# CONSORT-EHEALTH (V 1.6.1) -Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating webbased and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form please include any quotes from your manuscript in QUOTATION MARKS,

or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF \_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE!!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile **Health Interventions** 

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923 PMID: 22209829

\*Required

Your name \*

First Last

Balk-Møller, Nina Charlotte

Primary Affiliation (short), City, Country *	
University of Toronto, Toronto, Canada  University of Copenhagen, Co	
Oniversity of Coperinagen, Co	
Your e-mail address *	
abc@gmail.com	
nbm@nexs.ku.dk	
Title of years required to	
Title of your manuscript * Provide the (draft) title of your manuscript.	
Effect of a nine month web- and app-based workplace intervention for	
employees in the social welfare and health care sector: a Randomized	
Controlled Trial	
Article Preparation Status/Stage *	
At which stage in your article preparation are you currently (at the time you fill in this form)	
onot submitted yet - in early draft status	
onot submitted yet - in late draft status, just before submission	
submitted to a journal but not reviewed yet	
submitted to a journal and after receiving initial reviewer comments	
submitted to a journal and accepted, but not published yet	
published	
Other:	
Income all the	
Journal *	
If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")	
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Journal of Medical Internet Research (JMIR)	
Other:	
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the DOI, to be found at the bottom of each published article in JMIR)	
on ms number (yet) / not (yet) submitted to / published in JMIR	
Other: 6196	

### TITLE AND ABSTRACT

# 1a) TITLE: Identification as a randomized trial in the title

1a) Does your paper address CONSORT item 1a? \*

CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form
I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")
<ul><li>yes</li></ul>
Other:
1a-i) Identify the mode of delivery in the title
Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the
title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if
offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for
the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application
runs on different platforms.
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subitem not at all important O O O essential
Subternitot at all important
Does your paper address subitem 1a-i? *
Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information
not in the ms, or briefly explain why the item is not applicable/relevant for your study
The most relevant components are already mentioned in the study title:
"Effect of a nine month web- and app-based workplace intervention for employees in the social welfare and health care sector: a Randomized
Controlled Trial"
1a-ii) Non-web-based components or important co-interventions in title
Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone
support").
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subitem not at all important O O essential
Does your paper address subitem 1a-ii?
Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to
indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study
The key part of the intervention was the web- and app based interaction.
This is described in the abstract: "The tool was designed to help users
make healthy lifestyle changes such as losing weight, exercise more and quit smoking"
12-iii) Primary condition or target group in the title

### 1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

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1 2 3 4 5

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The key part of the intervention was the web- and app based interaction. This is described in the abstract: "The tool was designed to help users make healthy lifestyle changes such as losing weight, exercise more and quit smoking"

# 1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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### Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

nursing homes for elderly people in six municipalities in Denmark agreed to participate in the study. The employees at the nursing homes were randomized either 1:1 or 2:1 on a municipality level to use the SoSu-life tool or to serve as a control group with no treatment for 38 weeks. All participants underwent baseline measurements including body weight, waist circumference, body fat percentage, blood pressure and blood cholesterol level, and they filled in a questionnaire covering various aspects of health."

#### 1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

### Does your paper address subitem 1b-iv?

"A total of 566 (SoSu-life: n=355, control: n=211) participants signed up for the study. After 16 weeks 369 (SoSu-life: n=227, control: n=142) participants remained in the study and at 38 weeks 269 (SoSu-life: n=152, control: n=117) was left in the study." Use/Uptake of the intervention is not included in the analysis.

### 1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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### Does your paper address subitem 1b-v?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We believe these aspects are covered adequately in the abstract: Quote from manuscript: "Conclusion: The SoSu-life app and web-based tool had a modest yet beneficial effect on body weight and body fat percentage among employees in the health care sector."

### **INTRODUCTION**

# 2a) In INTRODUCTION: Scientific background and explanation of rationale

### 2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

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### Does your paper address subitem 2a-i? \*

too costly to use more broadly. Therefore, web- and app-based tools have been suggested as a new and potentially cost-effective way to reach out to, motivate and help people to improve their health1. (...) There is an unmet need for health promotion because of health inequalities increasing throughout Europe. (...) In the Danish population, the overall health, and in particular the distribution of overweight and obesity, are also unequally distributed with higher levels of overweight and obesity occurring among individuals with lower educational level3."

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### 2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

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### Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

fully understood. There is evidence that adding a social feature to the intervention, where users can compare and compete with each other, appears to have a positive effect on users' willingness to use a mobile app for health promotion. Yet, no web- and workplace-based interventions appear to have combined the use of a web-based health promoting program with a social feature, such as introducing a team based competitive element among females in a work place setting."

### 2b) In INTRODUCTION: Specific objectives or hypotheses

#### Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The primary aim of this study was to investigate the effect of the SoSu-life web- and a smartphone-based application, in combination with a social feature, on behavior change, weight loss and self-perceived well-being. We chose to have a control (comparator) group that were provided the same health examinations as the intervention group as this would increase recruitment to the study, and also provide information about the stand alone effect of offering health examinations."

### **METHODS**

# 3a) Description of trial design (such as parallel, factorial) including allocation ratio

### Does your paper address CONSORT subitem 3a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

any intervention. Those municipalities with an even number of nursing homes were randomized in a 1:1 ratio and municipalities with an odd number of nursing homes in a 2:1 ratio. Twelve out of a total of 20 nursing homes were randomized to SoSu-life, and 8 were randomized to control. The study was divided into two distinct periods. An initial 16 week period including a team competition among the participating nursing homes using the SoSu-life tool, and a subsequent 22 week period without a competition.

# 3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

### Does your paper address CONSORT subitem 3b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No changes		
		/

### 3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

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#### Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The content in the intervention remained the same during the 38 weeks and there were no significant bug fixes or downtimes during the project."

### 4a) Eligibility criteria for participants

#### Does your paper address CONSORT subitem 4a? \*

Employees working under er FOA (a Danish Union) agreement in elderly care in Denmark.	

### 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

#### Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Computer or mobile app literacy was not specifically used as an inclusion-criterion".

#### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

#### Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants were recruited through their workplace (offline) via an information meeting held by members of the project team, posters and flyers.

The participants got to know the project team members during the health examinations. If the workplace won one of the monthly competitions the project team would furthermore pay a visit to the workplace to hand over the price.

### 4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also

bias results.

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### Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The informed consent procedure was given during an information meeting held during work hours. The participants could choose to sign and hand in the consent form right after the meeting or they could take it home and hand it in to the daily leader a couple of days later. The signed consent forms were collected by the project team members approximately a week after the information meeting.

### 4b) Settings and locations where the data were collected

### Does your paper address CONSORT subitem 4b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

literacy was not specifically used as an inclusion-criterion. At the baseline examination taking place a few weeks after, the participants underwent a clinical examination including anthropometry, blood pressure and blood sampling values (...), signed up for their first pledge (Pledge 1), and were subsequently introduced to the SoSu-life tool, altogether taking up 30-45 minutes. After 16 weeks, the clinical examination was repeated, taking about 15 minutes in total. (...) An identical procedure was applied after the total of 38 weeks."

### 4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

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### Does your paper address subitem 4b-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The day before each of the 3 clinical examinations, the participants had to spend approximately 10-15 minutes answering an online questionnaire regarding demographic data, health behaviour and general well-being.

### 4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations

with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to a
intervention.(Not a required item - describe only if this may bias results)

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### Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We do not believe that institutional affiliation biased our results.

# 5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

### 5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

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### Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Any relevant considerations are mentioned in the manuscript in "Acknowledgement" part and "Funding and conflicts of interest" part.

### 5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

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#### Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The SoSu-liv tool did undergo some user feedback testing initially, but the RCT study itself did not include any formative and well characterized evaluation (focus groups, usability testing). Therefore, this is not mentioned in the study.

### 5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

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### Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The SoSu-liv tool is a one-and-only tool, only available in the version 1.0 that was used in the study, and there were no content changes during the project, so this is not mentioned in the manuscript.

#### 5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

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### Does your paper address subitem 5-iv?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

For most of the study outcomes, we used validated examination methods and questionnaires.

These have been described adequately where relevant.

5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-

### capture video, and/or providing flowcharts of the algorithms used

Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.

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### Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We believe that the study is reasonably and adequately described in the methods section.

### 5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

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#### Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Providing a full and detailed digital preservation would probably lead to information overflow to the readers of the manuscript. Any reasonable requests for digital preservation that may be required from the reviewers and editors, we will do our best to provide.

### 5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

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#### Does your paper address subitem 5-vii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Prior to the information meeting the daily leader of the participating nursing home provided the project team with a list of names and central national register number of the potentially employees who could participate in the study. Every potential participant was given a user profile. Those who wished to participate and signed the content form were activated as users and could then log in to the website using their full name and central national register number.

### 5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and - if computer-mediated communication is a component - whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

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### Does your paper address subitem 5-viii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is described in the section "description of the tool" "The SoSu-life tool is a web- and app-based tool developed specifically for this particular group of employees. The program has several social features that encourage the users to interact with each other both digitally, physically and orally at the work place. A general overview of the SoSu-life tool is best given by differencing the tool into four different sections.

The social section (...) (description in manuscript)

#### 5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

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### Does your paper address subitem 5-ix?

There was no specific "intended doses" or "optimal timing", so in that sense, the use of the SoSu-liv tool was provided ad libitum.	

### 5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 – generalizability).



### Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

During the intervention period the participants could call a support line where a project member would answer the phone. Further the participants could write a professional dietitian, personal fitness trainer or smoking cessation consultant using the message system on the website and in the app. During workdays they would usually answer within 24 hours.

#### 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 - generalizability).



#### Does your paper address subitem 5-xi? \*

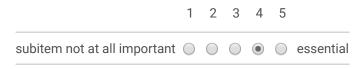
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The users received weekly SMS with a small assignment, SMS twice a week with health tips or tips to use the tool. The SMS were themed accordingly to the focus area the participants had chosen to focus on. Prior to the second and third health examination the participants received a SMS reminding them to fill in the web based questionnaire.

### 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in

addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 - generalizability.



### Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The participants received approximately 10 minutes of one to one time with a project team member after the first health examination where they were introduced to the tool.

# 6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

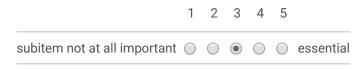
### Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

- Height (cm) [measured at week 0]
- Body weight (kg) [measured at week 0, week 16 and week 38]
- Waist circumference (cm) [measured at week 0, week 16 and week 381
- Hip circumference (cm) [measured at week 0, week 16 and week 381
- Total cholesterol (mmol/Lh) (Capillary whole blood cholesterol. measured using bedside equipment [measured at week 0, week 16 and

### 6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].



#### Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

The day before each of the 3 clinical examinations, the participants had to spend approximately 10-15 minutes answering an online questionnaire regarding demographic data, health behavior and general well-being. Most of the questions were based on a questionnaire developed and formerly used by the Danish National Research Centre for the Working Environment.

### 6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

1 2 3 4 5 subitem not at all important O O essential

### Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

As part of the intervention program, the participants were to be engaged in a team-based competition.

As part of this competition, the SoSu-life-tool used a point system where most of the activities performed using the tool gave points to the individual user. This was considered the key descriptor of the use of the program. The collection of points will be described in more detail in a separate scientific manuscript that can be sent to the reviewers on request.

### 6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained

Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).

subitem not at all important O O essential

#### Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

As part of the intervention program, the participants were to be engaged in a team-based competition.

As part of this competition, the SoSu-life-tool used a point system where most of the activities performed using the tool gave points to the individual user. This was considered the key descriptor of the use of the program. The collection of points will be described in more detail in a separate scientific manuscript that can be sent to the reviewers on request.

### 6b) Any changes to trial outcomes after the trial commenced, with reasons

### Does your paper address CONSORT subitem 6b? \*

"the glucose levels are not included in the analyses because the manufacturer informed us of a possible error in the micro-cuvettes used for the sampling of blood"

### 7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

### 7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

### Does your paper address subitem 7a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Power calculations in the study took dropout rate into account: "Change in body weight among study completers was used for the power calculations. Recruiting a total of 450 participants divided equally among the 2 study groups, and assuming a) dropout rate of 25% and 20% over the 16 week and 22 week intervention periods, respectively, b) a between group difference of 2.0 kg, c) assuming a SD of 4.0 kg in both groups, d) a significance level of 0.05, this would result in a power of 0.98. Retrospectively, the number of participants that volunteered to

### 7b) When applicable, explanation of any interim analyses and stopping guidelines

### Does your paper address CONSORT subitem 7b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not relevant to this study.		

### 8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

#### Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The randomization of the participating nursing homes was done continually over time within each municipality. Those municipalities with an even number of nursing homes were randomized in a 1:1 ratio and municipalities with an odd number of nursing homes in a 2:1 ratio. Twelve out of a total of 20 nursing homes were randomized to SoSu-life, and 8 were randomized to control."

### 8b) Type of randomisation; details of any restriction (such as blocking and block size)

### Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We applied a simple cluster randomization. Quote from manuscript: "Those municipalities with an even number of nursing homes were randomized in a 1:1 ratio and municipalities with an odd number of nursing homes in a 2:1 ratio."

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

### Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The allocation of the randomization was done at an initially meeting with local staff in each municipality in a simple blinded way (simple draw of paper indicating SoSu-liv or Control group assignment) by two of the study investigators and/or in collaboration between investigator and staff. Each draw was observed by independent witnesses to observe that the draw was performed in a fair and unbiased way."

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

### Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The randomization of the participating nursing homes was done continually over time within each municipality. Those municipalities with an even number of nursing homes were randomized in a 1:1 ratio and municipalities with an odd number of nursing homes in a 2:1 ratio. Twelve out of a total of 20 nursing homes were randomized to SoSulife, and 8 were randomized to control. The allocation of the randomization was done at an initially meeting with local staff in each municipality in a simple blinded way (simple draw of paper indicating

# 11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

### 11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

	1	2	3	4	5	
subitem not at all important	•				0	essential

### Does your paper address subitem 11a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No participants, care providers or those assessing outcome was blinded after assignment to interventions in this study.	

### 11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".



### Does your paper address subitem 11a-ii?

All participants knew whether they belonged to the intervention or to the control group.	

### 11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

### Does your paper address CONSORT subitem 11b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The intervention and control group both went through health examinations and answered questionnaires at week 0, week 16 and week 38 which gave each participants information about their current health status.

# 12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

### Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"All statistical analyses were performed in STATA release 11 (StataCorp.2009. Stata: Release 11. Statistical Software. College Station, TX: StataCorp LP). Differences in anthropometric measures from baseline to week 16 and from baseline to week 38 were analysed using a multi-level mixed effect linear regression (mixed model) with municipality as a random effect. For all analyses performed a p-value ≤0.05 was chosen to indicate significance. Descriptive statistics of the sample were presented as mean and

### 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

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subitem not at all important	0		•			essential

#### Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Only completers of the 38 weeks intervention period are included in the analysis. The analysis does not take into consideration whether the participants used the tool or not.

## 12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

### Does your paper address CONSORT subitem 12b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Due to the different pledges the participants could choose, the use of the SoSu-life tool differed between the participants. Therefore, in the anthropometric outcomes participants with a pledge regarding changing of smoking habits were left out. Furthermore, a separate analysis of a subgroup of participants with weight loss pledge both during the first 16 weeks and the last 22 weeks (sub-group with weight loss pledge 1 and 2) was carried out.

### X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

#### X26-i) Comment on ethics committee approval

1 2 3 4 5 subitem not at all important O O o essential

### Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The study was approved by the ethical committee of the Capital Region of Denmark (reference number: H-2-2012-079)"

### x26-ii) Outline informed consent procedures

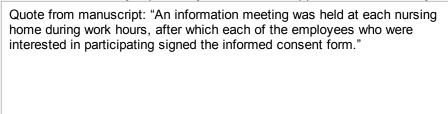
Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent

documents.

	1	2	3	4	5	
subitem not at all important				•		essential

### Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



### X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

	1	2	3	4	5	
subitem not at all important	•	$\bigcirc$		$\bigcirc$	0	essential

### Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No particular safety or security procedures were applied.	

### **RESULTS**

## 13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

### Does your paper address CONSORT subitem 13a? \*

"Initially, 1203 employees from 20 different nursing home units in six municipalities were invited to participate in the study. After the information meeting, a total of 566 participants signed the consent form and went through the baseline examination (n=355 in the intervention group, n=211 in the control group). After 16 weeks, the second measurement took place where 369 (65 %) participants were measured (n=227 in the intervention group, n=147 in the control group). The same procedure was applied after the total of 38 weeks where 269 (48 %) still

# 13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

A total of 566 participants signed the consent form and went through the baseline examination (n=355 in the intervention group, n=211 in the control group). After 16 weeks, the second measurement took place where 369 (65 %) participants were measured (n=227 in the intervention group, n=147 in the control group). The same procedure was applied after the total of 38 weeks where 269 (48 %) still remained in the study (n=152 in the intervention group, n=117 in the control group).

### 13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

1 2 3 4 5 subitem not at all important ( ) ( ) ( ) essential

### Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

As part of the intervention program, the participants were to be engaged in a team-based competition.

As part of this competition, the SoSu-life-tool used a point system where most of the activities performed using the tool gave points to the individual user. This was considered the key descriptor of the use of the program. The collection of points will be described in more detail in a separate scientific manuscript that can be sent to the reviewers on request.

### 14a) Dates defining the periods of recruitment and followup

#### Does your paper address CONSORT subitem 14a? \*

Participants were recruited August –September 2012 where baseline measured were collected, 16 weeks after December 2012- January 2013 the participants were measured again, after 38 weeks May- June 2013 the
participants were measured again.

### 14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

1 2 3 4 5 

#### Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We experienced no critical "secular events" during the study period.

### 14b) Why the trial ended or was stopped (early)

#### Does your paper address CONSORT subitem 14b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not relevant		

### 15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

### Does your paper address CONSORT subitem 15? \*

See table 1 in manuscript.	

### 15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

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### Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The participants (the social and health care workers) all belongs to the same socio demographic group.

# 16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

### 16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

1 2 3 4 5 subitem not at all important O O essential

### Does your paper address subitem 16-i? \*

In our results we have presented the denominator for each analyses performed.	

### 16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

### Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study was designed and powered as a "completers only" study, considering the completer analysis as the primary outcome. There were several considerations that led us to decide, that the completer analysis would be the main study outcome:

a) The study was designed as a truly real life intervention applied in a work place setting. The participation was completely voluntary for the staff working in the nursing homes that volunteered to participate. The

# 17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

### Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

See table 2 in manuscript. "The SoSu-life group (excluding participants with pledges regarding smoking) had a larger decrease in body weight of -1.01 kg (p=0.033), body fat percentage -0.78 % (p=0.027) and waist circumference of -1.79 cm (p=0.007) after a total of 38 weeks compared to the control group. The weight loss sub-group had an even larger decrease in body weight of -1.64 kg (p=0.021) and waist circumference of -2.47 cm (p=0.008) after 38 weeks compared to the control group.

### 17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

subitem not at all important ( ) ( ) ( ) essential

### Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

In this manuscript we have intentionally not specified the metrics of use and the intensity of use in any significant detail, as this information we intend to present in a separate publication, that will focus more in depth on the use of the web- and app-based tool, and how the use of the tool seemed to allow for a more social interaction around healthy lifestyle change.

### 17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

### Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not relevant, as no hinery sutcomes are included	
Not relevant, as no binary outcomes are included.	
	1

# 18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

### Does your paper address CONSORT subitem 18? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Subgroup analyses, in this case depending on choice of pledge.	are
presented in table 2.	

### 18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

	1	2	3	4	5	
subitem not at all important		•	$\bigcirc$			essential

#### Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

In our study we have completed analyses of all participants that provided outcome data (such as body weight) both before the intervention, and at the end of the intervention, regardless of their use of the web- and appbased tool.

## 19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

### Does your paper address CONSORT subitem 19? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not relevant. As this was a very pragmatic study design, as we did not systematically register harms or unintended effects in the study.

### 19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants. but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

1 2 3 4 5 subitem not at all important 

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#### Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We were not made aware of any privacy breaches or significant technical problems in the study.

### 19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

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subitem not at all important	0			•	0	essential

### Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

As a part of the research project qualitative interviews with both active and non-active users were carried out. This data is being reported in another manuscript.

### DISCUSSION

### 22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

### 22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

1 2 3 4 5 subitem not at all important  $\bigcirc$   $\bigcirc$   $\bigcirc$   $\bigcirc$  essential

### Does your paper address subitem 22-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The primary aim of the study was to evaluate whether using a web- and app-based tool for 38 weeks compared to a control group could provide beneficial changes on body weight and other anthropometric markers. After 38 weeks, we found a decrease in body weight between the groups of -1.01 kg and a decrease in body fat percentage of -0.8 %, in the favour of the SoSu-life group. The weight loss sub-group had an even larger decrease in body weight of -1.64 kg."

#### 22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

1 2 3 4 5 subitem not at all important O O O essential

### Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is described in the discussion part of the manuscript: "It is debatable whether a period of 38 weeks is long enough to determine the long-term effects of a web- and app-based weight control tool (...) The SoSu-life study is relevant because it shows that it is possible to maintain a weight loss for a relatively long period with the use of a weband app-based tool, yet we cannot predict the longer term effects. (...)Thus, the results may not fully be ascribed to the actual use of the SoSu-life tool but also to the fact that the employees at the nursing

### 20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

### 20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.



### Does your paper address subitem 20-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

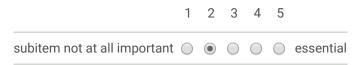
"The extent to which the study participants were capable of using the web- and app-based digital tools was not considered in the study, so essentially all employees were considered eligible. The participants were only given a brief introduction as to how to use the tool at baseline, and as this particular group of people, due to their lower socioeconomic status and their day to day work tasks with taking care of the elderly residents, they may likely to be less capable of using digital tools than the average population. Several participants had never

### 21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

#### 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations



### Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

See answer above (21-i) and further: Our study population is thus rather unique in terms of not having developed technological skills. The results from this study is therefore not generalizable to the general Internet population but to other technologically challenged populations.

### 21-ii) Discuss if there were elements in the RCT that would be different in a routine application settina

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.



### Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The intervention was designed to be applicable to the social and health care workers' general workplace. However outside the RCT context, due to extra economic costs, there would likely be less human involvement as the health examination would probably be less comprehensive, if at all present. Furthermore, the introduction to the tool would likely be an online introduction. The effect of an identical intervention applied outside a RCT setting would probably be smaller.

### OTHER INFORMATION

### 23) Registration number and name of trial registry

### Does your paper address CONSORT subitem 23? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The study is registered at ClinicalTrials.org with ID number NCT02438059."	

### 24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? \*

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study protocol is written in Danish language, and provided to the ethical committee, where it can be obtained by specific requested. As the study protocol contains some product-specific information that relates to immaterial rights, the full version of the study protocol cannot be uploaded on a public website.

### 25) Sources of funding and other support (such as supply of drugs), role of funders

### Does your paper address CONSORT subitem 25? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Funding and conflicts of interest

The project was funded by PenSam Livsforsikringsselskab and by a grant from the Danish Agency for Science Technology and Innovation, Ministry of Science Technology and Innovation. PenSam Livsforsikringsselskab manages occupational pension schemes for approximately 340,000 wage-earners employed in Danish municipalities and regions, and in private organisations. The University of Copenhagen takes full responsibility for the study design, the data

### X27) Conflicts of Interest (not a CONSORT item)

#### X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

1 2 3 4 5 subitem not at all important \( \cap \) \( \old \) \( \old \) essential

### Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Funding and conflicts of interest

The project was funded by PenSam Livsforsikringsselskab and by a grant from the Danish Agency for Science Technology and Innovation, Ministry of Science Technology and Innovation. PenSam Livsforsikringsselskab manages occupational pension schemes for approximately 340,000 wage-earners employed in Danish municipalities and regions, and in private organisations. The University of Copenhagen takes full responsibility for the study design, the data

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