Author’s response to reviews

Title: Improving Emergency Obstetric Referral Systems in Low and Middle Income Countries: A qualitative study in a tertiary health facility in Ghana.

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THE EDITOR
BMC HEALTH SERVICES RESEARCH

Dear Sir,

RE: BHSR-D-19-01392

Improving emergency obstetric referrals in developing countries: A qualitative study in a tertiary health facility in Ghana.

Anita Anima Daniels; Aaron Abuosi

With reference to your editorial and reviewers comments, we present to you highlights of our above mentioned paper taking into consideration the comments and suggestions raised. All changes in the paper have been tracked accordingly.

Philip Teg-Nefaah Tabong, PhD (Reviewer 1):

Method
The reviewer commented on the choice of case study as the design of the study and recommended phenomenology. This has been addressed accordingly under study design on Page 4.

Again, the research assistants were nursing students who were trained to conduct the interviews. The authors however see less effect of positionality with regards to information given since they were not workers in that unit (Please, refer to line 8 under Data Collection; Page 5).

Also, the interview guides were not translated into the local languages but research assistants were taken through training to accurately translate the questions for consistency (Line 9-11 under data collection, Page 5). Member checking was done during data collection to validate responses given (Line 21-22 under data collection, Page 5). Interview guides have been attached as supplementary material as suggested.

Results

Background information have been provided to support all illustrative quotes. Please, check all quotations under results (Pages 7-12).

Eric Nsiah-Boateng, MPH, MSc (Reviewer 2):

1. Although, the authors in some cases, mentioned the respondent (health professional, patient or relative of the patient) in the narratives before the quotes, it would be better for them to insert the type of respondent in bracket at the end of the quotes. [Please, these have been worked on in the manuscript, please refer to quotations in the results, Pages 7-12]

2. The authors need to exercise professional judgement in the quotes to bring more clarity. For example, Page 7: Line 15-16: insert "of the hospital" after "went to the back" and on Page 10; Line 44: change "gate" to "entrance of the hospital"; and on Page 10; Line 58: insert "teaching hospital" after "Korle-Bu". [Please, all these have been worked on and tracked in the manuscript].

Specific comments

1. Page 2; Line 24: Use low, middle and high income countries definition for "developing and developed countries" as recommended by the World Bank. E.g. low and middle income countries (LMICs). Kindly effect this change in the entire manuscript. [This has been done, please].

2. Page 2; Line 53-54: "(1) delays in recognizing danger and deciding to seek care in the household" sounds ambiguous. "...in the household" can be deleted to bring clarity. [Correction has been made and tracked in the manuscript, please].
3. Page 3; Line 41: insert abbreviation (KBTH) after Korle Bu Teaching Hospital [Corrected, please].

4. Page 4; Line 10-11: provide reference for ".....80% of referral cases resulting in maternal deaths each year". [Reference has been provided, Line 6; Page 4].

5. Page 4; Line 42: change IDI to IDIs [Change has been effected and tracked].

6. Page 2; Line 24: Use low, middle and high income countries definition for "developing and developed countries" as recommended by the World Bank. E.g. low and middle income countries (LMICs). Kindly effect this change in the entire manuscript.

7. Page 2; Line 53-54: "(1) delays in recognizing danger and deciding to seek care in the household" sounds ambiguous. "...in the household" can be deleted to bring clarity.

8. Page 3; Line 41: insert abbreviation (KBTH) after Korle Bu Teaching Hospital

9. Page 4; Line 10-11: provide reference for ".....80% of referral cases resulting in maternal deaths each year"

10. Page 4; Line 42: change IDI to IDIs

11. Page 5; Line 45-50. This information is captured under the "Data collection" section. Besides, the secondary data were only used for literature review. Therefore, the "Sources of Data" section can be deleted.

12. Page 6; Line 22-26: This section can be deleted and added to the "Ethics approval and consent to participate" section on page 14 [Deleted please].

13. Page 7; Line 9: "Similar sentiments were......." is not part of the data extracts or quotes. Kindly remove the italics. [Italics removed].

14. Page 7; Line 40: change "hydrate to "hydrated" [Corrected]

15. Page 9; Line 38: change "of" to "for" after "ask"[Corrected]


17. Page, Line 23-24: change "Ghana Health Service facilities" to "public facilities"[Corrected].

18. Page 14; Line 19: Define GHS and CHAG [Definitions given].

Patrick Lukulay, Ph.D. (Reviewer 3):
With respect to modification of the topic, ‘Systems’ has been added to capture the broad array of issues affecting emergency obstetric referrals in developing countries.

Again, all the headings under results have been re-written to reflect major and sub-headings [Pages 7-12].

Inadequate Use of Ambulance Services under Results has been changed to read Availability of Ambulance Services.

Poor accessibility and safety have also been captured under Availability of Ambulance Services as suggested [Refer Page 7].

Again, Type I, II and III delays have been defined under the background [Page 2, 2 paragraph, lines 6-9].

Again, the comments on the authors assertion that challenges identified are limited to the referred facility has been revised [Refer to study strengths and limitations, 2 paragraph, lines 3-7, Page 14].

Lastly, though training may have accounted for some of the challenges with the referral system at both referring and receiving hospitals, the authors did not explore that factor in this study.