Dear editors:

We write to suggest the suitability of our original research article, "Adapting a nurse-led primary care initiative to cardiovascular disease control in Ghana: A qualitative study" for publication in *BMC Family Practice*. Cardiovascular disease (CVD) and other non-communicable diseases are a growing health concern in Sub-Saharan Africa. Ghana is no exception: literature reports consistently high prevalence of cardiovascular disease and its risk factors, such as hypertension. The nationwide, nurse-led Community-Based Health Planning and Services (CHPS) primary care program, though successful in improving maternal and child health, remains poorly equipped to handle CVD in adults.

Our article reports the findings of an exploratory, grounded qualitative study of CHPS nurses' and their supervisors' perceived capacity to manage CVD risk factors such as hypertension - through the World Health Organization's HEARTS package - at CHPS facilities in the Upper East Region (UER) of Ghana, and barriers and facilitator to this program's uptake. Our results reveal several actionable barriers to program implementation: inadequate staff training; poor community health literacy; lack of access to CVD medications and other resources; a high burden of CVD and psychiatric risk factors including anxiety, depression, and substance abuse; and difficulty accessing CHPS compounds and referral centers.

As Abdel-All et al. (BMJ 2017) and others have suggested, however, non-physician health workers (NPHWs) such as CHPS nurses can be trained to effectively provide CVD prevention and treatment. Our findings suggest several feasible interventions to address barriers to HEARTS implementation through CHPS, such as improved access to essential medications; provider training; community member education; and transportation to referral sites. They also suggest means to adapt CHPS to function across the lifespan to accommodate integrated CVD and other chronic disease care for older adults. Our team is now developing and implementing a CHPS pilot program to treat hypertension, depression, and other CVD risk factors based upon these findings.

We feel that our manuscript aligns with *BMC Family Practice*'s focus on the delivery and evaluation of primary care and community medicine in diverse settings. Our study aims not only to inform the development of a HEARTS protocol intervention through CHPS facilities, but also to develop a model for non-physician-led chronic disease control applicable within primary care initiatives in low-resource settings worldwide.

This manuscript is original research, has not been published elsewhere, and is not under consideration for publication elsewhere. All authors – Leah A. Haykin, Jordan A. Francke, Aurelia Abapali, Elliasu Yakubu, Edith Dambayi, Elizabeth Jackson, Raymond Aborigo, Denis Awuni, Engelbert A. Nonterah, Abraham Oduro, Ayaga Bawah, James F. Phillips, and David J. Heller – participated in the preparation of the manuscript.

Thank you in advance for your consideration.

Sincerely,

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