

**Supplementary Table 1.** The Supportive and Palliative Care Indicators Tool (SPICT).

General SPICT indicators:
<ul style="list-style-type: none"> <li>• Unplanned hospital admission.</li> <li>• Performance status is poor or deteriorating, with limited reversibility (e.g. stays in bed or in a chair for more than half the day).</li> <li>• Depends on others for care due to increasing physical and/or mental health problems; person's carer needs more help and support.</li> <li>• Progressive weight loss; remains underweight; low muscle mass.</li> <li>• Persistent symptoms despite optimal treatment of underlying condition(s).</li> <li>• Person (or family) asks for palliative care; chooses to reduce, stop or not have treatment; or wishes to focus on quality of life.</li> </ul>
Disease-specific SPICT indicators:
<p>Cancer:</p> <ul style="list-style-type: none"> <li>• Functional ability deteriorating due to progressive cancer.</li> <li>• Too frail for cancer treatment or treatment is for symptom control.</li> </ul>
<p>Neurological disease:</p> <ul style="list-style-type: none"> <li>• Progressive deterioration in physical and/or cognitive function despite optimal therapy.</li> <li>• Speech problems with increasing difficulty communicating and/or progressive difficulty with swallowing.</li> <li>• Recurrent aspiration pneumonia; breathless or respiratory failure.</li> <li>• Persistent paralysis after stroke with significant loss of function and ongoing disability.</li> </ul>
<p>Heart/vascular disease:</p> <ul style="list-style-type: none"> <li>• Heart failure or extensive, untreatable coronary artery disease; with breathlessness or chest pain at rest or on minimal effort.</li> <li>• Severe, inoperable peripheral vascular disease.</li> </ul>
<p>Respiratory disease:</p> <ul style="list-style-type: none"> <li>• Severe, chronic lung disease; with breathlessness at rest or on minimal effort between exacerbations.</li> <li>• Persistent hypoxia needing long-term oxygen therapy.</li> <li>• Has needed ventilation for respiratory failure or ventilation is contraindicated.</li> </ul>
<p>Kidney disease:</p> <ul style="list-style-type: none"> <li>• Stage 4 or 5 chronic kidney disease (eGFR &lt; 30ml/min) with deteriorating health.</li> <li>• Kidney failure complicating other life limiting conditions or treatments.</li> <li>• Stopping or not starting dialysis.</li> </ul>
<p>Liver disease:</p> <ul style="list-style-type: none"> <li>• Cirrhosis with one or more complications in the past year: diuretic resistant ascites; hepatic encephalopathy; hepatorenal syndrome; bacterial peritonitis; or recurrent variceal bleeds.</li> <li>• Liver transplant is not possible.</li> </ul>
<p>Dementia/ frailty<sup>1</sup>:</p> <ul style="list-style-type: none"> <li>• Unable to dress, walk or eat without help.</li> <li>• Eating and drinking less, difficulty with swallowing.</li> <li>• Urinary and faecal incontinence.</li> <li>• Not able to communicate by speaking; little social interaction.</li> <li>• Frequent falls; fractured femur.</li> <li>• Recurrent febrile episodes or infections, aspiration pneumonia.</li> </ul>
<p>Other conditions:</p> <ul style="list-style-type: none"> <li>• Deteriorating and at risk of dying with other conditions or complications that are not reversible; any treatment available will have a poor outcome.</li> </ul>

<sup>1</sup> If a patient with mild cognitive impairment is considered eligible, the physician is requested to assess this patient's capacity using a locally available validated capacity assessment instrument.

**Supplementary Table 2.** Measurement instruments and their scale scores used in the iLIVE study.

Topic	Measurement instrument	Scale scores
<i>Patients</i>		
- Concerns, expectations and preferences of patients around dying and end-of-life care	- Self-developed questions adapted from the Serious Illness Conversation Guide (1) - AEOLI questionnaire (2)	Not applicable  Strongly disagree – disagree- neither agree nor disagree – agree- strongly agree – don't know
- Symptom load	Edmonton Symptom Assessment System (ESAS) (3)	0 (no symptom) – 10 (worst possible symptom)
- Health-related quality of life (HRQoL) and wellbeing	EORTC QLQ-C15-PAL quality of life question (4)  EuroQol 5 Dimension questionnaire (EQ-5D-5L) (5)  ICECAP Supportive Care Measure (ICECAP-SCM) (6)	0 (worst health) – 100 (best health)  Questions 1-3: no problems – slight problems- moderate problems – severe problems - unable  Questions 4 (pain) & 5 (anxious): no(t) – slight – moderate – severe – extreme(ly)  Most of the time –some of the time – only a little of the time - never
- Attitudes towards euthanasia <sup>a</sup>	10-item Euthanasia scale (7)	Strongly disagree – disagree- neither agree nor disagree – agree- strongly agree – don't know
- Health and social care resource use, absenteeism from work	(Partial) Health Economics Questionnaire (HEQ)(8)	Not applicable
- Sociodemographic characteristics	Self-developed questions and HEQ	Not applicable
<i>Relatives</i>		
- Concerns, expectations and preferences around dying and end-of-life care	Self-developed questions inspired by the Serious Illness Conversation Guide and the AEOLI questionnaire	Not applicable

- Health-related quality of life (HRQoL)	EORTC QLQ-C15-PAL  EQ-5D-5L	0 (worst health) – 100 (best health)  Questions 1-3: no problems – slight problems- moderate problems – severe problems - unable  Questions 4 (pain) & 5 (anxious): no(t) – slight – moderate – severe – extreme(ly)
- Well-being	ICECAP Close Person Questionnaire (ICECAP-CPM) (9)	Question 1 -2 : all of the time- most- some- a little- non  Question 3-6: fully able – mostly able- mostly unable –completely unable
- Informal care provision	iMTA Valuation of Informal Care Questionnaire (iVICQ)(10) and Informal Care Cost Assessment Questionnaire (CIQ) (11)	Not applicable
- Attitudes towards euthanasia	10-item Euthanasia scale	Strongly disagree – disagree- neither agree nor disagree – agree- strongly agree – don't know
- Bereavement	Hogan Grief Reaction Checklist (HGRC, despair and personal growth subscales) (12)	1= Does not describe me at all 2 = Does not quite describe me 3 = Describes me fairly well 4 = Describes me well 5 = Describes me very well
- Quality of care for dying patients	International questionnaire Care of the Dying Evaluation (iCODE) (13)	Various scales
<i>Physicians</i>		
- Patients' diagnosis, co-morbidities and life expectancy, perspective on	Based on the SPICT-criteria and the Australian version of the Karnofsky Performance Status (14)	Not applicable

patients' treatment aims and functional status		
- Evaluation of care in the dying phase	Adapted and based on the Swedish Quality of Dying Registry (15)	Various scales

## References

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