

Appendix B: Paper summary table

*Papers are formatted in American Psychological Association (APA) style, with a full reference list at the end of this document, to enable the reader to more easily cross reference between appendices and the main paper

Author(s) and year* Source	Aim of paper	Method Stakeholders	Setting	Focus relevant to research questions	Description of quality improvement activities at service level
Alidina, Martelli, Singer, & Aveling, 2019 Database	This study used qualitative methods to explore the experiences of primary care providers and patients engaged in practice improvement to achieve primary care goals, including high-functioning teams and patient-centred care. We focused on understanding how to optimize partnerships with patients and on identifying material, technical, and sociocultural resources that facilitated them.	Qualitative research Patients and staff	General practice & primary care Generalist scope USA	Capabilities focus Learning and development focus	Across sites, patients contributed to improvement projects focused on patient experience (e.g., booking appointments, check-in process, signage, and other aspects of the physical space), patient care (e.g., communication with patients around cancer screening), and shaping practice policies and processes (e.g., around medical marijuana or empanelling patients to primary care teams).
Bak et al., 2014 Reference List	An Experience Based Design (EBD) Collaborative was established to share successes and challenges	Qualitative research Patients and staff	More than one healthcare context	Capabilities incidentally reported Learning and development	Projects address various issues, such as process improvement (e.g. streamlining patient bookings, improving the patient experience), resource/tool development (e.g. toolkits, videos, screening tools)

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	related to the EBD projects. This paper summarizes the various lessons learned.		chronic kidney disease and systemic or radiation oncology departments Canada	incidentally reported	and establishing patient advisory boards and committees (patient councils and hospital renovation committees).
Bak, Moody, Wheeler, & Gilbert, 2018 Database	The purpose of the Experienced Based Co-Design (EBCD) evaluation was to: (1) describe the adoption and effectiveness of the EBCD approach; (2) identify the key enablers and barriers to success and (3) determine if additional resources would be required to further spread the EBCD approach across Ontario.	Mixed methods research Patients and staff	More than one healthcare context Cancer care Canada	Capabilities incidentally reported Learning and development focussed	Experience-based co-design (EBCD): group of staff and the group of patients, family members and caregivers are then brought together to explore the findings and to work together to identify and “co-design” activities to improve the service or the care pathway.

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Bar, Grant, Asuri, & Holms, 2018 Database	To report on Patients as Partners, a quality improvement initiative of the British Columbia Ministry of Health (the Ministry) that aims to bring patient voice, choice, and representation to the forefront of healthcare.	Reflection Patients and staff	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	Patient Voices Network is based on the belief that patients affected by healthcare decisions should be involved in the process of reaching those decisions. Patients have been involved in groups that worked on projects including redesigning services, considering design aspects of physical locations, and developing educational materials at the community level.
Blignault, Aspinall, Reay, & Hyman, 2017 Database	The aim of this study was to describe the implementation of the Joint Consumer Engagement Strategy in the Nepean Blue Mountains and the organisational benefits.	Qualitative research Staff only	More than one healthcare context Generalist scope Australia	Capabilities incidentally reported Learning and development incidentally reported	Since the beginning, the Joint Consumer Engagement Strategy has been driven by consumers. Key features include extensive community consultation and the formation of consumer groups in each area, giving the community a voice and consumers a platform to engage with other stakeholders to address pressing health issues. Individuals have contributed to the design and implementation of health programs and taken part in accreditation assessments.

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Boivin, Dumez, Fancott, & L'Espérance, 2018 Database	As a synthesis article, we propose an ecosystemic perspective on patient and citizen engagement in health, outlining key elements at the individual, organizational and systemic levels supporting reciprocal engagement relationships between patients, clinicians, citizens and health system leaders.	Opinion piece Patients and staff	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	There are a variety of roles that patients can play in the healthcare system: for example, planning, designing, advising, surveying, evaluating, recruiting and training. Increasingly, organizations ask patients and family members not only to be a “voice around the table” but to take on leadership roles.
Bombard et al., 2018 Citation	To identify the strategies and contextual factors that enable optimal engagement of patients in the design, delivery, and evaluation of health services	Literature review Patients and staff	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	Quality of care outcomes which involved patient engagement included: Extended opening hours; employment of a dedicated mental health advocate; improved/developed care facilities, services, programs, or intervention; improved access to service; creation of an employment support unit; creation of new services; improved governance; patient representation on board; auditing policy and frameworks; commitment to improve services; organizational culture change.

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Caplan et al., 2014 Database	In this article, we describe key organisational components critical to fostering a culture of patient engagement.	Reflection Patients and staff	General practice & primary care Generalist scope USA	Capabilities incidentally reported Learning and development incidentally reported	Sample Activities included: Teams hang posters in waiting areas to notify patients of patient engagement opportunities and quality improvement efforts, and all communications are branded with the “Partnering with Patients” logo; wait times surveys; calling some patients and inviting others to a team meeting, to learn more about the specific needs of patients with controlled and uncontrolled diabetes; Patient Advisory Panel to meets monthly for six months during the transition of a relocated clinic; a patient joins the team and to be an active participant at team meetings, resulting in more thoughtful conversations about patients.
Clavel, Pomey, & Ghadiri, 2019 Citation	The main goal of this research is to study key managerial practices to implement patient partners (PP) in quality improvement (QI) and has two main objectives: 1-	Qualitative research Patients and staff	More than one healthcare context Mental health and oncology - ambulatory	Capabilities focus Learning and development incidentally reported	This program aims to introduce patient advisors (PAs) into QI committees. PAs are volunteers who share their experiential knowledge with providers and managers to provide direct input on care and services. A QI committee works according to a Plan-Do-Study-

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	describe the implementation of a PP program in two different clinical areas; 2-identify managerial practices at different management levels used to implement PP in QI.		mental health hospital services unit, and a breast cancer unit Canada		Act method based on improvement cycles.
Davis et al., 2016 Database	This article introduces a patient engagement program for team-based practice redesign efforts.	Reflection Staff only	General practice & primary care Generalist scope USA	Capabilities incidentally reported Learning and development focus	Teams gathered data through surveys and cycle times, engaged in discussions with patients in one-time focus groups, involved patients through ongoing advisory panels, and partnered with patients by inviting them to join their QI team. Engagement efforts had specific QI goals in mind: one team solicited in-person feedback regarding the timing of delivering paediatric immunizations during an office visit, while another team held a focus group to help their clinic redesign the waiting room.
Dimopoulos-Bick, Osten, Shipway,	We have conducted a case study synthesis of the projects to identify the challenges of participation	Case study	More than one healthcare context -	Capabilities incidentally reported	Examples of improvement projects described in paper: Short film to raise public awareness of rehabilitation services and educate people on how to

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Trevena, & Hoffmann, 2019 <i>Patient Experience Journal</i> hand search	in, and implementation of Experience Based Co-Design (EBC) to identify lessons for future improvement projects.	Patients and staff	metropolitan, regional and rural settings Mental health, rehabilitation, blood and bone marrow transplant, brain injury rehabilitation, urinary incontinence, intellectual disability Australia	Learning and development incidentally reported	access services at the centre; service user and staff designed information brochure about the programs, education and services available; appointment scheduling process reviewed and changed to reduce wait times for patients between therapy sessions; guide developed to assist clinicians managing children and young people with urinary incontinence in primary health settings; guide to facilitate training/support for health professionals working outside the metropolitan area in the management of children and young people with incontinence using telehealth.
Fancott, Baker, Judd, Humphrey, & Morin, 2018 Reference List	This article describes Canadian Foundation for Healthcare Improvement (CFHI) initiatives to enhance patient engagement efforts across Canada and the lessons learned in the context of “engagement-capable	Reflection Patients and staff	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	The CFHI has supported healthcare organizations across Canada to meaningfully partner with patients in quality improvement and system redesign efforts.

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	environments” and offers reflections for the future of patient engagement in Canada.				
Farrington, Burt, Boiko, Campbell, & Roland, 2017 Database	This paper explores doctors’ perceptions of patient experience surveys in primary and secondary care settings in order to deepen understandings of how doctors view the plausibility of such surveys.	Qualitative research Staff only	More than one healthcare context Generalist scope UK	Capabilities incidentally reported Learning and development incidentally reported	Doctors emphasized the potential for patient experience surveys to facilitate quality improvement.
Frawley et al., 2019 Database	Aimed to evaluate a Patient and Public Involvement (PPI) training programme across nine regional administrative units in a national mental health service.	Mixed methods research Patients and staff	More than one – national mental health service Mental health Ireland	Capabilities incidentally reported Learning and development incidentally reported	Improve the design, delivery, planning and evaluating of mental health services. Focus was on forum and committee participation specifically.
Hertel et al., 2019 Citation	This paper describes the care design process, including how we	Mixed methods research	General practice & primary care	Capabilities incidentally reported	This study presents evaluation results from a care design effort that attempted to engage patients as equal partners in

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	recruited, prepared and involved patients, and the impact patients had on the design process and its outcomes. We also present lessons learned that may be useful for organizations interested in engaging patients codesign activities.	Patients and staff	Generalist scope USA	Learning and development incidentally reported	designing a new clinic service in three primary care clinics within Kaiser Permanente Washington, a large integrated delivery system in Washington State.
Holland-Hart, Addis, Edwards, Kenkre, & Wood, 2019 Database	To provide insights into how coproduction is viewed by clinicians and the public and identify perceived barriers and facilitators to its implementation.	Qualitative research Patients and staff	More than one healthcare context Generalist scope UK	Capabilities incidentally reported Learning and development incidentally reported	Participants from both clinician and public groups discussed coproduction mainly in relation to one-to-one interactions between clinicians and patients. However, some participants recognized that coproduction also involves citizens consciously contributing to the design and transformation of services.
Hwang & Warshaw, 2019 Database	To ascertain how and when consumer engagement is occurring in the clinical settings where American Geriatrics Society members provide care, and	Quantitative research Staff only	More than one healthcare context Older persons	Capabilities incidentally reported Learning and development	These structures can include patient and family advisory committees, patient representation on an organization's board of directors, or inclusion of patients and family members in quality improvement activities.

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	to identify opportunities to improve engagement.		USA	incidentally reported	
Jenkinson, Smethurst, Boorman, & Creedy, 2014 Citation	This paper describes the effects of a maternity consumer representative training program on participants' confidence to fulfil this role and engagement in representative activities.	Quantitative research Patients only	More than one healthcare context Maternity services Australia	Capabilities incidentally reported Learning and development focus	These activities included joining a consumer organisation or regularly attending a consumer forum, whereas others contributed to consumer organisations' submissions in response to draft policy and guideline documents. Furthermore, 15 participants had committee roles within their chosen consumer organisations, at either state or national level. Participants also reported becoming consumer representatives on a range of local and state-level committees.
Kirby, C., Darrah, & Milliman-Richard, 2018 <i>Patient Experience Journal</i> hand search	The primary purposes of developing this quality improvement initiative were to pioneer the involvement of patients and families in identifying and preventing harm through a series of tools and behaviours and to expand the use of the	Case study Patients and staff	Hospital - all areas or combination Paediatrics, young people and youth USA	Capabilities incidentally reported Learning and development incidentally reported	Development of Patient and Family Error Prevention Toolkit - brochures, posters, videos. Staff training. Evaluation of the toolkit.

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	safety behaviours and tools (initially aimed at staff to staff interaction) to patients and families while demonstrating their importance as part of the care team.				
Kratchman et al., 2015 <i>Patient Experience Journal</i> hand search	This paper describes the Family Partner Program infrastructure; approaches to recruiting, onboarding, training, and mentoring parents and caregivers; and the many ways that Family Partners promote the core principles of child- and family-centeredness in clinical care, quality improvement and research contexts.	Reflection Patients only	Hospital - all areas or combination Paediatrics, young people and youth USA	Capabilities incidentally reported Learning and development focus	Family Partners in research groups, hospital committees and other teams; parents are able to inform the planning, development and delivery of programs and research instead of being limited to providing feedback reactively. This included speaking at hospital events, reviewing documents and policy changes, and contributing to research or quality improvement projects.
Kuluski et al., 2019 Reference List	Our study aimed to determine principles to support caregiver	Qualitative research	More than one	Capabilities focus	Levels of engagement may include sharing their stories and perspectives, deliberating with care teams on their care plans and setting priorities for health systems generally. Designing and

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	engagement in practice and research.	Patients and Staff	Generalist scope Canada	Learning and development focus	evaluating services so that they are better calibrated to both patient and caregiver needs.
Larkins et al., 2019 Database	This paper reports how quality improvement is operationalised at successful ('high-improving') Indigenous Primary Health Care services, including the adaptation of strategies to cultural and historical contexts, and systems factors that were important in producing the Outcomes.	Mixed methods Patients and staff	Primary Care Aboriginal health Australia	Capabilities incidentally reported Learning and development incidentally reported	Continuous Quality Improvement activities - Indigenous health services participating in the Audit and Best Practice for Chronic Disease National Research Partnership.
Lavallee et al., 2019 Database	This short report describes the development of a Community and Patient Advisory Team formed to support patient involvement in interprofessional	Reflection Patients and staff	Hospital - inpatient only Heart failure USA	Capabilities incidentally reported Learning and development incidentally reported	Development and implementation of Structured Interprofessional Bedside Rounds rounding, including training activities, served as the project's intervention; these activities were designed to support professional learning through workshops, group activities, and simulated exercises.

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	collaborative practice for heart failure care.				
Lavoie-Tremblay et al., 2016 Reference List	This article presents the experience of patients in an academic health sciences centre who engaged patients in a process of co-designing care to improve the quality of care under a program entitled, Transforming Care at the Bedside.	Qualitative research Patients and staff	Hospital - all areas or combination Internal medicine unit, emergency department, medical-surgical unit, outpatient haemodialysis unit, general surgical unit Canada	Capabilities incidentally reported Learning and development incidentally reported	Patients were involved in weekly meetings and in the measurement and testing of change on the units. They interviewed patients in the unit to get their feedback on the experience and ask them how their experience of care or care processes could be improved.
Liang et al., 2018 Database	The primary purpose of this study was to describe the characteristics of published empirical research that evaluated patient engagement in hospital health service	Literature review Patients and staff	Hospital - all areas Generalist scope Canada	Capabilities incidentally reported Learning and development	All studies identified types of activities in which patients were engaged for hospital service improvement and their roles in these activities. Little detail was provided about precisely what patients were meant to do or did in relation to these activities. Studies focused on

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	improvement. In so doing, we also sought to describe the types, extent, determinants, interventions and impact of service improvement PE in the hospital context.			incidentally reported	consultation activities: questionnaire, interview, mass media and suggestion boxes; involvement activities: members of standing committees, advisory bodies, project teams or providing education to other patients; partnership: citizen advisory panel recommendations on core services were adopted by a hospital board for a restructuring initiative.
Loud, Jain, & Thomas, 2013 Database	This paper explores how a group of people with renal or other vascular conditions collaborated with renal practitioners in undertaking a quality improvement project, the aim of which was to reduce variation in care for people with Stages 3–4 chronic kidney disease (CKD).	Reflection Patients only UK	General practice & primary care Chronic kidney disease	Capabilities incidentally reported Learning and development incidentally reported	Examples of QI activities in paper included: Design of a letter for individuals with CKD offering them to join the project and take part in self-management; production of personal case studies and suggestions on explaining CKD from the patient perspective; production of information booklet on CKD for patients; co-design of the training given to practitioners on how to support people with CKD to self-manage; delivery of the training to practitioners.

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Maher, Hayward, Hayward, & Walsh, 2017a <i>Patient Experience Journal</i> hand search	We evaluated the co-design programme to explore the experiences, challenges and solutions that participating teams encountered while engaging with patients in their projects.	Qualitative research Patients and staff	More than one healthcare context Generalist scope New Zealand	Capabilities incidentally reported Learning and development incidentally reported	The co-design programme is based on the Experience Based Design approach (EBD) to co-design.
Maher, Hayward, Hayward, & Walsh, 2017b <i>Patient Experience Journal</i> hand search	This article investigates barriers and facilitators to sustainability in co-design projects undertaken at nine healthcare organisations as part of the Health Quality & Safety Commission New Zealand's Partners in Care codesign programme.	Qualitative research Patients and staff	More than one healthcare context Generalist scope New Zealand	Capabilities incidentally reported Learning and development incidentally reported	Programme participants used a systematic process to capture, understand and improve safety and other aspects of the care journey through the co-design of healthcare processes and services.
Majid & Gagliardi, 2019 Database	The objective of this review was to investigate how studies have conceptualised and differentiated between degrees of engagement in	Literature review Patients and staff	More than one healthcare context Generalist scope	Capabilities incidentally reported Learning and development	This qualitative systematic review analysed 18 studies on patient engagement in the planning and designing of administrative or health services and interventions.

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	planning and designing of health services.		Canada	incidentally reported	
Marshall et al., 2019 <i>Patient Experience Journal</i> hand search	This article describes the progress that has been made in England since 2015 in addressing those gaps through the development of a national model for co-production, gaining explicit national government-level support for coproduction in quality improvement, and the development of a national program to introduce Always Events®.	Case study Patients and staff	More than one healthcare context Generalist scope UK	Capabilities incidentally reported Learning and development incidentally reported	Always Events®, which is an improvement methodology for the co-design and consistent implementation of those aspects of patient experience that matter most to patients in a health care setting, was chosen.
McCarron et al., 2019 Database	The purpose of this study was to understand how health systems are intentionally investing in the training and skill development of patients and family members.	Literature review Patients only	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development focus	The paper focused on programs / activities / events that were determined to have an impact on the participation of patients in healthcare.

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McGhee & Gleicher, 2018 Database	In this article, factors needed to hard-wire quality improvement into healthcare systems and challenges to this are discussed as part of the process of developing capacity to do health system-based improvement work.	Opinion piece Patients and staff	Hospital - inpatient only Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	Batalden and Davidoff in their definition of QI work: "...the combined and unceasing efforts of everyone—healthcare professionals, patients and their families, researchers, payers, planners and educators—to make changes that will lead to better patient outcomes (health), better system performance (care) and better professional development."
Miller et al., 2020 Database	To evaluate two learning collaboratives aimed at increasing quality improvement capability in homecare settings.	Mixed methods research Patients and staff	Community health - generalist Generalist scope Canada	Capabilities incidentally reported Learning and development focus	Wave 1 consisted of a fall prevention collaborative. The collaborative assisted teams in meeting fall-related required organizational practices for accreditation. Wave 2 teams completed a patient safety pilot project on a topic chosen by their organization.
Nathan, Johnston, & Braithwaite, 2011 Database	This paper examines staff views about legitimacy of different roles for community representatives sitting on health service committees as part of a formal Community	Qualitative research Staff	More than one healthcare context - AHS Generalist scope	Capabilities incidentally reported Learning and development	Community representatives sitting on health service committees were involved in strategic planning, priority setting, service re-design or service delivery.

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	Participation Program (CPP) in an Area Health Service (AHS) in Australia.		Australia	incidentally reported	
Neech, Scott, Priest, Bradley, & Tweed, 2018 Database	This study is the first to explore user representatives' experiences of involvement within mental health services, focusing on their initial motivation, perceived opportunities in relation to getting involved and perceived outcomes of involvement.	Qualitative research Patients only	More than one healthcare context Mental health UK	Capabilities incidentally reported Learning and development incidentally reported	Participants had participated in at least one involvement activity, including peer support, research, consultation, staff interviews, training or attendance at forums and committee meetings.
O'Connor, Di Carlo, & Rouleau, 2018 Database	This article reflects the authors' collective experiences and common vision in leading patient partnership initiatives within Canada.	Opinion piece Patients and staff	More than one healthcare context Generalist scope Canada	Capabilities incidentally reported Learning and development incidentally reported	Examples discussed in the paper include: Patient involvement on healthcare boards of directors; integration of patients into every layer of the organizational structure, including in the hiring of all clinical staff; patients and caregivers were partnered with frontline clinical teams to identify the problems in care delivery, generate and test new ideas

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					and then evaluate the outcomes; change to open visitation across all their sites and the use of bedside whiteboards; introduction of standardized uniforms; bedside change-of-shift reporting including families.
O'Donnell, Fealy, & Downes, 2016 Database	This paper presents a systematic approach to involving public and patient representatives in the co-design of care pathways for acute frail older patients.	Qualitative research Patients and staff	Hospital - inpatient only Older persons Ireland	Capabilities incidentally reported Learning and development incidentally reported	Co-design discussions prompted the introduction of patient-centred quality improvement initiatives which targeted cultures of care, social relationships as well as environmental structures in the acute setting.
Pandhi et al., 2020 Database	The purpose of the pilot study was to assess the feasibility and preliminary effectiveness of different combinations of implementation strategies for promoting patient engagement in team-based quality improvement work.	Qualitative research Staff only	General practice & primary care Generalist scope USA	Capabilities incidentally reported Learning and development focus	Examples of QI projects for each clinic: Distance access to diabetes educators; improving clinic lipid screening rates; encouraging patients to complete advance directive; increasing proportion of the patients with completed asthma plans; focus on vaccination rates.

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Pomey et al., 2015 <i>Patient Experience Journal</i> hand search	The aim of this study is to gain an understanding of patients' experience as partners in quality improvement committees, by presenting their perceptions of their contribution to quality teams, of their learning, and of the challenges encountered during the process.	Qualitative research Patients only	More than one healthcare context General Medicine, Home Care, Long Term Care, Specialized care: Mental health, oncology, diabetes, rehabilitation Canada	Capabilities incidentally reported Learning and development incidentally reported	The 'Partnership in Care Program' (PCP) aims to develop a continuous quality improvement process through the implementation of interdisciplinary committees for continuous quality improvement (CIC), each including professionals and at least two resource patients.
Pomey et al., 2016 <i>Patient Experience Journal</i> hand search	The objective of this article is to: 1) describe the implementation strategy for patient advisor (PA) programme over its 18 months; 2) analyse the activities developed, how the practitioners and	Mixed methods research Patients and staff	More than one healthcare context Generalist scope	Capabilities incidentally reported Learning and development incidentally reported	Thus, PAs may participate in activities at different levels of the establishment. At the operational/clinical level - supporting planned interventions for complex situations, reviewing information pamphlets, or providing testimony. At the tactical level - develop action plans, sat on continuous

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	patients involved viewed them, and the factors that facilitated or hindered implementation; 3) discuss the challenges generated by the merger and 4) provide recommendations for establishments interested in setting up a framework for patient involvement.		Canada		improvement committees, and contributed to Kaizen activities. At the strategic level involving directors - review strategic planning, provide input on spatial reorganization of services, and participate in strategic Kaizen activities.
Pougheon Bertrand, Minguet, Gagnayre, & Lombrail, 2018 Database	The objective of this article is to report and reflect on patient and parent involvement at the 14 centres engaged in the pilot phase of the PHARE-M (Programme Hospitalier d'Amelioration des Resultats et de l'Expertise en Mucoviscidos) program from the perspective of the patients and parents and from the perspective of the	Mixed methods research Patients and staff	Hospital Cystic fibrosis (CF) France	Capabilities incidentally reported Learning and development focus	PHARE-M quality improvement program: intends to install a culture of quality improvement in the CF care teams, focusing on patient outcomes improvement and process of care redesign.

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	professionals on the quality teams.				
Renedo, Marston, Spyridonidis, & Barlow, 2015 Reference List	In this article, we examine the ways patients use specific elements of the organisational culture of PPI as resources for their involvement in quality improvement work. We ask: What elements of organizational culture facilitate PPI, and through what processes does this facilitation occur?	Qualitative research Patients only	More than one healthcare context Generalist scope UK	Capabilities incidentally reported Learning and development incidentally reported	Quality improvement work: initiatives that use systematic approaches to make changes in service provision to improve patient outcomes and experience
Rise, Solbjør, & Steinsbekk, 2014 Citation	The aim of this study was to investigate the experiences of professionals and service user representatives who took part in the implementation of a comprehensive development plan intended to enhance user	Qualitative research Patients and staff	Hospital - all areas or combination Mental health Norway	Capabilities incidentally reported Learning and development incidentally reported	Examples of elements of the comprehensive development plan described: Establishing a patient education centre; establishing an office run by users where various user representatives shall be available to the users of the centre; purchasing user expertise; establishing a strategy for the education of user representatives; appointing contact personnel for next of kin in each section; formulating and

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	involvement in a mental health hospital.				implementing a strategy for the quality assurance of attitudes and culture among personnel; implementing a web-based system for collaborating and coordinating individual plans and individual education plans for patients.
Scholz, Bocking, & Happell, 2017 Reference List	One aim of the present study was to better understand how consumer leadership could add value to mental health service provision. Another aim was to apply the service-dominant logic framework to better understand how consumer leadership can contribute to the co-creation of value (well-being of the organisation and consumer leaders) within mental health service delivery.	Mixed methods research Patients and staff	More than one healthcare context Mental health Australia	Capabilities incidentally reported Learning and development incidentally reported	Examples of consumer-led initiatives: Consumer satisfaction surveys or other feedback mechanisms; providing feedback and taking part in planning of services, as well as providing more high-level decision making through being involved in hiring decisions and being members of staff and boards of mental health services.

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Sharma et al., 2016 Reference List	This study aimed to use qualitative methods to learn more about both patient and staff experiences with Patient Advisory Councils (PACs) in the primary care setting, and to expand our limited understanding of how PACs are established and maintained at primary care clinics.	Qualitative research Patients and staff	General practice & primary care Generalist scope USA	Capabilities incidentally reported Learning and development incidentally reported	Examples of successful clinic improvement projects implemented by PACs: Patient communication tools; clinical care; the clinic's physical space; clinical workflows or systems.
Shklarov, Marshall, Wasylak, & Marlett, 2017 Citation	To implement and test a new research method and training curriculum to build patient capacity for engagement in health through peer-to-peer research.	Mixed methods research Patients and staff	More than one healthcare context Chronic disease Canada	Capabilities incidentally reported Learning and development focus	Health-care research and planning was in scope. Examples of research studies: The experience of living with chronic joint pain; the experience of waiting for help with osteoarthritis; Southeast Asian immigrants' experience of osteoarthritis surgery.
Singh et al., 2018 Database	This article briefly describes the role and growth of patient and family advisors and	Reflection Patients and staff	More than one healthcare context	Capabilities incidentally reported	Patient and family advisors partner on various types of quality and safety improvement projects, councils and

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	advisory councils in quality improvement in Alberta Health Services (AHS) and the participation of patient and family advisors in research initiatives through AHS' Strategic Clinical Networks. It also describes recent efforts to build AHS' capacity to engage with patients and families by introducing standard patient engagement training, supporting the creation of the innovative Patient and Community Engagement Research (PaCER) internship program, and by developing tools to measure the impact of patient and advisors on AHS. And finally, this article provides key learnings for healthcare		Generalist scope Canada	Learning and development focus	committees related to their healthcare experience.

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	leaders about engaging patients and families.				
Vennik, van de Bovenkamp, Putters, & Grit, 2016 Reference List	This article explores why hospitals involve patients and staff in co-production activities and hospitals' experiences with co-production in practice.	Qualitative research Patients and staff	Hospital - all areas or combination Cancer care - haematology and oncology departments The Netherlands	Capabilities incidentally reported Learning and development incidentally reported	This article specifically studies instances of co-design in healthcare: the process of designing a product or service. This involves not only designing the functionality, safety and reliability of the product or service, but also the whole interaction with it and how it feels or is experienced by users. By also focusing on the latter, not only healthcare services but also patients' experiences with treatment and care could be improved.
Worswick, Little, Ryan, & Carr, 2015 Database	This current study explored the experiences of the patient representatives from the Learn to Improve Back Pain in the Community (LIMBIC) project who brought their experiences as patients with back pain.	Mixed methods research Patients and staff	General practice & primary care Low back pain UK	Capabilities incidentally focus Learning and development focus	The patient representatives participated in the workshops learning about continuous quality improvement principles and methods and working with practice teams in identifying and implementing changes in their GP practice.

Appendix B: Paper summary table

References

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