Reviewer’s report

Title: Transitions of healthcare systems in low and middle income countries toward patient-centeredness

Version: 1
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Reviewer: Katrien Bombeke

Reviewer’s report:

Dear editor, dear authors

Thank you for the opportunity to review this debate article. The 4 phases framework is very interesting and provides a general overview of an important problem of interest to a broad audience. The framework is accessible even to those readers with limited knowledge of health systems development. The article is clearly written and well structured.

At the same time, this is also my major comment: the framework remains very ‘general’ in its statements. If one would like to implement the recommendations made for such a complex phenomenon, a more ‘operational’ level is welcome. More information is needed to understand to what extent the framework builds on previous research, and to clarify how this paper adds to the existing literature.

The concept of patient-centredness remains vague in the paper and seems to be used as a synonym of ‘quality health care’ in some parts. This also affects the stipulated goal of the paper, ie to present a “strategic framework to navigate the journey towards a patient-centered healthcare system”. To my viewpoint, patient-centredness can play its role in each of the 4 phases described (it is not only a goal but can also be an instrument). Next, I perceive the framework more as an ‘observational’, descriptive analysis, than a ‘strategy to navigate’. In this way, the aim ‘conceptualize how healthcare systems should be transformed systematically’ is only met partly.

I’d like to refer to a recent report from a regional conference in Dakar. Although the goals of both documents can’t be compared (a debate paper vs a critical review by 20 country delegations of the local health services organization in Africa), I do think this is a great example of how ‘patient-centred’ health care in LMIC can be operationalised in a specific way without ignoring the different contexts in which this model must be implemented.
http://www.health4africa.net/2014/01/renewing-health-district-strategy-new-africa/

To conclude, my recommendations are (major compulsory revisions)
- operationalize clearly described definitions
- more explanation of the theories that informed the framework (e.g., Omran’s epidemiologic transitions, life cycle of societies, Rayner & Lang, …)
- review the goal of this paper: the phases as such are sufficient if only a general description is aimed for, but should be made more concrete if the goal is a ‘strategic framework to navigate towards patient-centred care’
- disentangle the concepts patient-centredness and quality health care

More detailed comments are given below.

Major compulsory revisions:
A definition is given of patient-centredness but is not made ‘operational’. Are the authors thinking of an attitude, of skills such as doctor-patient communication in individual contacts, or of a health care system that is directed towards people-centred care? Individual patient-centred decisions may not be in line with guidelines developed to achieve people-centred care. It should be outlined in detail what is meant by ‘patient-centredness’, and references used to support the good effects of it should also be dealing with a similar concept. (eg for ‘outcomes’ the studies referenced to, focus on doctor-patient communication in the individual interview)

Ref 6-8 deals with ‘quality’ is this the same as ‘patient-centred’?

Box 1: implies that ‘patient-centred care’ is ‘coordinated care’ – from this it can be inferred that interdisciplinary teamwork is accepted by the authors as a substantial part of patient-centred care? These different aspects are never clearly addressed.

Minor essential revisions:
- some spelling mistakes, eg wawes (waves), sometimes a word is missing
- source of figure 1?

I wish the authors all success,
yours sincerely

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

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.