Reviewer's report

Title: The effectiveness of medical assistant health coaching for low-income patients with uncontrolled diabetes, hypertension, and hyperlipidemia: protocol for a randomized controlled trial

Version: 1 Date: 14 January 2013

Reviewer: John Furler

Reviewer's report:

Thanks for the chance to review this study protocol which is well written.

I take it that as a protocol and a registered trial and indeed as one that has already completed recruitment, and as a proposal that has passed through peer review process to be successfully funded and get past ethics review that the issues here are not about scientific quality nor is there any point in to suggesting methodological changes. None of my comments are mandatory and can all be called discretionary.

My first comment relates to the fact that this a paper both reporting a protocol as well as reporting on the recruitment process (now completed nearly a year ago) and also the baseline characteristics of the study population. I don’t have a problem with that but the authors might want to change the title to reflect what is actually being reported here. It also led to some problems with the tense of the text, switching as it does from present to future to past etc as it describes the current state of the study, what is proposed, what was found so far etc. Again the reader might be eased into this if the situation was simply clarified up front about what the paper is presenting but some careful editing might also help. Alternatively it might be better and easier to simply report the protocol and present the baseline characteristics in the outcome paper.

There seemed to be a lot of repetition and some confusion in relation to inclusion and exclusion criteria on page 5 (and this links to the reporting of outcomes on page 9). The inc and exc criteria are described twice and seem to be different so this needs to be clarified and repetition avoided.

The only other comments I had relate to language and usage. The main one is that I am not sure that I agree with the authors that self management support is synonymous with health coaching (3rd para page 3). I think health coaching is a particular type of self management support which can take many and varied forms (eg long term patient centred care by a primary care provider could fit the IOM definition, as might some ongoing counselling or therapy). But maybe my view is simply pedantic. I do feel that the notion of doctors and coaches etc “activating” patients (turning them on and off?) is ripe for sustaining a rather disempowering relationship between patient and provider. My sense of this was again alerted on page 7 when the paper describes the health coach almost taking over from the patient in the interaction with the doctor. I am sure none if this is actually intended by the authors and not what actually happened its just
that language is important and can play a role in sustaining the very power imbalances that it seeks to disrupt. I also think for an international audience that some editing is needed eg what are HIPAA forms? Is “warm hand-off” really used to describe talking with a colleague about a patient? I think the term best avoided and plainer language used.

**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 interests'