| Qualitative studies | 1.1. Is the qualitative approach appropriate to answer the research question? | 1.2. Are the qualitative data collection methods adequate to address the research question? | 1.3. Are the findings adequately derived from the data? | 1.4. Is the interpretation of results sufficiently substantiated by data? | 1.5. Is there coherence between qualitative data sources, collection, analysis and interpretation? |
|--------------------------------|---|---|---|---|--|
| Akram et al. 2012 | Yes | Yes 35 pharmacists in 5 focus groups Verbatim transcription | Yes Framework Analysis Independent coding and validation process | Yes Quotation is adequately employed for each theme. | Yes |
| Bennie et al. 2013 | Yes | Can't Tell No description of the topic guide. | Can't Tell No description of the method of qualitative analysis | Yes Quotation is adequately employed for each theme. | Yes |
| Kuruvilla et al. 2018 | Yes | Yes | Yes Framework Analysis Independent coding and discussion of discrepancies | Yes | Yes |
| Latham and Nyatanga 2018 | Yes | Can't Tell Full details of purposive sampling not given. Interview schedule validation unclear. | Yes Constant comparative method is reasonable for interpretative phenomenology. | Yes Quotation is adequately employed for each theme. | Yes |
| Quantitative studies | 4.1. Is the sampling strategy relevant to address the research question? | 4.2. Is the sample representative of the target population? | 4.3. Are the measurements appropriate? | 4.4. Is the risk of nonresponse bias | 4.5. Is the statistical low? analysis appropriate to answer the research question? |

| Lucey et al 2008 | Yes All GPs, pharmacists in one city area; all patients over a 3 month period in the hospice; unclear details of if / how nurses were sampled. | Can't Tell Details of respondents are not given, other than as part of the target sample | Can't Tell Details of the development of the questionnaires are not given | No Response rates were: GPs 41%; pharmacists 33% and patients 38.5%. | Yes |
|-------------------------------|---|---|--|--|-------------------------------|
| Bishop et al. 2009 | Yes Sampling process is adequate; surveyed all active programs in the target area | Can't Tell Clear description of the sample and reasonable as a local study but difficult to understand if generalisable across country or globally. | Yes The survey question was reviewed by a third party and seems to be reasonable. Data collection method of telephone interview was not described. | Yes All candidates were contacted and response rate of the survey was 22/22. Results from 1 program were not included due to limited response. | Yes Descriptive statistics |
| Walker and McPherson. 2010 | Can't Tell 1) Sampling process for the survey is adequate; surveyed all active programs in the target area. 2) No details of the method of sampling hospices or nurses within them for the comparative study. | Can't Tell 1) Details of survey respondent sample and hospices are lacking. 2) No details of hospices or nurses taking part in the comparative study are given. | Yes 1) Survey questions seem to be reasonable though it was only internally reviewed. Data collection method of telephone interview was not described. 2) Methods for comparing frequency, estimated cost and client satisfaction were reasonable. | Yes 1) 21/23 programs in the area participated and 14 reported using EMK 2) No details are given on response rates of nurses in the hospices | Yes Descriptive statistics |
| Ise et al. 2010 | Yes Random sampling from a community pharmacist database | Yes Clear description of the sample with adequate methods. | Yes The survey question was clearly defined and seemed to be reasonable though it was only internally reviewed. | No Response rate was low at 34.5%. | Yes |

| Leigh et al. 2013 | Can't Tell No details of sampling method of hospice agencies for nurses | No Only 77% had care for a veteran with institution's HEMk Reasons why eligib individuals chose r to participate were not described. | the development of t questionnaire ble not | he nurse | No Response rate of questionnaire we (78/160); author acknowledge the have been a pos response bias | as 49% 's ere may |
|--------------------|---|--|--|------------------------------------|---|---|
| Mixed-method study | 5.1. Is there an adequate rationale for using a mixed method design to address the research question? | 5.2. Are the different components of the study effectively integrated to answer the research question? | 5.3. Are the outputs of the integration of qualitative and quantitative components adequately interpreted? | inconsist quantita qualitati | divergences and tencies between tive and ve results ely addressed? | 5.5. Do the different components of the study adhere to the quality criteria of each tradition of the methods involved? |
| Miller 2017 | Yes | Yes | Yes | | | Yes 1) QUAN (Observational study): The sampling strategy was reasonable but limited participants. 2) QUAL (interviews): There was a clear description and reasonable methods. |