Reviewer’s report

**Title:** Case management in primary palliative care is associated more strongly with organisational than with patient characteristics. Results from a cross-sectional prospective study

**Version:** 2 **Date:** 23 February 2015

**Reviewer:** Tim Luckett

**Reviewer's report:**

Minor essential revisions

This study seeks to answer the important question of whether case management services are more closely related to patient needs versus organisational characteristics based on the premise that, if palliative care is appropriately person-centred, the former should be the case. While the study includes a relatively large sample (>600 patients), data on patient needs and organisational characteristics are quite limited, and the former can only be used to infer patient needs to a small extent. Greater acknowledgement of this limitation is needed.

In some cases (e.g. whether patients started receiving services earlier in the disease trajectory, and the organisation offered care for palliative only or any stage of illness), a correlation is hardly surprising and does not seem pertinent to the research question. In other cases – e.g. the fact that lower functional status is associated with fewer contacts and patient characteristics were not strongly predictive of conversation content – the study does offer surprising findings that warrant further investigation. The authors could do more to highlight which findings are really key.

The authors should provide details of response rate and more information to help readers assess whether the sample was representative. For example, they say that for some initiatives, data were only collected on every other patient.

Table 4 is not easy to interpret. Are only significant results included? For some variables (e.g. medical treatment/age), the CIs cross 1. Functional status is especially difficult to understand because the legend says that higher scores = lower functional status and it is not clear whether the table refers to scores or status.

No information is given as to whether patient characteristics varied according to organisational characteristics of the initiatives.

Given the study’s limitations, I think it is over-stating the implications to state that ‘it is alarming that organizational characteristics are guiding in care provision’

Discretionary revisions

I suggest re-ordering the introduction so that content on the configuration of
services follows on from establishing the need for person-centred care. The first paragraph under Setting might be more appropriately placed in the Background.

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

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

I declare that I have no competing interests.