Reviewer’s report

Title: PoDFEd: Podiatrists and Diabetes Footcare Education Survey. How do Australian podiatrists provide diabetes education?

Version: 0 Date: 24 Dec 2019

Reviewer: Veronica Newton

Reviewer's report:

Thank you for inviting me to review this work.

The issue of education for people living with diabetes has important public health implications and it may be worth signposting this in the introduction - there are examples in UK public health data - perhaps Australian figures would be more appropriate here,

Many podiatrists in clinical practice will find it relevant to their practice from an Australian perspective.

The introduction sets the scene for the study aims, there is minor inconsistency in identification of the primary and secondary aim between abstract and the main body of work. Namely that the work aims to determine primarily what and then secondarily how podiatrists are providing education. I am not sure how barriers and self perceived outcomes has been achieved in the narrative.

Given there is a considerable amount of international research on what and how education is delivered this should be very clear from the outset.

The choice of survey method is appropriate given the aims of the study and the response rate whilst somewhat biased in terms of geographical area has been acknowledged.

The process of statistical analysis appears to be conducted in a reasonable manner, however, the interpretation of the findings are, in my opinion somewhat compromised by some clumsy wording in question design.

I think the Design of questions would have benefitted from a more robust system of critical review by a larger panel than three, with several rounds to refine the iterations of the questions.

In my opinion Questions 10, 11, 13,14 and 15 could have been refined to further reduce ambiguity.

There is a brief acknowledgement of feedback on wording of questions in the discussion, but it lacks depth in terms of reflection on process and criticality of question design and would benefit from some improvement.
The tables are difficult to navigate, partly due to interchangeable use of terms, namely open and closed ended questions and promoted and non-prompted - this needs clarification please.

and I would suggest an improvement would be to link the reference of question themes to the question numbers to demonstrate transparency in the tables.

Perhaps a greater acknowledgment of the IWGDF recommendations in the introduction would set the scene better in terms of evidence and in the discussion on the evidence regarding structured education and how this links to culturally acceptable education, addressing gender differences, health literacy and personal circumstances and how this links to diabetes education.

The reference to behaviour change is not well made and could be better contextualised and supported by the inclusion of reference to the work by Jodi Binning and Sico Bus on motivational interviewing in the context of behavior change in people living with diabetes and how they engage with education using belief models.

It should be clear that it is not the remit of the work to explore the issue of behaviour change in the survey, but it is certainly related to strategies used to deliver health education in this group of people with diabetes, which is important for podiatry practice.

Once again thank you for undertaking work in this area of practice for poditrists.

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