

Study ID	Primary Outcomes: Results	Secondary Outcomes: Results
Clarke et al, RCT 19	Survival (% at 3.5 years) 73% in Intervention vs. 78% in control. Reported as non-significant.	Activities of daily living, loneliness (Wenger scale), morale (Geriatric Morale Scale), social contact score (Tunstall): no significant changes at 2 years. Information orientation score: not reported. Self-perceived health (% improved): 20% Intervention, 11% Control - reported as significant. HCU: 17% and 12% of both groups had seen GP and PHN respectively in previous month - reported as non-significant.
Grant et al	Mental Health: Anxiety (HADS-A) -1.9 (-3.0 to -0.7) <sup>a</sup> p=0.002, Depression (HADS-D) -0.9 (-1.9 to 0.2) p=0.116. Social Support (Dukes Social Support Scale): Confidant -0.9 (-2.4 to 0.6) p=0.221, Affective -0.3 (-1.2 to 0.7) p=0.594	Quality of life (delighted terrible faces scale): -0.5 (-0.9 to -0.1) p=0.006. Functional health (COOP/WONCA functional health assessment scale): Pain -0.5 (-0.8 to -0.1), Physical fitness -0.3 (-0.6 to 0.05) p=0.98, Feelings -0.5, (-0.8 to -0.2), Daily Activities -0.5 (-0.6 to -0.2) p=0.001, Social Activities -0.3 (-0.6 to 0.1) p=0.196, Change in health -0.3 (-0.6 to -0.03) p=0.03, Overall Health -0.4 (-0.7 to -0.1) p=0.003. HCU: both groups had similar contacts with the PCT, but the intervention group were reported as having more prescriptions, including mental health prescriptions and fewer referrals to general and mental health services, although no statistical analysis was performed.
Kangovi et al, 2018	Health Related Quality of Life (HRQoL), Physical Health Component (SF-12-V2 PCS) -0.7 (-2.2 to 0.7) <sup>b</sup> p=0.3	HRQoL Mental Health Component (SF-12-V2 MCS) 0.8 (-1.1 to 2.6) <sup>b</sup> p=0.3. Patient Activation (PAM score): 1.9 (-0.1 to 3.8) p=0.06. Chronic disease control: HBA1c -0.2 (-1.3 to 0.9), BMI -0.2 (-0.7 to 0.4), CPD -0.5 (-2.2 to 1.2), SBP -6.3 (-14.3 to 1.8). Patient reported quality of primary care: Intervention group were more likely to report highest rating for quality comprehensive care and supportiveness for self-management - risk difference 0.12 p<0.001. HCU: Intervention group had fewer repeat admissions -0.24 (-0.40 to -0.07) p=0.02 and 30d readmissions -0.17 (-0.32 to -0.02) p=0.04, fewer total hospital days (300 vs 471) and statistically non significant fewer total hospitalisations -0.3 (-0.6 to 0.0) p=0.07 and shorter length of stay -3.1 (-6.3 to 0.2) p=0.06.
Kangovi et al, 2017	Change in chronic disease control: HBA1C -0.2 (-1.3 to 0.9) <sup>c</sup> , BMI -0.2 (-0.7 to 0.4), CPD -0.5 (-2.2 to 1.2), SBP -6.3 (-14.3 to 1.8) p=0.08	Achievement of chronic disease management goals (% achieved) 18.3% vs 17.2% p=0.81. HRQoL Physical Health Component (change in SF-12-V2 PCS): 0.9 vs 0.5 p=0.67 and HRQoL Mental Health Component (change in SF-12-V2 MCS) 2.3 vs -0.2 p=0.008. Patient activation (change in PAM) 2.2 vs 1.5 p=0.66. Proportion of people reporting high quality of patient centred care that was comprehensive (49.2% vs 39.7% p=0.01) and supportive of disease management (62.9% vs 38% p=0.001). HCU: Intervention group had a total of 68 hospitalisations with 278 hospital days vs 98 hospitalisations and 414 hospital days in the control p=0.17.
Carnes et al	Not specified	Self rated health (scale 1 to5): 0.127 (-0.221 to 0.9475) <sup>d</sup> . Mental health, anxiety (HADS-A): -0.119 (-0.847 to 1.609). Mental health, depression (HADS-D): 0.857 (-0.737 to 2.451) Wellbeing (Scale of 0-6 in last week): -0.013 (-0.623 to 0.596). Positive and active engagement in life (HeiQ Scale 0-20): -0.073 (-1.278 to 1.131). Number of regular activities (range 0-6): -0.897 (-1.729 to -0.065) p=0.035. HCU: A&E visits in the previous 3 months (mean (SD): Intervention 0.3 (0.68), Control 0.5 (1.15), but no baseline rate reported for the intervention group. Annual GP consultation rate before referral decreased in the intervention group and slightly increased in the control group, but there were significant baseline differences- Intervention 8.3 to 7.3, p=0.001, Control 2.9 to 3.3 p=0.014 and p<0.001 for between group differences at baseline and follow up. The intervention group were prescribed

		significantly more medications at baseline and follow up than control p <0.001.
Dickens et al	Health Related Quality of Life, Mental Health Component (SF-12 MCS) 0.1 (-1.9, 2.1) <sup>e</sup>	HRQoL Physical Health Component (SF-12 PCS): 0.1 (-1.9 to 2.10) p=0.9. HRQoL (EQ-5D-3L): -0.09 (-0.14 to -0.03) p<0.001. Depression (GDS): 0.2 (-0.2 to 0.7) p=0.29. Social Support (MOS-6): 0.03 (-0.2 to 0.2) p=0.75. Social Activities: No significant differences were reported between groups for number of friends/family, club/group membership or frequency of get together with friends/family. The intervention group were less likely to report getting along with others (OR 0.6 (0.4 to 0.9) p<0.01). Social Participation (General Household Survey items on housework, transport, childcare, advice, emotional support) was not different between groups.
Mercer et al	Health Related Quality of Life (EQ-5D-5L) 0.008 (-0.028 to 0.045) <sup>f</sup>	Well-being (ICECAP-A): -0.011 (-0.039 to 0.016) p=0.411. Mental health, anxiety (HADS-A): -0.41 (-0.99 to 0.18) p=0.172. Mental health, depression (HADS-D): 0.09 (-0.49 to 0.68) p=0.753. Work and social adjustment scale: 0.05 (-1.37 to 1.48) p=0.940. Self-reported lifestyle activities (smoking, alcohol, exercise): no difference between groups.
<p><sup>a</sup> Mean Difference (95% CI) adjusted for baseline results. <sup>b</sup> Longitudinal estimated difference in difference (95% CI) from 6 to 9 months adjusted for site and chronic disease. <sup>c</sup> Difference in difference (95% CI) controlled for baseline results and any imbalanced baseline variables <sup>d</sup> Mean difference (95% CI) adjusted for age, sex, ethnicity, employment status and living arrangement. <sup>e</sup> Mean difference (95% CI) adjusted for employment status, accommodation type and living circumstances. <sup>f</sup> Mean difference (95% CI) adjusted for age, sex, SIMD, comorbidity, and significant baseline outcome measures as covariates and includes practice identifier as a random effects term.</p> <p>SF-12V2= Short Form Health Survey, is often used as a health related quality of life measure, with Physical (PCS) and Mental (MCS) health components reported separately on a scale of 0-100 with 100 representing maximal health. EQ-5D-5L=a standardized measure of self-reported health-related quality of life that assesses 5 dimensions at 5 levels of severity where 1 is the preferred state of health. EQ-5D-3L=an earlier version of EQ-5D-5L with 3 levels. GDS =Geriatric Depression Scale, a screening tool for depression in older people with a score of 4 or more indicating possible depression. HADS = Hospital Anxiety and Depression Scale measured on a scale of 0-42 where a higher score indicates worse mental health. HADS-A=Hospital Anxiety and Depression Scale, Anxiety, where a score above 10 indicates possible caseness; HADS-D=Hospital Anxiety and Depression Scale, Depression, where a score above 10 indicates possible caseness. Duke UNC Functional Social support scale measures an individual's social network, a higher score indicates stronger supports. MOS-6 Social support (six items from the Medical Outcomes Study Social Support Survey [MOS-SSS] where a higher score on scale of 1-6 indicates more support. ICECAPA= Investigating Choice Experiments for the Preferences of Older People Capability Measure for Adults, a capability based wellbeing measure for adults where 0 is no capability and 1 is full capability; WASAS = Work and Social Adjustment Scale that measures impact of mental health problems on daily life with higher scores denoting a greater impact.</p> <p>BMI=body mass index, CPD= cigarettes per day, SBP=systolic blood pressure, HbA1C=glycosylated haemoglobin, decrease denotes improvement.</p>		