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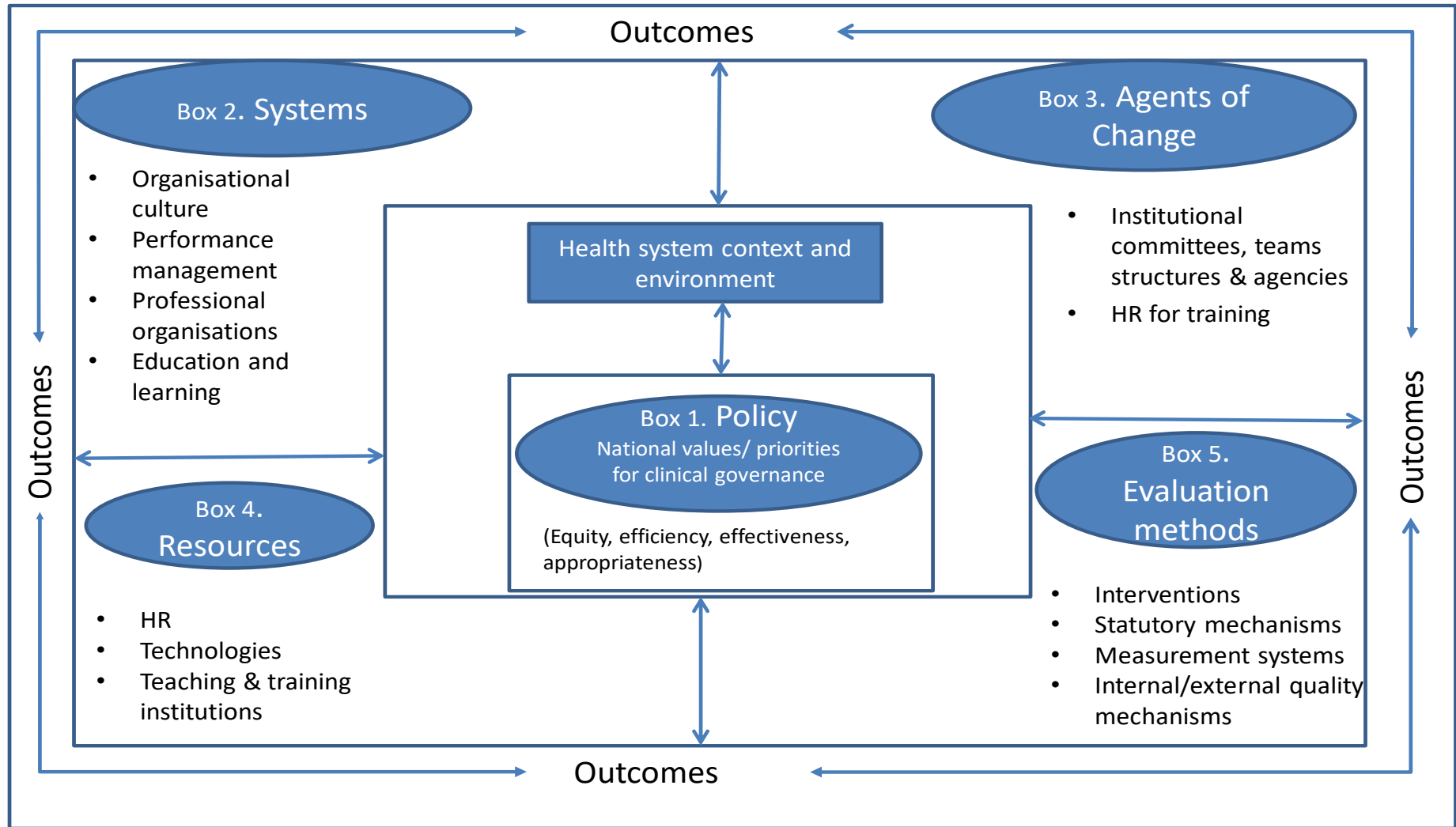
'Experiences of a scoping review process: *Strengthening clinical governance in low and middle income countries (LMICs)*'

GESI - CLL webinar - 30th August
2017.

Background to the study

- Scoping review is seeking to map existing clinical governance studies (CG) in LMICs
- Because CG is well reported in many high income countries (HICs)
- Identified key documents in HICs as guiding framework
 - Citation search of key documents
- Key documents fed into a conceptual framework development
- Conceptual framework provided the potential scope of the review

Conceptual framework



Developing a scoping review question

- Carried out a preliminary review using google search
 - Set-out to include all sources of evidence
- Expanded search engine to google scholar and snowballing
- Explored feasibility of additional sources of evidence
 - institutional learning sites (e.g. JLN – b/c of UHC related information)
 - Identified researchers involved in CG research (e.g. Thailand)
- *Stages of question revision*

Scoping review question

What is known from existing literature about CG in LMICs ?

– *and the extent to which predetermined elements of CG are being articulated or institutionalised in LMICs?*

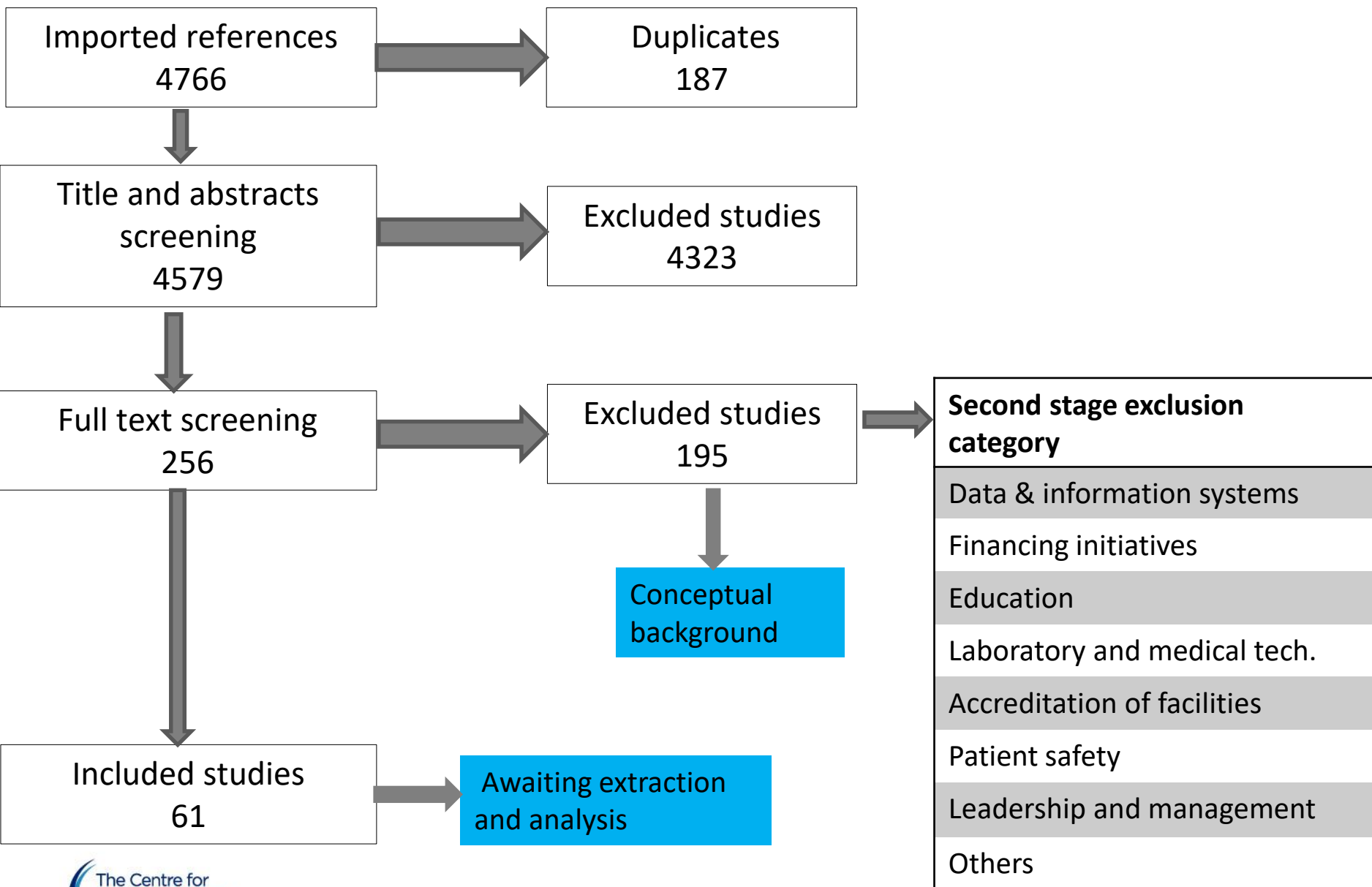
Role of collaborators

- Issues to consider: limitations in Google (Scholar)
 - For next steps - relevant databases, start date of search, search strategy,
- Warwick University
 - Technical support since conceptualisation of study
 - Meetings and skype calls on search terms and strategy
- University of the Witwatersrand's Librarians
 - Short tutorial sessions/meetings
- We developed a review protocol, search log and minutes of meetings to document process, identified databases

Search strategy

- CG relatively new in LMICs – may not be explicit
 - E.g. CG indexed in PubMed in 2009, so included synonyms
- References from 2000
 - Given WHO 1985 and 2000 report articulating clinical governance
- Developed inclusion and exclusion criteria
 - Two stage process ensued

Preliminary results: Prisma diagram



Key notes in the process

- Given the large citation output - Need to expand team (number of reviewers)
- A two stage screening process emerged in an effort to strike a balance between depth and breadth
 - Iterative process of inclusion and exclusion criteria, observing and analysing pattern to revise criteria
- We went for depth:
 - Excluded citations solely on one element of CG or quality improvement
- But, opportunity to describe broad scope (breadth)

Lessons learnt

- Requires huge time and effort (over 2 years, still ongoing)
- At the present stage, is the study still a scoping review?
 - Yes, but ‘QI’+ ‘other synonyms’ broadened our output
 - Pausing to make crucial decisions
 - Balancing depth (explicit CG studies) and breadth QI studies (breadth)
 - Excluded some sources of evidence
 - Websites, stakeholder interviews, grey documents
- Flexible process – no quality appraisal process
 - But decisions on analysis due to differences in study methods (quant and qual)

Lessons learnt

- But, any changes to review question? Yes
 - What strategies are being used to strengthen CG in LMICs and what opportunities and challenges arise in instituting CG?
 - (extent of core elements of CG – removed)
- What may have been done differently?
 - Perhaps, revision of search strategy and overlapping database
- Iterative process and a need for an effective communication strategy
 - (E.g. email, Whats' app group, etc.)

Scoping review team

- *Jane Goudge*
- *Frances Griffiths*
- *Bronwyn Harris*
- *John Eyles*
- *Faith Mambulu*
- *Teurai Rwafa*
- *Kafayat Oboirien*



References

- 1. WHO. Principles of quality assurance. Copenhagen - Denmark: 1985.
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