International Platform of Registered Systematic Review and Meta-analysis Protocols

INPLASY

Scoping review protocol of instruments measuring participant experience in work disability benefit systems

INPLASY202670089
doi: 10.37766/inplasy2026.7.0089
Received: 23 July 2026
Published: 23 July 2026

Sanatkar, S; Collie, A; McCabe, M; MacEachen, E; Grant, G.

Corresponding author:
Samineh Sanatkar

samineh.sanatkar@monash.edu

Author Affiliation:
Monash University, School of Public Health and Preventive Medicine, Health Systems Services and Policy, Melbourne, AU.

ADMINISTRATIVE INFORMATION

Support - Australian Research Council.

Review Stage at time of this submission - The review has not yet started.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202670089

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 23 July 2026 and was last updated on 23 July 2026.

INTRODUCTION

Review question / Objective The objective of this scoping review is to identify and characterise participant-reported experience measures (PREMs) used to assess participant experiences in government-regulated work disability systems. The characteristics of these measures will be summarised, including domains assessed and contexts of use and, if applicable, how these measures are applied across different populations and systems. Available information on scale validation, such as scale reliability and validity assessments, will be mapped.

The PCC Framework, developed by the Joanna Briggs Institute was utilised to indicate scope. PCC structures research questions around who is being studied (Population), what key idea or phenomenon is being explored (Concept), and in what setting or circumstances it is examined (Context).

For this scoping review, the Population comprises adults with work incapacity, whereby work incapacity is defined as a reduced ability to perform regular job functions due to a physical, psychological or chronic health condition. Concept refers to PREMs. PREMs are defined as any standardised tools that gather direct feedback from individuals about their system interaction experiences. In this review, we will consider PREMs in the Context of work disability benefit systems, which we define as government-regulated systems (irrespective of whether they are delivered through public or private organisations) that provide financial assistance to cover costs of daily living (as opposed to service provisions restricted to healthcare, rehabilitation, or assisted activities).

Background Work disability systems provide financial support to workers during periods of work incapacity. Depending on how social protection systems are organised in a given country, the financial support provided by these systems (often referred to as ‘benefits’ or ‘entitlements’) can be

administered through a combination of social security, social insurance, compulsory or voluntary insurance schemes. Examples of work disability systems include workers' compensation, employment injury insurance, disability insurance and sickness absence schemes.

Worker's experiences of accessing work disability systems can vary greatly, even within the same system. Research of the Australian transport accident and workers' compensation schemes demonstrated that about one third of examined workers accessing these schemes found the experience with the claims process stressful. Stressors related to issues with understanding scheme requirements, the duration of the claim process, financial compensation, independent medical examinations requested by the insurer, and being respected and listened to as an injured worker. Importantly, this claim-related stress predicted adverse recovery outcomes, such as sustained health and mental health conditions and reduced life quality, six years later.

The legislative objectives of work disability systems commonly include the promotion of worker's recovery in addition to the provision of financial continuity. This is important to note because research has shown that participant experiences are associated with important system outcomes such as the health and work outcomes of system beneficiaries, the duration of benefit receipt, and overall scheme costs. Understanding how individuals experience interactions with these systems is important for a comprehensive assessment of system impact and effectiveness. In order to relate work disability system interactions with workers' recovery trajectories, good quality assessment tools of workers' experiences are needed.

Participant-reported experience measures (PREMs) are standardised surveys or questionnaires used to gather direct feedback from individuals about their experiences while using a service. PREMs provide a structured way to capture user experiences, including aspects such as accessibility, procedural fairness, clarity of communication, and administrative burden. Despite their value, there has been no comprehensive mapping of PREMs used within work disability contexts.

We are seeking to identify the available PREMs in the area of work disability support systems. This is to help inform the development of a novel PREM aimed at providing a comprehensive tool to describe experiences of workers seeking work disability support that is grounded in Administrative Burden Theory (ABT). ABT proposes that there are three non-financial 'costs' experienced by participants during interactions with administrative systems: learning costs, compliance costs and psychological costs. The extent to which these costs are realised by an individual is a function of the complexity and transparency of system processes, and workers' human capital, or their ability to navigate systems and to access supporting resources. The new PREM seeks to assess workers' self-reported levels of learning, compliance, and psychological costs and their human capital to form a composite burden-capacity experience index of work disability system interactions.

Rationale A scoping review was chosen in line with recommendations described by Arksey and O'Malley. The scoping exercise is meant to help identify the contexts, domains, and items of existing PREMs used for work disability support system encounters and to clarify whether a novel ABT-related PREM will provide a useful addition to the current measurement landscape. We anticipate that the novel PREM will incorporate domains or items of existing validated tools (with permission of the scale creators) to provide a more comprehensive measure of system experience. The literature on PREMs is expected to be heterogeneous in design, context, and measurement approaches. In line with the scoping review framework, the objective is to map and characterise existing evidence rather than evaluate the effectiveness of an intervention or the prevalence of a phenomenon or participant characteristic commonly examined in systematic reviews.

Reference:
Arksey H, O'Malley L. Scoping studies: Towards a methodological framework. International Journal of Social Research Methodology: Theory and Practice. 2005;8:19–32. https://doi.org/10.1080/1364557032000119616.

METHODS

Strategy of data synthesis The following sources will be searched:

- Bibliographic databases: Medline, EMBASE, Scopus, PsycInfo, CINAHL
- Reference lists of included studies
- Expert consultations (as described in [9]): after bibliographic search is completed, we will present identified papers to around 4-6 international experts to seek any additional PREMs that were not yet identified by the search

Keywords and subject headings (Medline Ovid example):
Concept 1: Work Disability Population
keywords/synonyms: ("work disabilit*" or "work incapacity" or "sick leave" or "sickness absence" or "return to work" or "temporary disability" or "permanent disability" or "partial disability" or "total disability" or "injured worker*" or "disabled worker*" or "employee*" or "disability pension*" or "claimant*" or "recipient*" or "medical leave" or "occupational injur*" or "occupational disease*").mp
subject headings: Occupational Injuries/ or Accidents, Occupational/ or exp Occupational Diseases/ or Sick Leave/ or Absenteeism/

Concept 2: Work Disability Systems
keywords/synonyms: ("social security" or "social insurance" or "income support" or "financial* assist*" or "disability benefit*" or "disability support*" or "disability pension*" or "disability insurance" or "compensation" or "welfare system*" or "government benefit*" or "public insurance" or "statutory insurance").mp
subject headings: Workers' Compensation/ or financial support/ or financing, government/ or public assistance/ or social security/ or Insurance, Disability/ or Insurance/ or Pensions/

Concept 3: Participant Experience
keywords/synonyms: (((patient* or user* or participant* or client* or worker* or employee* or claimant* or recipient*) adj5 experience*) or "lived experience*" or ((compensation or insurance or claim* or benefit* or system*) adj5 experience*) or ((administrative or procedural or system*) adj5 burden*) or difficult* or stress* or challeng* or ease or interact* or communicat* or fair* or justice or understand*).mp
subject headings: patient satisfaction/ or patient preference/

Concept 4: Measurement Instrument
keywords/synonyms: (((questionnaire* or survey* or instrument* or scale* or measure* or tool*) adj5 (develop* or design* or valid* or reliab* or psychometric*)) or PREM? or psychometric* or validity or reliability or “measurement propert*” or “factor analysis” or feasibility or acceptability or prototype or “scale develop*").mp.
subject headings: "surveys and questionnaires"/ or self report/

Searches will be adapted for each database and limited to English. A full reproducible strategy is documented via the link below for the Ovid Medline database:
https://access.ovid.com/custom/redirector/index.html?dest=https://go.openathens.net/redirector/www.monash.edu?url=http://ovidsp.ovid.com/ovidweb.cgi?T=JS&NEWS=N&PAGE=main&SHAREDSEARCHID=1OoRPgpTeUSRS1m326J2EAevmkbIwftDFtqz96kq0JLfeFwOW9yBRGYgLfsgseeqZ

Data will be synthesised using the following methods:
• Descriptive statistics to describe cohorts and work disability systems
• Tabular mapping of identified PREMs and their characteristics (e.g., domains, items)
• Narrative synthesis of experience themes, domains/ items
• Summary of examined relationships between PREMs and outcomes where available.

Eligibility criteria Inclusion criteria:
• Studies describing the development or use of a structured questionnaire or measurement instrument to gather direct feedback from an individual about their experience of a work disability system.
• Studies including at least 80% of people with temporary or permanent (i.e., any duration) and partial or total (i.e., any severity) work incapacity (for any cause, including work- and non-work-related conditions, diseases, and accidents)
• Contexts involving social security or social insurance systems that provide financial assistance during periods of work disability, and that are government regulated
• English-language publications that are peer reviewed, including validation studies, studies testing reliability and validity, cross-sectional studies, cohort studies, case-control studies, controlled trials, ecological studies, and mixed methods studies
• No date restrictions

Exclusion criteria:
• Measures assessing outcomes rather than experiences
• Studies focusing on provider experiences, including insurers, employers, physicians, and healthcare providers
• Studies in which more than 20% of the sample are people without any work incapacity (e.g., people working full time or working their usual hours)
• Welfare systems not providing income support or welfare systems providing income support for reasons other than work disability (e.g., for general unemployment) or income support is provided by personal insurance (e.g., private income protection

insurance) or income support is provided by the employer via sick leave entitlements
• Non-English publications
• Non-peer reviewed literature, commentaries, case reports, editorials, opinion pieces, trial protocols, conference proceedings, grey literature.

Source of evidence screening and selection
Selection of Sources of Evidence
Results from each database search will be uploaded to Covidence and duplicate records across databases will be removed.

Title and Abstract Screening
Title and abstract screening will be conducted using a dual-reviewer approach. The first 20 articles will be screened independently by two reviewers (AC and SS) to ensure consistency in the screening process and a harmonised application of the selection criteria. Following this initial session, at least 10% of all available records but no less than 200 records will be independently screened by SS and AC. Once these records have been screened, the level of agreement between the two reviewers will be assessed. If agreement is at least substantial (Cohen's kappa > .70), dual screening of title and abstracts will cease. If inter-rater agreement is lower than substantial (Cohen's kappa ≤ .70), dual screening will continue until a substantial level of agreement is reached. Any disagreements between the two reviewers regarding eligibility will be resolved through consultation with a third reviewer (MM). Remaining records will be screened by one reviewer (SS). If the sole reviewer is uncertain about inclusion or exclusion, a second reviewer (AC) will be consulted.

If 2,000 or more records remain in Covidence after duplicate record removal, dual-screening of titles and abstracts will have the secondary purpose of training the Covidence AI-supported ranking tool. Records to be reviewed by the sole reviewer will then be prioritised using Covidence relevance ranking. Screening will proceed in order of relevance ("most relevant") until a stopping criterion is met, defined as no new potentially eligible studies identified within a consecutive set of 100 screened records. To assess potential false negatives, a random sample of 5% of records from the unscreened and low-ranked portion will be independently screened. If additional potentially eligible studies are identified, screening will resume until the stopping criterion is again satisfied. The number of records not screened using this approach will be reported.

Full Text Screening
All records that reach the full-text screening stage will be dual-reviewed to determine eligibility.

Data management Data will be charted using a predefined structured tabular form. The form will be piloted and refined as necessary. Data extraction will be conducted by two reviewers (AC and SS) for the first 3 articles. One reviewer (SS) will then proceed, with checks for accuracy by another reviewer (AC).

The following variables will be extracted:
• Bibliographic details (author, year, country)
• Type of work disability benefit system (e.g., workers compensation, disability insurance)
• Sample characteristics (e.g., age, gender distribution, injury or condition type)
• Name of PREMs
• Domains assessed (e.g., fairness, access, communication)
• Items and response format of PREMs
• Underlying theory or framework of PREMs
• Purpose and application of the measure
• Type of instrument (e.g., validated, adapted, newly developed)
• Associations with outcome measures where available.

Reporting results / Analysis of the evidence
Data will be synthesised using the following methods:
• Descriptive statistics to describe cohorts and work disability systems
• Tabular mapping of identified PREMs and their characteristics (e.g., domains, items)
• Narrative synthesis of experience themes, domains/ items
• Summary of examined relationships between PREMs and outcomes where available.

Presentation of the results The final review will include:
• A PRISMA flow diagram of study selection
• Characteristics of included sources, cohorts, and work disability benefit systems
• Detailed presentation of PREMs
• Synthesised findings aligned with objectives.

Language restriction Restriction to English-language studies.

Country(ies) involved Australia, Canada.

Other relevant information This scoping review will map the landscape of participant-reported experience measures in social security and social insurance systems. The findings will inform future

research, the development of more effective and user-centred experience measurement tools, and policy evaluation.

Potential limitations include:
• Restriction to English-language studies
• Omission of non-peer reviewed, unpublished, or grey literature
• Partial dual screening approach

Keywords Participant-reported experience measures; work incapacity; disability benefits; social insurance; income support; participant experience; administrative burden; human capital; procedural fairness; justice.

Dissemination plans Results will be submitted for publication in a peer-reviewed journal and presented at relevant national and international conferences focusing on occupational health, disability management, social policy, and workers' compensation. A summary of key findings will be shared with government agencies, insurers, worker advocacy groups, and researchers in the field. Findings will also be disseminated through institutional websites, professional networks, and social media platforms.

Contributions of each author

Author 1 - Samineh Sanatkar - Will draft the first version of the manuscript and will be the first reviewer as indicated in the protocol.
Email: samineh.sanatkar@monash.edu
Author 2 - Alex Collie - Will co-author the manuscript and will be the second reviewer as indicated in the protocol. Author 2 is also responsible for project funding.
Email: alex.collie@monash.edu
Author 3 - Melinda McCabe - Is a third reviewer and will provide feedback on the manuscript.
Email: melinda.mccabe@monash.edu
Author 4 - Ellen MacEachen - Will offer expert guidance to identify PREMs not captured in the database search and will provide feedback on the manuscript.
Email: ellen.maceachen@uwaterloo.ca
Author 5 - Genevieve Grant - Will offer expert guidance to identify PREMs not captured in the database search and will provide feedback on the manuscript.
Email: genevieve.grant@monash.edu