

**Supplemental Table 1. Survey responses**

<b>Theme 1. Characteristics of residential care facilities, staff and residents (n=56)</b>		<b>N (%)</b>
1.	Do you have or have you had residents with diabetes at the facility where you are employed?	
	Yes*	44 (78.6)
	No	12 (21.4)
2.	If yes, which type of diabetes are/were your residents diagnosed with?	
	Type 1 diabetes (autoimmune disease in which life is insulin-dependent)	23 (52.0)
	Type 2 diabetes (most common type, treated with tablets and lifestyle changes but can also require insulin treatment)	36 (80.0)
3.	What type of employees are employed to help residents with daily life?	
	Specialized health staff (e.g., special residential social worker, therapist)	4 (7.1)
	Residential social workers	54 (96.4)
	Nurses	26 (46.4)
	Social and health assistants	45 (80.4)
	Other kind of assistants (e.g. students, unskilled workers)	22 (39.3)
4.	How long have you been employed at the facility?	
	0-5 years	26 (46.4)
	6-10 years	12 (21.4)
	11-20 years	9 (16.1)
	>21 years	7 (12.5)
	Missing	2 (3.6)
5.	What is your position at the facility?	
	Manager (administrative)	16 (28.6)
	Daily manager	4 (7.1)
	Nurse, nurse consultant or coordinator	14 (25.0)
	Health assistant	11 (19.6)
	Educator	5 (8.9)
	Other	2 (7.1)
	Missing	2 (7.1)
6.	What is the highest level of education you have completed?	
	Short (up to three years after primary school)	4 (7.1)
	Medium long (up to three years after high school)	30 (53.6)
	Long (five years or more after high school)	4 (7.1)
<b>Theme 2. Diabetes care needs of the residents (n=44) *</b>		<b>N (%)</b>
7.	To what extent do the residents with diabetes need help from the staff to manage their diabetes?	
	To a very low extent	1 (2.3)
	To a low extent	2 (4.5)
	To some extent	6 (13.6)
	To a large extent	11 (25.0)
	To a very large extent	24 (54.5)
8.	In comparison with the residents' other challenges, how much time do the staff spend on their diabetes?	
	Very little of the time	3 (6.8)
	A little of the time	5 (11.4)
	Some of the time	25 (56.8)
	A lot of the time	11 (25.0)
	Almost all of the time	0 (0.0)

9.	What kind of support do the residents need from the staff when managing diabetes in everyday life?	
	Overview of medicine (e.g., doses, reminders)	39 (88.6)
	Healthy eating habits	38 (86.4)
	Physical activities	38 (86.4)
	Help to understand how to manage diabetes and why it is important	30 (68.2)
	Daily measurements of blood sugar levels	27 (61.4)
	Managing emotional aspects of living with diabetes	16 (36.4)
10.	Where do the residents receive treatment for their diabetes?	
	At a hospital or outpatient clinic	32 (72.7)
	At the general practitioner's clinic	8 (18.2)
	At the facility with a medical doctor who consults at the residency	2 (4.5)
11.	What kind of support is needed for your residents to be able to participate in consultations at a hospital or at the general practitioners' office? (n=56)	
	Organize appointments	42 (75.0)
	Overview and be reminded of appointments	48 (85.7)
	Transport to and from the appointment	52 (92.9)
	Understand what is going to happen at the consultation	50 (89.3)
	To understand key messages said during the consultation	45 (80.3)
	To get emotional support or calmed down before, during, or after the consultation	45 (80.3)
<b>Theme 3: Diabetes care at the facility (n=44) *</b>		<b>N (%)</b>
12.	How are the staff members trained to accommodate the resident's diabetes care needs?	
	Peer-to-peer knowledge transfer	36 (81.8)
	External diabetes education (e.g., courses, supervision)	11 (25.0)
	Personal supervision from diabetes care professionals	9 (43.2)
	Have knowledge about diabetes from their education	24 (54.4)
	Formal guidelines are followed about the residents' daily diabetes care	22 (50.0)
	There is no standardized way of training staff	5 (11.4)
13.	To what extent do the staff at the facility have sufficient knowledge <u>of diabetes</u> to be able to care for their residents' diabetes?	
	To a very high extent	4 (9.1)
	To a high extent	13 (29.5)
	To some extent	20 (45.5)
	To a low extent	5 (11.4)
	To a very low extent	0 (0.0)
	Missing	2 (4.5)
14.	To what extent do the staff at the facility have sufficient knowledge of <u>diabetes complications</u> (e.g., diseases of the eyes, kidney, nerves, foot)?	
	To a very high extent	3 (6.8)
	To a high extent	9 (20.5)
	To some extent	18 (40.9)
	To a low extent	12 (27.3)
	To a very low extent	0 (0.0)
	Missing	2 (4.5)
15.	To what extent do the staff at the facility have sufficient knowledge of how diabetes complications can be prevented (e.g., screening/preventive examinations of the eyes, kidneys, feet, nerves, heart)?	
	To a very high extent	2 (4.5)
	To a high extent	9 (20.5)
	To some extent	21 (47.7)

To a low extent	9 (20.5)
To a very low extent	0 (0.0)
Missing	3 (6.8)
<b>Theme 4. Barriers and drivers related to participating in screening programs (n=56)</b>	
<b>N (%)</b>	
16. What kind of challenges do your residents experience when participating in one or more physical examination at the hospital or at the general practitioner?	
Transportation to and from examination introduces practical challenges	48 (85.7)
The residents get worried, sad, or angry during or after the examination	38 (67.9)
Become very exhausted during examination	35 (62.5)
Emotional challenges in relation to meeting new health care professionals	34 (60.7)
The residents don't want to participate in the examination	33 (58.9)
Physical challenges during the examination (e.g., unpleasant sensations or pain)	25 (44.6)
Fear of or the experience that the doctor or nurse will be judgmental towards them	14 (25.0)
17. Which conditions can influence the residents' participation in screening programs?	
A plan on how to best accommodate the residents' needs is made in advance with the residents, staff, and diabetes care staff	43 (76.8)
Staff from the facility or relatives participate in the examination	42 (75.0)
Residents have been prepared and walked through all steps of the examination	35 (62.5)
Residents have already met the professional who will carry out the examination	19 (33.0)
<b>Theme 5. Time and settings for screening of residents (n=56)</b>	
<b>N(%)</b>	
18. How many hours in a row would your residents be able to participate in examinations at a hospital?	
1 hour maximum	29 (51.8)
1-2 hours	26 (46.4)
2-4 hours	13 (23.2)
4-6 hours	1 (1.8)
19. Which setting would be the most appropriate, if your residents had to participate in several screening examinations in a row?	
The hospital or outpatient clinic	28 (50.0)
The general practitioner's clinic	22 (39.3)
The residential care facility	43 (76.8)
20. How should six hours screening examinations be planned to best accommodate the resident's needs?	
All examinations should be carried out on the same day (approximately 6 hours)	9 (16.1)
The examination should be split into two days (approximately 3 hours)	23 (44.6)
Maximum of one examination per day (approximately 1 hour)	26 (64.3)
Don't know	4 (7.1)

\*Diabetes experience-specific questions were only given to the 44 survey respondents who had experience with residents with diabetes