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OPSWISE

Older People's Services and Workforce Interventions: a
Synthesis of Evidence

Glossary of terms

This list of terms and abbreviations which is by no means exhaustive has been compiled specifically with OPSWISE in mind. It is designed to be a useful resource for you, and may help you describe your involvement in the study to others

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Abstract: a summary of a research study (or review) in a journal article or report.

Appraisal: for this study, a process whereby judgments are made about whether evidence to be included in the study is relevant and of sufficient quality.

CCW: Care Council for Wales (social care workforce regulator).

CMOs: In realist studies, statements that explain how programmes (such as a workforce development initiative) work. They link the conditions that are needed for programmes to work, how programmes change the participants, and what impacts these changes have (Context –Mechanisms –Outcomes).

Co-production: a term used to describe both the process of delivering services where producers and users of the services are on equal terms, and the collaboration of knowledge users (e.g. staff or patients) and producers (e.g. researchers) in the research process. It is intended to make services or research outputs more user-friendly.

Context: in a realist study, those factors which influence whether a programme (e.g. workforce development intervention) might work or not.

Data extraction form: forms designed especially for realist synthesis studies based around the programme theory which guide the researcher in extracting the most important information from a paper.

Dissemination: how the study's findings are communicated to the wider audience through different ways e.g. written report, conference talk or YouTube clip

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FONS: Foundation of Nursing Studies (registered charity helping nurses and healthcare teams develop ways to improve practice).

Grey literature: material that can be included in the study which has not been published in academic journals or databases, for example, website information, conference proceedings.

HCA: Healthcare Assistant.

Knowledge mobilization: getting the right knowledge (in this instance, the study's findings), to the right audience- a process which involves different products (e.g. reports, presentations, talks, workshops, events, online forums etc).

LETB: Local Education Training Board (commissioners of health professional education in England).

Mechanisms: in a realist study, what it is about programmes that make them work (generate outcomes) –i.e. the important changes that a programme brings about.

Mid-range (or middle range) theory: in a realist study, a theory which people in practice/services can associate with and which can be tested. This helps us transfer findings from our study to other situations.

NIHR: the National Institute for Health Research (NHS organization which funds NHS research).

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Open access publication: unrestricted access to journal articles via internet.

Outcomes: in a realist study, the *consequences* of programmes.

Personalisation agenda: social care approach where people have control over the care they receive.

PI (Principal Investigator): Lead researcher(s) on a study with overall responsibility for how the research is carried out.

Programme theory: how an intervention or programme is supposed to work.

Proposition: in a realist study, statements which theorise about different CMOs.

Realism: a philosophical approach to doing research which prioritises how and why things work, and which supports the belief that we can work towards understanding causes of change.

REC: Research Ethics Committee.

Realist synthesis (or realist review): an approach to reviewing evidence around complex interventions to find out what works, in what contexts, and for whom.

RCN: Royal College of Nursing.

Search strategy: in a realist study, the action plan that is followed to find evidence to help us answer our review questions. Typically this will include searching digital databases of journal articles, hand searching library stocks and other activities.

Synthesis: in this study, the process of looking across the data for relationships between contexts, mechanisms and outcomes (CMOs).

WEDS: Workforce, Education and Development Services for healthcare in Wales. This organization commissions education for health professionals.

Workforce development: for this study, what is done to equip the support workforce providing care to older people with the right skills, knowledge and behaviours, to ensure that care is safe and of high quality.