**Supplementary File 2. Table 1. Risk of Bias Summary**

**Pre-Post Studies With No Control Group (*Clinical Interventions*)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Study Author (Date)** | **Were eligibility****/selection criteria for the study population** **pre-specified and clearly described?** | **Were the clinical outcome measures pre-specified, clearly defined, valid, reliable, and assessed consistently across all study participants?** | **Were the people assessing the *participant*****outcomes blinded to the participants' exposures****/interventions?** | **Was the loss to follow-up of participants after baseline 20% or less?**  | **Did the statistical methods examine changes in clinical outcome measures from before to after the intervention?**  |
| Gitlin *et al.,* 2010 | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes- (Gains presented as frequency data)  |
| **aMenne *et al****.,* **2017** | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes |
| **aMcCurry *et al****.,* **2017** | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes |
| Samia *et al.,* 2014 | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes |
| a**Sherman and Steiner*,* 2018** | Yes | Unclear | No - Outcomes were self-reported***b*** | Yes | Yes |
| Burgio *et al.,* 2009 | Yes  | Yes  | No - Outcomes were self-reported***b*** | Yes | Yes |
| Cheung *et al.,* 2015 | Yes  | Yes  | No - Outcomes were self-reported***b*** | Yes | Yes |
| Czaj *et al.,* 2018 | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes |
| Nichols *et al.,* 2011 | Yes  | Yes  | No - Outcomes were self-reported***b*** | No | Yes |
| Nicholls *et al.,* 2014 | Yes  | Yes  | No - Outcomes were self-reported***b*** | Participants-Not applicable (preliminary analysis) | Yes- Participant data (but preliminary analysis).Some RE-AIM outcomes can be calculated as frequencies (eg reach, fidelity) |
| Stevens *et al.,* 2012 | Yes  | Yes  | No - Outcomes were self-reported***a*** | No | Yes |

**a** Some studies were reported across multiple papers and all relevant papers from the study were considered for risk of bias judgments. However only the paper with the author in **bold** is reported in the review for succinctness

**b**Data which is provided by self-report means the assessor (in this case, participant providing the assessment data) is not blinded (unless they were unaware of intervention status) (Higgins et al, 2019).

**Risk of Bias Summary- Cluster RCT**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Study | Random sequence generation | Allocation concealment | Baseline outcome measure-ments similar | Baseline characteristics similar | Incomplete outcome data | Knowledge of the allocated interventions adequately prevented during the study (Outcome assessments) | Protection against contamination | Selective outcome reporting | Loss of cluster | Incorrect analysis |
| **aDöpp *et al.,*** **2011** | Low | Unclear | Low | Low | Low | Low-High | Low | Low | Low | Unclear |
|  | Statistician external to project managed randomisation and stratification randomisation details are provided | Not reported in enough detail to make judgement. Mentions external statistician but not specific description of allocation concealment. | No differences between groups | No differences between groups | Low number dropouts. Reasons reported clearly. Intention to treat analysis conducted. | Blinded participants Health professional not blinded (not possible)Blinded research assessors | Low risk. Randomisation by functional working unit | Protocol published and outcomes reported | No | Appears analysis accounted for clusters but not described in enough detail to replicate  |

aSome studies were reported across multiple papers and all relevant papers from the study were considered for risk of bias judgments. Only the paper with the author in **bold** is reported in the review for succinctness