Supplementary file 2

 Table S1. Number of Quality Indicators and Underlying Variables Demanded by Stakeholders in 2017

Stakeholder	Intensive Ca	re Unit	Prostate can	cer	Gastrointestin	nal cancer	Haematology	department	Elderly patie	ıts
	Indicators	Variables	Indicators	Variables	Indicators	Variables	Indicators	Variables	Indicators	Variables
Government										
Health and Youth Care Inspectorate	11	77	14	101	18	108	12	98	8	66
National Health Care Institute	8	29	9	52	12	32			6	14
Accreditation Institutes										
NIAZ			1	492	1	*				
JACIE							1	1532		
Insurers			6	23	48	140				
Professional Association										
Visitation of the Netherlands Association for Intensive care (NVIC)	1	256								
Visitation of the Netherlands Association for Urology (NVU)			1	301						
Visitation of the Netherlands Association for Surgery (NVH)					1	191				
Visitation of the Netherlands Association for Internists (NIV)							1	66		
Institute oncological collaboration (SONCOS)			21	22	26	41	1	2		
Association of primary care referrers (<i>Klankbordgroep verwijzers</i>)							1	10		
Netherlands Federation of University Medical Centres (NFU)							2	122		
Medical registrations										
National Intensive Care Evaluation (NICE) registry	28	234								
Registration of the Netherlands Society for Urology (NVU)			12	117						
Netherlands Comprehensive Cancer Organisation (IKNL)			6	99	6	191				

Dutch Upper GI Cancer Audit (DUCA)					22	83				
Dutch ColoRectal Audit (DCRA)					10	97				
Registrations for the Netherlands Society for Internists							3	84	7	42
(NIV)										
European Society for Blood and Marrow							3	23		
Transplantation (EBMT) database										
Patient organisation										
Certificate for senior friendly hospitals			1	17	1	*			1	106
Standards from the stoma foundation					1	14				
Hematon (organisation for patients with							14	17		
haematological cancer and patients with stem cell										
transplantation)										
Board of directors	26	503	1	411	14	402	28	217	12	118
Professional driven data	28	339					8	12		
Total	102	1438	86	1636	160	1299	74	2183	34	346

*hospital-wide accreditations are counted once (see prostate cancer)

Table S2. Number and Characteristics of Quality Registrations

	Intensive Care	Prostate	Gastrointestinal	Haematology	Elderly	Mean
	Unit	cancer	cancer	department	patients	
Number of stakeholders	6	10	12	11	5	8.8
Number of quality registrations	102	86	160	74	34	91
Number of underlying variables	1438	1636	1299	2183	346	1380
% overlap at indicator level	48%	51%	49%	41%	36%	47%
% overlap at the variable level	37%	16%	46%	17%	49%	28%

Primary aim of the registration						
- Accountability purposes	20%	58%	65%	15%	41%	44%
Accreditations and certificationInstitutional governance	0%	2%	2%	34%	3%	13%
- Quality improvement	25%	14%	7%	28%	41%	919%
	54%	26%	26%	23%	15%	25%
Type of indicator						
- Structure	25%	42%	33%	46%	41%	36%
- Process - Outcome	37%	28%	39%	35%	38%	36%
	38%	24%	28%	19%	21%	28%
Who is registering						
- Nurse	41%	27%	44%	31%	62%	39%
PhysicianQuality employee	37%	6%	9%	35%	9%	19%
Patient or relativeOther (eg, pharmacist)	7%	59%	41%	7%	24%	30%
	11%	3%	1%	5%	3%	4%
	4%	5%	5%	22%	3%	7%
Registration useful for quality improvement? (% yes)	34%	48%	29%	51%	62%	36%

	Never	Rarely	Once in a	Rather	Frequentl
	(%)	(%)	while (%)	often (%)	y (%)
Unreasonable registrations* (aggregated scale, n=314)	8.6	26.8	46.2	17.2	1.3
- should be registered by someone else?	10.5	20.7	36.9	26.1	5.7
- are going too far, and should not be expected from you?	11.7	27.6	34.0	22.2	4.4
- put you into an awkward position?	28.7	39.2	25.2	6.4	0.6
- are unfair for you to deal with?	13.1	33.1	32.5	18.2	3.2
Unnecessary registrations** (aggregated scale, n=313)	6.7	10.5	32.6	39.3	10.9
- they need to be done at all?	8.3	13.4	37.4	31.9	8.9
- they make any sense at all?	8.3	12.8	35.5	31.0	12.5
- they would not exist (or could be - done with less effort), if things were organized differently?	8.3	8.0	36.3	32.8	14.6
- they only exist because some people simply demand it this way?	9.6	11.8	29.6	34.1	15

 Table S3. Perceived Reasonability and Usefulness of Quality Registrations (Aggregated Scales and Individual Items)

Stem ** :Do you register quality information of which you keep wondering if ...