

The best of the UK? A report on the value and future of UK databases in the health and social care fields: a systematic map protocol

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ABSTRACT

Introduction: This protocol covers the first part of a two-part project funded by the Health Libraries Group and the University Health and Medical Librarians Group. It details the proposed methodology for a systematic map of the literature relating to UK bibliographic databases in the fields of health and social care. The aim of this mapping exercise is to consider ways in which UK bibliographic databases are described, considered and discussed in the published and unpublished literature. In doing so, we hope to gain a clearer sense of the ways in which UK bibliographic databases are used and viewed by the research community. It also enables the identification of any gaps in the literature for further research and discussion. This topic is important because UK databases are generally underused by researchers in the UK context and some databases are at risk of closure. A lack of access to UK databases means that researchers may miss relevant UK evidence when identifying an evidence base.

Method: Systematic Map.

Analysis: The authors will present a narrative description of the literature relating to UK bibliographic databases in the fields of health and social care. They will use tables to present descriptive information about the literature (eg, frequency tables) and use cross-tabulations to demonstrate intersecting themes. Separately, guidance on how to use the resources (eg, areas of unique content, updating frequencies, unique truncation symbols) will be sought from stakeholders and reported alongside the report narrative as a guide to usage.

BACKGROUND

Led by Chris Cooper, researchers at the Peninsula Medical School (PenTAG, University of Exeter) and King's College, London, responded to a call for proposals by the Health Libraries Group (HLG) and the University Health and Medical Librarians Group for the bi-annual 'Research In the Workplace Award'.

ARTICLE SUMMARY

Article focus

- Producing a systematic map of the literature relating to UK databases in the fields of health and social care.
- Analysis of the way in which UK databases are used in the fields of health and social care.

Key messages

- This protocol details the methods proposed to produce a systematic map of literature relating to health and social care databases in the UK.

Strengths and limitations of this study

- This work will produce the first map of literature relating to UK databases in the fields of health and social care.

The proposal submitted was to review the status of UK bibliographic databases in the fields of health and social care, through a review (Part 1) and interviews (Part 2), drawing together both parts in one final study.

Part 1

The overarching aim of the first part of the project is to map the literature, showing the ways in which UK bibliographic databases are referenced and discussed in the published and unpublished literature in the fields of health and social care.

Part 2

The main aim of the second part of the project—a series of qualitative interviews with stakeholders of UK bibliographic databases (not covered by this protocol)—is to consider the value and future of these unique resources and discuss the findings of the systematic map.

Rationale

The primary rationale for the study is an observation that a number of UK

bibliographic databases have closed, many more are small and run with only limited funding and we have reason to believe that others are at imminent risk of closure.¹ Losing these UK databases will mean losing access to a seam of truly unique UK material, that is, relevant to answering health and social care questions peculiar to the UK context.²

Additionally, we believe that these databases are extremely valuable, yet underused resources in health and social care research. This underuse can lead to serious problems in research, particularly for research with guidance, policy or practice implications intended for UK settings. By missing available UK evidence (eg, by only searching non-UK databases that do not have broad coverage of UK material and sources), a bias towards non-UK evidence is created in the resulting evidence base. This bias can be further exacerbated when research findings from countries outside of the UK have to be translated into the UK context, in the absence of valid UK material, which has been missed. The degree and effect of transferability is often difficult to assess.

Proposal

A systematic mapping of the evidence base is appropriate as it will draw together such literature as exists on the bibliographic databases in question, doing so in a clear and systematic way. This will, in turn, demonstrate where there is evidence and expose gaps in the literature, for discussion in the qualitative interviews.

When completed, the study will provide published guidance on UK bibliographic databases in the fields of health and social care. Through dissemination of this project, it is hoped that we can collectively raise awareness of these resources thereby demonstrating them as highly original and unique tools for UK research.

FUNDING

This review has been funded by the HLG and the University Health and Medical Librarians Group through the 'Research in the Workplace Award'. For further information, please see: <http://www.cilip.org.uk/get-involved/special-interest-groups/health/awards/Pages/research-in-the-workplace.aspx> (website accessed Thursday, 29 March 2012).

REVIEW QUESTION

What are the ways in which UK bibliographic databases in the fields of health and social care are used and represented in the published and unpublished literature? (eg, usage, usability, etc.).

METHODS

The methods for use in this review have been drawn from Centre for Reviews and Dissemination Handbook³ and the EPPI centre methods for conducting systematic reviews.⁴

Study design

Systematic mapping review

A systematic mapping review has been chosen to identify the literature on UK bibliographic databases. Not only will

this review aim to provide a robust picture of the evidence that exists on this topic, but it will also highlight the gaps in this evidence base and thereby help to propose research directions leading on from this project.⁴

Search approach

The search approach for this review will be systematic and broad.

Database searching: strategy

The search strategy will be operationalised on the population for this review, the UK bibliographic databases under review (see Inclusion section below).

The search syntax will use the named title of the database (eg, British Education Index), any commonly used acronyms (eg, BEI—where possible) and any relevant alternate names (eg, Social Care Online as well as its previous name, CareData), please see supplementary file available online only.

Database searching: sources

The following bibliographic databases will be systematically searched:

1. Amed via Ebsco
2. Assia via CSA
3. British Education Index via DIALOG
4. British Humanities Index (BHI) via CSA
5. British Library Catalogue via <http://tinyurl.com/bl-Catalogue>
6. British Nursing Index via ProQuest
7. Campbell Library via <http://www.campbellcollaboration.org/library.php>
8. CINAHL via Ebsco Host
9. Cochrane Library (all) via <http://www.thecochrane-library.com/view/0/index.html>
10. Embase via OVID
11. ERIC via CSA
12. Health Management Information Consortium (HMIC) via OVID
13. International Bibliography of Social Sciences (IBSS) via CSA
14. Library Information Science Abstracts (LISA) via CSA
15. Library, Information Science & Technology Abstracts (LISTA) via EBSCO Host
16. Medline in Process via OVID
17. Medline via OVID
18. National Criminal Justice Reference Service Abstracts NCJRS via CSA
19. Open Grey via <http://www.opengrey.eu/>
20. PsycINFO via OVID
21. Social Policy and Practice (SPP) via OVID
22. Social Services Abstracts via CSA
23. Social Work Abstracts via CSA
24. Sociological Abstracts via CSA
25. Web of Science via ISI

Notes (using the numbering scheme above):

5. The British Library Catalogue will be hand-searched;

12. HMIC will be searched as this resource indexes from the King's Fund Library and the Department of Health;

21. Social Policy and Practice includes: SCIE on-line, ChildData, AgeINFO and sections of Planex and Ubadoc and

25. This includes access to Conference Proceedings Citation Index.

Website searching: strategy

Website searching will focus on a PDF search of Google and a search of the meta-search engine, Dogpile (<http://www.dogpile.com/>). The focus of this search is to locate any web-based, or formally unpublished, material.

The websites of all the databases under consideration will be hand searched. The following specific websites will also be searched, as below.

Website searching: sources

- ▶ Google Advanced Search (with a PDF filter applied);
- ▶ Dogpile;
- ▶ Chartered Institute of Library and Information Professionals (CILIP) via <http://www.cilip.org.uk/Pages/default.aspx>
- ▶ ASLIB: The Association for Information Management via <http://www.aslib.co.uk/>
- ▶ Society of College, National and University Libraries (SCONUL) via <http://www.sconul.ac.uk/>.

Other sources: supplementary search methods

The following supplementary search methods will be used to locate information for this review.⁵

Citation chasing

Forwards and Backwards citation chasing will be applied on items included after full-text screening. Backwards chasing will be conducted manually, through the bibliography of the item in question. Forwards citation chasing will be conducted using Web of Science (via ISI). Items located by either method will be recorded in the review annex, de-duplicated against the database searches and then screened to the inclusion/exclusion criteria (below).

Related article searching

Related article searching will be conducted in Google Scholar to a depth of one time. Any items identified will be screened manually for inclusion with records of numbers and decisions made being kept in the annex.

Hand searching

The Health Information and Libraries Journal will be hand searched (2000-Current) using the table of contents. The European Association for Health Information and Libraries will be hand searched (2005-Current) through <http://www.eahil.net/journal/>.

The following organisations' conference publications will be hand searched: HLG, European Association for Health Information and Libraries, The Cochrane Colloquium and The Campbell Colloquium.

Expert contact

Authors of items included on full text will be contacted. The professional bodies searched in the web searching (3:6—above) will also be contacted with a view to locating unpublished or grey literature.^{6 7}

Dissemination

In addition to the publication of this protocol, research updates are to be disseminated via the monthly newsletter of the King's College Evidence Network: a newsletter with an audience of approximately 2500 recipients. These methods aim to stimulate contact with researchers in the field.

Search limits

Searches will be date limited 1990-Current to maintain relevancy and focus of search returns. The searches will not be limited by language,⁸ population or country of origin.

Recording the search

The searches will be recorded to PRISMA standards in their own fully annotated annex.⁹ This will include the following information: resource name and host, data parameters (where known), number of items retrieved and the search strategy applied. Each search will include a narrative detailing any particulars of the search in question.¹⁰

Screening

Inclusion criteria will be piloted on a random sample of 30 studies, prior to the start of the full-screening process. This piloting will help to ensure the clarity of the criteria and ensure a consensus understanding within the review team of what the criteria entail.

A randomly selected initial sample of 10% of records returned will be screened by two reviewers independently and inter-rater agreement will be monitored on an ongoing basis. Where abstracts meet all the criteria or if it is unclear from the abstract whether it meets the inclusion criteria, the full text will be retrieved and screened.

Full-text screening will be carried out by two reviewers independently and any differences resolved by discussion.

Inclusion/exclusion criteria

Inclusion criteria will be constructed hierarchically using a process to screen for relevant items within the record returned (please see supplementary file, available online only).

For the purposes of this review, a bibliographic database is a resource that can be searched and returns citations of bibliographic details (including title and abstract), examples include British Nursing Index or Social Policy and Practice.ⁱ

ⁱResources such as Child Health Specialist Library, Dementia Catalogue, Ethnicity & Health Specialist Library and Health Improvement Network were considered in scoping but we did not, for the purposes of this map, consider them to be databases.

Inclusion

This mapping review aims to consider the published and unpublished literature relating to the state and usage of UK bibliographic resources in the fields of health and social care.

Inclusion will be operationalised on the population of this review, where the record being screened deals with a UK database as the topical point/focus of the record being screened in the title, abstract and/or keyword.

The 'population' list below will be crossed checked with the interviewees in part 2 to highlight any omissions (*post-hoc*) that will then be discussed and reviewed by the team.

The databases of interest are:

1. Age INFO
2. Alcohol concern
3. AMED/Allied and Complementary Medicine
4. ASSIA/Applied Social Sciences Index and Abstracts (Previously British)
5. Bibliomap
6. BL Direct (zetoc)
7. British Education Index (BEI)
8. British Humanities Index (BHI)
9. British Nursing Index (BNI)
10. ChildData
11. Community Abstracts/Community Wise
12. Database of Abstracts of Reviews of Effects (DARE)
13. DOHPER/Database of Promoting Health Effectiveness Reviews
14. DrugData
15. Health Management Information Consortium (HMIC)
16. Health Scotland Evaluation database
17. HEED/Health Economic Evaluations Database
18. Index to British theses
19. International Bibliography of the Social Sciences (IBSS: Previously British)
20. NHS Economic Evaluation Database
21. NHS Evidence (Health development agency)/national library for health
22. NSPCC electronic library/NSPCC Inform
23. ORB Children's database
24. Planex/IDO/Planning Exchange
25. PROSPERO
26. Research Register for Social Care
27. RiP Evidence Bank
28. SCIE—social care online/caredata
29. Scottish Health Information Network/Scottish Health Libraries/ShelCAT
30. Social Policy and Practice (SPP)
31. TRIP database
32. TROpHI
33. Ubadoc/Urbaline/accompline.

Any study design/item type (eg, review, editorial or opinion piece) will be included in any setting with any population. Any outcome(s) is/are of initial interest.

Exclusion

Any item that does not include a UK database will be excluded. Items that make a passing reference to a UK database, for example, where a UK database has been searched as a part of a systematic review, will be excluded.

Items that fall outside of the topic area of health or social care will be excluded.

Mapping

A mapping tool will be designed to code and extract data from studies included after full-text screening. Sample mapping areas include:

Author (eg, Information Specialist, Reviewer)

Type of evidence (eg, editorial, conference publication)

Target audience (eg, information specialists, clinicians) discipline.

Database in question: (eg, HMIC)

Topic or focus of the document in relation to UK databases (eg, usage, usability)

An initial pilot of 25% of included studies (or until agreement is reached) will be reviewed by two reviewers. The remaining evidence will be single coded.

Evidence tables for all included studies will be created and included as appendices to the final review report.

Data synthesis and write-up

For each database, where information has been identified and included after full-text screening, we will produce a narrative synthesis, using tables to present descriptive information about the evidence base, where possible.

Separately, we also propose producing formal guidance on each resource, listing information gathered from the database producer, for example, frequency of information updating, unique features, indexing.

Dissemination

As a condition of the funding, the findings of this report will be made available through a freely published report. Anticipated publication is presently April 2013.

RESEARCH TEAM

Name	Position
Chris Cooper (PenTAG)	Principal Investigator/Lead Reviewer/Information Specialist
Morwenna Rogers (PenCLAHRC)	Information Specialist
Alison Bethel (PenCLAHRC)	Information Specialist
Jenny Lowe (PenTAG)	Information Officer
Alison O'Mara-Eves (EPPI Centre)	Research Officer
Alan Gomersall (King's College, London)	Senior Research Fellow

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REFERENCES

- Gomersall A, Cooper C, eds. *Database Selection Bias and Its Affect on Systematic Reviews: A United Kingdom Perspective*. Keystone, Colorado, USA: Joint Cochrane and Campbell Colloquium, 2010.
- Grayson L, Gomersall A. *A Difficult Business: Finding the Evidence for Social Science Reviews. Working Paper 19: Evidence Network*. [Internet]. London: King's College, 2003.
- Centre for Reviews & Dissemination. *Systematic Reviews: CRD's Guidance for Undertaking Reviews in Health care*. York: York Publishing Services Ltd, 2008. http://www.york.ac.uk/inst/crd/pdf/Systematic_Reviews.pdf
- EPPI. *EPPI-Centre Methods for Conducting Systematic Reviews*. London: EPPI-Centre, Social Science Research Unit, Institute of Education, University of London, 2010.
- Papaioannou D, Sutton A, Carroll C, et al. Literature searching for social science systematic reviews: consideration of a range of search techniques. *Health Info Libr J* 2010;27:114–22.
- British Library. *Reader Guide 9: Library and Information Scienceundated Thursday, 29 March 2012*. <http://www.bl.uk/reshelp/pdfs/043readerguide9a4.pdf>
- Mullan RJ, Flynn DN, Carlberg B, et al. Systematic reviewers commonly contact study authors but do so with limited rigor. *J Clin Epidemiol* 2009;62:138–42.
- Moher D, Pham B, Klassen TP, et al. What contributions do languages other than English make on the results of meta-analyses? *J Clin Epidemiol* 2000;53:964–72.
- Liberati A, Altman DG, Tetzlaff J, et al. The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: explanation and elaboration. *PLoS Med* 2009;6:e1000100.
- Craven J, Levay P. Recording database searches for systematic reviews—What is the value of adding a narrative to Peer-review Checklists? A Case study of NICE Interventional Procedures guidance. *Evid Based Libr Inform Pract* 2011;6:72–87.