Reviewer's report

Title: The impact of hospital-based and community based models of cerebral palsy rehabilitation: a quasi-experimental study

Version: 2 Date: 20 August 2014

Reviewer: Prue Morgan

Reviewer's report:

thank you for the opportunity to review this interesting manuscript. Although it is focused on Zimbabwe health practice, it has greater implications for the value and efficacy of outreach service provision v institution based service provision for children with disabilities.

Major compulsory revisions

My main concern relates to the authors' conclusions (lines 49-54 and 362-363). The authors correctly identify that therapist expertise was not equal across the two groups (line 302-304), with greater expertise existing in therapists working in the outreach service. This is highly likely to distort the findings and needs significantly more attention in the discussion. Hence the conclusion in both the abstract and the main body need to be changed to:

'lines 359-360:
'that provision of care within a community setting may be associated with a greater improvement .....'

lines 53-54 and 362 needs to be deleted and reworded to conclude a much more cautious outcome

Confusing terminology throughout -
need to be consistent with the use of CBR, OR, IB v community based, institutional based, hospital based. After the introduction, please change throughout to one consistent term to describe each group.

Minor essential revisions

Line 67
I was unable to locate the data in this reference that you cited

Line 82
Alma-Ata

Line 83
WHO please spell out in full the first time the abbreviation is used

Line 110
therefore
Methods - first paragraph
Is it geographical location that determines a child’s program allocation? That is not clear - please provide this information.

please give an example of 'other therapeutic interventions' that resulted in exclusion

give CSI reference the first time it is used

attrition is better term than drop-out

make it clear - baseline assessment at week 0, reassessment at week 12 (or similar)
potentially confusing re four week recruitment period...
Include time line on your figure

'No care-giver refused consent' - however in figure and later in text (line 214) you claim that 15 refused consent. Please clarify

delete duplicate 'children' word

I think you mean OR group

Table 1
what does asterisk relate to? not provided in table footnote

Treatment sessions and compliance - line 226
it would be valuable to provide the raw data on therapist hours to assist readers with external generalisation to their workplace - ie mean/median treatment time for both groups, range of treatment times for both groups

can we actually be given the mean/median number of therapy sessions scheduled and range rather than converted to %

would be valuable in this table to also provide GMFM 66 scores at baseline and 3/12 for both groups (mean, SD)

Line 255
IB (not IR)
Table 5
any statistical difference between the two groups for individual elements of CSI?
Line 268
reference needed
Discussion paragraph 1 line 283
please start discussion with a sentence reiterating the main aim/s of the study
line 307
? in OR group
line 318
alternatively, it may be that parents of younger children are in earlier phases of 'grief' in response to having a child with a disability which may dissipate over time to some extent
line 326
we weren't told of the typical frequency of IB services and hence cannot compare - please provide
line 355
spelling error
line 367
List of abbreviations
either provide all abbreviations used or none
Line 428
Zimbabwe
Line 435
monitoring

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

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests: I declare that I have no competing interests