

Review protocol for review question: What are the information and support needs of people who have self-harmed?

Table 4: Review protocol for review question: What are the information and support needs of people who have self-harmed?

Field	Content
PROSPERO registration number	Not applicable – signed off by NICE and commenced before it was formally signed off by the guideline committee due to restrictions caused by COVID
Review title	Information and support needs for people who have self-harmed
Review question	What are the information and support needs of people who have self-harmed?
Objective	To identify the information and support needs of people who have self-harmed.
Searches	<p>The following databases will be searched:</p> <ul style="list-style-type: none"> • Applied Social Sciences Index and Abstracts (ASSIA) • Cochrane Central Register of Controlled Trials (CENTRAL) • Cochrane Database of Systematic Reviews (CDSR) • Database of Abstracts of Reviews of Effects (DARE) • Embase • Emcare • International Health Technology Assessment (IHTA) database • MEDLINE & MEDLINE In-Process • PsycINFO • Social Sciences Citation Index (SSCI) • Web of Science (WoS) <p>Searches will be restricted by:</p> <ul style="list-style-type: none"> • Qualitative/patient issues study filter • English language studies • Human studies • Date: 2000 onwards. The GC felt that a date limit of 2000 was reasonable and would capture all the relevant studies while also ensuring the data within them was still in-date/relevant <p>Other searches:</p> <ul style="list-style-type: none"> • Inclusion lists of systematic reviews • Forward and backward citation searches of key studies

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	<ul style="list-style-type: none"> • Checking reference lists of key papers • Country: The committee wished to prioritise evidence from settings which most closely reflect the UK practice context. They therefore agreed to include studies from high income European countries according to the World Bank (https://datahelpdesk.worldbank.org/knowledgebase/articles/906519; i.e., Andorra, Austria, Belgium, Channel Islands, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Faroe Islands, Finland, France, Germany, Gibraltar, Greece, Greenland, Hungary, Iceland, Ireland, Isle of Man, Italy, Latvia, Lichtenstein, Lithuania, Luxembourg, Monaco, Netherlands, Norway, Poland, Portugal, San Marino, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, and UK), Canada, US, Australia and New Zealand, which would be sufficiently transferable. Priority will be given to UK studies, however data from studies conducted in other high-income countries will be added if new themes arise that are not captured in the UK evidence. <p>The full search strategies will be published in the final review.</p>
Condition or domain being studied	<p>All people who have self-harmed, including those with a mental health problem, neurodevelopmental disorder or a learning disability.</p> <p>'Self-harm' is defined as intentional self-poisoning or injury irrespective of the apparent purpose of the act. This does not include any mental health problem or substance use disorder that may be associated with self-harm, nor does it include repetitive stereotypical self-injurious behaviour, for example head-banging in people with a significant learning disability.</p>
Population	<p>Inclusion: All people who have self-harmed, including those with a mental health problem, neurodevelopmental disorder or a learning disability.</p> <p>Exclusion: People displaying repetitive stereotypical self-injurious behaviour, for example head-banging in people with a significant learning disability</p>
Phenomenon of interest	<p>Views and preferences of the population about information and support needs regarded as useful/ not useful or important/ not important</p> <p>Themes will be identified from the literature, but may include:</p> <ul style="list-style-type: none"> • Information content • Information format • Language • Communication • Types and availability of support
Comparator/Reference standard/Confounding factors	Not applicable
Types of study to be included	<ul style="list-style-type: none"> • Systematic reviews of qualitative studies • Qualitative studies (for example, semi-structured and structured interviews, focus groups, observations, and surveys with free text questions)
Other exclusion criteria	<p>Studies will not be included for the following reasons:</p> <p>Study design:</p> <ul style="list-style-type: none"> • Purely quantitative studies (including surveys with only descriptive quantitative data) <p>Language:</p> <ul style="list-style-type: none"> • Non-English <p>Publication status:</p>

Field	Content
	<ul style="list-style-type: none"> Abstract only
Context	<p>Settings - Inclusion: All inpatient, outpatient and community settings in which information and support needs are available to people who have self-harmed, including:</p> <ul style="list-style-type: none"> Primary, secondary and tertiary healthcare settings (including pre-hospital care, accident and emergency departments, community pharmacies, inpatient care, and transitions between departments and services) Home, residential and community settings, such as supported accommodation Supported care settings Education and childcare settings Criminal justice system Immigration removal centres. Community mental health services Inpatient mental health services
Primary outcomes (critical outcomes)	Please see potential themes under Phenomenon of interest
Secondary outcomes (important outcomes)	Please see potential themes under Phenomenon of interest
Data extraction (selection and coding)	<p>All references identified by the searches and from other sources will be uploaded into EPPI and de-duplicated.</p> <p>Titles and abstracts of the retrieved citations will be screened to identify studies that potentially meet the inclusion criteria outlined in the review protocol.</p> <p>Dual sifting will be performed on 10% of records; 90% agreement is required. Disagreements will be resolved via discussion between the two reviewers, and consultation with senior staff if necessary.</p> <p>Full versions of the selected studies will be obtained for assessment. Studies that fail to meet the inclusion criteria once the full version has been checked will be excluded at this stage. Each study excluded after checking the full version will be listed, along with the reason for its exclusion.</p> <p>A standardised form will be used to extract data from studies. The following data will be extracted: study details (reference, country where study was carried out, type and dates), participant characteristics, details of research questions and methods (including analytical and data collection technique), relevant key themes/ findings, risk of bias and source of funding. One reviewer will extract relevant data into a standardised form, and this will be quality assessed by a senior reviewer.</p>
Risk of bias (quality) assessment	<p>Risk of bias of systematic reviews of qualitative studies will be assessed using the scale by Flemming (2012) (https://www.sbu.se/contentassets/14570b8112c5464cbb2c256c11674025/methodological_limitations_qualitative_evidence_synthesis.pdf) and risk of bias of original qualitative studies will be assessed using the CASP qualitative checklist as described in Developing NICE guidelines: the manual.</p>
Strategy for data synthesis	NGA EPPI software will be used for generating bibliographies/citations, study sifting and data extraction.

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	<p>Studies will be reviewed chronologically from most recent first to oldest.</p> <p>Thematic analysis of the data will be conducted and findings presented.</p> <p>The quality of the evidence will be assessed using GRADE-CERQual for each theme.</p>																					
Analysis of sub-groups	<p>Formal subgroup analyses are not appropriate for this question due to qualitative data, but the evidence from the following groups will be considered separately if there is inconsistency or incoherence in the results for a given theme:</p> <ul style="list-style-type: none"> • Age group: ≥65 years, 26-64 years, 16-25 years, , <16 years • Ethnicity: Ethnic minority v non-ethnic minority • Setting: Community v health v educational 																					
Type and method of review	Qualitative																					
Language	English																					
Country	England																					
Anticipated or actual start date	21/07/2020																					
Anticipated completion date	26/01/2022																					
Stage of review at time of this submission	<table border="1"> <thead> <tr> <th>Review stage</th> <th>Started</th> <th>Completed</th> </tr> </thead> <tbody> <tr> <td>Preliminary searches</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Piloting of the study selection process</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Formal screening of search results against eligibility criteria</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Data extraction</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Risk of bias (quality) assessment</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Data analysis</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table>	Review stage	Started	Completed	Preliminary searches	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Piloting of the study selection process	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Formal screening of search results against eligibility criteria	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data extraction	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Risk of bias (quality) assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data analysis	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Named contact	<p>5a. Named contact: National Guideline Alliance</p> <p>5b Named contact e-mail: selfharm@nice.org.uk</p>																					

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	5e Organisational affiliation of the review: National Institute for Health and Care Excellence (NICE) and National Guideline Alliance
Review team members	National Guideline Alliance
Funding sources/sponsor	This systematic review is being completed by the National Guideline Alliance which receives funding from NICE.
Conflicts of interest	All guideline committee members and anyone who has direct input into NICE guidelines (including the evidence review team and expert witnesses) must declare any potential conflicts of interest in line with NICE's code of practice for declaring and dealing with conflicts of interest. Any relevant interests, or changes to interests, will also be declared publicly at the start of each guideline committee meeting. Before each meeting, any potential conflicts of interest will be considered by the guideline committee Chair and a senior member of the development team. Any decisions to exclude a person from all or part of a meeting will be documented. Any changes to a member's declaration of interests will be recorded in the minutes of the meeting. Declarations of interests will be published with the final guideline.
Collaborators	Development of this systematic review will be overseen by an advisory committee who will use the review to inform the development of evidence-based recommendations in line with section 3 of Developing NICE guidelines: the manual. Members of the guideline committee are available on the NICE website: https://www.nice.org.uk/guidance/indevelopment/gid-ng10105
Other registration details	None
Reference/URL for published protocol	Not applicable – signed off by NICE and commenced before it was formally signed off by the guideline committee due to restrictions caused by COVID
Dissemination plans	NICE may use a range of different methods to raise awareness of the guideline. These include standard approaches such as: <ul style="list-style-type: none"> • notifying registered stakeholders of publication • publicising the guideline through NICE's newsletter and alerts • issuing a press release or briefing as appropriate, posting news articles on the NICE website, using social media channels, and publicising the guideline within NICE.
Keywords	Self-harm, assessment, management, prevention, support needs, health care
Details of existing review of same topic by same authors	None
Current review status	Ongoing
Additional information	Not applicable
Details of final publication	www.nice.org.uk