Author’s response to reviews

Title: The evolution of the National Licensing System of Health Care Professionals: A qualitative descriptive case study in Laos

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Reviewer 1

1.

Q: Re lines 10-11 page 8 re the national examination for midwives. How is the examination developed? What is the exam format and it is benchmarked against standards set by the International Council of Midwives (ICM). Specifically how are in-country quality standards being set and monitored locally and aligned globally.

A: The midwifery National examination was implemented in 2010 under the supervision of MOH. Examination candidates must have completed a formal midwifery education program and must have handled at least 100 cases of ANC and 20 cases of delivery. The national examination includes both a theoretical test and a practical test (OSCE) based on the National midwifery Education standard established in accordance with ICM guideline. (I added in thee page 8)

Q: Re lines 18-33 page 8 about the compulsory placement of new nursing graduates in rural areas for 3 years question arises re the support provided to these new graduates, specifically, if
there is any graduate internship scheme in place to support the graduates and how is the quality of the practice supervised?

Lines 19 & 20 page nine goes on to speak of the strategic focus on shifting from quantity of HRH in rural areas vs improving the quality of service provision but is silent on what interventions/initiatives are envisaged to achieve this shift?

A: • Although Laos currently has no supervisory program for new graduates with 3 years of practical experience, they plan to develop a program with target goals, evaluation criteria etc. (I added in the page 9)

  • It is explained in the key event, for example D).

Q: Re lines 26-29 on page 11 and the need to harmonize strategies with existing policies in Laos, what about the need to align regionally in support of the desire for regional licensing reciprocity and also alignment with global quality standards in HRH education and practice?

A: • In my personal opinion, Laos needs to develop more highly skilled medical professionals in line with regional and global standards. In addition, Laos should continue to improve training for community health workers who work in rural areas, especially with ethnic minority communities.

  • I revised page 12 as Laos is in the process of developing a licensing and registration system to ensure the quality of healthcare professionals who meet the regional standards of Mutual Recognition Agreement. On the other hand, one disadvantage regarding licensure is that it creates stringent barriers to becoming a health care professional. In order to supply sufficient numbers of a community health workers, future licensure should conform to existing policies in Laos.

Reviewer 2

Q: The manuscript summarizes a very important set of actions regarding human resources for health development. The reviewer is not completely sure about the appearance of the explicit content "registration and licensure" and the "National Licensing and Registration System for Healthcare Professionals in Laos" along the text. The title indicated an overview of the registration system, but no description of the registration system could be found in the text.

A: I added a definition of the licensing and registration system in the page 10 G).
Q: The Background of the review is satisfactory, however the Methods section lacks some basic information. The authors conducted a document analysis, but we do not know how many laws, regulations and relevant reports were taken into consideration. There is no information about the timeframe, what does the "past few decades" cover, which documents were paid attention to. The authors state that interviews were carried out with key informants. More details are required about the number of interviews and the role or status of the key informants, and the selection criteria.

A: Prior to 2005, no specific action had been taken to develop a licensing and registration system in Laos. In addition, obvious problems resulting from the lack of regulation were not well documented.

Q: The authors state the "introduction of a systematic framework for licensing is a crucial step" and "systematic development" was carried out by the MOH, however in their line of actions it is not confirmed that systematic or strategic approach was followed. Many significant topics are presented in the text, but the structure or the systematic logic is lacking. For example, we can read about the migration of health professionals, which is doubtlessly an essential theme in the field, but no data or evidence is shown about the volume or trends of mobility. Therefore the reader cannot guess the relevance of the phenomenon. The authors state on page 7 that "In addition to facilitating the cross-border movement of professionals" but little evidence or information is provided about the reasons for facilitating the cross-border movements in the country context. Of course free international movement is beneficial for many reasons but we do not get informed why it is important for

A: · I deleted the title of A) Systematic development ~.
· I reorganized the result section more logically.
· The specific number of migrant healthcare professionals in Laos is unknown; because MOH still doesn't have the capacity to track the number of migrant workers. However, the numbers of health professionals from Thailand, Vietnam and China has increased recently due to the growth of foreign funded private clinics Moreover, there are also a few healthcare professionals from developed countries who mainly engage in humanitarian aid work for NPOs.

Q: Laos. Does the domestic health workforce rely on foreign professionals in different health professions or do they need to calculate foreign professionals in order to sustain the operation of their health system?
A: Due to a limited absorption capacity for new medical graduates in the public health sector, Lao might have no need for foreign healthcare professionals aside from those who work in NPOs.

Q: Another important issue is the education: Professional competencies were established for 3 professions but little we know about the selection of these professions, since the law regulated 16 professions (as stated on page 5). National examination was brought into focus, however no information is known what that really means and how it is constructed in the country context.

A: As I mentioned in P7 A), Because ASEAN MRA targets Medical doctor, Dentists and Nurses, Laos has made it priority to develop standards of professional competency for these occupations.

Q: The reader can suppose that geographical distribution causes difficulties but no data is presented. Page 8 attempts to start dealing with the numbers, but some basic information is missing. We read about the numbers of professionals between 1988-2009. The numbers are important but no information is available about the regulations before 2005. The consistency of the information provided could increase the quality of the paper, namely, number of different professionals in different years, territorial distribution and belonging regulations. Now we see only "the total number of health workers" in the text that might cover all 16 professions? Figure 2 shows clearly what should be written in the text (the quote for the table is misused).

A: I included a comparison HRH development in Cambodia and US because this can facilitate our understanding of Laos current position and the challenges that must be faced and overcome etc.

Although the information I have provided is insufficient, because it is not a global comparative study, I think these examples will be informative for the readers.

Reviewer 3

Q: It can be a challenge to create a sense of life in a paper that draws primarily on documentary materials. You mention in your methods that you undertook interviews, but the documentary materials feel like they overshadow the interviews and your findings.

A: Please check the revised method
Q: The section I enjoyed most is in 1 - the Key Events as it has a sense of movement. The discussion section would be enhanced by aiming to create a similar sense of movement - whether of events, or perhaps by focusing more specifically on the actions that different policy actors (e.g. Ministry of Health and the Healthcare profession council) are or need to pursue.

A: I reorganized and added some information in the Discussion section.

Q: I was also curious as to whether there were organized groups of health professionals or perhaps health educators (e.g. Colleges and Universities) involved?

A: As described in the paper, although medical council has a official responsibility for the development of a licensing system, the medical association has none.

Q: The paragraph beginning on Line 41 on page 4 was a helpful overview of some background information. However, given the later reference in the paper to private hospitals it would also be helpful to include a description of the relative activities or % of health care delivery in Laos that is delivered in this way. Perhaps also to the multi-ethnic communities within Laos (as referred to in the conclusion).

A: Even though there are no statistics that indicates the exact number of private hospitals, I have added this information in the page 9.

I have also add some information about ethnic minorities, in the discussion section, in the page 12.

Q: The sentence beginning on Line 50 with However - is a little confusing, and you may wish to consider a stronger statement beginning with "Laos lacks the mechanisms......, and then include the elements you have listed.

A: It was changed according to your recommendation.

Q: Page 5, Line 5 - you may wish to simplify this line be replaced 'ascertaining whether' with 'determining if'

A: It was changed according to your recommendation.
Q: Table 1 is very detailed, and the journal would need to advise on its suitability. It would be easier to read in a web page than the smaller size of a printed journal.

A: We would like to ask the editorial office to format this.

Q: Page 10, Line 6 - there is mention of an 'observation' about the overlap of legal instruments - is this something that has a specific reference/source or drawn from your interviews?

A: The joint analysis by the authors revealed no overlap in the collected legal documents.

Q: Page 7, Line 49 - you may wish to simplify by removing "in particular, that for nurse was established as" and add a comma to the previous sentence and add' Including a "National

A: The sentence was deleted.

Q: Page 8, Line 14 - I was not clear whether newly recruited civil servants would be all trained health practitioners, or those of certain groups (e.g. medical practitioners and nurses), or a small number who had been recruited as civil servants. It would be appreciated if this could be clarified as this section is especially interesting.

A: I modified as "for newly employed healthcare professionals in the government sector"

Q: Page 10, Line 37 - I think "sort of" may have been text from a previous version as it is not required for this sentence to be clear.

A: "sort of" is substituted to "There seem to be relatively few overlaps"

Q: Page 11 - some of the content you mention in the conclusion - i.e. Overseas medical graduates, national examination for ethnic minorities and level of expertise within the same profession' is likewise interesting, and I did wonder if this may be better positioned in the discussion to highlight that there are challenges that are specific to many other countries and others which are perhaps less universal. e.g. specific arrangements for ethnic minorities.

A: It was moved from conclusion to discussion section.
Q: I could not locate a mention of Figure 3 in the text of the article, and the categorizations would require some additional explanation.

A: Figure 3 is located on page 10 "Ten-year strategy for licensing and registration of health care professionals"

#Reviewer 4

Q: The abstract results state that Laos is in the process of transitioning the focus of its HRH policy and that the six key events listed are key events in that transition. In the article text (p. 5) the key events are presented as key events of the overall evolution of the licensing system.

A: Abstract is modified as "The key events in the development of the licensing and registration system" deleting "transition".

Q: The three points in the results section were not introduced and therefore I found the results section to be informative (highlighting the key events, etc.) but I had a hard time following the flow and message of these points. I think that the results need a little more hand-holding for the reader.

A: We changed the structure of results

Q: (Page 9 - line 43) - I don't feel like this paper has shown the development of a regulatory framework so much as outline key events in this process and then talk about the plan to continue into the future (the 10 year plan).

A: To clarify, this study actually describes how Laos laid the foundation for the licensing system and plans for the future and I inserted this sentence in the page5.

Q: (Page 11 - 14) - The first line of the conclusion "The process of policy evaluation…has been described", it doesn't feel like a licensing and registration system actually exists in Laos yet. What was described was the ongoing development towards this goal and this paper highlights the challenges and steps taken but not a lot was said about what licensing providers will actually look like in Laos moving forward.

A: I changed the first sentence of conclusion as "The process of ongoing development towards policy evolution for a licensing and registration system in Laos has been described."
Q: The article needs to be revised for writing clarity and flow. There were many long and confusing sentences.

A: It was already edited by an English native speaker.

Q: The acronym HRH is being used to refer to different things in the article, which is confusing. For example, p. 4 line 34 - …the development of an HRH system, p. 4 line 37 - …that enable the sustainable production, deployment, and retention of HRH.

A: I changed the first sentence of the conclusion to "The process of ongoing development to described."

Q: Title The title says "the development of a national…" but the aim of the study is to examine the evolution of the HRH policies.

A: I changed the title to "The evolution of the National Licensing and Registration System for Health Care Professionals: A case study in Laos"

Q: Abstract- although clear after reading the article - it was a little confusing prior to reading the article if "improving the quality of service provision" was referring to the service provision in remote areas or overall service provision.

A: I changed to "improving the quality"

Q: 56 - 2) the establishment "and of" responsible (typo?)

A: I changed to "the establishment of"

Q: Coming from a country with licensing and registration of healthcare professionals some additional background information as to how many countries are currently working to establish licensing and registration would be helpful. This would provide some context and show the relevancy of this topic.

A: I only added information about the situation in South-East Asia on which I could get official information through my laotian co-authors.
Q: p. 4; 32 - Sentence starting with "According to the "House Model" is a long, confusing sentence. Revise.
A: I have amended the draft as per your comment.

Q: p. 5; 5 - "Over the past few decades" but it has only been one decade since 2005.
A: I have amended the draft as per your comment.

Q: p. 5; 6 - "Few studies" are there any studies? Please cite to show what research has been done.
A: I have amended this to "No studies" as we couldn't find any studies.

Q: Very short methods section. Would like some additional information about the data collection and analysis, e.g., where did they find the documents? How did they identify interviewees? How many people were interviewed? What interview guide did they use? How was the data analyzed?
A: The method was modified as per your comment.

Q: Results; They are providing the chronology of the HRH (policies) and related issues in developing the licensing and registration system, but in the background it said that it was highlighting a framework. If the chronology is providing the context/baseline for the framework this should be clear.
A: I modified the background and abstract, as "A qualitative case study methodology was applied to document and describe to examine how Laos laid down the foundation for the development of a licensing and registration system."

Q: The results have not been presented clearly. On page 5, line 54, it jumps into the list a little abruptly. It says that the chronology and related issues are being presented but does not introduce the three points and what these points contribute to our understanding of this chronology and evolution/development of the system. The introduction to the key events on line 57 is helpful; something like this for the three points would be helpful as well.
A: The result structure has been changed to chronological order as per your comment.

Q: p. 6 2 - have dates clearly associated with these key events in the text - the table was helpful but I felt like reading this I couldn't really put things in order and understand the progression without seeing the relevant dates.

A: I rearranged the key events according to the year it occurred.

Q: p. 7 Paragraph C (line 7) - It would help if there was a clear distinction between the two issues around international qualifications: Laotians going abroad and having international practitioners in Laos. They are two separate thoughts but are not clearly delineated in the text.

A: For a country like Laos, MRA leads to an increase in inbound health care professionals and forces member states to reform their regulatory frameworks by establishing procedures to regulate foreign health care professionals. In this section, the first paragraph explains about laotian going abroad to seek employment and that the numbers and impact are not problematic. On the other hand, the second paragraph explains about international practioners who flow into Laos. This potential problem is expected to be more significant than the former one.

Q: 31 - "current policies" - is this the new policies? Or ones that still need to be changed.

A: This is a new regulation. I modified the sentence.

Q: Paragraph E (line 14) - some clarity is needed in this paragraph. A few issues are being raised and I'm not sure what is highlighted as the solution. It says that there are shortages of providers in rural areas, but that there are too many nursing graduates and not enough positions. Are these two separate issues? Also, it doesn't look like the 3 years are compulsory but instead provide an advantage to those who elect to do it?

A: The paragraph has been amended as per your comment.

Q: 29 - all "civil servants" or just those in health care? Also, this language is not consistent with the figure 1 "government servants".

A: It means government servants who are employed in the health sector.
Q: 45 - Can "official identity" be elaborated on? What does that mean? What does it give them? Why do they need it to work in private hospitals but not all practitioners need it?

A: I modified to "official recognition for a health care practitioner who is not registered in the government servant registry to work in a private health care facility."

Q: 45 - "The requirement to hold a professional certificate also affected the necessity for the urgent development of a licensing and registration system for health care professionals in Laos." - How?

A: I modified F) in the page 9 to answer to your comment.

Q: 51 - 2. Header - "policy shift from strengthening the deployment of health workers in rural health care to improving the quality of health care professionals" - it wasn't clear in paragraph E (p. 8 - line 14) that the deployment of providers to rural areas was deterring from the end goal of registration and licensing and that a shift away from it needed to be made.

A: Due to the limited numbers of job opportunities and high numbers of graduates, this mandate of three years work experience in rural areas is not expected to have a detrimental effect on the goal of registration and licensing. I added

Q: p. 9 8 - The "health sector reform framework" and MDG targets came out of no-where as a priority in this section. Maybe they should have been introduced earlier to provide more context to the whole article? Did the key events from point 1 lead to those initiatives being created?

A: I changed the structure placing "the health sector reform framework" between "chronology" and "key events".

Q: 50 - the example of the licensure in the US does not contribute anything to this discussion - would recommend deleting.

A: I included a comparison of HRH development in Cambodia and US because this can help our understanding of Laos' current position and the challenges that must be faced and overcome etc.
Although the information I have provided is insufficient, because it is not a global comparative study, I think these examples will be informative for the readers.

Q: p. 10 5 - this paragraph jumps from saying what motivated the change to what is still needed. To me the thoughts seem unrelated and shouldn't be connected with a "moreover". If they are connected this is not clear - consider revising the sentence.

A: I modified as follows, "Another factor is the increasing demand for control over private health care services, which have less administrative oversight [34] due to the international free flow of health services led by the ASEAN Economic Community."

Q: 19 - "to achieve MDGs" - you didn't really highlight what that includes, just its different phases.

A: I modified to "MDGs goal 4 and 5"

Q: Figure 3 is listed as Figure 1 in the text.

A: It has been modified.