Reviewer's report

Title: Adapting the SLIM diabetes prevention intervention to a Dutch real-life setting: joint decision making by science and practice

Version: 1 Date: 20 August 2012

Reviewer: Dean Whitehead

Reviewer's report:

Many thanks for this manuscript submission. It does have merits - but I have some main reservations (particularly methodological) that would currently make it unsuitable for publication. These being:

Major revision - the SLIM (table 1) reference in the background section requires description - not just referral to a table

Major revision - the 'local' setting section also requires a statistical descriptive demographic - not just a table list

Major revision - the 'expert' sample is small and localised. The defining of them is 'scant'. The expert inclusion criteria is limited to description of role and location. The term experts were 'assumed' is highly flawed and open to bias. There is mention of a 'health promotion' expert as almost being the 'overseer' i.e. the expert of all the experts - but no role definition. What is meant by a health promotion expert - why are the others on the panel not the same?

Major revision - this is where the most change has to occur. Methodologically - the authors do not seem to understand Delphi. They mention throughout that they have used a 'modified' Delphi - but modification is not explained - and it comes across almost as a 'made-up' study process. Delphi is used where clarity of terms or situation are not known. This context is not mentioned in this study. A 'classic' Delphi does not have around 0. Round 1 is qualitative interviews or questionnaires where categories emerge from - that does not happen here. Usually - many (up to 100-200 statements for ranking occur out of the first round process. Your study suggests 16 - of which 8 were then chosen - that seems highly flawed. The subsequent rounds are then usually Likert rounds for statistical consensus. None of that currently exists. What of means and SD` scores - what of consensus levels? Look to studies - such as Whitehead's International Delphi on health promotion and health education with nurses - for examples of cut-offs and how descriptive results should be classified. Your table 4 does not do this. Your round 3 is a qualitative focus group - again - not conventional at all for Delphi.

I trust that these comments assist

Level of interest: An article whose findings are important to those with closely related research interests
Quality of written English: Needs some language corrections before being published

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

Declaration of competing interests:

I declare that I have no competing interests