

# Screening Protocol- Resilience in Healthcare (RiH)

## **Aim**

Systematically go through all SHARE affiliated former (going back to 2010) and ongoing research projects to consider inclusion in the RiH research project according to “What is the essence of this research project? Is the focus here on quality and resilience? In what way is this project and its findings potentially relevant for the RiH project?”

## **1. Determine which research projects have a SHARE affiliation**

- a) Search through the SHARE website, the SNLA website (projects from 2017 and onwards), the NTNU Gjøvik website (projects from 2015 and onwards), etc. for information on SHARE-affiliated research projects.
- b) Use SHARE documentation and conversations with key personnel, coordinators and/or contact persons with the three SHARE partners for quality assurance of affiliated projects.

## **2. List all SHARE affiliated projects for initial screening**

- a) Search in Brage, Cristin and Google Scholar for relevant project information and outputs (PhD-theses, journal articles, protocols, etc.)
- b) Include all current, finished, and newly started SHARE projects in a screening table according to project title, affiliated researcher(s), project status (finalised, ongoing, start-up), empirical setting, clinical field, and/or stakeholders involved.
- c) Use conversations with key personnel, coordinators and/or contact persons with the three SHARE partners for quality assurance of the screening table.

## **3. Initial screening of all SHARE research projects**

Based on the list of project titles and belonging project information compiled during step 2, screen all projects for relevance to quality and resilience according to the “*RiH Quality & Resilience Trigger Tool*”.

Mark projects in **green** if they are definitive (or highly likely) inclusions; mark projects in **orange** if further consultation of project documentation is needed; mark projects in **red** if they are not relevant for inclusion.

#### **4. Second level screening of projects marked in orange**

Second level screening of projects marked in orange based on the same information as in step 3, conducted by a second researcher. If necessary use additional information through other publicly available sources or seek access to approved project plans and/or protocols from involved researchers.

Mark projects in **green** if they are definitive (or highly likely) inclusions; mark projects in **red** if they are not relevant for inclusion. Mark projects in **orange** if still unsure of inclusion status and further consultation with colleagues is needed.

#### **5. Group consensus process for final inclusion assessment**

Any projects still marked in orange will require further assessment of inclusion in consultation with colleagues.

A group consisting of 5 members will be formed to establish consensus for final inclusion. The group will in their process also include impartiality discussions regarding the issue of conducting research on researchers according to the “*RiH impartiality principles*”.

Make final decision regarding inclusion/exclusion of projects marked **orange**, and document possible actions concerning impartiality.

#### **6. Summary of final project inclusion**

Summarize included projects according to quality and resilience relevance, project phase, empirical setting, clinical domain, and stakeholder groups.