### Additional file 5 – Summary of findings tables (patient outcome)

#### Table S6

**Supervision by an oral health care team compared to guideline dissemination for the implementation of an oral health care guideline**

- **Patient or population:** Healthcare personnel
- **Setting:** Nursing homes in Belgium
- **Intervention:** Supervision by an oral health care team
- **Comparison:** Guideline dissemination

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Anticipated absolute effects* (95% CI)</th>
<th>Risk with guideline dissemination</th>
<th>Risk with supervision by an oral health care team</th>
<th>Relative effect (95% CI)</th>
<th>№ of participants (Studies)</th>
<th>Quality of the evidence (GRADE)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tongue plaque level</strong></td>
<td></td>
<td>The mean tongue plaque level in the control group was <strong>3.66</strong> plaque index score points.</td>
<td>The mean tongue plaque level in the intervention group was <strong>0.07</strong> lower (0.91 lower to 0.77 higher)</td>
<td>Not estimable.</td>
<td>12 nursing homes, 278 residents (1 Cluster-RCT)</td>
<td>LOW 1 2</td>
<td>P = 0.87 Results corrected for cluster and baseline differences.</td>
</tr>
<tr>
<td><strong>Dental plaque level</strong></td>
<td></td>
<td>The mean dental plaque level in the control group was <strong>1.77</strong> plaque index score points.</td>
<td>The mean dental plaque level in the intervention group was <strong>0.15</strong> lower (0.45 lower to 0.14 higher)</td>
<td>Not estimable.</td>
<td>12 nursing homes, 97 residents (1 Cluster-RCT)</td>
<td>LOW 1 2</td>
<td>P = 0.32 Results corrected for cluster and baseline differences.</td>
</tr>
<tr>
<td><strong>Denture plaque level</strong></td>
<td></td>
<td>The mean denture plaque level in the control group was <strong>2.37</strong> plaque index score points.</td>
<td>The mean denture plaque level in the intervention group was <strong>0.32</strong> lower (0.52 lower to 0.11 lower)</td>
<td>Not estimable.</td>
<td>12 nursing homes, 194 residents (1 Cluster-RCT)</td>
<td>LOW 1 2</td>
<td>P = 0.02 Results corrected for cluster and baseline differences.</td>
</tr>
</tbody>
</table>

1. Only one single study with few events
2. Small sample size
Table S7

The patient safety programme "SAFE OR SORRY?" compared to usual care for the implementation of pressure ulcer, urinary tract infection and falls best practice guidelines

**Patient or population:** Healthcare personnel  
**Setting:** Nursing homes in Netherlands  
**Intervention:** The patient safety programme "SAFE OR SORRY?"  
**Comparison:** Usual care

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Anticipated absolute effects(^*) (95% CI)</th>
<th>Relative effect (95% CI)</th>
<th>No of participants (Studies)</th>
<th>Quality of the evidence (GRADE)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Incidence of adverse events (pressure ulcer, urinary tract infections and falls).  
Assessed with: chart review and skin inspection by independent research assistants.  
Follow up: 9 months | Risk with usual care | Risk with the patient safety programme "SAFE OR SORRY?" | Rate ratio 0.67 (0.47 to 0.97) | 10 wards from 6 nursing homes, 392 residents (1 Cluster-RCT) | P<0.05  
Intervention group 174/2754, control group 272/3045 adverse events/patient weeks. Results corrected for cluster. |
| Study population | Mean 0.07 events/patient week | Mean 0.07 events/patient week | 10 wards from 6 nursing homes, 392 residents (1 Cluster-RCT) | P<0.05  
Intervention group 174/2754, control group 272/3045 adverse events/patient weeks. Results corrected for cluster. |

1. Participants allocated after randomization, unclear risk of selection bias. Intervention and control wards within the same nursing home, high risk of contamination bias.  
2. Only one single study with few events.  
3. Wide confidence interval.  
4. Small sample size.
### The employment of a project nurse compared to usual care for the implementation of falls best practice strategies

**Patient or population:** Healthcare personnel  
**Setting:** Nursing homes in Australia  
**Intervention:** The employment of a project nurse  
**Comparison:** Usual care

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Anticipated absolute effects* (95% CI)</th>
<th>Relative effect (95% CI)</th>
<th>% of participants (Studies)</th>
<th>Quality of the evidence (GRADE)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents with at minimum one femoral neck fracture</td>
<td>Risk with usual care</td>
<td>Risk with the employment of a project nurse</td>
<td>RR 0.95 (0.63 to 1.43)</td>
<td>88 nursing homes, 5391 residents (1 Cluster-RCT)</td>
<td>P=0.79 Results corrected for cluster.</td>
</tr>
<tr>
<td>Study population</td>
<td>41 per 1000 (26 to 59)</td>
<td>39 per 1000 (26 to 59)</td>
<td>88 nursing homes, 5391 residents (1 Cluster-RCT)</td>
<td>P=0.79 Results corrected for cluster.</td>
<td></td>
</tr>
</tbody>
</table>

2. Only one single study with few events.  
3. Large confidence interval.