Author’s response to reviews

Title: Community Utilisation and Satisfaction with the Community-Based Health Planning and Services Initiative in Ghana: A comparative study in two System Learning Districts of the CHPS+ Project

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Response to Reviews
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Community Utilisation and Satisfaction with CHPS services: A comparative study in two Systems Learning Districts of Ghana
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BMC Health Services Research

Corrections have been made to the names of some of the authors in the revised manuscript.

Editor Comments:
Thank you for submitting your manuscript to BMC Health Services Research. The reviewers have raised a number of points that we would like you to address. With regards to reviewer 2's points, we ask that you revise your sample size calculation statement to include the power and level of significance your study intended to achieve.

Response: The sample size has been revised to include the significance the power requested

Please also carry out the below corrections:
1. Source of map - Figure 1
   Please state in your response letter whether the map depicted in figure 1 is your own or taken from another source. If taken from another source, please acknowledge the source in the figure legend, and if it is under copyright also state the written permission given to use and adapt it. If the above conditions are not met the image needs to be removed. Please note the editors may request proof of permission at any time. Should you require an alternative source you may wish to try Wikimedia Commons: http://commons.wikimedia.org/wiki/Main_Page.

   Response: The source of the figure has been provided. It is, however, not copyright protected.

2. Consent for publication
   Consent for publication refers to consent for the publication of identifying images or other personal or clinical details of participants that compromise anonymity. Seeing as this is not applicable to your manuscript please state “Not Applicable” in this section.

   Response: Not Applicable.

3. Availability of data and material
   The Availability of data and materials section refers to the raw data used in your study. By presenting tables and figures, it is not sufficient to state that all data is contained within the manuscript and additional files. Please only use this statement if you have indeed provided all raw data on which your study is based. We strongly encourage all authors to share their raw data, either by providing it in a supplementary file or depositing it in a public repository and providing the details on how to access it in this section. If you do not wish to share your data, please clearly state
this in this section along with a justification. Data availability statements can take one of the following forms (or a combination of more than one if required for multiple datasets):

Response: The data availability statement in the manuscript has been changed to “The datasets used and/or analysed during the current study available from the corresponding author on reasonable request.”

4. Role of funder(s)
Please state clearly the role the funder(s) had in your study in the "funding" section of the declarations.

Response: The role of funders has been reviewed as “The CHPS+ Project from which the present study was conducted was funded by the Doris Duke Charitable Foundations’ African Health Initiative. The funding, however, did not cover the present publication.”

5. Authors' contributions
We would also like to ask for you to provide more justification for the contributions of the following listed authors in the authors' contributions statement - EM, JK, FYA, ET, GAA, and JG, as currently they do not automatically qualify for authorship. Contribution to being responsible for a manuscript draft, alone, does not usually justify authorship.

Response: The author contribution section has been reviewed in the revised manuscript to justify and roles played by the aforementioned authors

Reviewer reports:
Amirhossein Takian, MD, PhD, FHEA (Reviewer 1):
A) Major comments:
This paper is based upon an important concept, i.e., the role of community participation in delivery of health services in Ghana, and I acknowledge the efforts of the authors for such a great research. However, the following are recommended to help improve the article.

Comment: 1. Considering the relevance of the article especially in the era of universal health coverage where role of community in health systems strengthening and service delivery is becoming increasingly important globally, I think the background (especially from page 5, line 12-45) and the discussion section is weak - i.e., there is high relevance of their work/findings for many LMICs which I think it is not addressed sufficiently. I think authors can improve the readability of the article "by enhancing the synthetization of essential information of global implications", focusing on universal health coverage and health system strengthening - i.e., the core mandate of CHPS in Ghana.

Response: The relevance of the article in the era of universal health coverage has been highlighted in the revised background of the manuscript as well as in the discussion.
2. Further, there can be a separate section for policy recommendations, preferably before the conclusion, which should be well written in a more actionable and succinct format - if appropriate in bulletin. In particular, they can divide the policy recommendations for different groups of stakeholders; i.e. politicians, MOH, academia, international donors, etc.

Response: A new section has been introduced into the manuscript on recommendations which has been bulleted as suggested by the reviewer. This has, however, been placed after the conclusion. The essence is to ensure that conclusions are drawn based on the key findings before recommendations are proffered for policy and practice. The recommendation has also been made more actionable by indicating the institutions responsible for executing the recommendations.

Comment: 3. Again, were there any limitations to your work? Researchers can also provide a section for "Strengths and Limitations to the study - I think it will interest readers to know that.

Response: A section has been provided on the strengths and limitations of the study after the discussion section.

4. The conclusion section (including that in the abstract) can be revised as well, and can be extended (in brief) to cover the importance of the study and its policy implications not only to the Ghanaian community but the global policy environment.

Response: The conclusion has been revised as suggested by the reviewer to cover the importance of the study and its policy implications not only to the Ghanaian community but the global policy environment as suggested by the reviewer.

B) Specific comments
There are other minor errors in the manuscript including typographical/grammatical or punctuational mistakes etc., requiring thorough review of the paper. Some examples can be found in the listed comments below.

Background
5. Page 4, Line 11-28: Please is it possible to limit the use of a single reference continuously (i.e., ref 4 and ref 6)?

Response: This has been addressed throughout the background.


Response: Punctuation has been double-checked and rectified.

7. Page 4, Line 54-59: Please, which year was CHPS initiated - are you sure it was in 2005? Kindly double-check with the information provided in Page 5, Line 17-27.

Response: This was a typographical error and has thus, the appropriate year added.
8. Page 4, Line 51 through to line 17 on page 5: Can authors kindly avoid the use of the same reference repeatedly? - I think there are several publications on CHPS or PHC - any justification for the use of that particular reference (ref 6), repeatedly?

Response: This has been addressed and another reference introduced.

9. Page 5, Line 17-27: Please do you mean that the concept was scaled up throughout Ghana in the year 2000, but was initiated in 2005 (line 54-59)? How possible - kindly clarify or double-check your facts to ensure consistency.

Response: This has been rectified to synchronize with the information

Discussions
10. Page 12, Line 17: Kindly double check your punctuations

Response: Punctuations have been double checked and corrections effected throughout the manuscript as suggested by the reviewer

11. Page 17, line 28: Please delete repeated words

Response: Repeated words have been deleted

12. Page 18, line 57 - Page 19, line 7: Are community health professionals mandated under the initiative to render delivery service - it being a major component of midwifery services? If no, and except under emergencies situations (like head in the vagina), can you therefore state specific midwifery services in this regard or include that per the policy guideline midwives are not stationed at CHPS compounds? Further, kindly discuss, if CHPS implementation is not the same throughout the country, hence, some CHPS compounds have midwifery units while others don't.

Response: This has been addressed in the revised manuscript (at the discussion section) and references even provided to substantiate the postulation.

Comment: Overall, I think the paper is timely and relevant. Addressing the comments can improve the novelty and comprehensiveness of the findings.

Thank you for granting me the opportunity to review this manuscript.

Response: Thank you. All comments made have been addressed.

Yanhong Gong (Reviewer 2):
1. Research significance of this paper is limited.

Response: Extensive corrections have been made in the manuscript to bring out the research significance of the paper. Specifically, changes have been made in the background, discussion, and conclusions to reflect the relevance of the study in the global health system especially in the era of
universal health coverage and the SDGs. The strengths and limitations of the study have also now been stated in the manuscript.

2. The article is too long and much information is redundant. Furthermore, the logic of this article is unclear.

Response: The article has been reviewed and some information taken out at all sections to reduce length, redundancy, and ambiguities. The background, discussion, conclusion, and recommendations have all been reworked to further elucidate the logic of the work.

3. The calculation of sample size is blurred.

Response: The sample size has been revised to include the significance the power. Details of the calculation have been provided in the revised manuscript.

4. Some important information was not presented, such as the cut-off point of the dichotomous variable of satisfied (1) and not satisfied (0) was not illustrated.

Response: The cut-off point of the dichotomous variable for the satisfaction scale has been indicated in the revised manuscript.

5. Figure 1, Figure 3, and Figure 5 are all redundant.

Response: Based on comments from the editorial team, figure 1 has rather been reviewed to increase its relevance in the work as it appropriately depicts the study site. The figures 3 and 5 are also very relevant to the result as they show they respectively show the overall utilisation satisfaction with overall CHPS services while their respective preceding figures show the individual components of the CHPS services. The figures 2 and 4 only present the levels of utilisation and satisfaction of the individual variables constituting the utilisation and satisfaction scales respectively and do not report on the overall levels of utilisation and satisfaction. As such, the figures 3 and 5 cannot be considered to be redundant.

6. There are a lot of grammatical errors.
Response: The manuscript has been reviewed and proof-read to remove any existing grammatical errors.