

Appendix 2. Excluded studies

When screening titles by title/abstract, I first looked at whether it was clearly not qualitative research. Then, I then considered if it concerned the patients perspective. If the citation was still not excludable I considered if it was clearly not dealing with the primary-secondary care interface. For foreign language titles, Google translate was used to ascertain if the title was applicable.

Database Embase (1974 to 30th July 2014), Platform: Ovid.

The electronic database returned 351 citations.

Of the 338 that remained after excluding duplicates, 323 were excluded by reading titles / abstracts, leaving 15 citations.

Excluded because not qualitative: 113

Excluded because participants not patients: 94

Excluded because not involving the primary-secondary care interface: 116

Of the 15 remaining, the following 10 were excluded after reading the full texts:

(1) Benjamin C, Flynn M, Hallett C, Ellis I, Booth K. The use of the life course paradigm and life course charts to explore referral for family history of breast cancer. *Int J Nurs Stud.* 2008 Jan;45(1):95-109. Epub 2006 Dec 8.

Reason for exclusion; not qualitative.

(2) Blank, L Patient perceptions of the referral of older adults to an epilepsy clinic: Do patients and professionals agree who should be referred to a specialist?. *Epilepsy & behavior [1525-5050] yr:2014 vol:34 pg:120 -123*

Reason for exclusion; not focusing on primary-secondary care interface.

(3) Dutton, H Patient perspectives on discharge from specialist type 2 diabetes care back to primary care: A qualitative study. *Canadian journal of diabetes [1499-2671] yr:2014 vol:38 iss:3 pg:191 -197*

Reason for exclusion; not focusing on primary-secondary care interface (focus involves tertiary centre).

(4) Fitzsimons, M. Epilepsy care in Ireland: An exploration of patient health care journeys and experiences: What are the implications for practice?. *Epilepsia [0013-9580] vol:50 pg:37*

Reason for exclusion; conference abstract and not a full paper.

(5) Galambos, C. Managed care and mental health: Personal realities. *Journal of health & social policy [0897-7186] yr:2004 vol:20 iss:1 pg:1 -22*

Reason for exclusion; not focusing on primary-secondary care interface.

(6) Graves H, Pollard LC, Lempp H, Kingsley GH, Scott DL. Perceived barriers to integrated care in rheumatoid arthritis (RA): Views of providers and recipients of primary and secondary care services. *Rheumatology* 2009 April 2009;48:107.

Reason for exclusion; poster abstract i.e. not a full paper. Pollard however, author of main paper of this work which subsequently accepted.

(7) Jackson, C J Referral and attendance at a specialist antenatal clinic: Qualitative study of women's views. *BJOG: an international journal of obstetrics and gynaecology* [1470-0328] yr:2006 vol:113 iss:8 pg:909 -913

Reason for exclusion; not focusing on primary-secondary care interface, focus primarily on community midwife referral to specialist antenatal clinic-and the impact of being referred and attending this on women.

(8) Muller E, Vorobeichik M, Admi H, Shadmi E. Oncology patients' experience at the interface between hospital and community care: A mixed method investigation. *European Journal of Cancer, Supplement* 2009 September 2009;7(2-3):238.

Reason for exclusion; author (Efrat Shadmi) contacted directly; Abstract from a conference abstract and not a full paper.

(9) Shaw, S N. More than one dollop of cortex: Patients' experiences of interprofessional care at an urban family health centre. *Journal of interprofessional care* [1356-1820] yr:2008 vol:22 iss:3 pg:229 -237

Reason for exclusion; not focusing on primary-secondary care interface.

(10) Wilkinson, Emma, et al. "A multi-centre qualitative study exploring the experiences of UK South Asian and White Diabetic Patients referred for renal care." *BMC nephrology* 13.1 (2012): 157.

Reason for exclusion; not focusing on primary-secondary care interface.

5 were included after reading fulltexts.

(1) Admi H, Muller E, Ungar L, Reis S, Kaffman M, Naveh N, et al. Hospital-community interface: A qualitative study on patients with cancer and health care providers' experiences. *European Journal of Oncology Nursing* 2013 OCT;17(5):528-535.

(2) Bain N, Campbell N, Ritchie L, Cassidy J.

Striking the right balance in colorectal cancer care—a qualitative study of rural and urban patients *Family Practice* (2002) 19 (4): 369-374 doi:10.1093/fampra/19.4.369

(3) Burkey, Y. Patients' views on their discharge from follow up in outpatient clinics: Qualitative study. *BMJ. British medical journal* [0959-8138] yr:1997 vol:315 iss:7116 pg:1138 -1141

(4) Göbel B, Zwart D, Hesselink G, Pijnenborg L, Barach P, Kalkman C, et al. Stakeholder perspectives on handovers between hospital staff and general practitioners: an evaluation through the microsystems lens. *BMJ QUAL SAF* 2012 12/02;21:i106-13.

(5) Kemp K, et al, An exploration of the follow-up needs of patients with inflammatory bowel disease, Journal of Crohn's and Colitis (2013), <http://dx.doi.org/10.1016/j.crohns.2013.03.001>

Search Terms for Database Medline (1946 to present (30th July 2014) with daily update), Platform: Ovid. Medline In-Process & Other Non-Indexed Citations.

The electronic database returned 164 citations.

Of the 156 that remained after excluding duplicates, 141 were excluded by reading titles / abstracts, leaving 15 citations.

Excluded because not qualitative: 31

Excluded because participants not patients: 63

Excluded because not involving the primary-secondary care interface: 47

Of the 15 remaining, the following 5 were excluded after reading the full texts:

(1) Adewuyi Dalton, R. Patients' views of routine hospital follow-up: a qualitative study of women with breast cancer in remission. *Psycho-oncology* [1057-9249] yr:1998 vol:7 iss:5 pg:436 -439

Reason for exclusion; not focusing on primary-secondary care interface.

(2) Anvik, T. "When patients have cancer, they stop seeing me"--the role of the general practitioner in early follow-up of patients with cancer--a qualitative study. *BMC family practice* [1471-2296] yr:2006 vol:7 pg:19

Reason for exclusion; not focusing on primary-secondary care interface.

(3) Sanders, C. Unmet need for joint replacement: a qualitative investigation of barriers to treatment among individuals with severe pain and disability of the hip and knee. *Rheumatology* [1462-0324] yr:2004 vol:43 iss:3 pg:353 -357

Reason for exclusion; not focusing on primary-secondary care interface.

(4) Tod, A M. Barriers to uptake of services for coronary heart disease: qualitative study. *BMJ. British medical journal* [0959-8138] yr:2001 vol:323 iss:7306 pg:214

Reason for exclusion; not focusing on primary-secondary care interface.

(5) Wainer, J. The treatment experiences of Australian women with gynaecological cancers and how they can be improved: a qualitative study. *Reproductive health matters* [0968-8080] yr:2012 vol:20 iss:40 pg:38 -48

Reason for exclusion; not focusing on primary-secondary care interface; focus is on primary-tertiary interface.

10 were included after reading fulltexts.

(1) Bain NSC, Campbell NC. Treating patients with colorectal cancer in rural and urban areas: A qualitative study of the patients' perspective. *Fam Pract* 2000;17(6):475-479.

- (2) Berendsen AJ, De Jong GM, Meyboom-De Jong B, Dekker JH, Schuling J. Transition of care: Experiences and preferences of patients across the primary/secondary interface a qualitative study. *BMC Health Services Research* 2009;9.
- (3) Hesselink G, Vernooij-Dassen M, Pijnenborg L, Barach P, Gademan P, Dudzik-Urbaniak E, et al. Organizational culture: an important context for addressing and improving hospital to community patient discharge. *Med Care* 2013;51(1):90-98.
- (4) McHugh GA, Silman AJ, Luker KA. Quality of care people with osteoarthritis: A qualitative study. *J Clin Nurs* 2007;16(7):168-176.
- (5) Pascoe, S W. Patients' experiences of referral for colorectal cancer. *BMC family practice* [1471-2296] yr:2013 vol:14 pg:124
- (6) Preston, C. Left in limbo: patients' views on care across the primary/secondary interface. *Quality in health care* [0963-8172] yr:1999 vol:8 iss:1 pg:16 -21
- (7) Somerset M, Faulkner A, Shaw A, Dunn L, Sharp DJ. Obstacles on the path to a primary-care led National Health Service: Complexities of outpatient care. *Social Science and Medicine* 1999 January 1999;48(2):213-225
- (8) Walton L, McNeill R, Stevens W, Murray M, Lewis C, Aitken D, et al. Patient perceptions of barriers to the early diagnosis of lung cancer and advice for health service improvement. *Fam Pract* 2013 08;30(4):436-444.
- (9) Wilkes S, Rubin G, Crosland A, Hall N, Murdoch A. Patient and professional views of open access hysterosalpingography for the initial management of infertility in primary care. *British Journal of General Practice* 2009 MAY;59(562):336-342.
- (10) Wright CA, Osborn DPJ, Nazareth I, King MB. Prevention of coronary heart disease in people with severe mental illnesses: A qualitative study of patient and professionals' preferences for care. *BMC Psychiatry* 2006 04;6.

CINAHL PLUS WITH FULL TEXT (EBSCO host accessed 30.7.2014)

The electronic database returned 87 citations.

Of the 86 that remained after excluding duplicates, 83 were excluded by reading titles / abstracts, leaving 3 citations.

Excluded because not qualitative: 28

Excluded because participants not patients: 27

Excluded because not involving the primary-secondary care interface: 28

Of the 3 remaining, the following 2 were excluded after reading the full texts:

- (1) Berendsen AJ, de Jong GM, Schuling J, Bosveld HE, de Waal MW, Mitchell GK, et al. Patient's need for choice and information across the interface between primary and secondary care: a survey. *Patient Education & Counseling* 2010 Apr;79(1):100-105.

Reason for exclusion; not qualitative methodology.

(2) Philibert, I. The European HANDOVER Project: a multi-nation program to improve transitions at the primary care--inpatient interface. *BMJ quality & safety* [2044-5415] yr:2012 vol:21 pg:i1 -6

Reason for exclusion; an editorial, not a qualitative study.

1 was included after reading full texts

(1) Davies, E. Using clinical audit, qualitative data from patients and feedback from general practitioners to decrease delay in the referral of suspected colorectal cancer. *Journal of evaluation in clinical practice* [1356-1294] yr:2007 vol:13 iss:2 pg:310 -317

PsycINFO, Psychology and Behavioural Sciences Collection, Health Business Elite, Biomedical Reference Collection: Comprehensive Library, Information Science & Technology Abstracts, eBook Collection (EBSCOhost)

The electronic database returned 5 citations.

Of the 5 that remained after excluding duplicates, 5 were excluded by reading titles / abstracts;

Excluded because not qualitative: 5

Excluded because participants not patients: 0

Excluded because not involving the primary-secondary care interface: 0

Web of Science Core Collection (2003-present): Citation Indexes (Science Citation Index Expanded (SCI-EXPANDED)—2003-present, and Social Sciences Citation Index (SSCI) –2003-present). Accessed 30th July 2014.

The electronic database returned 22 citations.

Of the 22 that remained after excluding duplicates, 18 were excluded by reading titles / abstracts, leaving 4 citations.

Excluded because not qualitative: 9

Excluded because participants not patients: 7

Excluded because not involving the primary-secondary care interface: 2

Of the 4 remaining, the following 1 was excluded after reading the full texts:

(1) Farquhar M, Barclay S, et al. Barriers to effective communication across the primary/secondary interface: example from the ovarian cancer patient journey. *European Journal of Cancer Care*, 14 (2005), pp. 359–366

Reason for exclusion; Patients not participants.

3 were included after reading fulltexts;

(1) Beech R, Henderson C, Ashby S, Dickinson A, Sheaff R, Windle K, et al. Does integrated governance lead to integrated patient care? Findings from the innovation forum. *Health & Social Care in the Community* 2013 11;21(6):598-605

(2) Berendsen AJ, De Jong GM, Meyboom-De Jong B, Dekker JH, Schuling J. Transition of care: Experiences and preferences of patients across the primary/secondary interface a qualitative study. BMC Health Services Research 2009 2009;9.

(3) Walton L, McNeill R, Stevens W, Murray M, Lewis C, Aitken D, et al. Patient perceptions of barriers to the early diagnosis of lung cancer and advice for health service improvement. Fam Pract 2013 08;30(4):436-444.

OpenSIGLE (opensigle.inist.fr accessed 7th August 2014)

The electronic database returned 11 citations.

Of the 10 that remained after excluding duplicates, 10 were excluded by reading titles / abstracts;

Excluded because not qualitative: 4

Excluded because participants not patients: 3

Excluded because not involving the primary-secondary care interface: 3

Healthcare Management Information Consortium (HMIC) database (including records from the Library & Information Services department of the Department of Health (DH) in England and the King's Fund Information & Library Service.

The electronic database returned 18 citations.

Of the 11 that remained after excluding duplicates, 6 were excluded by reading titles / abstracts;

Excluded because not qualitative: 4

Excluded because participants not patients: 1

Excluded because not involving the primary-secondary care interface: 1

Of the 5 remaining, the following 1 was excluded after reading the full text:

(1) Hampson, J R. Shared care: a review of the literature. Family practice [0263-2136] yr:1996

Reason for exclusion; not a qualitative study.

4 were included after reading fulltexts;

(1) Berendsen AJ, De Jong GM, Meyboom-De Jong B, Dekker JH, Schuling J. Transition of care: Experiences and preferences of patients across the primary/secondary interface a qualitative study. BMC Health Services Research 2009 2009;9.

(2) McHugh GA, Silman AJ, Luker KA. Quality of care people with osteoarthritis: A qualitative study. J Clin Nurs 2007 07;16(7):168-176.

(3) Preston, C. Left in limbo: patients' views on care across the primary/secondary interface. Quality in health care [0963-8172] yr:1999 vol:8 iss:1 pg:16 -21

(4) Walton L, McNeill R, Stevens W, Murray M, Lewis C, Aitken D, et al. Patient perceptions of barriers to the early diagnosis of lung cancer and advice for health service improvement. Fam Pract 2013 08;30(4):436-444.

National Technical Information Service (accessed online on 7th August 2014 via www.ntis.gov/).

The electronic database returned 21 citations.

Of the 21 that remained after excluding duplicates, 21 were excluded by reading titles / abstracts;

Excluded because not qualitative: 21

PsycEXTRA (accessed online on 7th August 2014 via www.apa.org/psycextra/).

The electronic database returned 11 citations.

Of the 11 that remained after excluding duplicates, 11 were excluded by reading titles / abstracts;

Excluded because not qualitative: 11