sentence detailing who determine ability to provide informed consent and how has been inserted. Also, a reference is made to the Mental Capacity Act and the sentence detailing ethical approval has been moved to this section as suggested.
3. The reviewer queries how significant living in your own home was as a predictor given 79% lived in their own home. The analysis performed looks to examine differences between the two groups, i.e. whether or not there is a significant difference/association in the place of residence for those admitted appropriately and inappropriately. We can see that of those who lived in their own home a lower proportion were admitted appropriately in comparison to those who lived in a nursing/residential home (68.1% compared with 88.0%). This is a significant findings irrespective of the fact 79% of the total sample lived in their own home.
4. A sentence stating: ‘In the cases where the patient was not discharged despite being medically fit there was no evidence of problems that may have caused a delay i.e. no evidence that there was a delay in the undertaken of investigations, referral requests
etc.’ has been inserted to clarify why the category of ‘failure to discharge the patient when medically fit’ was used.

5. The endnote references have been amended to read correctly: ‘Department of Health’, rather than ‘Health Do’.

Please do not hesitate to contact us if you feel any further revisions are needed.

Yours sincerely

Christina Hammond, Margaret Phillips, Lorraine Pinnington.