Author's response to reviews

Title: Why do older people with multi-morbidity experience unplanned hospital admissions from the community: a root cause analysis.

Authors:

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Version: 2 Date: 11 August 2015

Author's response to reviews: see over
Dear Editor:

I am pleased to resubmit for publication the revised version of MS: 1339593608157574 “Why do older people with multi-morbidity require emergency admissions to hospital from the community: a root cause analysis”.

Editorial request: Acknowledgements are now shown for the source of the funding for the study. A medical writer was not engaged in this project. No other personnel made a substantial contribution to the study or this manuscript.

Please find following a point by point response to the suggestions for improvements provided by the two reviewers of this manuscript.

Reviewer 1.

1. in the abstract line 10 with the sentence starting with Using. I think it would be clearer if the numbers of participants were indicated first.
   Response: The abstract has been modified as suggested by the reviewer.

2. in the abstract line 10 with the sentence starting with Using. I think it would be clearer if the numbers of participants were indicated first.
   Response: The abstract has been modified as suggested by the reviewer.

3. What is meant by separations?
   Response: This is a phrase commonly used in Australia for hospitalisations where the patient is discharged alive. This may not be familiar to non-Australian readers and the term “hospitalisations” has been used in its place. In addition it is apparent that the term “emergency admissions” suggested to reviewers that we had examined Emergency Department admissions which was not the case. Accordingly we have amended the manuscript to refer to “unplanned hospital admissions”.

4. page 105 discusses how individuals other than patients were included. Please comment if consent was obtained from them?
   Response: The consent process relating to the conduct of interviews with individuals involved in the patients’ care is now outlined in the methods section.

5. sentence on page 185 beginning with Hence is a bit awkward? meaning is not clear
   Response: Agreed and this sentence has been rewritten.

6. line 189 sentence beginning with finding appears to support is unclear. I would suggest deleting "strong enough incentives to foster"
   Response: Agree sentence modified as suggested

Reviewer 2

7. The results section needs expansion for the reader to judge the validity of the RCA in this study and to also examine the rigour of the findings. I think the design
while appropriate needs to mention more about the limitations of RCA, and in view of its limitations for examining large numbers of admission in this way, it would be more helpful to discuss future feasible avenues for research as well. 

Response: Agreed and the results and limitations section has been expanded. Additional avenues for future research are also discussed.

8. The abstract also requires careful wording appropriate to the type of data generated and the type of study that was completed. The population in this study is not representative of all community dwelling older people or all older people.

Response: Agreed and the abstract has been modified to emphasise that due to the purposive sampling, the proportions of subjects in each category can not be confidently be ascribed which is discussed in the discussion section.

9. Abstract: Need to report that it is for “community dwelling older people” not older people.

Response: Agreed and this has been changed in the abstract.

10. The percentages of each category are not appropriate for presenting these type of data as they can give a misleading impression to the reader of the abstract only. Themes must in this sample be somewhat overlapping in some causal sense and thematic analysis presents qualitative data with the attendant limitations.

Response: Agreed and these limitations are now noted in the abstract.

11. The conclusion takes the RCA a step too far in my opinion – I don’t think it’s possible to conclude at this point that the thematic analysis can result in classifications. I do think they could assist in designing interventions somewhat, but the most relevant conclusion or next research step is that they could assist in constructing a larger epidemiological cohort study.

Response: Agreed and the abstract and conclusion section of the paper has been modified accordingly.

12. Methods - To examine whether the methodology was soundly used in this study the event flow diagram should be presented and at least one example of the cause and effect diagram should be presented. The thematic analysis needs some amplification as to how it was conducted here, to examine if it was soundly conducted.

Response: A case study outlining the steps involved in the RCA process is included in Appendix 1. The purpose and conduct of the thematic analysis has been expanded upon in the methods section.

13. Results - At least one cause and effect diagram should be presented.

Response: Agreed and an example of the analysis conducted is now listed at the end of the report.

14. Results - There needs to be presentation of quotes to support the thematic analysis component of the study. Its a RCA that used thematic analysis – hence if this is done well the reader can feel confident about ascribing a root cause to the admission.

Response: We are unable to present quotes as the interviews were not audio-recorded due to concerns regarding the privacy and confidentiality of other
patients on the ward who were not part of the study. However, extensive field notes were taken during the interviews which were utilized in the RCAs. Also (as now outlined in the methods section) the purpose of the thematic analysis was to examine patterns in the root cause statements and recommendations of the RCA rather than analyse the interview data itself.

15. Discussion - The examination and discussion of the themes needs to be undertaken in more contexts with the evidence for why older people present to emergency departments.
Response: Agreed and we have expanded the section in the discussion.

16. Limitations - A more detailed limitations section is required to address the problem and the sample chosen to examine the problem. Here you have interviewed people without cognitive impairment and those who were able to take part in an interview. As such this is not inclusive of all older people who attend emergency departments.
Response: Agreed and the limitation section has been expanded to address this issue.

I hope that these improvements to the manuscript enable it to be published in your journal. If there are further queries please don’t hesitate to contact me.

Yours sincerely,

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