Reviewer’s report

Title: Determinants of the implementation of a lifestyle counseling program in patients with venous leg ulcers: a multiple case study

Version: 1 Date: 17 January 2012

Reviewer: Lars Wallin

Reviewer’s report:

Determinants of the implementation of a lifestyle counseling program in patients with venous leg ulcers: a multiple case study

Reviewer Lars Wallin

This is a study investigating determinants that hindered or facilitated the implementation of a lifestyle counseling program in outpatient dermatology clinics and in home care in the Netherlands. Overall I found the study readable and interesting. However, there are issues with the paper which I am addressing below.

Major Compulsory Revisions

Page 9 and 18. The section on data analyses is difficult to follow. You write: Data analysis comprised an iterative process of identifying convergent evidence within each case and then examining and comparing the evidence across multiple case studies to draw conclusions from the study as a whole [29]. Method triangulation was used to enhance the credibility of the conclusions drawn from the data. The paper would be strengthened if you could describe the principles of this comparison. For example: Did a determinant need to be frequent to be reported as a finding? How frequent? I also would like you to be more explicit on the use of triangulation. What data sources were combined? How?

The additional file provides information on program adherence, which is good, but a major problem in reading the paper is if the success of implementation is linked to the identification of determinants, i.e. could you link identification of more frequent obstacles to lower extent of guideline implementation? In the results I cannot read that such a comparison is made. On page 18 you claim “by closely following a relatively small number of implementation trajectories, we succeeded in identifying some patterns of influencing factors for implementation”. However, it is not clear for me how you linked determinants to implementation success/failure.

Page 16. I have difficulties in connecting statements in the discussion section to what should have been presented in the results section. In the third paragraph in the discussion section you write that participants were able to identify determinants beforehand and that these mostly were confirmed during and after implementation. I do not really see this repeated measurement approach
presented in the results section. Also the following text in the third paragraph is difficult to link to the results section. I think more concrete examples are needed for the reader to understand “how and why determinants were of influence”

Minor Essential Revisions

Page 3-4. You use a framework inspired by Hasson (2007). It is not clear why this specific framework was selected. You write that it addresses determinants but determinants do not seem to be a predominant part of the framework. It would benefit the paper (and the overall issue on use of theory in implementation research) if you in the discussion judge the value of using this framework, what the benefits/disadvantages were.

Page 7 and 15. In the methods section I read it as you were developing several implementation strategies that could be used as a “smorgasbord” of participating units. In the results section I find that some strategies were compulsory, others optional depending on obstacles/facilitators at the specific unit. On page 15 you write that one common determinant was the extent to which the implementation program was carried out, which gives me the feeling that you expected all components to be carried out. In Table 3 I see that 3 of 5 units used most of implementation and you describe all strategies as planned in the table. How much of adaption of the implementation program was it to local conditions? This should be made clearer. You also need to explain the bottom line in Table 3, don’t understand that these figures represent range, and particularly case 4?

Page 8 and 13. I do not get the point of asking study participants how well the programme will be implemented in half a year. For what purpose did you use that information? What there any implications of participants believing that the implementation would be better in half a year? I do not see how this contributes to the paper.

Page 19 Implications. I have difficulties in following your reasoning in the implication section. In the first paragraph you state that With less complex interventions it might be sufficient to choose a less extensive method. Is not most implementation interventions complex in nature as they require change of people’s behavior? And what would be a less extensive method than a case study? In the second paragraph under implications you jump to chronic venous insufficiency. I do not see how that is connected to identification of determinants. And for the third paragraph under implication you state that macro level implementation would be the focus for future research. As it stands I am not sure that this section contributes to the paper, it is too loosely connected to the focus of your paper – identification of determinants of implementation.

Discretionary Revisions

Page 8. There is word lacking in the following sentence under “Participants responsiveness”: To measure this, patients were given a self-developed evaluation questionnaire with a return envelope at the end of the.

Page 15-16. I found the last paragraph in the results section (page 15) very
similar to the introduction paragraph of the discussion section (page 16). I don't think it is necessary to have information repeated so close to each other.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**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.