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Citation

Jeonghwa You, Soo Chan Carusone, Rebecca Ganann, Maggie MacNeil, Maureen Markle-Reid, Carly Whitmore, Julia Abelson. Characteristics and impacts of public engagement in health system decision-making for older adults. PROSPERO 2022 CRD42022291339 Available from: https://www.crd.york.ac.uk/prospero/display_record.php?ID=CRD42022291339

Review question

How has public engagement been conducted to inform health policies for older adults at the system level and what has been the impact of public engagement?

Searches

Six electronic databases will be searched: MEDLINE (via Ovid), HealthStar (via Ovid), CINAHL (via EBSCOhost), AgeLine (via EBSCOhost), Politics Collection (via ProQuest) and Social Science Citation Index (via Web of Science).

A combination of the three main domains of terms will be used; health policymaking (subject headings include health policy, policy making), patient public engagement (subject headings include stakeholder participation, community participation), and policies for older adults (subject headings include aged, geriatric, gerontology). These search terms are developed for the MEDLINE database (through Ovid), and they will be adapted to the syntax and subject headings of each database. A search strategy has been developed and tested after consultations with a McMaster Health Science librarian.

To identify grey literature, the aforementioned databases (with the option to scan grey literature sources selected), as well as Google Advanced and Participedia will be searched based on the combinations of concept domains below. The same search terms (combinations specific to health policymaking; patient public engagement; and policies for older adults) will be used. When the search yields thousands of results, the first 10 pages will be screened and the screening will continue for another five pages if relevant materials are found. When no more relevant information is found, the search will end.

Hand searching for reference lists and citations will also complement the search.

Databases will be searched from inception. No geographical and methodological will be applied to the search, while only articles reported in English will be included.

Types of study to be included

There are no restrictions on the types of study design eligible for inclusion. It will include both peer-reviewed articles and grey literature.

Condition or domain being studied

This is a review of public engagement at the system level that aims to help inform health policies for older adults. There is no restriction on the particular disease or condition.

Participants/population

There is no pre-determined population with a clear-cut criterion because participants/population will be one of the review's expected outcomes. Nonetheless, articles that only describe activities with experts or professionals in the healthcare or health policy sector will be excluded. This review will include articles

describing activities involving lay public members such as older adults, family, friends, non-professional caregivers, and their representative organizations that advocate their rights (e.g. charities and volunteer groups as opposed to service delivery organizations).

Intervention(s), exposure(s)

This review does not focus on traditional interventions or exposures. This review will include articles that describe public engagement in policymaking at the system level to help inform health policies for older adults.

Comparator(s)/control

No comparator.

Context

Eligibility criteria for inclusion are purposefully broad to catch the unique characteristics of public engagement observed in policymaking settings.

1. Public engagement: public engagement refers to a wide variety of activities and roles that public members play in various stages and domains of the health system and policy decision-making. This review will include articles describing activities involving lay public members such as older adults, family, friends, non-professional caregivers, and their representative organizations that advocate their rights (e.g., charities and volunteer groups as opposed to service delivery organizations). Articles that only describe activities with experts or professionals in healthcare or health policy sectors will be excluded.
2. Policymaking at the system level: To operationalize this criterion, this review will use the taxonomy of governance, financial and delivery arrangements within health systems developed by McMaster Health Forum. Accordingly, this review will include articles focused on decision-making at the health system levels only; articles focused on other settings and at other levels such as individual healthcare decisions, health research, organizations and community settings will be excluded.
3. Health policies for older adults: Articles will be included that focus on PE to inform health policies aimed at improving the health of older adults. Health policies for older adults include various fields of medicine such as primary care, specialty care, psychiatry, dentistry, emergency care. Articles focused on social policies will be considered out of the scope for this review.

Main outcome(s)

This review aims to describe the characteristics and impacts of engagement initiatives designed to help inform health policymaking for older adults at the system level. It will encompass a wide range of public engagement initiatives so that it can provide a high-level overview of what is known about them.

Measures of effect

Descriptions of the participants (including marginalized populations), activities (e.g. engagement methods and tools), intended and reported impacts, inclusion strategy, and descriptive statistics, where reported.

Additional outcome(s)

Not applicable.

Measures of effect

Not applicable.

Data extraction (selection and coding)

Selection process: All retrieved articles from the search will be uploaded to COVIDENCE software. After removing duplicates, two screeners will review the abstracts and titles of all retrieved articles independently and in duplicate based on the eligibility criteria to identify the relevance of studies for inclusion. The articles that the two screeners agree on for inclusion will be subjected to a full-text review. A third screener will resolve disagreements between the two screeners, and any remaining discrepancies will be resolved through discussion between the screeners. Finally, the full texts of all included studies will be reviewed for

data extraction and analysis.

Data extraction process: All included studies will be reviewed in full-text in duplicate by two reviewers. Two reviewers will independently extract data from each included study using a customized data extraction form. Extracted data will be compared for accuracy and completeness. Any differences between the reviewers will be settled by consensus. A third reviewer will resolve any remaining disagreements.

Abstracted data will include basic information of each article and specific information regarding public engagement initiatives. The specific information regarding public engagement initiatives include intended/ recruited participants, activity, intended/ reported impacts, and inclusion strategy. Given the research aim to describe characteristics and impacts of engagement, all extracted data regarding public engagement will be in narrative form.

Risk of bias (quality) assessment

All included studies will undergo a quality appraisal process during the data extraction stage. Two reviewers will independently conduct the appraisal in duplicate. The MMAT Mixed Methods Appraisal Tool will be used, which is designed to critically appraise quantitative, qualitative and mixed-methods studies included in systematic mixed-studies reviews. Additionally, the AACODS checklist (authority, accuracy, coverage, objectivity, date, significance) will be used for appraising grey literature.

Strategy for data synthesis

Extracted data will be synthesized using a narrative synthesis approach, which is suitable for the research aim and the diverse range of studies included in the review. Following the European Social Research Council (ESRC) Guidance on the Conduct of Narrative Synthesis in Systematic Reviews, the process will involve (1) preliminary synthesis of the included studies, (2) exploring relationships within and between studies, and (3) assessing the robustness of the synthesis. While ESRC guidance suggests developing a theoretical basis for the work in the synthesis process, this step will not be applied given the descriptive nature of the review. The output of the review will be a narrative summary of key information on participants, activities, impacts, and diversity consideration of engagement.

Analysis of subgroups or subsets

Not applicable.

Contact details for further information

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Type and method of review

Narrative synthesis, Systematic review

Anticipated or actual start date

01 March 2022

Anticipated completion date

31 October 2022

Funding sources/sponsors

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Conflicts of interest

Language

English

Country

Canada

Stage of review

Review Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

MeSH headings have not been applied to this record

Date of registration in PROSPERO

25 March 2022

Date of first submission

22 February 2022

Details of any existing review of the same topic by the same authors

No previous existing review.

Stage of review at time of this submission

The review has not started

Stage	Started	Completed
Preliminary searches	No	No
Piloting of the study selection process	No	No
Formal screening of search results against eligibility criteria	No	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No

The record owner confirms that the information they have supplied for this submission is accurate and complete and they understand that deliberate provision of inaccurate information or omission of data may be construed as scientific misconduct.

The record owner confirms that they will update the status of the review when it is completed and will add publication details in due course.

Versions

25 March 2022

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