Reviewer’s report

Title: Inadequate programming, insufficient communication and non-compliance with the basic principles of maternal death audits in health districts in Burkina Faso: a qualitative study

Version: 0 Date: 07 Jun 2017

Reviewer: Bettina Utz

Reviewer's report:

Thanks for letting me review this manuscript on maternal deaths reviews in Burkina. Overall a topic of importance however the manuscript in its present form needs further revision before a final conclusion regarding publication is possible.

First of all: The manuscript need to be reviewed by a native English speaker or professional language service as throughout the document there are various language issues.

Regarding the following points the authors need to clarify:

* Line 52/153: Natural conditions? What do you mean with that?

* 53 Implementation or quality?

* 62: Phrase not clear "in function of events, so not systematic according to the programming."

* Table 1: in parts not readable; mix of French and English "1 an"; period of training > <2014?

Do you mean year of training?

* 126: MAD used for the first time- abbreviation needs to be indicated before

* Wording issues, e.g. 135 "to die by maternal mortality cause when having age of childbearing"
* 139: Actually it was MDG 5 not 4

* 205: All staff or staff involved in MDA?

* 272: what do you mean by skilled actors?

* 318/19 sentence not clear

* 357 audit reports double

The period of data collection is not always specified:

87: The summary in french is different from the abstract- see dates "enquête s'est déroulée du 27 Avril au 30 Mai 2015"- in English only mentioned May 2017 ( see also 222: on May 2017-period not specified)

Methodology

In the methodology section 112/182 it is stated that this is a qualitative study: but data extraction and a structured survey is not qualitative.

192: Please clarify sampling: what do you mean by " based on the notification of maternal deaths, on statement in reviews in 2014"?

Also more information and clarity is required for the data analysis 229-232

222: data collection by "physician with "a lot of":very vague

224: collection of the general data that guided the selection of respondents: so what were the selection criteria of respondents???
239 kept in a place? not clear: under lock and key?*

246: How many health facilities? Average number of deaths per facility?

248: provide not only % but also a number (n=)

References:

1/3 of references of Ministry of Health??

Discussion

The discussion needs to be improved. Although the findings are a bit limited, there are areas that can be further discussed and the authors, particularly those involved in MDA in their services could come up with more concrete ideas how the system of MDA in Burkina Faso may be improved based on the results

Discussion: 459 "The environment of small numbers of health care providers, the relative small number of deaths … were announced as predisposing factors…Therefore, for better compliance with the principles, there is a need for capacity building."

Even if you build capacity, one of the difficulty you mention is the composition of MDA teams. Who do you train? One of the problems is the low number of MD in regional hospitals. What other forms of audits could you do to have a regularity in auditing and thus keep up the skills?

463: Supervision: Who will supervise? How often? How will this be financed?
Level of interest
Please indicate how interesting you found the manuscript:

An article whose findings are important to those with closely related research interests

Quality of written English
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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