Appendix 2: Methodological details

Full texts were assessed against the inclusion criteria. Where eligibility remained uncertain after full-text review, CV and ND discussed the paper until consensus was reached. Because the initial screening showed that PFAES are described in many ways and not always explicitly, we consulted experts for advice on relevant publication and backward snowballing to the search strategy. This involved checking the reference lists of relevant peer-reviewed systematic reviews and all included full-text papers to identify additional studies and capture all possible iterations of PFAES. Consulting experts and backward snowballing stopped when data saturation was reached.

The following descriptive information was extracted from each articles: publication characteristics (title, name of authors, document type, and year of publication); study characteristics (country of study, study setting, scope or focus, study design, study population, study timeline, comparator group, and sample size); intervention characteristics (PFAES name or type, description of PFAES); PFAES implementation process (description of implementation, barriers, facilitators, healthcare professional perceptions and responses, patient and families perceptions and responses, equity considerations); outcomes and impact (description of effectiveness, impact on patient safety, patient and family satisfaction, description of sustainability).

For included papers, a data extraction form was developed based on the review objectives. The data extraction table was initially piloted on a subset of five papers to ensure its applicability and usefulness. The form was then used to extract data from all included papers.