Appendix A - How this guideline was developed

The Home care guideline was developed in accordance with the process and methods set out in the social care guidance manual.

1. Search strategies

The evidence reviews used to develop the guideline recommendations were underpinned by systematic literature searches. The aim of the systematic searches was to comprehensively identify the published evidence to answer the review questions developed by the Guideline Development Group and NICE Collaborating Centre for Social Care.

The search strategies for the review questions (based on the scope) were developed by the NICE Collaborating Centre for Social Care in order to identify empirical research and systematic reviews. Search strategies are listed at the end of this appendix.

Searches were based upon retrieving items with the setting or intervention of "home care" and either one or more of the population groups of "older people, 65 years and over", "carers", "workforce" and "social care organisation". Searches were developed using subject heading and free text terms, aiming to balance sensitivity and precision, and the strategy was run across a number of databases. The searches limited results to studies published from 2000 onwards. Following the running of the searches, it was decided to only use evidence from 2004 onwards. Studies published between 2000 and 2003 were then removed from the set prior to screening by title and abstract of the search results. An update of these searches was undertaken during November 2014 in order to identify any recently published controlled trials, comparison studies, or systematic reviews. The database searches were not restricted to specific geographical areas, however, in selecting the websites to search, research on people's views was focused on the UK. The sources searched are listed below. Citation searches using Google Scholar, were undertaken on six relevant controlled trials and comparison studies in order to identify further studies of this type.

Guideline Development Group members were also asked to alert the NICE Collaborating Centre for Social Care to any additional evidence, published, unpublished or in press, that met the inclusion criteria. Other sources of literature included scoping materials and a NICE guideline currently in development which focuses on the social care of older people with complex care needs and multiple long-term conditions. Details of the contribution of these studies are shown in the flowchart presented as Figure A1.

Economic evidence was searched for as part of the wider search strategy. In addition, the following economic databases were searched: the NHS Economic Evaluation Database (NHS EED); EconLit, IDEAS repec and the Cost-effectiveness analysis registry (CEA Registry).

The bibliographic database searches were undertaken between November 2013 and December 2013. Website searches were undertaken during January 2014. Update searches of databases were undertaken during November 2014 which addressed only the research questions on effectiveness, for which evidence elicited from previous searches had been relatively limited.

Main searches

The following sources were searched.

Bibliographic databases

Social care and social science:

Social Care Online (beta version (2013 only)) (SCO)

Social Policy and Practice (SCO, CPA, CLA, IDOX Information) (SPP)

Social Work Abstracts (SWA)

Social Services Abstracts (SSA)

Applied Social Sciences Index & Abstracts (ASSIA)

Sociological Abstracts

International Bibliography of the Social Sciences (IBSS)

Social Science Citation Index

Worldwide Political Science Abstracts

Library and information science abstracts (LISA)

Conference proceeding citation indexes (2011 onwards only)

Health:

Medline

PsycINFO

EMBASE

Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)

Health Management Information Consortium (HMIC)

Cumulative Index to Nursing and Allied Health Literature (CINAHL)
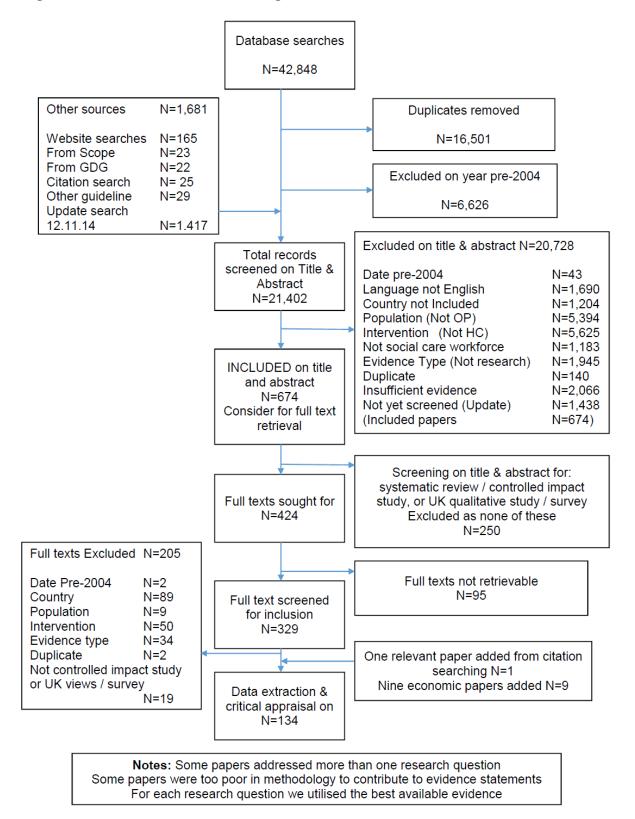
Economic:

NHS Economic Evaluation Database (NHS EED)

ECONLIT

IDEAS repec

CEA registry

Other databases and websites:

AgeUK Professional Resources

Campbell collaboration library

Centre for Ageing and Development Research Ireland (CARDI)

Care Quality Commission (CQC)

Data.gov.uk

EPPI-Centre Adult Social Care Outcomes Framework database

Equality and Human Rights Commission (EHRC)

Evidence Database on Aging Care (EDAC)

GeroLIT

GOV.UK

Health and social care information centre (HSCIC)

Joseph Rowntree Foundation (JRF)

Kings Fund library

LGA - Knowledge Hub

Local Government Association (LGA)

National audit social care intelligence service (NASCIS)

NHS Evidence

Nuffield Trust

Office of National Statistics (ONS)

Online research bank social policy database (Northern Ireland)

Opengrey

Oxford centre for social policy

www.poverty.org.uk

Personal Social Services Research Unit (PSSRU) - Discussion Papers

Qualitative archive on ageism

Research in practice (RIP) – Evidence Bank

Research in practice for adults (RIPFA)

School for Social Care Research (SSCR)

Social policy digest

Transforming Adult Social Care/Think local act personal (TASC / TLAP)

UK Clinical Research Network Study Portfolio

United Kingdom Homecare Association (UKHCA)

Excluded studies

Figure A1. Flowchart summarising excluded studies

```
                          ┌──────────────────────────┐
                          │   Database searches       │
                          │      N=42,848             │
                          └──────────────────────────┘

┌─────────────────────────────────┐       ┌──────────────────────────────┐
│ Other sources        N=1,681    │       │   Duplicates removed          │
│                                 │       │      N=16,501                 │
│ Website searches     N=165      │       └──────────────────────────────┘
│ From Scope           N=23       │
│ From GDG             N=22       │       ┌──────────────────────────────┐
│ Citation search      N= 25      │       │ Excluded on year pre-2004     │
│ Other guideline      N=29       │       │      N=6,626                  │
│ Update search                   │       └──────────────────────────────┘
│ 12.11.14             N=1.417    │
└─────────────────────────────────┘
```

┌──┐
│ Excluded on title & abstract N=20,728   │
│   │
│ Date pre-2004   N=43   │
│ Language not English   N=1,690   │
│ Country not Included   N=1,204   │
│ Population (Not OP)   N=5,394   │
│ Intervention   (Not HC)   N=5,625   │
│ Not social care workforce   N=1,183   │
│ Evidence Type (Not research)   N=1,945   │
│ Duplicate   N=140   │
│ Insufficient evidence   N=2,066   │
│ Not yet screened (Update)   N=1,438   │
│ (Included papers   N=674)   │
└──┘

Total records screened on Title & Abstract N=21,402

INCLUDED on title and abstract N=674 Consider for full text retrieval

┌──┐
│ Screening on title & abstract for: │
│ systematic review / controlled impact   │
│ study, or UK qualitative study / survey   │
│ Excluded as none of these   │
│ N=250   │
└──┘

Full texts sought for N=424

┌──┐
│ Full texts not retrievable   │
│ N=95   │
└──┘

┌─────────────────────────────────────┐
│ Full texts Excluded N=205   │
│   │
│ Date Pre-2004   N=2   │
│ Country   N=89   │
│ Population   N=9   │
│ Intervention   N=50   │
│ Evidence type   N=34   │
│ Duplicate   N=2   │
│ Not controlled impact study   │
│ or UK views / survey   │
│   N=19   │
└─────────────────────────────────────┘

Full text screened for inclusion N=329

┌──┐
│ One relevant paper added from citation   │
│ searching N=1   │
│ Nine economic papers added N=9   │
└──┘

Data extraction & critical appraisal on N=134

┌──┐
│ **Notes:** Some papers addressed more than one research question   │
│ Some papers were too poor in methodology to contribute to evidence statements │
│ For each research question we utilised the best available evidence   │
└──┘

Search strategies for the bibliographic database searches

ASSIA

Proquest

Search run by Proquest on 4/12/13 (S28 and S29)

Search line S27 run by CS on 28/11/13

Final search S27 OR (S28 AND S29)

Date limits 2000-2014

1440 records

S29	(TI,AB(Employees OR (Providers N/1 (homecare OR domiciliary OR care)) OR (Attendant N/1 (homecare OR domiciliary OR care)) OR (Attendants N/1 (homecare OR domiciliary OR care)) OR (Assistant N/1 (homecare OR domiciliary OR care)) OR (Assistants N/1 (homecare OR domiciliary OR care)) OR (Staff N/1 (homecare OR domiciliary OR care)) OR Staffing OR (Managers N/1 (homecare OR domiciliary OR care)) OR (Manager N/1 (homecare OR domiciliary OR care)) OR (Supervisors N/1 (homecare OR domiciliary OR care)) OR (Supervisor N/1 (homecare OR domiciliary OR care)) OR (Professional N/1 (homecare OR domiciliary OR care)) OR (Professionals N/1 (homecare OR domiciliary OR care)) OR (Coordinator N/1 (homecare OR domiciliary OR care)) OR (Coordinators N/1 (homecare OR domiciliary OR care)) OR (Facilitator N/1 (homecare OR domiciliary OR care)) OR (Facilitators N/1 (homecare OR domiciliary OR care)) OR (Adviser N/1 (homecare OR domiciliary OR care)) OR (Advisor N/1 (homecare OR domiciliary OR care)) OR (Advisers N/1 (homecare OR domiciliary OR care)) OR (Advisors N/1 (homecare OR domiciliary OR care)) OR (Operatives N/1 (homecare OR domiciliary OR care)) OR "Health aide" OR "Health aides" OR "Home help" OR "Home helps" OR "Shared lives" OR "Shared life" OR "Home care agencies" OR "Home care agency" OR "Homecare agencies" OR "Homecare agency" OR "Homecare work*" OR (Domiciliary N/1 agency) OR (Domiciliary N/1 agencies) OR (Domiciliary N/1 work*) OR ("Care worker") OR ("Case

worker") OR "Support worker*" OR "Lone worker" OR "Lone workers" OR Workforce OR "Social worker" OR "Social workers" OR "Workforce" OR "Human resource*" OR Careworker OR Careworkers OR "Social care" OR "social service*" OR "social work" OR "welfare service" OR "welfare services" OR "adult care service" OR "adult care services" OR "community service" OR "community services" OR "community care" OR "Supportive service" OR "Supportive services" OR "integrated service" OR "integrated services" OR "Services integration" OR "Local authority" OR "Local authorities" OR "State support" OR "interprofessional working" OR "inter professional working" OR "service model" OR "service models" OR "local government" OR "local government" OR "directed care" OR "selfdirected care" OR commission OR commissioning OR commissioners OR commissioned OR Multiagency OR Multiagencies OR "Multiple agencies" OR "Multiple agency" OR "joint working" OR "collaborative working" OR "agency directed" OR "self directed" OR (service N/1 delivery) OR (services N/1 delivery) OR (care N/1 organisation) OR (care N/1 organization) OR ("care service") OR ("care services") OR "self managed" OR "user directed" OR "Consumer directed" OR (Purchase N/2 care) OR (Purchasing N/2 care) OR Personalisation OR "adult service" OR "adult services" OR Caregiver OR Caregivers OR Carer OR carers OR "Care giver" OR "Care givers" OR Caregiving OR "Care giving" OR "informal care" OR "informal caring" OR "unpaid care" OR "unpaid caring" OR "family caring" OR "voluntary caring" OR caretaker OR caretakers OR caretaking OR "care taker" OR "care takers" OR "care taking" OR "nonprofessional caring" OR "professional caring" OR "service user" OR "service users" OR Ageing OR Aging OR Elder* OR Frail* OR Seniors OR Geriatric* OR gerontology OR Pensioner* OR "late life" OR "later life" OR "old old" OR "Oldest old" OR (pension* N/1 age*) OR "older than 55" OR "older than 50" OR "older than 65" OR "older than 70" OR "older than 75" OR "older than 80" OR "older than 85" OR "middle age*" OR "Mid life" OR Midlife OR "Middle life" OR (Senior N/1 (adult OR adults OR "service user" OR "service users" OR person OR

	persons OR men OR women OR male OR males OR female OR females OR community OR communities OR population OR populations OR age OR aged OR ages OR resident OR residents OR citizen OR recipient OR individual OR citizens OR recipients OR individuals)) OR (Old* N/1 (people* OR person OR adult OR "service user" OR "service users" OR men OR women OR male OR female OR population OR age OR resident OR citizen OR senior OR community OR communities OR recipient OR individual OR persons OR adults OR "service users" OR males OR females OR populations OR ages OR residents OR citizens OR seniors OR recipients OR individuals)) OR "aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95") OR SU.EXACT("Single elderly people" OR "Developmentally disabled older people" OR "Older people" OR "Learning disabled older people" OR "Disabled older people" OR "Mentally ill older people" OR "Language disordered elderly people" OR "Retired people" OR "Learning disabled elderly people" OR "Divorced elderly people" OR "Hearing impaired elderly people" OR "Visually impaired elderly people" OR "Gifted elderly people"OR "Housebound elderly people" OR "Disabled elderly people" OR "Mentally ill elderly people" OR "Sick elderly people" OR "Centenarians" OR "Remarried elderly people" OR "Terminally ill elderly people" OR "Brain damaged elderly people" OR Low income elderly people" OR "Unemployed older people" OR "Elderly people" OR "Emotionally disturbed elderly people" OR "Ageing" OR "Carers" OR Social Workers" OR "Volunteer support services" OR "Community volunteers" OR "Volunteers"))
S28	(TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR

	"home assistance" OR (Domiciliary N/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping N/2 ("support" OR "assistance" OR service*)) OR ("own home" N/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" N/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" N/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" N/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care N/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home N/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care") OR SU.EXACT("Long term home care") OR SU.EXACT("Home health aides")) NOT (SU.EXACT("Foster care") OR SU.EXACT("Private foster care") OR SU.EXACT("Temporary foster care") OR SU.EXACT("Day foster care") OR SU.EXACT("Long term foster care") OR SU.EXACT("In care") OR SU.EXACT("National Foster Care Association") OR SU.EXACT("Postnatal care") OR SU.EXACT("Foster care") OR SU.EXACT("Perinatal care") OR SU.EXACT("Guardians ad litem") OR SU.EXACT("Private foster care") OR SU.EXACT("Temporary foster care") OR SU.EXACT("Guardianship") OR SU.EXACT("Family child care") OR SU.EXACT("Wardship") OR SU.EXACT("Therapeutic child care") OR SU.EXACT("Leaving care") OR SU.EXACT("Antenatal care") OR SU.EXACT("Day foster care") OR SU.EXACT("Care orders") OR SU.EXACT("Antenatal education") OR SU.EXACT("Long term foster care") OR SU.EXACT("Child protection") OR SU.EXACT("Child care") OR SU.EXACT("Quality child care") OR SU.EXACT("Childminding") OR SU.EXACT("Maternal health care") OR SU.EXACT("Kinship foster care") OR SU.EXACT("Parent aide services") SU.EXACT("Kinship foster care"))
S27	PUB(Aged OR Aging OR Ageing OR Geron* OR Elderly OR Geriatric*) AND (TI,AB("home care" OR "homecare" OR "home caring" OR "home

help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary N/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping N/2 ("support" OR "assistance" OR service*)) OR ("own home" N/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" N/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" N/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" N/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care N/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home N/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care") OR SU.EXACT("Long term home care") OR SU.EXACT("Home health aides")) NOT (SU.EXACT("Foster care") OR SU.EXACT("Private foster care") OR SU.EXACT("Temporary foster care") OR SU.EXACT("Day foster care") OR SU.EXACT("Long term foster care") OR OR SU.EXACT("In care") OR SU.EXACT("National Foster Care Association") OR SU.EXACT("Postnatal care") OR SU.EXACT("Foster care") OR SU.EXACT("Perinatal care") OR SU.EXACT("Guardians ad litem") OR SU.EXACT("Private foster care") OR SU.EXACT("Temporary foster care") OR SU.EXACT("Guardianship") OR SU.EXACT("Family child care") OR SU.EXACT("Wardship") OR SU.EXACT("Therapeutic child care") OR SU.EXACT("Leaving care") OR SU.EXACT("Antenatal care") OR SU.EXACT("Day foster care") OR SU.EXACT("Care orders") OR SU.EXACT("Antenatal education") OR SU.EXACT("Long term foster care") OR SU.EXACT("Child protection") OR SU.EXACT("Child care") OR SU.EXACT("Quality child care") OR SU.EXACT("Childminding") OR SU.EXACT("Maternal health care") OR SU.EXACT("Kinship foster care") OR SU.EXACT("Parent aide

	services") SU.EXACT("Kinship foster care"))

CEA Registry

24/1/2014

5 records

Searched basic search, single word searches and browsed results for the following terms:

home care; homecare; domiciliary; personal care; telecare; caregiver; caregivers; carer; carers; social work; social worker; social workers; social care; social support

CINAHL

HDAS

9871 records

2/12/2013

20	HOME HEALTH CARE/ OR HOMEMAKER SERVICES/ OR HOME HEALTH AIDES/ OR HOME CARE EQUIPMENT AND SUPPLIES/ OR HOME HEALTH CARE INFORMATION SYSTEMS/	15249
21	HOME HEALTH CARE/ OR HOMEMAKER SERVICES/ OR HOME HEALTH AIDES/ OR HOME CARE EQUIPMENT AND SUPPLIES/ OR HOME HEALTH CARE INFORMATION SYSTEMS/	15249
22	(((("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance"))).ti,ab	10870
23	(((("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR	10870

	"home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance"))).ti,ab	
24	((("Personal care services" OR "Personal care service" OR (Shopping adj2 ("support" OR "assistance" OR service*))))).ti,ab	73
25	((("own home" adj2 ("care" OR "caring" OR "support" OR "assistance" OR service*)))).ti,ab	28
26	((("home based" adj2 ("assistance" OR "care" OR service* OR "caring" OR "support")))).ti,ab	654
27	((("in the home" adj3 ("assistance" OR "care" OR service* OR "caring" OR "support")))).ti,ab	1677
28	((("in the home" adj3 ("assistance" OR "care" OR service* OR "caring" OR "support")))).ti,ab	1677
29	(((care adj2 "individual* homes"))).ti,ab	2
30	((("care in" adj1 "home"))).ti,ab	822
31	((("personal care" AND home))).ti,ab	244
32	(((home adj2 assistance))).ti,ab	133
33	((("personal assistance" AND home))).ti,ab	50
34	((((care adj1 home) NOT "care home" AND))).ti,ab	12485
35	20 OR 21 OR 22 OR 23 OR 24 OR 25 OR 26 OR 27 OR 28 OR 29 OR 30 OR 31 OR 32 OR 33 OR 34	23594
36	((Aged OR Aging OR Ageing OR Geron* OR Elderly OR Geriatric* OR "social care" OR "social service?")).so	56168
37	((Caregiver* OR Carer* OR "Care giver*" OR Caregiving OR "Care giving" OR "informal care" OR "informal caring" OR "unpaid care" OR "unpaid caring" OR "family caring" OR "voluntary caring" OR caretak* OR "care tak*" OR "nonprofessional caring" OR "service user" OR "service users")).ti,ab	32011
38	CAREGIVERS/	15572

39	AGED/ OR AGED, 80 AND OVER/ OR FRAIL ELDERLY/ OR MIDDLE AGE/	485656
40	HOME HEALTH AGENCIES/	4373
41	HOMEMAKER SERVICES/ OR HOME HEALTH AIDES/	1271
42	35 OR 40	25764
43	SOCIAL WORKERS/ OR SOCIAL WORKER ATTITUDES/ OR SOCIAL SERVICE ASSESSMENT/	6784
46	HEALTH CARE DELIVERY, INTEGRATED/	4244
47	SOCIAL WORK/	9915
48	SOCIAL WELFARE/	3398
49	SOCIAL WORK SERVICE/ OR SOCIAL WORK PRACTICE/	8297
50	VOLUNTEER WORKERS/ OR WORKFORCE/	12068
51	((Employees OR (Providers adj1 (homecare OR domiciliary OR care)) OR (Attendant* adj1 (homecare OR domiciliary OR care)) OR (Assistant* adj1 (homecare OR domiciliary OR care)) OR (Staff adj1 (homecare OR domiciliary OR care)) OR Staffing OR (Managers adj1 (homecare OR domiciliary OR care)) OR (Manager adj1 (homecare OR domiciliary OR care)) OR (Supervisors adj1 (homecare OR domiciliary OR care)) OR (Supervisor adj1 (homecare OR domiciliary OR care)) OR (Professional* adj1 (homecare OR domiciliary OR care)) OR (Coordinator* adj1 (homecare OR domiciliary OR care)) OR (Facilitator* adj1 (homecare OR domiciliary OR care)) OR (Adviser adj1 (homecare OR domiciliary OR care)) OR (Advisor adj1 (homecare OR domiciliary OR care)) OR (Advisers adj1 (homecare OR domiciliary OR care)) OR (Advisors adj1 (homecare OR domiciliary OR care)) OR (Operatives adj1 (homecare OR domiciliary OR care)) OR "Health aide" OR "Health aides" OR "Home help" OR "Home helps" OR "Shared lives" OR "Shared life" OR "Home care agencies" OR "Home care agency" OR "Homecare agencies" OR "Homecare agency" OR "Homecare work*" OR (Domiciliary adj1 agenc*) OR (Domiciliary adj1 work*) OR "Care worker" OR "Case worker" OR "Support worker*" OR	57823

	"Lone worker*" OR Workforce OR "Social worker*" OR "Workforce" OR "Human resource*" OR Careworker?)).ti,ab	
52	(("Social care" OR "social service*" OR "social work" OR "welfare service*" OR "adult care service*" OR "community service*" OR "community care" OR "Supportive service*" OR "integrated service*" OR "Services integration" OR "Local authority" OR "Local authorities" OR "State support" OR "interprofessional working" OR "inter professional working" OR "service model" OR "service models" OR "professional caring" OR "local government" OR "local government" OR "directed care" OR "selfdirected care" OR Commission* OR Multiagenc* OR "Multiple agencies" OR "Multiple agency" OR "joint working" OR "collaborative working" OR "agency directed" OR "self directed" OR (service? adj1 delivery) OR (care adj1 organisation) OR (care adj1 organization) OR "care service" OR "care services" OR "self managed" OR "user directed" OR "Consumer directed" OR (Purchas* adj2 care) OR Personalisation OR "adult service" OR "adult services")).ti,ab	39610
53	((Ageing OR Aging OR Elder* OR Frail* OR Seniors OR Geriatric* OR gerontology OR Pensioner* OR "late life" OR "later life" OR "old old" OR "Oldest old" OR (pension* adj1 age*) OR "older than 55" OR "older than 50" OR "older than 65" OR "older than 70" OR "older than 75" OR "older than 80" OR "older than 85" OR "middle age*" OR "Mid life" OR Midlife OR "Middle life")).ti,ab	79995
54	((Senior adj1 (adult OR adults OR "service user*" OR person OR persons OR men OR women OR male OR males OR female OR females OR community OR communities OR population OR populations OR age OR aged OR ages OR resident OR residents OR citizen OR recipient OR individual OR citizens OR recipients OR individuals))).ti,ab	924
55	((Old* adj1 (people* OR person OR adult OR "service user" OR men OR women OR male OR female OR population OR age OR resident OR citizen OR senior OR community OR communities OR recipient OR	53771

	individual OR persons OR adults OR "service users" OR males OR females OR populations OR ages OR residents OR citizens OR seniors OR recipients OR individuals))).ti,ab	
56	(("aged 50" OR "aged 55" OR "aged 60" OR "aged 65" OR "aged 70" OR "aged 75" OR "aged 80" OR "aged 85" OR "aged 90" OR "aged 95")).ti,ab	9779
57	36 OR 37 OR 38 OR 39 OR 40 OR 41 OR 43 OR 46 OR 47 OR 48 OR 49 OR 50 OR 51 OR 52 OR 53 OR 54 OR 55 OR 56	642456
58	42 AND 57	15529
59	58 [Limit to: Publication Year 2000-2013]	9957
62	FOSTER PARENTS/ OR CHILD, FOSTER/	1296
63	CHILD CARE/ OR CHILD DAY CARE/	3067
64	PRENATAL CARE/	7622
71	INFANT CARE/ [Limit to: Publication Year 2000-2013]	1767
72	62 OR 63 OR 64 OR 71 [Limit to: Publication Year 2000-2013]	10745
73	59 not 72 [Limit to: Publication Year 2000-2013]	9871

Cochrane Library

02/12/2013

CENTRAL = 1197

Cochrane reviews = 40

Other reviews = 71

Economic Evaluations (NHS EED) = 151

Health Technology Assessments = 49

1510 records

#1   ((care near/1 home) not "care home"):ti,ab,kw (Word variations have been searched)

#2   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary near/2 ("assistance" or "care" or service* or "caring" or "support")) or "Personal care services" or "Personal care service" or (Shopping near/2 ("support" or "assistance" or service*)) or ("own home" near/2 ("care" or "caring" or "support" or "assistance" or service*)) or ("home based" near/2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" near/3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" near/3 ("assistance" or "care" or service* or "caring" or "support")) or (care near/2 "individual* homes") or ("care in" near/1 "home") or ("personal care" and home) or (home near/2 assistance) or ("personal assistance" and home)):ti,ab,kw (Word variations have been searched)

#3   #1 or #2

#4   MeSH descriptor: [Home Care Services] this term only

#5   MeSH descriptor: [Home Health Aides] explode all trees

#6   MeSH descriptor: [Homemaker Services] explode all trees

#7   #3 or #4 or #5 or #6 from 2000 to 2013

#8   (Caregiver* or Carer* or "Care giver*" or Caregiving or "Care giving" or "informal care" or "informal caring" or "unpaid care" or "unpaid caring" or "family caring" or "voluntary caring" or caretak* or "care tak*" or "nonprofessional caring" or "service user" or "service users"):ti,ab,kw

#9   (Employees or (Providers near/1 (homecare or domiciliary or care)) or (Attendant* near/1 (homecare or domiciliary or care)) or (Assistant* near/1 (homecare or domiciliary or care)) or (Staff near/1 (homecare or domiciliary or care)) or Staffing or (Managers near/1 (homecare or domiciliary or care)) or (Manager near/1 (homecare or domiciliary or care)) or (Supervisors near/1 (homecare or domiciliary or care)) or (Supervisor near/1 (homecare or domiciliary or care)) or (Professional* near/1 (homecare or domiciliary or care)) or (Coordinator* near/1 (homecare or domiciliary or care)) or (Facilitator* near/1 (homecare or domiciliary or care)) or (Adviser near/1 (homecare or domiciliary or care)) or (Advisor near/1 (homecare or domiciliary or care)) or (Advisers near/1 (homecare or domiciliary or care)) or (Advisors near/1 (homecare or domiciliary or care)) or (Operatives near/1

(homecare or domiciliary or care)) or "Health aide" or "Health aides" or "Home help" or "Home helps" or "Shared lives" or "Shared life" or "Home care agencies" or "Home care agency" or "Homecare agencies" or "Homecare agency" or "Homecare work*" or (Domiciliary near/1 agenc*) or (Domiciliary near/1 work*) or "Care worker" or "Case worker" or "Support worker*" or "Lone worker*" or Workforce or "Social worker*" or "Workforce" or "Human resource*" or Careworker*):ti,ab,kw

#10   ("Social care" or "social service*" or "social work" or "welfare service*" or "adult care service*" or "community service*" or "community care" or "Supportive service*" or "integrated service*" or "Services integration" or "Local authority" or "Local authorities" or "State support" or "interprofessional working" or "inter professional working" or "service model" or "service models" or "professional caring" or "local government" or "local government" or "directed care" or "selfdirected care" or Commission* or Multiagenc* or "Multiple agencies" or "Multiple agency" or "joint working" or "collaborative working" or "agency directed" or "self directed" or (service* near/1 delivery) or (care near/1 organisation) or (care near/1 organization) or "care service" or "care services" or "self managed" or "user directed" or "Consumer directed" or (Purchas* near/2 care) or Personalisation or "adult service" or "adult services"):ti,ab,kw

#11   (Ageing or Aging or Elder* or Frail* or Seniors or Geriatric* or gerontology or Pensioner* or "late life" or "later life" or "old old" or "Oldest old" or (pension* near/1 age*) or "older than 55" or "older than 50" or "older than 65" or "older than 70" or "older than 75" or "older than 80" or "older than 85" or "middle age*" or "Mid life" or Midlife or "Middle life"):ti,ab,kw

#12   (Senior near/1 (adult or adults or "service user*" or person or persons or men or women or male or males or female or females or community or communities or population or populations or age or aged or ages or resident or residents or citizen or recipient or individual or citizens or recipients or individuals)):ti,ab,kw

#13   (Old* near/1 (people* or person or adult or "service user*" or men or women or male or female or population or age or resident or citizen or senior or community or communities or recipient or individual or persons or adults or "service users" or males or females or populations or ages or residents or citizens or seniors or recipients or individuals)):ti,ab,kw

#14   ("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95"):ti,ab,kw

#15   MeSH descriptor: [Caregivers] explode all trees

#16   MeSH descriptor: [Voluntary Workers] explode all trees

#17   ("Homemaker Services" or "Social Work" or "State Medicine" or "Interinstitutional Relations" or "Delivery of Health Care, integrated" or "Social Welfare" or "home health aides" or "home nursing"):kw

#18   ("Aged" or "Aged, 80 and over" or "Frail Elderly" or "Health Services for the Aged" or "Middle Aged"):kw

#19   #5 or #8 or #9 or #10 or #11 or #12 or #13 or #14 or #15 or #16 or #17 or #18

#20   #7 and #19 from 2000 to 2013

#21   (Child or infant):kw

#22   adult:kw

#23   #21 not (#21 and (#22 or #18))

#24   #20 not #23

Econlit

EBSCO Host

21/11/2013

Search modes - Boolean/Phrase

496 records

#	Query	Results
S10	S5 NOT S9	496
S9	S6 NOT S8	11,555
S8	S6 AND S7	326
S7	SU (Elderly OR "Older People" OR AGED)	6,616
S6	SU ("Child Care" OR Children OR Youth) Limiters - Published Date: 20000101-20131231	11,881
S5	S3 OR S4 Limiters - Published Date: 20000101-20131231	560
S4	(ZW "home care of the elderly, price-subsidy, fiscal incidence index, non-cooperative family, cooperative family, income pooling, altruism, benefit shifting, medical expenditure panel survey, medicaid, simulation") or (ZW "home care policy, canada, competitive	8

	contracting, managed competition") or (ZW "home care services, adults, ontario, health personnel, consistency of services, providers") or (ZW "home care workers") or (ZW "home care workers, job satisfaction, retention") or (ZW "home care workers, retention, job satisfaction") or (ZW "home care, managed competition, benchmarks, provider consistency")	
S3	S1 OR S2	740
S2	AB ("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary N2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping N2 ("support" OR "assistance" OR service*)) OR ("own home" N2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" N2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" N3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" N3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care N2 "individual* homes") OR ("care in" N1 "home") OR ("personal care" AND home) OR (home N2 assistance) OR ("personal assistance" AND home))	629
S1	TI("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary N2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping N2 ("support" OR "assistance" OR service*)) OR ("own home" N2 ("care"	238

	OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" N2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" N3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" N3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care N2 "individual* homes") OR ("care in" N1 "home") OR ("personal care" AND home) OR (home N2 assistance) OR ("personal assistance" AND home))	

EMBASE

OVID SP<1996 to 2013 Week 47>

1098 records

Notes: This database was searched as a supplementary search to the other health databases. Furthermore the controlled term "home care" is used vary broadly within this medical database. Therefore, further parameters on the home-care controlled term were used, and results were limited to those outside Medline-indexed journals.

1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or "support")) or "Personal care services" or "Personal care service" or (Shopping adj2 ("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or "support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1 "home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab. (14379)

2   ((care adj1 home) not "care home").ti,ab. (9998)

3   (Aged or Aging or Ageing or Geron* or Elderly or Geriatric* or "social care" or "social service?").jw. (89277)

4   (Caregiver* or Carer* or "Care giver*" or Caregiving or "Care giving" or "informal care" or "informal caring" or "unpaid care" or "unpaid caring" or "family caring" or "voluntary caring" or caretak* or "care tak*" or "nonprofessional caring" or "service user" or "service users").ti,ab. (56088)

5   (Employees or (Providers adj1 (homecare or domiciliary or care)) or (Attendant* adj1 (homecare or domiciliary or care)) or (Assistant* adj1 (homecare or domiciliary or care)) or (Staff adj1 (homecare or domiciliary or care)) or Staffing or (Managers adj1 (homecare or domiciliary or care)) or (Manager adj1 (homecare or domiciliary or care)) or (Supervisors adj1 (homecare or domiciliary or care)) or (Supervisor adj1 (homecare or domiciliary or care)) or (Professional* adj1 (homecare or domiciliary or care)) or (Coordinator* adj1 (homecare or domiciliary or care)) or (Facilitator* adj1 (homecare or domiciliary or care)) or (Adviser adj1 (homecare or domiciliary or care)) or (Advisor adj1 (homecare or domiciliary or care)) or (Advisers adj1 (homecare or domiciliary or care)) or (Advisors adj1 (homecare or domiciliary or care)) or (Operatives adj1 (homecare or domiciliary or care)) or "Health aide" or "Health aides" or "Home help" or "Home helps" or "Shared lives" or "Shared life" or "Home care agencies" or "Home care agency" or "Homecare agencies" or "Homecare agency" or "Homecare work*" or (Domiciliary adj1 agenc*) or (Domiciliary adj1 work*) or "Care worker" or "Case worker" or "Support worker*" or "Lone worker*" or Workforce or "Social worker*" or "Workforce" or "Human resource*" or Careworker?).ti,ab. (96950)

6   ("Social care" or "social service*" or "social work" or "welfare service*" or "adult care service*" or "community service*" or "community care" or "Supportive service*" or "integrated service*" or "Services integration" or "Local authority" or "Local authorities" or "State support" or "interprofessional working" or "inter professional working" or "service model" or "service models" or "professional caring" or "local government" or "local government" or "directed care" or "selfdirected care" or Commission* or Multiagenc* or "Multiple agencies" or "Multiple agency" or "joint working" or "collaborative working" or "agency directed" or "self directed" or (service? adj1 delivery) or (care adj1 organisation) or (care adj1 organization) or "care service" or "care services" or "self managed" or "user directed" or "Consumer directed" or (Purchas* adj2 care) or Personalisation or "adult service" or "adult services").ti,ab. (75935)

7   (Ageing or Aging or Elder* or Frail* or Seniors or Geriatric* or gerontology or Pensioner* or "late life" or "later life" or "old old" or "Oldest old" or (pension* adj1

age*) or "older than 55" or "older than 50" or "older than 65" or "older than 70" or "older than 75" or "older than 80" or "older than 85" or "middle age*" or "Mid life" or Midlife or "Middle life").ti,ab. (334745)

8   (Senior adj1 (adult or adults or "service user*" or person or persons or men or women or male or males or female or females or community or communities or population or populations or age or aged or ages or resident or residents or citizen or recipient or individual or citizens or recipients or individuals)).ti,ab. (2372)

9   (Old* adj1 (people* or person or adult or "service user" or men or women or male or female or population or age or resident or citizen or senior or community or communities or recipient or individual or persons or adults or "service users" or males or females or populations or ages or residents or citizens or seniors or recipients or individuals)).ti,ab. (233513)

10   ("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95").ti,ab. (48264)

11   social care/ or one to one care/ or personal care/ or personalisation/ or social care services/ or social welfare/ or social care staff/ (12760)

12   social care services/ or home care social services/ or access to social services/ or social service information/ or social service information services/ or social service information systems/ or social service libraries/ or social service planning/ or social service policy/ or social services administration/ or social services departments/ or social services management/ or social services provision/ or social welfare/ or social work/ or social workers/ (18092)

13   *home care/ (15005)

14   home care/ and (home environment/ or daily life activity/ or home safety/ or independent living/) (1756)

15   exp social work/ or exp social care/ or social work practice/ (88750)

16   home care/ and 15 (2244)

17   home health agency/ (91)

18   home care/ not (emergency care/ or hospital/ or hospitalization/ or nursing home/) (25652)

19   1 or 2 or 13 or 14 or 16 or 17 or 18 (33427)

20   geriatric care/ (9718)

21   elderly care/ (28225)

22   aged/ or frail elderly/ or very elderly/ or middle aged/ (1794331)

23   caregiver/ (35285)

24   social care/ or caregiver support/ or psychosocial care/ or social work/ or social work practice/ (24733)

25   social work practice/ or social worker/ (4092)

26   worker/ (8308)

27   voluntary worker/ or volunteer/ (27052)

28   social worker attitude/ (44)

29   home health agency/ (91)

30   aging/ (130635)

31   3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 (2328789)

32   exp foster care/ (2205)

33   exp child care/ (32984)

34   32 or 33 (34880)

35   19 not 34 (32659)

36   31 and 35 (17816)

37   exp child/ or exp pregnancy/ or exp adolescent/ or exp infant/ (1576909)

38   adult/ or geriatric care/ or elderly care/ or aged/ or frail elderly/ or very elderly/ or middle aged/ (3676930)

39   37 not (38 and 37) (928417)

40   36 not 39 (17237)

41   limit 40 to yr="2000 -Current" (14237)

42   limit 41 to exclude medline journals (1098)

HMIC Health Management Information Consortium

OVID SP<1979 to October 2013>

29/11/2013

1501 records

1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or

"support")) or "Personal care services" or "Personal care service" or (Shopping adj2 ("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or "support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1 "home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab. (2808)

2   ((care adj1 home) not "care home").ti,ab. (1500)

3   "Home Care"/ (2281)

4   Caregivers/ or Volunteers/ (273)

5   Social Work/ or State Medicine/ or Interinstitutional Relations/ or "Delivery of Health Care, Integrated"/ or Social Welfare/ or "home health aides"/ (3083)

6   social services/ (1791)

7   community services/ (309)

8   (Aged or Aging or Ageing or Geron* or Elderly or Geriatric* or "social care" or "social service?").jw. (4597)

9   (Caregiver* or Carer* or "Care giver*" or Caregiving or "Care giving" or "informal care" or "informal caring" or "unpaid care" or "unpaid caring" or "family caring" or "voluntary caring" or caretak* or "care tak*" or "nonprofessional caring" or "service user" or "service users").ti,ab. (10410)

10   (Employees or (Providers adj1 (homecare or domiciliary or care)) or (Attendant* adj1 (homecare or domiciliary or care)) or (Assistant* adj1 (homecare or domiciliary or care)) or (Staff adj1 (homecare or domiciliary or care)) or Staffing or (Managers adj1 (homecare or domiciliary or care)) or (Manager adj1 (homecare or domiciliary or care)) or (Supervisors adj1 (homecare or domiciliary or care)) or (Supervisor adj1 (homecare or domiciliary or care)) or (Professional* adj1 (homecare or domiciliary or care)) or (Coordinator* adj1 (homecare or domiciliary or care)) or (Facilitator* adj1 (homecare or domiciliary or care)) or (Adviser adj1 (homecare or domiciliary or care)) or (Advisor adj1 (homecare or domiciliary or care)) or (Advisers adj1 (homecare or domiciliary or care)) or (Advisors adj1 (homecare or domiciliary or care)) or (Operatives adj1 (homecare or domiciliary or care)) or "Health aide" or "Health aides" or "Home help" or "Home helps" or "Shared lives" or "Shared life" or "Home care agencies" or "Home care agency" or "Homecare agencies" or

"Homecare agency" or "Homecare work*" or (Domiciliary adj1 agenc*) or (Domiciliary adj1 work*) or "Care worker" or "Case worker" or "Support worker*" or "Lone worker*" or Workforce or "Social worker*" or "Workforce" or "Human resource*" or Careworker?).ti,ab. (18560)

11   ("Social care" or "social service*" or "social work" or "welfare service*" or "adult care service*" or "community service*" or "community care" or "Supportive service*" or "integrated service*" or "Services integration" or "Local authority" or "Local authorities" or "State support" or "interprofessional working" or "inter professional working" or "service model" or "service models" or "professional caring" or "local government" or "local government" or "directed care" or "selfdirected care" or Commission* or Multiagenc* or "Multiple agencies" or "Multiple agency" or "joint working" or "collaborative working" or "agency directed" or "self directed" or (service? adj1 delivery) or (care adj1 organisation) or (care adj1 organization) or "care service" or "care services" or "self managed" or "user directed" or "Consumer directed" or (Purchas* adj2 care) or Personalisation or "adult service" or "adult services").ti,ab. (46604)

12   "child care"/ or "child welfare"/ or "foster care"/ (2389)

13   (Ageing or Aging or Elder* or Frail* or Seniors or Geriatric* or gerontology or Pensioner* or "late life" or "later life" or "old old" or "Oldest old" or (pension* adj1 age*) or "older than 55" or "older than 50" or "older than 65" or "older than 70" or "older than 75" or "older than 80" or "older than 85" or "middle age*" or "Mid life" or Midlife or "Middle life").ti,ab. (13219)

14   (Senior adj1 (adult or adults or "service user*" or person or persons or men or women or male or males or female or females or community or communities or population or populations or age or aged or ages or resident or residents or citizen or recipient or individual or citizens or recipients or individuals)).ti,ab. (91)

15   (Old* adj1 (people* or person or adult or "service user" or men or women or male or female or population or age or resident or citizen or senior or community or communities or recipient or individual or persons or adults or "service users" or males or females or populations or ages or residents or citizens or seniors or recipients or individuals)).ti,ab. (9295)

16   ("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95").ti,ab. (1994)

17   home bathing service/ or home care/ or "home care of patient"/ or home care assistants/ or home care social services/ (2991)

18   home nursing/ (107)

19   1 or 2 or 3 or 17 or 18 (4695)

20   home care social services/ (46)

21   home care assistants/ (30)

22   home bathing service/ (1)

23   exp older people/ or exp ageing/ or exp geriatrics/ or exp health services for elderly people/ or exp health services for older people/ or exp old age/ (16970)

24   social care/ or one to one care/ or personal care/ or personalisation/ or social care services/ or social welfare/ or social care staff/ (10508)

25   social care services/ or home care social services/ or access to social services/ or exp social care centres/ or exp social care staff/ or social service information/ or social service information services/ or social service information systems/ or social service libraries/ or social service planning/ or social service policy/ or social services administration/ or social services departments/ or social services management/ or social services provision/ or social welfare/ or social work/ or social workers/ (14844)

26   4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 13 or 14 or 15 or 16 or 20 or 21 or 22 or 23 or 24 or 25 (89208)

27   child care/ or child community care/ or child day care/ or foster care/ or kinship care/ or residential child care/ or child care workers/ or child welfare/ or children in care/ (4542)

28   12 or 27 (4542)

29   19 not 28 (4644)

30   26 and 29 (3365)

31   limit 30 to yr="2000 -Current" (1501)

IDEAS repec

24/1/2014

All fields: ("home care"|domiciliary care| "personal care"| telecare| home + "social care"| home + "social service") date 2004 onwards

Scanned 436 records in the results and saved 117 records.

International Bibliography of the Social Sciences (IBSS)

Proquest

29/11/2013

577 records

S37	TI,AB(Employees OR (Providers NEAR/1 (homecare OR domiciliary OR care)) OR (Attendant NEAR/1 (homecare OR domiciliary OR care)) OR (Attendants NEAR/1 (homecare OR domiciliary OR care)) OR (Assistant NEAR/1 (homecare OR domiciliary OR care)) OR (Assistants NEAR/1 (homecare OR domiciliary OR care)) OR (Staff NEAR/1 (homecare OR domiciliary OR care)) OR Staffing OR (Managers NEAR/1 (homecare OR domiciliary OR care)) OR (Manager NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisors NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisor NEAR/1 (homecare OR domiciliary OR care)) OR (Professional NEAR/1 (homecare OR domiciliary OR care)) OR (Professionals NEAR/1 (homecare OR domiciliary OR care)) OR (Coordinator NEAR/1 (homecare OR domiciliary OR care)) OR (Coordinators NEAR/1 (homecare OR domiciliary OR care)) OR (Facilitator NEAR/1 (homecare OR domiciliary OR care)) OR (Facilitators NEAR/1 (homecare OR domiciliary OR care)) OR (Adviser NEAR/1 (homecare OR domiciliary OR care)) OR (Advisor NEAR/1 (homecare OR domiciliary OR care)) OR (Advisers NEAR/1 (homecare OR domiciliary OR care)) OR (Advisors NEAR/1 (homecare OR domiciliary OR care)) OR (Operatives NEAR/1 (homecare OR domiciliary OR care)) OR "Health aide" OR "Health aides" OR "Home help" OR "Home helps" OR "Shared lives" OR "Shared life" OR "Home care agencies" OR "Home care agency" OR "Homecare agencies" OR "Homecare agency" OR "Homecare work*" OR (Domiciliary NEAR/1 agency) OR (Domiciliary NEAR/1 agencies) OR (Domiciliary NEAR/1 work*) OR ("Care worker") OR ("Case worker") OR "Support worker*" OR "Lone worker" OR "Lone workers" OR Workforce OR "Social worker" OR "Social workers" OR "Workforce" OR "Human resource*" OR Careworker OR Careworkers OR "Social care" OR "social service*" OR "social work" OR "welfare service" OR "welfare services" OR "adult care

service" OR "adult care services" OR "community service" OR "community services" OR "community care" OR "Supportive service" OR "Supportive services" OR "integrated service" OR "integrated services" OR "Services integration" OR "Local authority" OR "Local authorities" OR "State support" OR "interprofessional working" OR "inter professional working" OR "service model" OR "service models" OR "local government" OR "local government" OR "directed care" OR "selfdirected care" OR commission OR commissioning OR commissioners OR commissioned OR Multiagency OR Multiagencies OR "Multiple agencies" OR "Multiple agency" OR "joint working" OR "collaborative working" OR "agency directed" OR "self directed" OR (service NEAR/1 delivery) OR (services NEAR/1 delivery) OR (care NEAR/1 organisation) OR (care NEAR/1 organization) OR ("care service") OR ("care services") OR "self managed" OR "user directed" OR "Consumer directed" OR (Purchase NEAR/2 care) OR (Purchasing NEAR/2 care) OR Personalisation OR "adult service" OR "adult services" OR Caregiver OR Caregivers OR Carer OR carers OR "Care giver" OR "Care givers" OR Caregiving OR "Care giving" OR "informal care" OR "informal caring" OR "unpaid care" OR "unpaid caring" OR "family caring" OR "voluntary caring" OR caretaker OR caretakers OR caretaking OR "care taker" OR "care takers" OR "care taking" OR "nonprofessional caring" OR "professional caring" OR "service user" OR "service users" OR Ageing OR Aging OR Elder* OR Frail* OR Seniors OR Geriatric* OR gerontology OR Pensioner* OR "late life" OR "later life" OR "old old" OR "Oldest old" OR (pension* NEAR/1 age*) OR "older than 55" OR "older than 50" OR "older than 65" OR "older than 70" OR "older than 75" OR "older than 80" OR "older than 85" OR "middle age*" OR "Mid life" OR Midlife OR "Middle life" OR (Senior NEAR/1 (adult OR adults OR "service user" OR "service users" OR person OR persons OR men OR women OR male OR males OR female OR females OR community OR communities OR population OR populations OR age OR aged OR ages OR resident OR residents OR citizen OR recipient OR individual OR citizens OR recipients OR individuals)) OR (Old* NEAR/1

	(people* OR person OR adult OR "service user" OR "service users" OR men OR women OR male OR female OR population OR age OR resident OR citizen OR senior OR community OR communities OR recipient OR individual OR persons OR adults OR "service users" OR males OR females OR populations OR ages OR residents OR citizens OR seniors OR recipients OR individuals)) OR "aged 50" OR "aged 55" OR "aged 60" OR "aged 65" OR "aged 70" OR "aged 75" OR "aged 80" OR "aged 85" OR "aged 90" OR "aged 95") AND TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) AND yr(2000-2019)
S38	(SU.EXACT("Social workers") OR SU.EXACT("Social support") OR SU.EXACT("Social services") OR SU.EXACT("Informal sector") OR SU.EXACT("Social security") OR SU.EXACT("Caring") OR SU.EXACT("Abuse of the aged") OR SU.EXACT("Social welfare") OR SU.EXACT("Welfare state") OR SU.EXACT("Aged") OR SU.EXACT("Middle age") OR SU.EXACT("Welfare") OR SU.EXACT("Care of the aged") OR SU.EXACT("Social work") OR

	SU.EXACT("Local government")) AND TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) AND yr(2000-2019)
S54	PUB(Aged OR Aging OR Ageing OR Geron* OR Elderly OR Geriatric*) AND TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3

	("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home))
S55	S38 or S37 or S54 = 577

Library and Information Science Abstracts (LISA)

Proquest

21/11/13

55 records

TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care") OR SU("Home care workers")Limits applied - Years 2000-current.

MEDLINE

OVID SP, Medline in process and Other Non-Indexed Citations and Ovid MEDLINE 1946 to Present

2/12/2013

11,935 records

1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or "support")) or "Personal care services" or "Personal care service" or (Shopping adj2 ("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or "support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1 "home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab.

2   ((care adj1 home) not "care home").ti,ab.

3   Home care services/

4   Home Health Aides/

5   Homemaker Services/

6   Home Nursing/

7   Foster Home Care/ or child care/ or "maternal health services"/ or pregnancy/

8   1 or 2 or 3 or 4 or 5 or 6

9   8 not 7

10   "Aged"/ or "Aged, 80 and over"/ or "Frail Elderly"/ or "Health Services for the Aged"/ or "Middle Aged"/

11   (Aged or Aging or Ageing or Geron* or Elderly or Geriatric* or "social care" or "social service?").jw.

12   (Caregiver* or Carer* or "Care giver*" or Caregiving or "Care giving" or

"informal care" or "informal caring" or "unpaid care" or "unpaid caring" or "family caring" or "voluntary caring" or caretak* or "care tak*" or "nonprofessional caring" or "service user" or "service users").ti,ab.

13   (Employees or (Providers adj1 (homecare or domiciliary or care)) or (Attendant* adj1 (homecare or domiciliary or care)) or (Assistant* adj1 (homecare or domiciliary or care)) or (Staff adj1 (homecare or domiciliary or care)) or Staffing or (Managers adj1 (homecare or domiciliary or care)) or (Manager adj1 (homecare or domiciliary or care)) or (Supervisors adj1 (homecare or domiciliary or care)) or (Supervisor adj1 (homecare or domiciliary or care)) or (Professional* adj1 (homecare or domiciliary or care)) or (Coordinator* adj1 (homecare or domiciliary or care)) or (Facilitator* adj1 (homecare or domiciliary or care)) or (Adviser adj1 (homecare or domiciliary or care)) or (Advisor adj1 (homecare or domiciliary or care)) or (Advisers adj1 (homecare or domiciliary or care)) or (Advisors adj1 (homecare or domiciliary or care)) or (Operatives adj1 (homecare or domiciliary or care)) or "Health aide" or "Health aides" or "Home help" or "Home helps" or "Shared lives" or "Shared life" or "Home care agencies" or "Home care agency" or "Homecare agencies" or "Homecare agency" or "Homecare work*" or (Domiciliary adj1 agenc*) or (Domiciliary adj1 work*) or "Care worker" or "Case worker" or "Support worker*" or "Lone worker*" or Workforce or "Social worker*" or "Workforce" or "Human resource*" or Careworker?).ti,ab.

14   ("Social care" or "social service*" or "social work" or "welfare service*" or "adult care service*" or "community service*" or "community care" or "Supportive service*" or "integrated service*" or "Services integration" or "Local authority" or "Local authorities" or "State support" or "interprofessional working" or "inter professional working" or "service model" or "service models" or "professional caring" or "local government" or "local government" or "directed care" or "selfdirected care" or Commission* or Multiagenc* or "Multiple agencies" or "Multiple agency" or "joint working" or "collaborative working" or "agency directed" or "self directed" or (service? adj1 delivery) or (care adj1 organisation)

or (care adj1 organization) or "care service" or "care services" or "self managed" or "user directed" or "Consumer directed" or (Purchas* adj2 care) or Personalisation or "adult service" or "adult services").ti,ab.

15 (Ageing or Aging or Elder* or Frail* or Seniors or Geriatric* or gerontology or Pensioner* or "late life" or "later life" or "old old" or "Oldest old" or (pension* adj1 age*) or "older than 55" or "older than 50" or "older than 65" or "older than 70" or "older than 75" or "older than 80" or "older than 85" or "middle age*" or "Mid life" or Midlife or "Middle life").ti,ab.

16 (Senior adj1 (adult or adults or "service user*" or person or persons or men or women or male or males or female or females or community or communities or population or populations or age or aged or ages or resident or residents or citizen or recipient or individual or citizens or recipients or individuals)).ti,ab.

17 (Old* adj1 (people* or person or adult or "service user" or men or women or male or female or population or age or resident or citizen or senior or community or communities or recipient or individual or persons or adults or "service users" or males or females or populations or ages or residents or citizens or seniors or recipients or individuals)).ti,ab.

18 ("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95").ti,ab.

19 Caregivers/

20 Voluntary Workers/

21 "Social Work"/ or "State Medicine"/ or "Interinstitutional Relations"/ or "Delivery of Health Care, Integrated"/ or "Social Welfare"/ or "home health aides"/

22 Home Nursing/ma

23 Home Nursing/ec

24 Home Nursing/og

25 Homemaker Services/ec

26   Homemaker Services/ma

27   Homemaker Services/og

28   Home Health Aides/

29   10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22
      or 23 or 24 or 25 or 26 or 27 or 28

30   exp child/ or exp infant/ or exp adolescent/

31   exp adult/ or "Aged"/ or "Aged, 80 and over"/ or "Frail Elderly"/ or
      "Health Services for the Aged"/ or "Middle Aged"/

32   30 not (30 and 31)

33   29 not 32

34   9 and 33

35   (letter or comment or editorial).pt.

36   34 not 35

37   limit 36 to yr="2000 -Current"

PsycINFO

OVID SP <1987 to November Week 4 2013>
29/11/2013
No. of records: 3707
1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or
"homemaker services" or "homemaker service" or "home maker service" or "home
maker services" or "Home support" or "home carer" or "home carers" or "home
caregivers" or "home caregiver" or "home service" or "home services" or "home
assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or
"support")) or "Personal care services" or "Personal care service" or (Shopping adj2
("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or
"support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care"
or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or
service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or
service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1

"home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab. (5316)

2   ((care adj1 home) not "care home").ti,ab. (3236)

3   "Home Care Personnel"/ (286)

4   "Home Care"/ (4123)

5   1 or 2 or 3 or 4 (7399)

6   "Elder Care"/ or Aging/ or "Aging in Place"/ (33990)

7   Caregivers/ or Volunteers/ (20420)

8   Home Care Personnel/ (286)

9   Social Work/ or State Medicine/ or Interinstitutional Relations/ or "Delivery of Health Care, Integrated"/ or Social Welfare/ or "home health aides"/ (10468)

10   community welfare services/ (944)

11   social casework/ (10183)

12   social services/ (5698)

13   community services/ (9063)

14   (Aged or Aging or Ageing or Geron* or Elderly or Geriatric* or "social care" or "social service?").jw. (45836)

15   (Caregiver* or Carer* or "Care giver*" or Caregiving or "Care giving" or "informal care" or "informal caring" or "unpaid care" or "unpaid caring" or "family caring" or "voluntary caring" or caretak* or "care tak*" or "nonprofessional caring" or "service user" or "service users").ti,ab. (42684)

16   (Employees or (Providers adj1 (homecare or domiciliary or care)) or (Attendant* adj1 (homecare or domiciliary or care)) or (Assistant* adj1 (homecare or domiciliary or care)) or (Staff adj1 (homecare or domiciliary or care)) or Staffing or (Managers adj1 (homecare or domiciliary or care)) or (Manager adj1 (homecare or domiciliary or care)) or (Supervisors adj1 (homecare or domiciliary or care)) or (Supervisor adj1 (homecare or domiciliary or care)) or (Professional* adj1 (homecare or domiciliary or care)) or (Coordinator* adj1 (homecare or domiciliary or care)) or (Facilitator* adj1 (homecare or domiciliary or care)) or (Adviser adj1 (homecare or domiciliary or care)) or (Advisor adj1 (homecare or domiciliary or care)) or (Advisers adj1 (homecare or domiciliary or care)) or (Advisors adj1 (homecare or domiciliary or care)) or (Operatives adj1 (homecare or domiciliary or care)) or "Health aide" or "Health aides" or "Home help" or "Home helps" or "Shared lives" or "Shared life" or "Home care agencies" or "Home care agency" or "Homecare agencies" or

"Homecare agency" or "Homecare work*" or (Domiciliary adj1 agenc*) or (Domiciliary adj1 work*) or "Care worker" or "Case worker" or "Support worker*" or "Lone worker*" or Workforce or "Social worker*" or "Workforce" or "Human resource*" or Careworker?).ti,ab. (71366)

17   ("Social care" or "social service*" or "social work" or "welfare service*" or "adult care service*" or "community service*" or "community care" or "Supportive service*" or "integrated service*" or "Services integration" or "Local authority" or "Local authorities" or "State support" or "interprofessional working" or "inter professional working" or "service model" or "service models" or "professional caring" or "local government" or "local government" or "directed care" or "selfdirected care" or Commission* or Multiagenc* or "Multiple agencies" or "Multiple agency" or "joint working" or "collaborative working" or "agency directed" or "self directed" or (service? adj1 delivery) or (care adj1 organisation) or (care adj1 organization) or "care service" or "care services" or "self managed" or "user directed" or "Consumer directed" or (Purchas* adj2 care) or Personalisation or "adult service" or "adult services").ti,ab. (53756)

18   6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 (222017)

19   "child care"/ or "child welfare"/ or "foster care"/ (12418)

20   5 not 19 (6803)

21   limit 20 to (360 middle age <age 40 to 64 yrs> or "380   aged <age 65 yrs and older>" or "390   very old <age 85 yrs and older>") (2953)

22   limit 21 to (100 childhood <birth to age 12 yrs> or 120 neonatal <birth to age 1 mo> or 140 infancy <age 2 to 23 mo> or 160 preschool age <age 2 to 5 yrs> or 180 school age <age 6 to 12 yrs> or 200 adolescence <age 13 to 17 yrs>) (156)

23   limit 20 to (100 childhood <birth to age 12 yrs> or 120 neonatal <birth to age 1 mo> or 140 infancy <age 2 to 23 mo> or 160 preschool age <age 2 to 5 yrs> or 180 school age <age 6 to 12 yrs> or 200 adolescence <age 13 to 17 yrs>) (915)

24   20 not 23 (5888)

25   24 or 22 (6044)

26   (Ageing or Aging or Elder* or Frail* or Seniors or Geriatric* or gerontology or Pensioner* or "late life" or "later life" or "old old" or "Oldest old" or (pension* adj1 age*) or "older than 55" or "older than 50" or "older than 65" or "older than 70" or "older than 75" or "older than 80" or "older than 85" or "middle age*" or "Mid life" or Midlife or "Middle life").ti,ab. (91714)

27   (Senior adj1 (adult or adults or "service user*" or person or persons or men or women or male or males or female or females or community or communities or population or populations or age or aged or ages or resident or residents or citizen or recipient or individual or citizens or recipients or individuals)).ti,ab. (1174)

28   (Old* adj1 (people* or person or adult or "service user" or men or women or male or female or population or age or resident or citizen or senior or community or communities or recipient or individual or persons or adults or "service users" or males or females or populations or ages or residents or citizens or seniors or recipients or individuals)).ti,ab. (67442)

29   ("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95").ti,ab. (16894)

30   18 or 26 or 27 or 28 or 29 (300124)

31   25 and 30 (4574)

32   21 or 31 (4984)

33   limit 32 to yr="2000 -Current" (3707)

Social Care Online (beta version)

31/10/2013

Keyword: "home care" - and items from 2013

38 records

Note: This search was used to supplement the Social Policy and Practice search

Social Policy and Practice

OVID SP<201310>

19/11/2013

3341 records

1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or "support")) or "Personal care services" or "Personal care service" or (Shopping adj2 ("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or

"support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1 "home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab. (5211)

2   ((care adj1 home) not "care home").ti,ab. (2827)

3   "home care".hw. (2642)

4   "homecare".hw. (6)

5   "DOMICILIARY CARE".hw. (525)

6   (PREGNANCY or BIRTH or "Young people" or "children" or "pregnant women" or "child").hw. (107730)

7   ("elderly people" or "older people" or "middle age*" or elderly).hw. (76366)

8   6 and 7 (2572)

9   6 not 8 (105158)

10   1 or 2 or 3 or 4 or 5 (6800)

11   10 not 9 (5889)

12   limit 11 to yr="2000 -Current" (3341)

Social Sciences Citation Index

Conference Proceedings Citation Index, Social Sciences and Humanities

Web of Science

2/12/2013

SSCI, line #13, date limit 2000-2013 = 4,200

CPCI-SSH, line #15, date limit 2010-2013 = 18 records

Set	Results	
# 15	18	#11 AND #10
		Databases=CPCI-SSH Timespan=2010-2013

# 14   177   #11 AND #10
Databases=CPCI-SSH Timespan=2000-2013

# 13   4,200   #11 AND #10
Databases=SSCI Timespan=2000-2013

# 11   461,238   #2 or #3 or #4 or #5 or #6 or #7 or #8
Databases=SSCI, CPCI-SSH Timespan=2000-2013

# 10   5,771   #1 NOT #9
Databases=SSCI, CPCI-SSH Timespan=2000-2013

# 9   10,463   TS=("foster care" OR "child care" or "infant care" OR childcare OR "antenatal care" or "prenatal care")
Databases=SSCI, CPCI-SSH Timespan=2000-2013

8   99,907   TS=(Employees OR (Providers NEAR/1 (homecare OR domiciliary OR care)) OR (Attendant* NEAR/1 (homecare OR domiciliary OR care)) OR (Assistant* NEAR/1 (homecare OR domiciliary OR care)) OR (Staff NEAR/1 (homecare OR domiciliary OR care)) OR Staffing OR (Managers NEAR/1 (homecare OR domiciliary OR care)) OR (Manager NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisors NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisor NEAR/1 (homecare OR domiciliary OR care)) OR (Professional* NEAR/1 (homecare OR domiciliary OR care OR caring)) OR (Coordinator* NEAR/1 (homecare OR domiciliary OR care)) OR (Facilitator* NEAR/1 (homecare OR domiciliary OR care)) OR (Adviser NEAR/1 (homecare OR domiciliary OR care)) OR (Advisor NEAR/1 (homecare OR domiciliary OR care)) OR (Advisers NEAR/1 (homecare OR domiciliary OR care)) OR (Advisors NEAR/1 (homecare OR domiciliary OR care)) OR (Operatives NEAR/1 (homecare OR domiciliary OR care)) OR "Health aide" OR "Health aides" OR "Home help" OR "Home helps" OR "Shared lives" OR "Shared life" OR "Home care agencies" OR "Home care agency" OR "Homecare agencies" OR "Homecare agency" OR "Homecare work*" OR (Domiciliary NEAR/1 agenc*) OR (Domiciliary NEAR/1 work*) OR ("Care worker") OR ("Case

worker") OR "Support worker*" OR "Lone worker*" OR Workforce OR "Social worker*" OR "Workforce" OR "Human resource*" OR Careworker*)

Databases=SSCI, CPCI-SSH Timespan=2000-2013

7   55,682   TS=("Social care" OR "social service*" OR "social work" OR "welfare service*" OR "adult care service*" OR "community service*" OR "community care" OR "Supportive service*" OR "integrated service*" OR "Services integration" OR "Local authority" OR "Local authorities" OR "State support" OR "interprofessional working" OR "inter professional working" OR "service model" OR "service models" OR "local government" OR "local government" OR "directed care" OR "selfdirected care" OR Commission* OR Multiagenc* OR "Multiple agencies" OR "joint working" OR "collaborative working" OR "agency directed" OR "self directed" OR (service* NEAR/1 delivery) OR (care NEAR/1 organisation) OR (care NEAR/1 organization) OR ("care service") OR ("care services") OR "self managed" OR "user directed" OR "Consumer directed" OR (Purchas* NEAR/2 care) OR Personalisation OR "adult service" OR "adult services" OR "multiple agency")

Databases=SSCI, CPCI-SSH Timespan=2000-2013

6   30,101   TS=(Caregiver* OR Carer* OR "Care giver*" OR Caregiving OR "Care giving" OR "informal care" OR "informal caring" OR "unpaid care" OR "unpaid caring" OR "family caring" OR "voluntary caring" OR caretak* OR "care tak*" OR "nonprofessional caring" OR "service user" OR "service users")

Databases=SSCI, CPCI-SSH Timespan=2000-2013

5   11,063   TS=("aged 50" or "aged 55" or "aged 60" or "aged 65" or "aged 70" or "aged 75" or "aged 80" or "aged 85" or "aged 90" or "aged 95")

Databases=SSCI, CPCI-SSH Timespan=2000-2013

4   71,763   TS=((Old* NEAR/1 (people* OR person OR adult OR "service user" OR men OR women OR male OR female OR population OR age OR resident OR citizen OR senior OR community OR

communities OR recipient OR individual OR persons OR adults OR "service users" OR males OR females OR populations OR ages OR residents OR citizens OR seniors OR recipients OR individuals)))
Databases=SSCI, CPCI-SSH Timespan=2000-2013

# 3   1,489   TS=(Senior NEAR/1 (adult OR adults OR "service user*" OR person OR persons OR men OR women OR male OR males OR female OR females OR community OR communities OR population OR populations OR age OR aged OR ages OR resident OR residents OR citizen OR recipient OR individual OR citizens OR recipients OR individuals))
Databases=SSCI, CPCI-SSH Timespan=2000-2013

# 2   302,894   TS=(Ageing OR Aging OR Elder* OR Frail* OR Seniors OR Geriatric* OR gerontology OR Pensioner* OR "late life" OR "later life" OR "old old" OR "Oldest old" OR (pension* NEAR/1 age*) OR "older than 55" OR "older than 50" OR "older than 65" OR "older than 70" OR "older than 75" OR "older than 80" OR "older than 85" OR "middle age*" OR "Mid life" OR Midlife OR "Middle life")
Databases=SSCI, CPCI-SSH Timespan=2000-2013

1   6,243   TS=("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR

service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home))
Databases=SSCI, CPCI-SSH Timespan=2000-2013

Social Services Abstracts

Proquest

21/11/2013

1677 records

S5	S1 NOT S3Limits applied Narrowed by: Decade: 2000 - 2009; 2010 - 2019	1677°
S4	S1 NOT S3	2635°
S3	SU.EXACT.EXPLODE("Child Care Services") OR SU.EXACT.EXPLODE("Foster Care") OR SU.EXACT.EXPLODE("Infant mortality")	4099*
S1	TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2	2916°

| | ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care") | |

Social Work Abstracts

OVID SP<1968 to September 2013>

19/11/2013

241 records

1   ("home care" or "homecare" or "home caring" or "home help" or "home helps" or "homemaker services" or "homemaker service" or "home maker service" or "home maker services" or "Home support" or "home carer" or "home carers" or "home caregivers" or "home caregiver" or "home service" or "home services" or "home assistance" or (Domiciliary adj2 ("assistance" or "care" or service* or "caring" or "support")) or "Personal care services" or "Personal care service" or (Shopping adj2 ("support" or "assistance" or service*)) or ("own home" adj2 ("care" or "caring" or "support" or "assistance" or service*)) or ("home based" adj2 ("assistance" or "care" or service* or "caring" or "support")) or ("in the home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or ("in home" adj3 ("assistance" or "care" or service* or "caring" or "support")) or (care adj2 "individual* homes") or ("care in" adj1 "home") or ("personal care" and home) or (home adj2 assistance) or ("personal assistance" and home)).ti,ab. (748)

2   ((care adj1 home) not "care home").ti,ab. (500)

3   "Home health care".hw. (125)

4   home care.hw. (45)

5   domiciliary care.hw. (1)

6   1 or 2 or 3 or 4 or 5 (807)

7   foster care.hw. (825)

8   children.hw. (5714)

9   youths.hw. (584)

10   child welfare services.hw. (163)

11   adolescents.hw. (3394)

12   7 or 8 or 9 or 10 or 11 (9972)

13   6 not 12 (611)

Removed year offline 2000-2013 = 241

Sociological Abstracts

Proquest

29/11/2013

868 records

Search = S45 OR S48 OR S51, where:

S51	PUB(Aged OR Aging OR Ageing OR Geron* OR Elderly OR Geriatric*) AND ((TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3

	("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care")) AND yr(1990-2019))Limits applied

S45	TI,AB(Employees OR (Providers NEAR/1 (homecare OR domiciliary OR care)) OR (Attendant NEAR/1 (homecare OR domiciliary OR care)) OR (Attendants NEAR/1 (homecare OR domiciliary OR care)) OR (Assistant NEAR/1 (homecare OR domiciliary OR care)) OR (Assistants NEAR/1 (homecare OR domiciliary OR care)) OR (Staff NEAR/1 (homecare OR domiciliary OR care)) OR Staffing OR (Managers NEAR/1 (homecare OR domiciliary OR care)) OR (Manager NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisors NEAR/1 (homecare OR domiciliary OR care)) OR (Supervisor NEAR/1 (homecare OR domiciliary OR care)) OR (Professional NEAR/1 (homecare OR domiciliary OR care)) OR (Professionals NEAR/1 (homecare OR domiciliary OR care)) OR (Coordinator NEAR/1 (homecare OR domiciliary OR care)) OR (Coordinators NEAR/1 (homecare OR domiciliary OR care)) OR (Facilitator NEAR/1 (homecare OR domiciliary OR care)) OR (Facilitators NEAR/1 (homecare OR domiciliary OR care)) OR (Adviser NEAR/1 (homecare OR domiciliary OR care)) OR (Advisor NEAR/1 (homecare OR domiciliary OR care)) OR (Advisers NEAR/1 (homecare OR domiciliary OR care)) OR (Advisors NEAR/1 (homecare OR domiciliary OR care)) OR (Operatives NEAR/1 (homecare OR domiciliary OR care)) OR "Health aide" OR "Health aides" OR "Home help" OR "Home helps" OR "Shared lives" OR "Shared life" OR "Home care agencies" OR "Home care agency" OR "Homecare agencies" OR "Homecare agency" OR

"Homecare work*" OR (Domiciliary NEAR/1 agency) OR (Domiciliary NEAR/1 agencies) OR (Domiciliary NEAR/1 work*) OR ("Care worker") OR ("Case worker") OR "Support worker*" OR "Lone worker" OR "Lone workers" OR Workforce OR "Social worker" OR "Social workers" OR "Workforce" OR "Human resource*" OR Careworker OR Careworkers OR "Social care" OR "social service*" OR "social work" OR "welfare service" OR "welfare services" OR "adult care service" OR "adult care services" OR "community service" OR "community services" OR "community care" OR "Supportive service" OR "Supportive services" OR "integrated service" OR "integrated services" OR "Services integration" OR "Local authority" OR "Local authorities" OR "State support" OR "interprofessional working" OR "inter professional working" OR "service model" OR "service models" OR "local government" OR "local government" OR "directed care" OR "selfdirected care" OR commission OR commissioning OR commissioners OR commissioned OR Multiagency OR Multiagencies OR "Multiple agencies" OR "Multiple agency" OR "joint working" OR "collaborative working" OR "agency directed" OR "self directed" OR (service NEAR/1 delivery) OR (services NEAR/1 delivery) OR (care NEAR/1 organisation) OR (care NEAR/1 organization) OR ("care service") OR ("care services") OR "self managed" OR "user directed" OR "Consumer directed" OR (Purchase NEAR/2 care) OR (Purchasing NEAR/2 care) OR Personalisation OR "adult service" OR "adult services" OR Caregiver OR Caregivers OR Carer OR carers OR "Care giver" OR "Care givers" OR Caregiving OR "Care giving" OR "informal care" OR "informal caring" OR "unpaid care" OR "unpaid caring" OR "family caring" OR "voluntary caring" OR caretaker OR caretakers OR caretaking OR "care taker" OR "care takers" OR "care taking" OR "nonprofessional caring" OR "professional caring" OR "service user" OR "service users" OR Ageing OR Aging OR Elder* OR Frail* OR Seniors OR Geriatric* OR gerontology OR Pensioner* OR "late life" OR "later life" OR "old old" OR "Oldest old" OR (pension* NEAR/1 age*) OR "older than 55" OR "older than 50" OR "older than 65" OR "older than 70" OR "older than 75" OR "older than

80" OR "older than 85" OR "middle age*" OR "Mid life" OR Midlife OR "Middle life" OR (Senior NEAR/1 (adult OR adults OR "service user" OR "service users" OR person OR persons OR men OR women OR male OR males OR female OR females OR community OR communities OR population OR populations OR age OR aged OR ages OR resident OR residents OR citizen OR recipient OR individual OR citizens OR recipients OR individuals)) OR (Old* NEAR/1 (people* OR person OR adult OR "service user" OR "service users" OR men OR women OR male OR female OR population OR age OR resident OR citizen OR senior OR community OR communities OR recipient OR individual OR persons OR adults OR "service users" OR males OR females OR populations OR ages OR residents OR citizens OR seniors OR recipients OR individuals)) OR "aged 50" OR "aged 55" OR "aged 60" OR "aged 65" OR "aged 70" OR "aged 75" OR "aged 80" OR "aged 85" OR "aged 90" OR "aged 95") AND ((TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care")) AND yr(1990-2019)) AND yr(2000-2013)

S48	(SU.EXACT("Middle Aged Adults") OR SU.EXACT("Elderly") OR SU.EXACT("Geriatrics") OR SU.EXACT("Elderly Women") OR SU.EXACT("Aging") OR SU.EXACT("Gerontology") OR SU.EXACT("Assistance") OR SU.EXACT("Social Welfare") OR SU.EXACT("Social Work") OR SU.EXACT("Social Services Utilization") OR SU.EXACT("Social Workers") OR SU.EXACT("Social Services") OR SU.EXACT("Social Security") OR SU.EXACT("Caregivers") OR SU.EXACT("Workers") OR SU.EXACT("Adult Care Services")) AND ((TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care")) AND yr(1990-2019)) AND yr(2000-2013)

Worldwide political science abstracts

Proquest

21/11/2013

158 records

TI,AB("home care" OR "homecare" OR "home caring" OR "home help" OR "home helps" OR "homemaker services" OR "homemaker service" OR "home maker service" OR "home maker services" OR "Home support" OR "home carer" OR "home carers" OR "home caregivers" OR "home caregiver" OR "home service" OR "home services" OR "home assistance" OR (Domiciliary NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("Personal care services") OR ("Personal care service") OR (Shopping NEAR/2 ("support" OR "assistance" OR service*)) OR ("own home" NEAR/2 ("care" OR "caring" OR "support" OR "assistance" OR service*)) OR ("home based" NEAR/2 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in the home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR ("in home" NEAR/3 ("assistance" OR "care" OR service* OR "caring" OR "support")) OR (care NEAR/2 "individual* homes") OR ("care in" NEAR/1 "home") OR ("personal care" AND home) OR (home NEAR/2 assistance) OR ("personal assistance" AND home)) OR SU.EXACT("Home Health Care") OR SU.EXACT("Home Care")
Limits applied 2000-2013

Update searches:

The bibliographic database searches were re-run during November 2014, except for CEA registry and IDEAS repec. The results were put into an Endnote database and searches were undertaken within the database (see below) to identify controlled trials and other comparison studies, or systematic reviews. This yielded 1417 records once duplicates were removed.

Endnote search: Any field: trial* OR cost* OR control* OR random* OR compar* OR evaluat* OR prospect* OR intervention* OR pilot* OR longitudinal* OR test* OR regression* OR analysis* OR systematic* OR exclusion criteria* OR inclusion criteria* OR eligibility criteria* OR screening criteria* OR non-random* OR review* OR synthesis*OR retrospect* OR pooled data OR search* OR handsearch* OR metaanalysis OR metaregression OR cohort*

2. Review questions and review protocols

Component	Description
VIEWS AND EXPERIENCES OF HOME CARE	
Review No & Question **Scope section: all aspects of 4.3**	1.1 What are users' and family carers' experiences of home care? 1.2 What do they think works well and what needs to change?
Objectives	• To describe the views and experiences of users and family carers of home care service; • To highlight aspects of home care which work well, as perceived by service users and their families; • To highlight aspects of home care which service users and their families feel should change in order to improve the service; • To contextualise and compare findings from effectiveness questions on home care and consider the extent to which evidence of different kinds is mutually supportive to recommendations.
Criteria for considering studies for the review	**Population:** Older people, aged 65 years and older, who use home care services, and their families, partners and carers **Intervention:** Home care – personal care and practical support – provided by social care practitioners. **Setting:** Service users' home, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement. **Outcomes:** None specified, but driven by the data, which concerns narrative or survey-based description of service users' and their families' views and experience of home care. Likely to relate to outcomes such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding (4.4 Scope).

	The study designs relevant to these questions are likely to include:
	- Systematic reviews of qualitative studies on this topic; - Qualitative studies of user and carer views of home care; - Qualitative components of effectiveness studies; - Observational and cross-sectional survey studies of user experience (e.g. Health & Social Care Information Centre reports on user satisfaction; studies showing the distribution of home care hours). Grey literature which includes views of people who use services and their carers (possibly as part of evaluation) may be identified. Findings from surveys undertaken by organisations representing service users, patients and carers which are not published in research journals may also be considered.
How the information will be searched	**Search summary** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation". The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed. A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care
- Social Care Online – beta version (2013 only)
- Social Policy and Practice
- Social Work Abstracts
- Social Services Abstracts

For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.

Social science and politics
- ASSIA
- Sociological Abstracts
- Social policy and practice
- IBSS
- Social Science Citation Index
- Worldwide Political Science Abstracts
- Library and information science abstracts

Health
- Medline
- PsycINFO
- EMBASE
- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
- HMIC
- CINAHL

Economic
- NHS EED
- ECONLIT
- IDEAS repec

- CEA registry

Other databases
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes (2011 onwards only)
GeroLIT (output is titles only)
Evidence Database on Aging Care – EDAC
Opengrey

Websites
School for Social Care Research
Oxford centre for social policy
Qualitative archive on ageism
UKHCA – United Kingdom Home care Association
Transforming Adult social Care
NASCIS – national audit social care intelligence service
Centre for policy on aging
Care Quality Commission
Local Government Association
Ireland National Council on Aging and older people
Online research bank social policy database (Northern Ireland)
Nuffield Trust
Joseph Rowntree Foundation
AgeUk Professional Resources
Health and social care information centre

	Office of National Statistics
	LGA – Knowledge Hub
	Poverty www.poverty.org.uk
	Equality and Human Rights Commission
	Centre for Policy on Ageing
	Data.gov
	GOV.UK

Searches were based on:
Concept A "home care" AND one or more of:
Concept B older people
Concept C carers
Concept D workforce
Concept E) social care organisation/ self-commissioning
AND
year 2004+

A long list of search terms to be used can be supplied on request.

Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below).

Follow-up searching
Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available.

At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the

	GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material. During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and may then conduct additional searching on telecare (and relevant associated search terms.).
The review strategy	**Screening of search outputs for exclusion or inclusion** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below. **Exclusion criteria applied on screening of search outputs** **Date of publication:** Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.) **Language: Exclude if not in English language.** **Country:** Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand. **Insufficient information:** Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.) **Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the**

literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.

Intervention: Exclude if this is not about home care delivered by social care workforce.

Workforce: *Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded.*

Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)

Duplicate: Exclude if this is a duplicate of another entry (pick the best referenced one).

Marker: Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material.

Non-excluded papers will be classified as follows:
INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish

to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.

Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews

	• Gaps in evidence, including those related to the experience and views of sub-groups of the population. The analysis of search outputs for each questions will be tabulated: • by study type – a measure of the strength of the findings of the study; • by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context. Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities. The material identified and retrieved in full text versions will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions (on user and carer views and experiences), the checklists for qualitative studies and possibly that for cross-sectional studies will be applied. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries. We expect the majority of the data identified to be qualitative in nature, and presented in narrative format. Qualitative data will not be amenable to meta-analysis, and the approach to analysis of material on the views of service users and carers will be broadly interpretive. This will seek to identify, but not quantify, related concepts within primary studies, and to test their robustness and consistency. High level themes on aspects of care and care improvement that are important to older people and their carers will then be identified. This set of data is likely to be among the first reviews presented to the GDG, as

	it may inform subsequent approaches, for example by illustrating the importance of particular approaches to personalised care. Qualitative and survey studies addressing these questions will be reviewed for inclusion of sub-groups (e.g. those at end of life; diverse populations) in order to consider whether their views are adequately represented. A strategy for further focussed searching may be devised.

Component	Description
VIEWS AND EXPERIENCES OF HOME CARE	
Review No & Question **Scope section: all aspects of 4.3**	2.1 What are the views and experiences of home care practitioners, service managers and commissioners procuring or delivering services? 2.2 What do they think works well and what needs to change?
Objectives	• To describe the views and experiences of people delivering, organising and commissioning home care services; • To collect evidence on key workforce and practice issues which we may consider within the guidance; • To highlight aspects of home care which work well, as perceived by practitioners, managers and commissioners; • To highlight aspects of home care which providers and commissioners feel should change in order to improve the service; • To contextualise and compare findings from effectiveness questions on home care and consider the extent to which evidence of different kinds is mutually supportive to recommendations. • Although commissioning models are out of scope, to collect the views of commissioners on what services should be provided to inform the guidance.
Criteria for considering studies for the review	**Population:** Practitioners, managers and commissioners of home care services for older people, aged 65 years and older. Views of people funded and/or commissioned by service users and their families will also be sought. Views of primary healthcare staff who work with or liaise with home care service providers may also be included. **Intervention:** Home care – personal care and practical support – provided by social care practitioners. **Setting:** Service users' home, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement. **Outcomes:** None specified, but expected to refer to narrative or survey-based description of outcomes of home care for service users' and their families, as well as organisational outcomes (see below).

	Likely to relate to user outcomes such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding (4.4 Scope). Likely to relate to employee and organisational outcomes such as: productivity, consistency in care provision, staff retention rates job satisfaction; condition of work; organisational issues, perceived competency; work-related training and supervision issues; quality of home care provided. The study designs relevant to these questions are likely to include: • Systematic reviews of qualitative studies on this topic; • Qualitative studies of provider, manager and commissioner views of home care; • Qualitative components of effectiveness studies; • Observational and cross-sectional survey studies of home care provided (e.g. NHSIC reports showing the distribution of home care hours). Research-based findings from organisations representing providers (e.g. UKHCA) may also be considered as evidence.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "care professional(s)"; "care provider(s)"; "care co ordinat*"; "social worker*"; "Care supervi*" "Care worker(s)"; "workforce", "social care organisation". The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed.

A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care

- Social Care Online – beta version (2013 only)
- Social Policy and Practice
- Social Work Abstracts

Social Services Abstracts - for the social care databases just the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.

Social science and politics

- ASSIA
- Sociological Abstracts
- Social policy and practice
- IBSS
- Social Science Citation Index
- Worldwide Political Science Abstracts
- Library and information science abstracts

Health

- Medline
- PsycINFO
- EMBASE
- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
- HMIC
- CINAHL

Economic

- NHS EED
- ECONLIT
- IDEAS repec
- CEA registry

Other databases
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes (2011 onwards only)
GeroLIT (output is titles only)
Evidence Database on Aging Care – EDAC
Opengrey

	Websites School for Social Care Research Oxford centre for social policy Qualitative archive on ageism UKHCA – United Kingdom Home care Association Transforming Adult social Care NASCIS – national audit social care intelligence service Centre for policy on aging Care Quality Commission Local Government Association Ireland National Council on Aging and older people Online research bank social policy database (Northern Ireland) Nuffield Trust Joseph Rowntree Foundation AgeUk Professional Resources Health and social care information centre Office of National Statistics LGA – Knowledge Hub Poverty www.poverty.org.uk Equality and Human Rights Commission Centre for Policy on Ageing Data.gov GOV.UK **Searches were based upon:** Concept A "home care" AND one or more of: Concept B older people Concept C carers Concept D workforce Concept E) social care organisation/ self-commissioning AND

	year 2004+
	A long list of search terms to be used can be supplied on request.
	Search outputs will be screened against the exclusion criteria for the review question (see Review Strategy below).
	Follow-up searching Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available.
	At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. Within these questions (1.2.1 and 1.2.2) detail will be sought on the ways in which personalised services are delivered to people living alone, people at end of life, people, service users who lack capacity, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
	During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and will conduct additional searching on telecare (with appropriate synonyms). The views of providers and commissioners on the use of telecare as aides to delivering home care are within scope.
The review strategy	Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice

and practice guidance) which will be parked for later use in supporting the guideline.

Exclusion criteria applied on screening of search outputs:

Date of publication: Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.)

Language: Exclude if not in English language

Country: Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand.

Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.)

Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.

Intervention: Exclude if this is not about home care delivered by social care workforce.

Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded.

Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)

Duplicate: Exclude if this is a duplicate of another entry (pick the best referenced one).

Marker: Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material.

Non-excluded papers will be classified as follows:

INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.

Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic

	thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities. The material identified and retrieved in full text versions will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions (on user and carer views and experiences), the checklists for qualitative studies and possibly that for cross-sectional studies will be applied. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries. We expect the majority of the data identified to be qualitative in nature, and presented in narrative format. Qualitative data will not be amenable to meta-analysis, and the approach to analysis of material on the views of service users and carers will be broadly interpretive. This will seek to identify, but not quantify, related concepts within primary studies, and to test their robustness and consistency. High level themes on aspects of care and care improvement that are important to older people and their carers will then be identified. This set of data is likely to be among the first reviews presented to the GDG, as it may inform subsequent approaches, for example by illustrating the importance of particular approaches to personalised care. Qualitative and survey studies addressing these questions will be reviewed for inclusion of sub-groups (e.g. those at end of life; diverse populations) in order to consider whether their views are adequately represented. A strategy for further focussed searching may be devised.

Component	Description
PLANNING AND DELIVERING HOME CARE	
Review No & Question **Scope sections 4.3.1:** **Care & support planning;** **Activities & interventions provided as part of home care service;** **Liaison & joint working.**	3.1 What approaches to home care planning and delivery are effective in improving outcomes for people who use services? 3.2 What are the significant features of an effective model of home care? 3.3 Are there any undesired/harmful effects from certain types of home care approaches?
Objectives	• 2.1.1 To identify and evaluate the effects of different models and frameworks for care and support planning, including activities and interventions provided as part of a home care service, and liaison and joint working with other (formal and informal) care providers. • Relevant approaches might include, for example: personalised care; outcomes-focussed planning and delivery; care integrated, delivered or coordinated with healthcare practice/practitioners and with other providers of care and support e.g. housing; case management; home care delivered by volunteers under formal arrangements; home care organised and/or partly or wholly funded by the person receiving care; shared lives schemes and other 'live-in' home care. • 2.1.2 To evaluate the components of an effective model of home care. This question anticipates that the approaches referred to in 2.1.1 may not be that different from each other, may not be compared with other approaches and are unlikely to show 'causal' relationships with aspects of the approach: we would need then to consider some of those service elements which seem to be evidenced across approaches as showing good outcomes. • 2.1.3 May be concerned with some of the home care practices which could deliver harmful outcomes, e.g. rushed visits; lack of training in lifting and moving or continence care. There may be some overlap or continuity with question on safety (2.3).
Criteria for considering studies for the	**Population:** Models and frameworks for delivering home care to older people (aged 65

review	years and older), implemented by practitioners, managers and commissioners of home care services. Models of self-funding and/or commissioning by service users and their families will also be sought. Teams including primary healthcare staff who work alongside home care service providers in integrated practice may also be included. **Intervention:** Home care – personal care and practical support – provided by social care practitioners. **Setting:** Service users' home, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement. **Comparator:** None identified for home care, although there may be comparative studies of different models of providing home care. **Outcomes:** None specified, but expected to refer to outcomes of home care for service users' and their families, as well as organisational outcomes (see below). Likely to relate to user outcomes such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding (4.4 Scope). Additional organisational outcomes which may influence outcomes for service users such as: productivity, consistency in care provision, staff retention rates job satisfaction; condition of work; organisational issues, perceived competency; work-related training and supervision issues; quality of home care provided. The study designs relevant to these questions are likely to include: • Systematic reviews of studies of different models of home care; • Randomised controlled trials of different models; • Quantitative and qualitative evaluations of different home care models; • Observational and cross-sectional survey studies of home care provided (e.g. Health & Social Care Information Centre reports showing the distribution of home care hours).

	- Cohort studies , case control and before and after studies; - Mixed methods studies; - Case studies of practice site implementation.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation". The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed. A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review. Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched: **Social care** - Social Care Online – beta version (2013 only) - Social Policy and Practice - Social Work Abstracts - Social Services Abstracts For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases. **Social science and politics** - ASSIA

| | Sociological Abstracts Social policy and practice IBSS Social Science Citation Index Worldwide Political Science Abstracts Library and information science abstracts **Health** Medline PsycINFO EMBASE Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews) HMIC CINAHL **Economic** NHS EED ECONLIT IDEAS repec CEA registry **Other databases**
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes (2011 onwards only)
GeroLIT (output is titles only)
Evidence Database on Aging Care – EDAC
Opengrey |

Websites
School for Social Care Research
Oxford centre for social policy
Qualitative archive on ageism
UKHCA – United Kingdom Home care Association
Transforming Adult social Care
NASCIS – national audit social care intelligence service
Centre for policy on aging
Care Quality Commission
Local Government Association
Ireland National Council on Aging and older people
Online research bank social policy database (Northern Ireland)
Nuffield Trust
Joseph Rowntree Foundation
AgeUk Professional Resources
Health and social care information centre
Office of National Statistics
LGA – Knowledge Hub
Poverty www.poverty.org.uk
Equality and Human Rights Commission
Centre for Policy on Ageing
Data.gov
GOV.UK

Searches were based upon:

Concept A "home care" AND one or more of:
Concept B older people
Concept C carers
Concept D workforce
Concept E) social care organisation/ self-commissioning

	AND
	year 2004+
	A long list of search terms to be used can be supplied on request.
	Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below).
	Follow-up searching:
	Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available.
	At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
	During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and may then conduct additional searching on telecare (and relevant associated search terms).
The review strategy	**Screening of search outputs for exclusion or inclusion:**
	Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The

formal exclusion criteria applied are laid out below.

Exclusion criteria applied on screening of search outputs:

Date of publication: Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.)

Language: Exclude if not in English language.

Country: Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand.

Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.)

Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise.   Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.

Intervention: Exclude if this is not about home care delivered by social care workforce.

	Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded. **Evidence type:** Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.) **Duplicate:** Exclude if this is a duplicate of another entry (pick the best referenced one). **Marker:** Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material. **Non-excluded papers will be classified as follows:** **INCLUDE policy & practice guidance:** Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline. **INCLUDE on title & abstract:** Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.) **QUERY INCLUDE:** first reviewer is unsure, so paper is marked for second opinion from another reviewer. Papers screened at this stage on title and abstract and included will be subject to a further

checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies

| | will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.

The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries.

If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions. |
|---|---|

Component	Description
PLANNING AND DELIVERING HOME CARE	
Review No & Question **Relevant to all aspects of scope (4.3) with emphasis on adoption & implementation.**	3.4 What are the barriers to, and facilitators of, effective implementation of approaches shown (2.1.1) to deliver good outcomes?
Objectives	• Drawing on approaches, models and practice identified as potentially effective (see 2.1.1, 2.1.2), to identify opportunities for and barriers to their implementation. • To identify implementation and practice issues which contribute to undesirable or harmful effects (2.1.3). • To contextualise the views of users, carers and practitioners (1.1.1, 1.1.2, 1.2.1, 1.2.2) by identifying barriers and facilitators to improved or changed practice they suggest would improve outcomes. • To consider feasibility and cost of implementing practice shown to deliver good outcomes to service users and carers.
Criteria for considering studies for the review	**Population:** Older people (aged 65 years and older) receiving home care, implemented by social care practitioners and managers of home care services. Material on implementation of models of self-funding and/or commissioning by service users and their families will also be sought. Barriers and facilitators to effective implementation may be identified within papers which describe or evaluate models and frameworks, or may be considered independently. **Intervention:** Models and frameworks for delivering home care: past and potential implementation of change or improvement. **Setting:** Service users' homes, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement. **Comparator:** There may be comparative studies of different models of providing or implementing home care. **Outcomes:** None specified, but expected to refer to outcomes of home care for service

	users' and their families, as well as organisational outcomes (see below).
	Likely to relate to user outcomes such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding (4.4 Scope). Additional organisational outcomes which may influence outcomes for service users such as: productivity, consistency in care provision, staff retention rates job satisfaction; condition of work; organisational issues, perceived competency; work-related training and supervision issues; quality of home care provided. The study designs relevant to these questions are likely to include: • Systematic reviews of studies of different models of home care and their implementation; • Randomised controlled trials of different models and their implementation; • Quantitative and qualitative evaluations of different home care models and/or their implementation; • Observational and cross-sectional survey studies of home care provided (e.g. Health & Social Care Information Centre reports showing the distribution of home care hours). • Cohort studies , case control and before and after studies; • Case studies of implementation in practice; • Mixed methods studies.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation".

The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed.

A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care
- Social Care Online – beta version (2013 only)
- Social Policy and Practice
- Social Work Abstracts
- Social Services Abstracts

For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.

Social science and politics
- ASSIA
- Sociological Abstracts
- Social policy and practice
- IBSS
- Social Science Citation Index
- Worldwide Political Science Abstracts
- Library and information science abstracts

Health

- Medline
- PsycINFO
- EMBASE
- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
- HMIC
- CINAHL

Economic
- NHS EED
- ECONLIT
- IDEAS repec
- CEA registry

Other databases
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes *(2011 onwards only)*
GeroLIT *(output is titles only)*
Evidence Database on Aging Care – EDAC
Opengrey

Websites
School for Social Care Research
Oxford centre for social policy
Qualitative archive on ageism
UKHCA – United Kingdom Home care Association
Transforming Adult social Care

	NASCIS – national audit social care intelligence service Centre for policy on aging Care Quality Commission Local Government Association Ireland National Council on Aging and older people Online research bank social policy database (Northern Ireland) Nuffield Trust Joseph Rowntree Foundation AgeUk Professional Resources Health and social care information centre Office of National Statistics LGA – Knowledge Hub Poverty www.poverty.org.uk Equality and Human Rights Commission Centre for Policy on Ageing Data.gov GOV.UK **Searches were based upon:** Concept A "home care" AND one or more of: Concept B older people Concept C carers Concept D workforce Concept E) social care organisation/ self-commissioning AND year 2004+ A long list of search terms to be used can be supplied on request. Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below).

	Follow-up searching: Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available. At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material. During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and may then conduct additional searching on telecare (and relevant associated search terms).
The review strategy	**Screening of search outputs for exclusion or inclusion:** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below. **Exclusion criteria applied on screening of search outputs:** **Date of publication:** Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.)

	Language: Exclude if not in English language
	Country: Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand
	Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.)
	Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.
	Intervention: Exclude if this is not about home care delivered by social care workforce.
	Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded.
	Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future

studies AND dissertations. (NB: latter may be retrieved later.)

Duplicate: Exclude if this is a duplicate of another entry (pick the best referenced one).

Marker: Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material.

Non-excluded papers will be classified as follows:

INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.
Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.

The material identified will be critically appraised, using the modified appraisal tools

	supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries. If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions.

Component	Description
PLANNING AND DELIVERING HOME CARE	
Review No & Question **Scope section: 4.3.1 safeguarding**	4.1 What are the effects of approaches to promote safe care?
Objectives	- To identify aspects of home care organisation and delivery which promote the safety (alongside dignity, choice, control and other desirable user outcomes) of the service user, their carers and the practitioners working within the home. - To identify policy and practice to support safe delivery of specific home care services practice in relation to safeguarding (from neglect or abuse); and systems to support lone workers. - To identify aspects of care delivery which users and carers say contribute to their sense of safety (e.g. reliability of service, consistency of care staff and good communication with provider agencies). - To consider this question alongside the question on training effects (2.4) and the question on information and support needed to enable service users and carers to play a full role in planning their own care (2.1.1 and 2.1.2), as being informed and giving feedback will improve safety.
Criteria for considering studies for the review	**Population:** Older people (aged 65 years and older) receiving home care. **Intervention:** Aspects of home care – personal care and practical support – provided by social care practitioners which support the safety of service users, carers and practitioners. Could include, models, protocols, etc. Material on personal services commissioned by service users and their families will also be sought, as there is some concern that these services are not regulated and carers will not, for example, be CRB checked. Barriers and facilitators to the delivery of safe care may be identified within papers which describe or evaluate models and frameworks (2.1.1, 2.1.2, 2.1.3), or their implementation (2.2), or safety issues may be considered independently. **Setting:** Service users' home, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement.

	Comparator: There may be comparative studies of different models of providing or implementing home care. **Outcomes:** None specified, but expected to refer to outcomes of home care for service users' and their families, as well as organisational outcomes (see below). Likely to relate to user outcomes such as: Safety and safeguarding of users and carers; user satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; (4.4 Scope). Additional organisational outcomes which may influence safe outcomes for service users such as: productivity, consistency in care provision, staff retention rates job satisfaction; condition of work; organisational issues, perceived competency; work-related training and supervision issues; quality of home care provided. The study designs relevant to these questions are likely to include: • Systematic reviews of studies of different models of home care and their implementation which highlight safety and safeguarding issues within the described models; • Randomised controlled trials of different models which describe safety and safeguarding issues; • Quantitative and qualitative evaluations of different home care models or safety aspects of home care delivery; • Observational and cross-sectional survey studies of home care provided; • Cohort studies , case control and before and after studies; • Mixed methods studies.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the

setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation".

The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed.

A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care
- Social Care Online – beta version (2013 only)
- Social Policy and Practice
- Social Work Abstracts
- Social Services Abstracts

For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.

Social science and politics
- ASSIA
- Sociological Abstracts
- Social policy and practice
- IBSS
- Social Science Citation Index
- Worldwide Political Science Abstracts

- Library and information science abstracts

Health
- Medline
- PsycINFO
- EMBASE
- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
- HMIC
- CINAHL

Economic
- NHS EED
- ECONLIT
- IDEAS repec
- CEA registry

Other databases
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes *(2011 onwards only)*
GeroLIT *(output is titles only)*
Evidence Database on Aging Care – EDAC
Opengrey

Websites
School for Social Care Research

	Oxford centre for social policy Qualitative archive on ageism UKHCA – United Kingdom Home care Association Transforming Adult social Care NASCIS – national audit social care intelligence service Centre for policy on aging Care Quality Commission Local Government Association Ireland National Council on Aging and older people Online research bank social policy database (Northern Ireland) Nuffield Trust Joseph Rowntree Foundation AgeUk Professional Resources Health and social care information centre Office of National Statistics LGA – Knowledge Hub Poverty www.poverty.org.uk Equality and Human Rights Commission Centre for Policy on Ageing Data.gov GOV.UK **Searches were based upon:** Concept A "home care" AND one or more of: Concept B older people Concept C carers Concept D workforce Concept E) social care organisation/ self-commissioning AND year 2004+

	A long list of search terms to be used can be supplied on request.
	Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below).
	Follow-up searching:
	Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available.
	At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
	During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and may then conduct additional searching on telecare (and relevant associated search terms).
The review strategy	**Screening of search outputs for exclusion or inclusion:**
	Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below.

	Exclusion criteria applied on screening of search outputs: **Date of publication:** Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.) **Language: Exclude if not in English language** **Country:** Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand. **Insufficient information:** Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.) **Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.** **Intervention: Exclude if this is not about home care delivered by social care workforce.** **Workforce:** Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care

delivered purely by health practitioners is excluded.

Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)

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Non-excluded papers will be classified as follows:

INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.
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exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and

	some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities. The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries. If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions.

Component	Description
PLANNING AND DELIVERING HOME CARE	
Review No & Question **Scope section 4.3.1** **Education & training of home care workers;** **Support & supervision of home care workers.**	5.1 What are the effects of training, supervision and support on outcomes for people who use services and their family carers?
Objectives	- To identify core induction and training needs of home care workers and managers. - To identify and evaluate training programmes and approaches which, when delivered to home care workers and managers, demonstrate improved outcomes for people who use services and their family carers, sustainable service quality improvements and worker job satisfaction. - To identify good practice in the provision of supervision and support to home care workers and managers. - To identify approaches which benefit from cross-disciplinary working, training or work shadowing (e.g. with colleagues involved in delivering healthcare in homes). - To consider the implementation costs of training, and if possible any effects on recruitment and retention. - To consider evidence for this question alongside that concerning questions on significant features of effective home care (2.1.2), safety and safeguarding (2.3), and evidence relating to the views and experiences of users, carers, and practitioners (1.1.1 – 1.2.2).
Criteria for considering studies for the review	**Population:** Social care practitioners and workers delivering home care to older people (aged 65 years and older). The training needs of personal assistants who are commissioned by service users and their families will also be within scope. Training and support delivered by community health personnel (GPs, district nurses) to home care workers will also be within scope. **Intervention:** Training, supervision and support to home care workers and managers.

	Setting: In the practice setting (service users' home, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement), in the agencies managing home care support, or in other settings. **Comparator:** Comparative studies could compare organisations receiving training with those who do not, or before/after designs. **Outcomes:** Primary outcomes are improved home care for service users' and their families, such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding of users and carers; (4.4 Scope). Additional organisational outcomes may include: Increased or changed productivity, consistency in care provision, staff retention rates, job satisfaction, conditions of work, self/manager-perceived competency. Outcomes reporting will consider the length of follow-up, since the sustainability of improved or changed practice is important to this topic and to cost-effectiveness of training. The study designs relevant to these questions are likely to include: - Systematic reviews of studies of different models of training for home care staff and managers; - Randomised controlled trials of different models of training (or cluster randomised trials or before and after evaluations); - Quantitative and qualitative evaluations of different models of training with demonstrable outcomes over time; - Observational and cross-sectional survey studies of training provided; - Mixed methods studies.
How the information will be searched	**Search summary:**

Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation".

The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed.

A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care
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For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.

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	• Library and information science abstracts **Health** • Medline • PsycINFO • EMBASE • Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews) • HMIC • CINAHL **Economic** • NHS EED • ECONLIT • IDEAS repec • CEA registry **Other databases** EPPI-Centre Adult Social Care Outcomes Framework Research in practice – Evidence Bank PSSRU Discussion Papers Campbell collaboration library NHS Evidence (including QIPP) Kings Fund library Social Policy Digest UK Clinical Research Network Study Portfolio Conference Papers index/ Conference proceeding citation indexes *(2011 onwards only)* GeroLIT *(output is titles only)* Evidence Database on Aging Care – EDAC Opengrey **Websites** School for Social Care Research Oxford centre for social policy

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The review strategy	**Screening of search outputs for exclusion or inclusion:** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below.

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Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.

Intervention: Exclude if this is not about home care delivered by social care workforce.

Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care |

	delivered purely by health practitioners is excluded.
	Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)
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exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

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The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
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| | some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.

The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries.

If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions. |
|---|---|

Component	Description
PLANNING AND DELIVERING HOME CARE	
Review No & Question **Scope section 4.3.1, telecare which** **supports home care**	6.1 What elements of telecare that could be used in planning and delivering home care are effective in improving outcomes for people who use services and their carers? 6.2 What are the views of users and family carers on the use of telecare as part of the home care package?
Objectives	• To identify and evaluate elements of telecare that are used or could be used effectively in home care planning, practice and delivery. • To identify the outcomes – for service users and carers, and for the home care workforce and agencies - of using telecare in home care practice. • To consider how useful and acceptable telecare is from the perspective of home care users and carers. • To consider whether issues of good or poor practice identified by users, carers and practitioners (1.1.1 – 1.2.2), barriers to implementation of good home care practice (2.2), safety deficits (2.3) and support for the workforce (2.4) could be wholly or partially addressed by investment in telecare.
Criteria for considering studies for the review	**Population:** Older people (aged 65 years and older) receiving home care and people who care for those using services. Home care practitioners delivering home care to older people. **Intervention:** Telecare which contributes directly to the organisation and effectiveness of home care. **Setting:** Service users' homes, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement, and organisations delivering home care. **Comparator:** There may be comparative studies of agencies using/not using telecare, or of outcomes of different types of telecare. **Outcomes:** None specified, but expected to refer to outcomes of home care for service users' and their families, as well as organisational outcomes (see below).

	Likely to relate to user outcomes such as: User satisfaction; quality and continuity of home care; choice and control; involvement in decision-making; dignity and independence; quality of life; health status; safety and safeguarding (4.4 Scope). Additional organisational outcomes which may influence outcomes for service users such as: productivity, consistency in care provision, staff retention rates job satisfaction; condition of work; organisational issues, perceived competency; work-related training and supervision issues; quality of home care provided. The study designs relevant to these questions are likely to include: • Systematic reviews of studies of different models of telecare; • Randomised controlled trials (or cluster randomised trials) of telecare; • Before and after evaluations of telecare; • Cost effectiveness studies of telecare, or other economic studies; • Qualitative evaluations of telecare, including studies concerning user, carer and practitioner views of telecare; • Mixed methods studies.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation". The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed. A single broad search strategy will be used to identify material which addresses all the

agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.

Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:

Social care
- Social Care Online – beta version (2013 only)
- Social Policy and Practice
- Social Work Abstracts
- Social Services Abstracts

For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.
Social science and politics
- ASSIA
- Sociological Abstracts
- Social policy and practice
- IBSS
- Social Science Citation Index
- Worldwide Political Science Abstracts
- Library and information science abstracts
Health
- Medline
- PsycINFO
- EMBASE
- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
- HMIC
- CINAHL

Economic
- NHS EED
- ECONLIT
- IDEAS repec
- CEA registry

Other databases
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
PSSRU Discussion Papers
Campbell collaboration library
NHS Evidence (including QIPP)
Kings Fund library
Social Policy Digest
UK Clinical Research Network Study Portfolio
Conference Papers index/ Conference proceeding citation indexes *(2011 onwards only)*
GeroLIT *(output is titles only)*
Evidence Database on Aging Care – EDAC
Opengrey

Websites
School for Social Care Research
Oxford centre for social policy
Qualitative archive on ageism
UKHCA – United Kingdom Home care Association
Transforming Adult social Care
NASCIS – national audit social care intelligence service
Centre for policy on aging
Care Quality Commission
Local Government Association
Ireland National Council on Aging and older people

Online research bank social policy database (Northern Ireland)
Nuffield Trust
Joseph Rowntree Foundation
AgeUk Professional Resources
Health and social care information centre
Office of National Statistics
LGA – Knowledge Hub
Poverty www.poverty.org.uk
Equality and Human Rights Commission
Centre for Policy on Ageing
Data.gov
GOV.UK

Searches were based upon:

Concept A "home care" AND one or more of:
Concept B older people
Concept C carers
Concept D workforce
Concept E) social care organisation/ self-commissioning
AND
year 2004+

A long list of search terms to be used can be supplied on request.

Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below).

Follow-up searching:
Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available.

	At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
	During the scope development, it was decided to include telecare which supports the provision of home care. In discussion with the GDG, we will seek to identify the types of telecare which are in use within the sector, and may then conduct additional searching on telecare (and relevant associated search terms), although some material on use of telecare has been identified through the broad search.
The review strategy	**Screening of search outputs for exclusion or inclusion:** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below. **Exclusion criteria applied on screening of search outputs:** **Date of publication:** Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.) **Language: Exclude if not in English language.** **Country:** Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia

and New Zealand.

Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.)

Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.

Intervention: Exclude if this is not about home care delivered by social care workforce.

Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded.

Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)

Duplicate: Exclude if this is a duplicate of another entry (pick the best referenced one).

	Marker: Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material. **Non-excluded papers will be classified as follows:** **INCLUDE policy & practice guidance:** Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline. **INCLUDE on title & abstract:** Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.) **QUERY INCLUDE:** first reviewer is unsure, so paper is marked for second opinion from another reviewer. Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists. **Quality assurance of screening process:** Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening

team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.

The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA

	and recording purposes, and will be reported in evidence tables and evidence summaries. If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions.

Component	Description
INFORMATION AND SUPPORT FOR PEOPLE WHO USE SERVICES AND THEIR FAMILY CARERS	
Review No & Question **Scope section: 4.3.1** **Providing support & access to information about home care services to people using services, their families & carers**	7.1 What information and support is helpful to people seeking access to home care services?
Objectives	• To identify the information and support needs of people seeking access to home care services and their families. • To consider whether information and support which people find helpful when seeking access to home care services is available, and how accessible it is to different populations. • To consider whether improvement in information provision has an impact on choice, control and other outcomes for people seeking access to home care and their families. • To consider whether issues of good or poor practice identified by users, carers and practitioners (1.1.1 – 1.2.2) concern initial access to information.
Criteria for considering studies for the review	**Population:** Older people (aged 65 years and older) seeking access to home care and their families. The experience of agencies providing and commissioning care (including local authorities who have a duty to provide information and assessment) will also be relevant. **Intervention:** Information provided to the public generally and to older people about home care (functions, criteria, funding options, self-directed care, assessment, etc.). Information may be in the form of text products, internet material, face to face advice, telephone consultation, etc. **Setting:** Community contexts where information is provided or coordinated (including

	local authorities); the potential service users' homes, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement; organisations delivering home care.
	Comparator: There may be comparative studies of agencies who have a strong vs weak communication strategy.
	Outcomes: None specified, but expected to refer to outcomes for service users' and their families, as well as organisational outcomes (see below).
	Likely to relate to user outcomes such as:
	User satisfaction with process of information seeking; perceived choice and control; involvement in decision-making; dignity and independence; quality of life (4.4 Scope).
	Additional organisational outcomes such as improved relationships based on realistic expectations may influence outcomes for care providers and managers.
	The study designs relevant to these questions are likely to include:
	• Qualitative studies of users' and carers' experience of seeking information about home care. • Qualitative studies of practitioners and social services' staff experience of providing information to people about home care. • Surveys concerning information needs and provision; • Before and after evaluations where a new communication strategy has been introduced, e.g. by a local authority; • Mixed methods studies; • Self-reported returns to Health and Social Care Information Centre, illustrating demand for and supply of information provision.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care

	organisation".
	The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed.
	
	A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review.
	
	Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched:
	
	Social care
	  • Social Care Online – beta version (2013 only)
	  • Social Policy and Practice
	  • Social Work Abstracts
	  • Social Services Abstracts
	
	For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases.
	Social science and politics
	  • ASSIA
	  • Sociological Abstracts
	  • Social policy and practice
	  • IBSS
	  • Social Science Citation Index
	  • Worldwide Political Science Abstracts
	  • Library and information science abstracts
	Health

	- Medline
	- PsycINFO
	- EMBASE
	- Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews)
	- HMIC
	- CINAHL
	Economic
	- NHS EED
	- ECONLIT
	- IDEAS repec
	- CEA registry
	Other databases
	EPPI-Centre Adult Social Care Outcomes Framework
	Research in practice – Evidence Bank
	PSSRU Discussion Papers
	Campbell collaboration library
	NHS Evidence (including QIPP)
	Kings Fund library
	Social Policy Digest
	UK Clinical Research Network Study Portfolio
	Conference Papers index/ Conference proceeding citation indexes *(2011 onwards only)*
	GeroLIT *(output is titles only)*
	Evidence Database on Aging Care – EDAC
	Opengrey
	Websites
	School for Social Care Research
	Oxford centre for social policy
	Qualitative archive on ageism
	UKHCA – United Kingdom Home care Association
	Transforming Adult social Care

| | NASCIS – national audit social care intelligence service
Centre for policy on aging
Care Quality Commission
Local Government Association
Ireland National Council on Aging and older people
Online research bank social policy database (Northern Ireland)
Nuffield Trust
Joseph Rowntree Foundation
AgeUk Professional Resources
Health and social care information centre
Office of National Statistics
LGA – Knowledge Hub
Poverty www.poverty.org.uk
Equality and Human Rights Commission
Centre for Policy on Ageing
Data.gov
GOV.UK

Searches were based upon:

Concept A "home care" AND one or more of:
Concept B older people
Concept C carers
Concept D workforce
Concept E) social care organisation/ self-commissioning
AND
year 2004+

A long list of search terms to be used can be supplied on request.

Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below). |

	Follow-up searching: Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available. At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
The review strategy	**Screening of search outputs for exclusion or inclusion:** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below. **Exclusion criteria applied on screening of search outputs:** **Date of publication:** Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.) **Language: Exclude if not in English language.** **Country:** Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand.

	Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.) **Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.** **Intervention: Exclude if this is not about home care delivered by social care workforce.** **Workforce:** Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care delivered purely by health practitioners is excluded. **Evidence type:** Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.) **Duplicate:** Exclude if this is a duplicate of another entry (pick the best referenced one). **Marker:** Check this box IN ADDITION to exclusion criteria above, if there is possibility this

may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material.

Non-excluded papers will be classified as follows:

INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.
Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening

team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.

The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA

| | and recording purposes, and will be reported in evidence tables and evidence summaries.

If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions. |
|---|---|

Component	Description
INFORMATION AND SUPPORT FOR PEOPLE WHO USE SERVICES AND THEIR FAMILY CARERS	
Review No & Question **Scope section: 4.3.1** **Providing support & access to information about home care services to people using services, their families & carers**	3.2 What information and support should be provided to people who use home care services to enable them to be aware of their options, and play a full role in reviewing their care and making decisions?

Objectives	• To identify the information and support needs of people who are receiving home care services and their families.
	• To consider whether information and support which people find helpful when seeking access to home care services is available, and how accessible it is to different populations.
	• To consider the effects and outcomes of information provided during a period of home care, including impact on:
	  ➢ The empowerment of people who use services and their carers
	  ➢ Ability to participate in and influence decision-making, including full participation in regular reviews of care
	  ➢ increased choice and control
	  ➢ the ability of users and family carers to consider options for self-directed care and use of personal budgets
	  ➢ ability to make complaints and suggestions
	  ➢ safety and safeguarding, where users and carers have concerns about care or about limitations of care.
	• To consider whether issues of good or poor practice identified by users, carers and practitioners (1.1.1 – 1.2.2) concern access to information during receipt of home care services.

| Criteria for considering studies for the review | **Population:** Older people (aged 65 years and older) receiving home care and their families. The experience of agencies providing and commissioning care (including local authorities who have a duty to provide information and assessment) will also be relevant.
Intervention: Information provided to older people receiving home care (functions, reviews, changing criteria, funding options, self-directed care options, etc.). Information may be in the form of text products, internet material, face to face advice, telephone consultation, etc.
Setting: Community contexts where information is provided or coordinated (including local authorities); the service users' homes, including sheltered housing accommodation, extra care housing, Shared Lives Scheme living arrangement; organisations delivering home care.
Comparator: There may be comparative studies of agencies who have a strong vs weak communication strategy.
Outcomes: None specified, but expected to refer to outcomes for service users' and their families, as well as organisational outcomes (see below).

Likely to relate to user outcomes such as:
User satisfaction with process of information seeking; perceived choice and control; involvement in decision-making; take up of self-directed care and individual budget options; dignity and independence; quality of life (4.4 Scope).

Additional organisational outcomes such as improved relationships based on realistic expectations may influence outcomes for care providers and managers.

The study designs relevant to these questions are likely to include:

• Qualitative studies of users' and carers' experience of seeking or receiving information about home care.
• Qualitative studies of practitioners and social services' staff experience of providing information to people receiving home care, including routes for complaints.
• Before and after evaluations where a new communication strategy has been introduced, e.g. by a local authority; |

	• Mixed methods studies; • Self-reported returns to Health and Social Care Information Centre, illustrating demand for and supply of information provision, with possible links to number of service reviews, take up of self-directed care, etc.
How the information will be searched	**Search summary:** Electronic databases in the research fields of social care, health and social science will be searched using a range of controlled indexing and free-text search terms based on the setting "home care" and the populations: "older people", "carers", "workforce", "social care organisation". The search will capture both journal articles and other publications of empirical research. Additional searches of websites of relevant organisations will also be carried out. It may be necessary to conduct some additional searches for economics literature if needed. A single broad search strategy will be used to identify material which addresses all the agreed review questions on home care, and additional searching will be considered if it is felt that relevant material was not delivered for all questions. The search strategy does not distinguish research of specific study designs, as this will be differentiated at the screening stages of the review. Systematic searches balancing sensitivity and precision will be undertaken. The following databases will be searched: **Social care** • Social Care Online – beta version (2013 only) • Social Policy and Practice • Social Work Abstracts • Social Services Abstracts For the social care databases only the first concept – home care - will be used as the "social care organisation" concept is a core theme of these databases. **Social science and politics**

| | ASSIA Sociological Abstracts Social policy and practice IBSS Social Science Citation Index Worldwide Political Science Abstracts Library and information science abstracts **Health** Medline PsycINFO EMBASE Cochrane Library (including DARE, HTA, CENTRAL trials, Systematic reviews) HMIC CINAHL **Economic** NHS EED ECONLIT IDEAS repec CEA registry **Other databases**
EPPI-Centre Adult Social Care Outcomes Framework
Research in practice – Evidence Bank
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Care Quality Commission
Local Government Association
Ireland National Council on Aging and older people
Online research bank social policy database (Northern Ireland)
Nuffield Trust
Joseph Rowntree Foundation
AgeUk Professional Resources
Health and social care information centre
Office of National Statistics
LGA – Knowledge Hub
Poverty www.poverty.org.uk
Equality and Human Rights Commission
Centre for Policy on Ageing
Data.gov
GOV.UK

Searches were based upon:

Concept A "home care" AND one or more of:
Concept B older people
Concept C carers

	Concept D workforce Concept E) social care organisation/ self-commissioning AND year 2004+ A long list of search terms to be used can be supplied on request. Search outputs were screened against the exclusion criteria for the review question (see Review Strategy below). **Follow-up searching:** Follow-up searching will include reference checking of research studies included at evidence review stage, and citation checking using Google Scholar and Web of Knowledge. The extent of citation checking will depend on the quality of studies available. At GDG2 members highlighted the need to consider sub-groups of older people whose views and experiences of care may be different. As detailed in the equality impact assessment (EIA) this may include, people living alone, people at end of life, people, service users who lack capacity, service users with dementia, people of diverse ethnicity or culture, etc. Once search outputs are screened for inclusion, with guidance from the GDG, we will consider whether the interests of these groups are adequately reflected in search outputs, and if not, how to identify appropriate additional material.
The review strategy	**Screening of search outputs for exclusion or inclusion:** Search outputs (title and abstract only) will be stored in EPPI Reviewer 4, and screened against an exclusion tool which operationalises the included studies, with a view to excluding those which are outside scope. The tool will identify empirical research which addresses the review questions; and will also identify material (policy, legislation, practice and practice guidance) which will be parked for later use in supporting the guideline. The formal exclusion criteria applied are laid out below.

	Exclusion criteria applied on screening of search outputs:
	Date of publication: Exclude if published before 2004. (Studies are restricted to those published in or after 2004 up to the present day -10+ years in total.)
	Language: Exclude if not in English language.
	Country: Exclude if not in list of included countries. Included countries (with some similar features) are UK, European Union, Denmark, Norway, Sweden, Canada, USA, Australia and New Zealand.
	Insufficient information: Exclude if there is no abstract, and title is either unclear or suggests not in scope. (There is an option to click 'find on web' on database to check if more is available.)
	Population: The population of interest is older people living at home and in receipt of home care. Older people is operationalised as those specifically described in the literature as old. No specific age limits will be applied (although 65+ is a common threshold of older people). Populations described as adults without qualification of age are not intentionally identified by the search. People identified by health conditions are do not quality, except that people with dementia are assumed to be older people unless stated otherwise. Older people or carers who organise and/or fund their own care are included. Carers: family carers includes family, friends, and supporters that provide informal (usually unpaid) social care. NOTE exception to rule: if the paper is about the home care workforce (without specific reference to older people) do not exclude here.
	Intervention: Exclude if this is not about home care delivered by social care workforce.
	Workforce: Exclude on workforce if the study does not concern either social care practitioners, or health personnel working in partnership with social care workers. Care

delivered purely by health practitioners is excluded.

Evidence type: Exclude on evidence type if it is not derived from primary empirical research & is not policy & practice guidance. Examples include opinion pieces, discussions, essays, trade journal articles, books, protocols or other accounts of future studies AND dissertations. (NB: latter may be retrieved later.)

Duplicate: Exclude if this is a duplicate of another entry (pick the best referenced one).

Marker: Check this box IN ADDITION to exclusion criteria above, if there is possibility this may be useful. An example might be views of LGBT people (or other equalities groups) on social care generally: these may be useful if there is not more relevant material.

Non-excluded papers will be classified as follows:

INCLUDE policy & practice guidance: Government policy, legislation and guidance from potentially authoritative organisations. These are NOT carried forward into review questions as they are not research and cannot be critically appraised, but GDG may wish to consider them for inclusion as background to the guidance. Studies reporting relevant policy, legislation and practice or practice guidance will be parked for later sorting and retrieval to support the guideline.

INCLUDE on title & abstract: Include based on title and abstract for allocation to review questions respectively. (Note: All studies will be re-assessed for 'EXCLUDE' status at the second stage of critical appraisal and data extraction when we have accessed the full texts.)

QUERY INCLUDE: first reviewer is unsure, so paper is marked for second opinion from another reviewer.
Papers screened at this stage on title and abstract and included will be subject to a further checkbox allocation to the research review questions to which they appear to contribute. The review questions will be entered into a coding framework which sits beneath the

exclusion criteria tool in EPPI-Reviewer 4 (a software package that supports systematic reviews). Any papers which appear to allude to cost or resource use will also be identified at this stage, and entered into the question coding box as 'Costs' for further analysis by the health economists.

Quality assurance of screening process: Studies not excluded will be allocated to the relevant research review questions within this topic. At least 10% of search outputs will be double-screened by two or more systematic reviewers, with a view to activating the EPPI Reviewer priority screening mechanism. All queries will be discussed by the screening team to agree on inclusion status.

Reviewing the search outputs for each review question:

Each set of included studies allocated to each question will be analysed for:

- Correspondence to the review question
- Study type, including systematic reviews
- Gaps in evidence, including those related to the experience and views of sub-groups of the population.

The analysis of search outputs for each questions will be tabulated:

- by study type – a measure of the strength of the findings of the study;
- by country of origin, as this is a measure of how generalisable the findings will be to the UK home care context.

Where the potential number of included studies is too large to manage within capacity and timeframe, the GDG will participate in deciding which is the best and the most relevant type of study for inclusion. This analysis will be undertaken for each question (so that topic thresholds can be different for different questions). An agreed set of included studies will then be retrieved for further analysis in full text versions. Some of these studies will be available through the internet, some will need to purchased (e.g. from British Library), and

	some, despite our best efforts, will not be available. Process and outputs of full text retrieval will be documented, using EPPI Reviewer 4 facilities.
	The material identified will be critically appraised, using the modified appraisal tools supplied by NICE in the Social Care Guidance Manual. For these review questions, the checklists for systematic reviews, RCTs, cohort, case control and qualitative, cross-sectional and economic evaluations will be applied to determine the credibility and generalisability of research findings. Codings will be entered into EPPI Reviewer 4 for QA and recording purposes, and will be reported in evidence tables and evidence summaries. If we find systematic reviews (with or without meta-analyses), we will pay particular attention to issues such as how recently the primary studies were undertaken, whether the services evaluated are comparable to those models in use in England, and whether there is justification for disaggregating the review papers in order to consider those most relevant to our review questions.