

Reviewer's report

Title: Major surgery delegation to mid-level health practitioners in Mozambique: health professionals' perceptions

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Reviewer: Pascoal Mocumbi

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The training of the tecnico de cirurgia (TC), as a new professional cadre of the Mozambique health system to deliver basic comprehensive services, mainly in rural areas, was introduced in Mozambique in 1984. The TC training comprises two years of lectures, practical sessions in the Maputo Central Hospital followed by a practical internship lasting a year at a provincial hospital. The TC is then able, under supervision of a specialist, to perform surgical work in rural areas and address three priorities: pregnancy-related complications, trauma complications, and emergency inflammatory conditions. Sixty-two TCs have qualified since the start of this training to date (2006) and fifty-one are still practicing, mostly in rural areas. Two important published studies regarding these professionals have shown the quality of their work to be very good. Nevertheless there are still questions among professionals about the competence of the TC's, and there are problems with TC morale, relating principally to professional recognition and compensation. The study under review examines the opinions of health professionals, and particularly the views of medical doctors and maternal & child health nurses, about the capacity and performance of the "tecnico de cirurgia".

The study is well defined and focused on the views of a specific group of health professionals. It elicits the general opinions on the role played by the TC, the adequacy of their training, career progression and remuneration, and their relationships with health facility teams.

The study may be replicated, with appropriate adaptations to the specific context, based on the clear description and well presented details.

It is not easy to quantify perceptions, but the results and conclusions clearly show the relevance of the TC in providing surgical emergency care delivery in rural areas where their retention has been recognized as better than that of medical doctors. However, to better contribute to establishment of policies and programs aimed at integrating access to surgical care within preventive health care programs, collection of surgical data and cost estimation is also needed. Equally important is the characterization and assessment of medical-model influence on reforms by the National Health Service which are deemed necessary to ensure coherence with health for all strategy (HFA) and the primary health care approach (PHC) in force since 1978. The general view of the TC was overwhelmingly positive, but the discussion of the seven themes most frequently mentioned in the interviews should have focused on the policy context behind the reforms leading to the introduction of a new cadre of human resources for health in the Mozambican health system. The different categories of health professionals working in the public health sector should complement one another across the continuum of disease prevention, treatment/care and health promotion activities aimed at improving people's health.

Thus this study on health professional's perception about major surgery delegation to mid-level health practitioners in Mozambique could usefully be replicated and taken into account when considering the application to other health professional careers of the TC experience to ensure affordable efficient and good quality health services.

These are my comments after reviewing this study which is extremely timely as we are confronted worldwide with limited human resources for health crises and the rocketing costs of healthcare.

What next?: Accept after discretionary revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.