INTRODUCTION

Review question / Objective The overall aim of this realist-informed scoping review is to explore the nature and extent of the literature on lower-level social care needs of adults on entry to male prisons, identify any gaps in the prison literature, and explore conceptualisations and definitions of social care used. Adopting a realist-informed approach, we will use the information gathered from the scoping review to develop a set of ‘context-mechanism-outcome’ (CMO) configurations, and seek to address the following research question: ‘What works in addressing the lower-level social care needs of adults on entry to male prisons, how, why, for whom, and in what circumstances?’

Note: We anticipate that there will be knowledge gaps in the prison literature. Therefore, in line with our realist-informed approach, we will also explore the broader community literature on lower-level social care after completing the prison-specific search and analysis. This aspect of the review will be exploratory and iterative in nature.

Background A significant number of people living in prisons have, or are at risk of developing, social care needs. Examples include needing help with getting washed/dressed, toileting, mobility, building/maintaining positive relationships, or participating in purposeful activity. In England local authorities (e.g., county councils) have responsibility, under the Care Act 2014, for assessing and providing for certain social care needs of people in prison, for prevention of social care needs, and for the promotion of independence relating to social care. However, there are specific eligibility criteria, leaving many people with lower-level needs excluded from formal support and in some cases receiving inappropriate informal support (for example,
Rationale  Our discussions with key stakeholders (including social care practitioners and people who have lived in prison), suggest that services/interventions to date have focused largely on longer-term social care needs throughout an individual's sentence and/or upon release from prison. We also know that much of the focus has been on people who meet the eligibility criteria under the Care Act 2014 (for example having at least two social care needs due to a physical, mental, or cognitive illness or disability). Conversely, very little attention has been paid to people entering prison with social care needs which are not covered by the Care Act (for example worry and uncertainty over housing, finances, or families), to the circumstances of people who do not meet the formal eligibility criteria for domains which are covered by the Care Act, or to prevention and the promotion of independence. These are the key issues to be covered by the current review, as summarised below:

i) Social care needs that are covered by the Care Act 2014 but fail to meet eligibility criteria.
ii) Social care needs that are not covered by the Care Act 2014.
iii) Prevention: preventing, reducing, or delaying the escalation of social care needs, as stipulated by the Care Act 2014.
iv) Promotion of independence: promoting and maintaining independence, as stipulated by the Care Act 2014.

It is crucial that we explore this gap because unmet social care needs may impact on the individual’s capacity to engage with the prison system itself, as well as their engagement with their prison sentence and related rehabilitation work. Moreover, overlooking people’s social care and support needs in prison may be in breach of their human rights such as freedom from degrading treatment, may place them at risk of deterioration thereby adding further burden for individuals, their peers, and prison staff, and likely requiring more intensive and costly services and resources further down the line.

A scoping review is appropriate for this study given the lack of previous reviews in this area, and the anticipated heterogeneity in the way social care, and lower-level social care specifically, is conceptualised and defined. We chose to adopt a realist-informed approach to our scoping review because social care provision in prisons often involves complex interventions, something realist-approaches are well-suited to dealing with. Moreover, realist-informed approaches explore how and why interventions work (or not), for whom, and in what contexts, rather than simply determine whether they are effective.

METHODS

Strategy of data synthesis  For the prison-specific aspect of the review, we ran a final search in the following electronic bibliographic databases on 1st June 2023: Criminal Justice Abstracts (CJA); Ovid (Medline, Embase, and Social Policy and Practice). The strategy used in CJA was as follows:

(“Low* social care” OR “Low* level social care” OR “moderate social care” OR “moderate level social care” OR “Non-eligible social care needs” OR (“Moderate need” AND “social care”) OR (“Non-eligible” AND “social care”) OR (“Not eligible” AND “social care”) OR (“Non-eligible” AND “Care Act”) OR (“Not eligible” AND “Care Act”) OR (“Low* level support” AND “social care”) OR (“Low* level care package” AND “social care”) OR (“Sub-threshold” AND “social care”) OR (“Sub-threshold” AND “Care Act”) OR (“Advice and support” AND “social care”) OR (“Advice and support” AND “Care Act”) OR (“Information and advice” AND “social care”) OR (“Information and advice” AND “Care Act”) OR (“Support from the voluntary sector” AND “social care”) OR (“Support from the voluntary sector” AND “Care Act”) OR (“Support from the Third sector” AND “social care”) OR (“Support from the Third sector” AND “Care Act”) OR (“prevention services” AND “social care”) OR (“prevention services” AND “Care Act”) OR (“preventative services” AND “social care”) OR (“preventative services” AND “Care Act”) OR (Signposting AND “social care”) OR (Signposting AND “Care Act”) OR (“Maintain* independence” AND “social care”) OR (“Maintain* independence” AND “Care Act”) OR (“Promot* independence” AND “social care”) OR (“Promot* independence” AND “Care Act”) OR (“Promotion of independence” AND “social care”) OR (“Promotion of independence” AND “Care Act”) OR (“informal support” AND “social care”) OR (“informal support” AND “Care Act”) OR (“Unmet social care need”* OR (“Unmet need”* AND “social care”) OR (“self

INPLASY  Buck et al. INPLASY protocol 202370056. doi:10.37766/inplasy2023.7.0056
Eligibility criteria

The following pertains to the prison-specific aspect of the review.

In this scoping review we will use the ‘PCC’ framework (Population, Concept, and Context) which has been recommended for scoping reviews by the Joanna Briggs Institute (JBI) (2015), as follows:

Population – all adults (18+) living in male prisons with lower-level social care needs.

Concept – meeting lower-level social care needs, and preventing or delaying deterioration of these needs, on entry to prison. This will include descriptive information and author insights (such as facilitators and recommendations), as well as any empirical outcomes.

Context – UK male prison settings initially, and then (likely) wider UK community settings to plug anticipated gaps in the prison literature.

There will be no restrictions based on study design, publication type or publication status.

We are restricting to UK settings and English language because the review is concerned with social care in UK prisons, with a longer-term view of developing a programme theory and recommendations for best meeting these needs in the UK. Social care provision in prisons varies greatly within and between countries.

Source of evidence screening and selection

All records identified from the electronic database searches will be independently screened by title and abstract by pairs of reviewers, with any disagreements resolved by discussion or, where necessary, a third reviewer. Documents considered potentially eligible for inclusion will then undergo full text screening to confirm eligibility/relevance by at least two reviewers. Records will be screened according to pre-determined inclusion criteria. Reason for exclusion will be recorded at each stage using a pre-specified set of codes.

Data management Screening: A screening file has been produced in Excel, ready for initial screening by title/abstract (screening has not yet begun other than to remove duplicates and pilot the inclusion criteria and screening codes).

Data extraction:

Data will be extracted into a bespoke data extraction form in Excel by two reviewers and checked for accuracy and agreement. The form will be piloted first and refined, if necessary, before full data extraction. Data to be extracted will include study characteristics (e.g., author, year, country), setting (e.g., prison - on entry; care home; day centre; domiciliary), population or subgroup (e.g., people in prison with learning difficulties, older people in care homes), type of social care need, the nature of the care/support provided, the source of the care/support, summary of relevant findings, examples of good practice regarding lower-level social care, facilitators and barriers, recommendations from the authors, and in line with a realist-informed approach, any details pertaining specifically to context, mechanism, and outcome parameters. We will also record definitions of social care and lower-level social care if provided. We envisage significant heterogeneity within the literature in terms of level of detail and depth of insight and will therefore record the information in free-text form rather than applying pre-defined codes.

Reporting results / Analysis of the evidence

We will conduct basic descriptive analysis of the prison literature (such as frequency counts of concepts, populations/sub-groups, or location), which we will map visually in tables or graphs. We will also use descriptive qualitative techniques, for example basic coding of data to specific categories, which is appropriate for scoping reviews seeking to identify or clarify concepts/definitions in a particular field or identify key characteristics related to a concept. In addition, we will highlight any gaps in the evidence/knowledge from the prison literature, summarise any insights from the community setting, and develop a set of context-mechanism-outcome (CMO) configurations based on evidence and insights from both settings, in line with the realist approach. As is established practice for scoping reviews, we will not conduct a formal quality appraisal.
Language restriction We are restricting to documents written in English language as the review is concerned with social care in UK prisons.

Country(ies) involved England.

Other relevant information The wider study: The aim of our wider study, which includes a separate but linked qualitative interview phase (not reported here), is to co-produce an initial programme theory (IPT) for a model of lower-level social care for adults on entry to male prisons. In the future, once both phases of the study are complete, we will organise a workshop with Steering Group members and key stakeholders to co-produce the IPT.

Previous consultation with stakeholders: We have consulted with stakeholders to determine what, from their perspective, is meant by lower-level social care needs in the prison setting: this helped inform the development of our search strategy.

Insights from community settings: While the focus of this realist-informed scoping review is lower-level social care in prisons, we will also explore what can be learned and potentially transferred from the wider community into prison settings regarding lower-level social care provision and prevention.

Keywords Social care; social support; support needs; prison; scoping review; realist approach; context-mechanism-outcome configurations.

Dissemination plans Findings will be submitted for publication in an appropriate peer-reviewed journal and presented at an academic conference. We will write lay summaries for stakeholder groups. The review findings will subsequently inform the future co-development and evaluation of an initial programme theory which will include recommendations for meeting lower-level social care needs on entry to prison and preventing/delaying such needs.

Contributions of each author
Author 1 - Deborah Buck. Email: deborah.buck@manchester.ac.uk
Author 2 - Lee D Mulligan.
Author 3 - Catherine Robinson.
Author 4 - Jennifer J Shaw.
Author 5 - Andrew Shepherd.
Author 6 - Katrina Forsyth.