Reviewer's report

Title: Cambodia's health professionals and the ASEAN Mutual Recognition Arrangements: Registration, education and mobility

Version: 0 Date: 09 Sep 2018

Reviewer: Alyson Smith

Reviewer's report:

I am concerned there are a number of factual errors in the content of this paper as outlined below. It appears that key informants are focused on describing the historical approach to regulation of health professionals and therefore overlooking the impact of the changes under the new Law on Regulation of Health Practitioners (Nov 2016). This is compounded by terminology (key words and abbreviations) not being used consistently through the article.

The use of the term "registration" with "and regulation" in the title and throughout the document is erroneous and requires amendment for clarity. Registration (and licence to practice) is one of a number of key functions within the framework of health profession regulation. This is important when identifying the three key themes - is it Registration or Regulation as the first theme?

The use of the term "professional training" in the text rather than "professional education" creates further confusion and needs to align with the use of "education" in the title to avoid confusion with post-graduate training or continuing professional development activities.

There are some inaccuracies in the Abstract which are also in the body of the document.

1. The statement "recent legislation makes registration compulsory for the three professions" is incorrect. Registration has always been compulsory under both the previous and the new law. It is the enforcement through fines and/or imprisonment that is now in the new law to ensure all practicing health professionals hold "initial registration as a health professional" and "a renewable licence to practice as a health practitioner".

2. It notes dentistry and nursing introduced continuing professional development initiatives as a positive reinforcer for registration. However, it omits the fact that the Medical Council of Cambodia (MCC) initiated this approach and that the Dental Council and Nurses Council subsequently adopted the MCC approach.

3. The statement regarding education courses being longer than regional counterparts is not well explained. A mandatory Foundation Year for all health professional students is included in each
health profession course and these topics are not profession specific making a four year Bachelor degree in Nursing actually a 3 year degree. This could be further explained at Page 11, Line 38.

4. The government of Cambodia is known as the Royal Government of Cambodia (RGC)

Keywords: Page 3, Line 27 - Mutual Recognition Agreements not Arrangements

Page 8, Line 49-59 is incorrect. Regulation of health profession education through accreditation of public and private education providers and approval of pre-service (undergraduate) curricula for doctors, dentists and nurses is the shared responsibility of the Ministry of Education, Youth and Sport (MoEYS) and the Ministry of Health. The five health profession Councils - Medical Council of Cambodia (MCC); Dental Council of Cambodia (DCC); Cambodian Midwives Council (CMC); Cambodian Council of Nurses (CCN); and Pharmacy Council of Cambodia (PCC) do not have legislative authority regarding health profession education development and approval. The new law on Regulation of Health Practitioners (Nov 2016) provides for Councils to set the Scope of Practice for each health profession and establish the competencies required of new graduates but does not give the authority to approve pre-service (undergraduate) curricula. Each Councils involvement is at the discretion of MoEYS and MoH.

Page 9, Line 17-29 states midwifery is subsumed in the nursing agreement. However, it is not explained that Cambodia is distinctly different in that it recognizes Nursing and Midwifery as two separate health professions like some other countries with discrete pre-service education and two separate regulatory Councils (CMC and CCN). Midwifery is not a subset of the Nursing Profession.

Page 10, Line 7-37 connects CPD as a incentive for registration which historically was the case under the previous law. However, under the new Law it is now an essential criteria for demonstrating continuing competence as a health practitioner and renewal of license to practice.

Page 12, Line 7-8 - recommend an alternate word be chosen for "anxious" when applied to the Ministry of Health (MoH)

Page 14, Line 17-25- I am unsure if this statement is correct and believe the source (002#) should be checked. It states [Midwives] are the weakest of all professions ...... and not on the radar for health donors and yet midwives are well supported in Cambodia through donor funded maternal and child health programs e.g. USAID, UNFPA, Marie Stopes, GIZ, WHO etc. I believe this statement more accurately reflects the position of Nurses not Midwives in Cambodia.
Page 17, Line 1 - May be helpful to explain in the article and the conclusion the impact of unreliable institutional assessments relates not only to the health profession courses but also to the standard of secondary education in Cambodia.

Page 17, Line 46 - I am unclear where the term CPE, Continuing Professional Education derives from. The term Continuing Professional Development (CPD) is the current terminology.

Page 17, Line 60 - Suggest inclusion of five health profession Councils names - Medical Council of Cambodia (MCC); Dental Council of Cambodia (DCC); Cambodian Midwives Council (CMC); Cambodian Council of Nurses (CCN); and Pharmacy Council of Cambodia (PCC).

Page 18, Line 5 - The Nursing and Midwifery Education Society is identified, described and listed but not the other professional associations for medicine, dental and nursing.

Page 19, Line 15 - Suggest Peter Miller’s title be included in the Acknowledgement - The Human Resource for Health Consultant for the Office of the Representative of WHO, Cambodia...........

Table 1

1st column, 4th row - Technical School of Health Care should be Technical School of Medical Care (TSMC)

3rd column, 1st row - Cambodian Health Profession Councils

3rd column, 2nd row - Medical Council of Cambodia should read Medical Council of Cambodia - National as opposed to Regional MCC and Provincial MCC

3rd column, 5th row - Nursing Council of Cambodia should read Cambodian Council of Nurses - National

3rd column, 6th row - Midwifery Council of Cambodia should read Cambodian Midwives Council - National

3rd column, 3rd & 4th rows - National should be added to PCC and DCC.

3rd column, 7th and 8th rows - should include the abbreviations for each of the five health profession Councils in order of their establishment - MCC, DCC, CMC, CCN and PCC.

Figure 1. Thematic Map for analysis
Theme 1 Health Professionals Regulatory Framework does not provide clarity. I believe it would be better for the Theme 1 title to be Health Professions’ Regulatory Framework than Health Professionals’

Regulatory Framework and the map re-engineered to reflect the following.

The entities with the legislative power and authority for health professions' regulation or regulators should be clearly identified i.e EDUCATION ACCREDITATION & CURRICULA APPROVAL- MoEYS & MoH (mechanism is the ACC); REGULATION OF HEALTH PROFESSIONALS - MCC, DCC, CMC, CCN, PCC (mechanism is registration, licence to practice; professional codes and standards; scope of practice, investigation of complaints with protective or disciplinary sanctions; monitoring and compliance.

Local and foreign health professionals; professional associations and NMESC are not legal entities for regulation. They are stakeholders of the regulators and advocates for the profession.

Theme 2 needs to be further refined to focus on Accreditation of Education Providers - public and private and Approval of pre-service curricula for the National Exit Exam and subsequent registration by each health profession Councils.

There is duplication of boxed titles - Institutions x 2; Curriculum x 2

Theme 3 - Mobility of Health Professionals

Should Student movement” actually be "Graduate movement or registered and licensed health practitioner movement?"

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