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

Q: Re Key Words. It is recommended that key words are drawn from the formal listings in a global library indexing system such as the MeSH Browser

A. I drew the following keyword form MeSH and modified; Health policy, licensure, licensing, health workforce, Laos

Q. Re Method. The outline of methods in lines 23-35 of page 5 does not contain sufficient information to reassure the reader re the quality and rigor of the research process. Critical information pertaining to the initial research question/s, the type and number of interviews, description, profile and number of participants is missing. Stakeholder interview data is not adequately reported. It is recommended that authors refer to publications related to Qualitative Case Study Methodologies and the COREQ Consolidated Criteria for reporting Qualitative Research before resubmitting this work for publication.

A. Method was revised as per your comment and another reviewer's comment.
Q. Ethical clearance. Data collection includes interviews with key stakeholders, however, no ethical clearance was obtained and is noted as non-essential (see lines 35-41 page 11). This study goes beyond document review alone, it is noted as qualitative case study including stakeholder interviews. Appropriate publication standards require ethics clearance for all research involving human participants.

A. I added ethical consideration in the methods as follows. “Interviewees agreed upon the conditions to remain anonymous, and that confidentiality of information be rigorously adhered to” . The study was conducted according to the “Ethical Guidelines for Medical and Health research involving a Human subjects” issued by Japanese government.

#Reviewer 2

Background;

Q. The first paragraph clarifies the definition of licensing, but as reading the manuscript, there is a clear difference between being licensed and registered when considering practice. It would be more exact to see the meaning of licensing and registration, since they cover slightly different concepts, and whether the professional is allowed to practice or not.

A. I fully agree with your comment. I just focus on Licensing and deleted registration.

Q. At the end of the paragraph 1, a linking sentence is missing. For example: Not only the professionals' competences and knowledge should be regulated but also the quality and safety of care needs to be ensured. A. I added your suggested sentence in the end of the paragraph 1.

Q. The second paragraph quotes WHO but does not refer to WHO Global Strategy on HRH, which is an essential document when developing national level policies. This document also calls the attention to the development of HRH data (objective 4). Also several international documents contribute to realizing more systematic actions regarding HRH policies, HRH data and registries, see the findings of the Joint Action on Health Workforce Planning and Forecasting programme.

A. I modified utilizing WHO's global strategy as reference.

Q. The third paragraph focusses on Laos, that is, brings the attention to the national environment. Line 45-46 states "having only 5.4 and 1.3 health workers per 1000 population" does not help the reader to understand the context. It would be nice to see what this indicated "only" means and
what kind of professionals "health workers" we talk about hereby, namely some comparison in the average numbers of the same profession in Southeast Asian region.

A. I modified as per your comment.

Q. The end of this line "As a result,.." stays vague, what results are we catching here?
A. It was wrong conjunction. I modified to “Therefore”

Q. Another remark, the authors put some examples of the US, Cambodia and Japan to the discussion part, but they have better place in the background part.
A. I still keep a comparison of HRH development in Japan and US in the discussion section, because this can help reader’s understanding for future impact caused by a licensure, prospective of licensing system, and Lao’s advantage in system development. However, I deleted the name of Cambodia according to other reviewer’s comment.

Results:

Q. Chronology of the most significant regulations and event are listed among results. The starting point 2005 is clearly set. Main paths, ideas - lets say goals - inequal distribution of workforce, recruitment and retention, access to care and UHC appeared in the text, but some listing or systematic approach could make it more easily understandable. The biggest concerns are that "comprehensive developmental strategy" and the licensing and registration System is quoted many times but we only read about closely HRH strategy on page 10, section G. If Im not mistaken that is the strategy and the core result of the country in this field. Authors suggest that the line of actions - or rather the regulations - was built carefully, but no strategic planning (setting goals, determining actions, mobilizing resources, environment analysis, preparing action plan etc.) appears. The elements of the comprehensive strategy cannot be captured. The most informative part is G, where we can get familiar with the strategy, promised from the beginning of the manuscript. Figures have improved a lot and they serve getting deeper insight to the current national situation.
A. I newly inserted Table3 in the section G to explain overall strategy for licensing system development.
Q. If key events would mean the key elements of the strategy, they rather summarize 1) education, certification and training strategy, and 2) establishing the responsible body (or bodies since one office and two councils are listed).

A. Key events mean “key events that happened in the chronology of policy development for a licensing system” and these are not same with key elements of the strategy.

Summary

Q. The key events in topics of education, compulsory practice and establishing responsible bodies do not necessarily equal with national licensure and registration system and strategy in my view.

A. Authors have a different opinion from what you mentioned. We think the objective of a licensing system is to enhance quality of HRH. In order to achieve this objective, a comprehensive policy to develop quality HRH including education, clinical practice and licensure is necessary.

Q. The question still remains what is the system of licensure and registration in Laos? What system did the events and regulations between 2005-2015 result in? I do think that the achievements of the country are not described appropriately.

A. A licensing system of Laos is still under development. Main achievements of Laos between 2005-2015 in terms of a licensing system is to obtain the direction for future.

#Reviewer 4

Q. typo - remove "to examine"; Results: typo - the establishment and of responsible (remove and); 6) typo - the introduction of (a) requirement (include a).

A. I modified as per your comment.

Q. p. 6, line 3: this sentence is confusing

A. I modified as "Development of legal framework is started from the core health law, and followed by sub-decrees and other relevant legislation"
Q. p. 6, line 22: spell out MOH - you have not spelled it out in the text yet (only in the abstract)
A. I spelled out MOH as per your comment.

Q. line 32: This was some of my feedback on the last round - just mentioning targets 4 & 5 of the MDG doesn't tell me what those goals are, why it is important, or how it relates to this article. Please elaborate. I needed to Google the goals to understand the context while reading the article.
A. Laos actually has paid huge effort especially to improve Maternal and Child health targeted in the MDG 4; reduce child mortality and MDG 5; improve maternal health. However, I changed the sentence as “For reaching health related Millennium Development Goals (MDGs)” to describe the situation simply because detail of MDG 4 and 5 are not relevant to this article.

Q. p. 7, line 38: revise sentence confusing
A. I modified the sentence as “For example, certification of foreign health care workers has recently been required by the Council for them to work in private hospitals.”

Q. p. 8, line 21: if MOH is spelled out earlier it can be deleted here.
A. I modified as per your comment.

Q. p. 10, line 21: Why is Japan being mentioned here? Maybe provide some context.
A. I deleted the name of Japan International Cooperation Agency, because it isn't important information.

Q. Section G) Interesting! I wonder, what happens to all the current practitioners, will they be required to go through this licensing process?
A. According to the strategy, all the current practitioners will be required to obtain a professional license in future. However, it will take long time to completely issue the license.

Q. p. 12, line 11: you just mention Cambodia here, but then refer directly to the situation in Laos (multiple regulatory bodies). If you want the comparison maybe mention what is happening in
Cambodia. As is I feel like you could simply say, the existence of multiple regulatory bodies... makes the system complex (mentioning that that is also happening in Cambodia doesn't add anything).

A. I deleted the name of particular country "Cambodia" from the sentence and I modified it to as "another country". Because, I would like to highlight comparison with the current situation in Laos.