PROSPERO International prospective register of systematic reviews

Review title and timescale

1   Review title
Give the working title of the review. This must be in English. Ideally it should state succinctly the interventions or exposures being reviewed and the associated health or social problem being addressed in the review.
Perspectives and experiences of the process of mental health diagnosis: a systematic review

2   Original language title
For reviews in languages other than English, this field should be used to enter the title in the language of the review. This will be displayed together with the English language title.

3   Anticipated or actual start date
Give the date when the systematic review commenced, or is expected to commence.
01/08/2016

4   Anticipated completion date
Give the date by which the review is expected to be completed.
30/09/2017

5   Stage of review at time of this submission
Indicate the stage of progress of the review by ticking the relevant boxes. Reviews that have progressed beyond the point of completing data extraction at the time of initial registration are not eligible for inclusion in PROSPERO. This field should be updated when any amendments are made to a published record.

The review has not yet started   ✖

Review stage	Started	Completed
Preliminary searches	Yes	No
Piloting of the study selection process	Yes	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

Provide any other relevant information about the stage of the review here.

Review team details

6   Named contact
The named contact acts as the guarantor for the accuracy of the information presented in the register record.
Miss Perkins

7   Named contact email
Enter the electronic mail address of the named contact.
amorette.perkins@nsft.nhs.uk

8   Named contact address
Enter the full postal address for the named contact.
Hellesdon Hospital, Norwich, NR6 5BE

9   Named contact phone number
Enter the telephone number for the named contact, including international dialing code.
+44 (0)1603 421421

10   Organisational affiliation of the review
Full title of the organisational affiliations for this review, and website address if available. This field may be completed as 'None' if the review is not affiliated to any organisation.
1. Norfolk and Suffolk NHS Foundation Trust; 2. University of East Anglia

Website address:
1. www.nsft.nhs.uk; 2. www.uea.ac.uk

11   Review team members and their organisational affiliations
Give the title, first name and last name of all members of the team working directly on the review. Give the organisational affiliations of each member of the review team.

Title	First name	Last name	Affiliation
Miss	Amorette	Perkins	Norfolk and Suffolk NHS Foundation Trust
Mr	Joseph	Ridler	Norfolk and Suffolk NHS Foundation Trust
Dr	Corinna	Hackmann	Norfolk and Suffolk NHS Foundation Trust
Professor	Tom	Shakespeare	University of East Anglia
Dr	Caitlin	Notley	University of East Anglia
Dr	Guy	Peryer	University of East Anglia

12   Funding sources/sponsors
Give details of the individuals, organizations, groups or other legal entities who take responsibility for initiating, managing, sponsoring and/or financing the review. Any unique identification numbers assigned to the review by the individuals or bodies listed should be included.
Pending

13   Conflicts of interest
List any conditions that could lead to actual or perceived undue influence on judgements concerning the main topic investigated in the review.
Are there any actual or potential conflicts of interest?
None known

14   Collaborators
Give the name, affiliation and role of any individuals or organisations who are working on the review but who are not listed as review team members.

Title	First name	Last name	Organisation details
Mrs	Amanda	Gibley	Norfolk and Suffolk NHS Foundation Trust
Dr	Jonathon	Wilson	Norfolk and Suffolk NHS Foundation Trust

Review methods

15   Review question(s)
State the question(s) to be addressed / review objectives. Please complete a separate box for each question.
To identify the factors impacting service user experiences of the process of mental health diagnosis.

To explore what factors might have a positive and negative impact on service users within the process of diagnosis (e.g. communication of a diagnosis via a letter or in a face-to-face conversation).

To explore the impact of context (i.e. what factors have a positive and negative impact, for whom, when, and where).

To collate service user, carer, clinician, and researcher recommendations for the process of mental health diagnosis.

16   Searches
Give details of the sources to be searched, and any restrictions (e.g. language or publication period). The full search strategy is not required, but may be supplied as a link or attachment.
The following databases will be searched: PsycINFO, EMBASE, MEDLINE and CINAHL. Searches will also be conducted using the following sources: Google scholar, Google, OpenGrey, GreyLIT and GreyNET. Citations and bibliographies will be explored and we will contact key authors/researchers in the field for additional articles. Such methods will help to capture qualitative studies using descriptive titles, which may be missed using standard database searches.

17   URL to search strategy
If you have one, give the link to your search strategy here. Alternatively you can e-mail this to PROSPERO and we

will store and link to it.

I give permission for this file to be made publicly available
No

18 **Condition or domain being studied**
Give a short description of the disease, condition or healthcare domain being studied. This could include health and wellbeing outcomes.
Service user, carer, and clinician experiences and perspectives on the process of adult mental health diagnosis.

19 **Participants/population**
Give summary criteria for the participants or populations being studied by the review. The preferred format includes details of both inclusion and exclusion criteria.
Inclusion: adults (over 18 years of age); mental health diagnosis. Exclusion: children or adolescents (under 18 years of age); developmental disorders; dementia; substance abuse disorders; traumatic brain injury.

20 **Intervention(s), exposure(s)**
Give full and clear descriptions of the nature of the interventions or the exposures to be reviewed
We are exploring service user, carer, and clinician experiences and perspectives on the process of mental health diagnosis. That is, the process whereby an individual is identified and informed of having a named mental disorder. We will review the factors impacting the experience of the diagnostic process from the perspectives of service users, carers, and clinicians. A scoping review has indicated that these factors could include the medium of communication, whether the diagnosis is explained in the context of the individual's life experiences, and the quality of the service user-clinician relationship.

21 **Comparator(s)/control**
Where relevant, give details of the alternatives against which the main subject/topic of the review will be compared (e.g. another intervention or a non-exposed control group).
Not applicable.

22 **Types of study to be included**
Give details of the study designs to be included in the review. If there are no restrictions on the types of study design eligible for inclusion, this should be stated.
We will include studies of a qualitative or mixed methods design (extracting only qualitative data), reported in English, which explore service user, carer, and clinician experiences, views, or recommendations for adult mental health diagnosis.

23 **Context**
Give summary details of the setting and other relevant characteristics which help define the inclusion or exclusion criteria.
We will explore the process of mental health diagnosis in primary, community and acute mental health services. Examples of mental health diagnoses include Affective Disorders (e.g. Bipolar Affective Disorder; Depressive Disorders; Anxiety Disorders; Obsessive-Compulsive Disorder; Stress Disorders; Dissociative Disorders); Eating Disorders; Psychotic Disorders; and Disorders of Personality and Identity. We will focus on Western countries, including public and private services.

24 **Primary outcome(s)**
Give the most important outcomes.
To review service user, carer, and clinician experiences and perspectives on the process of mental health diagnosis, identifying what factors might positively and negatively impact service user experiences of this process.

Give information on timing and effect measures, as appropriate.

25 **Secondary outcomes**
List any additional outcomes that will be addressed. If there are no secondary outcomes enter None.
To understand the impact of context (i.e. what factors have a positive and negative impact, for whom, when, and where).

Give information on timing and effect measures, as appropriate.

26 Data extraction (selection and coding)

Give the procedure for selecting studies for the review and extracting data, including the number of researchers involved and how discrepancies will be resolved. List the data to be extracted.

Study selection: Titles and abstracts of studies retrieved using the search strategy (and those from additional sources) will be selected using predefined exclusion and inclusion criteria. To establish inter-rater reliability, the first 50 papers will be assessed for inclusion by two researchers. Data extraction: The full text of the potentially eligible studies will be retrieved. A standardised, pre-piloted form will be used to extract data from these papers. Extracted information will include first-order (participants' experiences and views) and second-order (author interpretations and recommendations) constructs. We will extract themes relating to people's views/experiences of diagnosis and what they found helpful or unhelpful about how diagnoses were communicated and received; recommendations about how the process of diagnosis can be improved; study setting; study population and participant demographics (including the specific diagnoses under investigation); methodology; and information for assessment of quality. Data will be extracted from one reviewer and verified by a second. Any disagreements will be resolved by discussion, with involvement of a third reviewer where necessary. Missing data will be requested from study authors using the contact details provided on the relevant publication.

27 Risk of bias (quality) assessment

State whether and how risk of bias will be assessed, how the quality of individual studies will be assessed, and whether and how this will influence the planned synthesis.

We will critically assess study quality with reference to the CASP qualitative assessment checklist, supplemented by a narrative appraisal of study quality attending to the particular methodological approaches adopted by the included studies. Disagreements between the reviewers will be resolved by discussion, with involvement of a third review author where necessary. Example questions to assess quality include: 1. Is the research design appropriate? 2. Is the recruitment strategy appropriate to the aims of the research? 3. Has the relationship between the researcher and participants been adequately considered? 4. Was the data analysis sufficiently rigorous? 5. Is there a clear statement of findings? 6. How valuable is the research? We will examine the impact of quality on synthesis by exploring whether inclusion of high quality studies only changes the overall conclusions. As discussed, researcher bias will be avoided in data extraction and synthesis by checking inter-rater reliability and triangulating perspectives.

28 Strategy for data synthesis

Give the planned general approach to be used, for example whether the data to be used will be aggregate or at the level of individual participants, and whether a quantitative or narrative (descriptive) synthesis is planned. Where appropriate a brief outline of analytic approach should be given.

Experts by experience, clinicians, and academics will work together to analyse and synthesise the extracted themes concerning what might (positively and negatively) impact service users' experiences of the diagnostic process. We will explore the number of times a particular theme is coded in data extraction, alongside important considerations such as relevance, usefulness, and transferability. Consensus seeking will ensure triangulation of different perspectives. We will also investigate any differences and contradictions between study findings, exploring how these may be understood within context (e.g. diagnostic type, setting, age). This will help us to understand what factors might have a positive and negative impact, for whom, when, and where.

29 Analysis of subgroups or subsets

Give any planned exploration of subgroups or subsets within the review. 'None planned' is a valid response if no subgroup analyses are planned.

Subgroups or subsets (e.g. diagnostic category; age; setting) will be explored to understand similarities and differences between studies.

Review general information

30 Type and method of review

Select the type of review and the review method from the drop down list.

Qualitative synthesis, Systematic review

31 Language

Select the language(s) in which the review is being written and will be made available, from the drop down list. Use the control key to select more than one language.

English

Will a summary/abstract be made available in English?

Yes

32 Country

Select the country in which the review is being carried out from the drop down list. For multi-national collaborations select all the countries involved. Use the control key to select more than one country.
England

33 Other registration details

Give the name of any organisation where the systematic review title or protocol is registered together with any unique identification number assigned. If extracted data will be stored and made available through a repository such as the Systematic Review Data Repository (SRDR), details and a link should be included here.

34 Reference and/or URL for published protocol

Give the citation for the published protocol, if there is one.
Give the link to the published protocol, if there is one. This may be to an external site or to a protocol deposited with CRD in pdf format.

I give permission for this file to be made publicly available
Yes

35 Dissemination plans

Give brief details of plans for communicating essential messages from the review to the appropriate audiences.
Plans for dissemination include conference presentations, including the Improving Recovery through Organisational Change (ImROC) National Conference; Royal College of Psychiatry Annual Congress.; and INVOLVE National Conference 2018 (PPI conference). We also hope to publish in relevant journals including British Journal of Psychiatry, The Lancet Psychiatry and Journal of Mental Health. We will produce a publicly accessible report for all participants, on the University of East Anglia website and available for download. We will also widely disseminate findings via public channels, including social media and local/national press.

Do you intend to publish the review on completion?
Yes

36 Keywords

Give words or phrases that best describe the review. (One word per box, create a new box for each term)
Mental Health

Diagnosis

Experience

Process

Systematic Review

Meta-Synthesis

Qualitative

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

Give details of earlier versions of the systematic review if an update of an existing review is being registered, including full bibliographic reference if possible.

38 Current review status

Review status should be updated when the review is completed and when it is published.
Ongoing

39 Any additional information

Provide any further information the review team consider relevant to the registration of the review.

40 Details of final report/publication(s)

This field should be left empty until details of the completed review are available.
Give the full citation for the final report or publication of the systematic review.
Give the URL where available.