

**Supplementary Table 1. Topics covered by the educational meeting interventions**

Study	Topics of educational meetings	Aimed at
<b>Beck 1997</b> <sup>29</sup>	1. Medications and drug-related problems 2. Exercise 3. Nutrition 4. Alternate care 5. Skilled nursing facilities 6. Home safety 7. Advance directives 8. Use of emergency care services	Patients
<b>Leveille 1998</b> <sup>30</sup>	1. Nutrition tip sheets 2. Health promotion course, 3. Physical activity (walking, swimming, dancing, tai chi and a supervised endurance, strength and flexibility training programme) 4. Home exercise options 5. Chronic Illness Self-Management Course, (disease self-management concepts)	Patients
<b>Coleman 1999</b> <sup>31</sup>	1. Polypharmacy and medications associated with functional decline. 2. Self-management skills and group problem solving for chronic health problems 3. Topics about physical activity, nutrition and advanced care planning (individual groups)	Patients
<b>Scott 2004</b> <sup>33</sup>	1. Patient care notebooks 2. Routine health maintenance 3. Pharmacy brown bags 4. Advanced directives 5. Emergency care and 6. Continuing care 7. Chronic pain 8. Nutrition 9. Exercise 10. Home safety 11. Disease processes such as stroke, hypertension, arthritis, osteoporosis and Alzheimer's disease	Patients
<b>Meng 2005</b> <sup>21</sup>	1. Information and assistance on hiring and firing in-home workers 2. Instructions and assistance relating to billing and income tax issues 3. Relevant knowledge and skills on how to conduct disease self-management 4. Health-behaviour change strategies (empower individuals to engage in behaviour change, develop and sustain motivation, develop behavioural skills and participate in community activities)	Patients and caregivers
<b>Lin 2006</b> <sup>34</sup>	1. Education and behavioural activation 2. Identify depression treatment preferences 3. Arthritis-related problems 4. Problem-Solving	Patients

<b>Hochhalter 2010<sup>41</sup></b>	1. Prepare for healthcare appointments 2. Communicate effectively and gather information and support during healthcare appointments and	3. Follow through on plans of care	Patients
<b>Lamers 2010<sup>22</sup></b>	1. Responsibility for day-to-day management of their own illness and its consequences 2. Cognitive-behavioural therapy & self-management	3. Reattribution of negative cognitions, and problem solving	Patients
<b>Touchette 2012<sup>24</sup></b>	1. Provide education and counselling to improve enrollees' understanding of their medications	2. Improve adherence to medications	Patients
<b>Moral 2015<sup>25</sup></b>	1. Patient safety and medication adherence	2. Motivational interviewing	Patients
<b>Toots 2019<sup>38</sup></b>	1. Exercise (high-intensity functional exercise programme)		Patients