

National Institute for Health and Care Excellence

Draft for consultation

Disabled children and young people up to 25 with severe complex needs: integrated service delivery and organisation across health, social care and education

[F] Evidence review for supporting participation in education and social activities

NICE guideline TBC

Evidence reviews

August 2021

Draft for consultation

These evidence reviews were developed by the National Guideline Alliance which is a part of the Royal College of Obstetricians and Gynaecologists

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1 Supporting participation in education and social activities

2 Recommendations supported by this evidence review

3 This evidence review supports recommendations 1.7.1 - 1.7.7, 1.17.15. Other
4 evidence supporting these recommendations can be found in the evidence reviews
5 on Views and experiences of service users (evidence report A), Barriers and
6 facilitators of joined-up care (evidence report K), Views and experiences of service
7 providers (evidence report M).

8 **Review question**

9 What are the most effective ways that health, social care and education services can
10 work together to support disabled children and young people with severe complex
11 needs to participate in and benefit from education and social activities?

12 **Introduction**

13 This review aims to determine effective combined approaches to support disabled
14 children and young people with severe complex needs to participate in and benefit
15 from education and social activities.

16 At the time of scoping and developing the review protocols, documents referred to
17 health, social care and education in accordance with NICE style. When discussing
18 the evidence and making recommendations, these services will be referred to in the
19 order of education, health and social care for consistency with education, health and
20 care plans.

21 **Summary of the protocol**

22 See Table 1 for a summary of the Population, Intervention, Comparison and
23 Outcome (PICO) characteristics of this review.

24 **Table 1: Summary of the protocol (PICO table)**

Population	Disabled children and young people from birth to 25 years with severe complex needs who require health, social care and education support.
Intervention	Any joint-working practices to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities. For example: <ul style="list-style-type: none"> • 1:1 support • Personalised budgets • Visual support hierarchy recommendations (or total communication guidance) • Short breaks/respite and holiday clubs • EHC plans • Named responsible practitioners (e.g., keyworker, single point of contact, lead professional, named coordinator, transition worker) • Arrangements/links with third sector/community organisations (e.g., football clubs, theatre groups)
Comparison	Any other practices to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities
Outcome	<p>Critical</p> <ul style="list-style-type: none"> • Participation and inclusion • Progress in learning (e.g., measured by progress towards outcomes/goals specific in EHC plans) • Positive social relationships (e.g., friends) <p>Important</p> <ul style="list-style-type: none"> • Educational achievement or attainment • Developmental progress (including social and emotional development)

1 *EHC: education, health and care*

2 For further details see the review protocol in appendix A.

3 **Methods and processes**

4 This evidence review was developed using the methods and process described in
5 Developing NICE guidelines: the manual. Methods specific to this review question
6 are described in the review protocol in appendix A and the methods document
7 (Supplement A).

8 Declarations of interest were recorded according to NICE's conflicts of interest policy.

9 **Effectiveness evidence**

10 **Included studies**

11 Five studies were included for this review, 1 randomised controlled trial (RCT; Asmus
12 2017), 2 cluster RCTs (George 2011 and Selanikyo 2017), 1 retrospective cohort
13 study (Bent 2002), and 1 before and after study (Hoehne 2020). One of the cluster
14 RCTs (George 2011) only reported outcome data of interest for the intervention
15 group and, therefore, was treated as a before and after study.

16 The included studies are summarised in Table 2.

17 Three studies looked at the effectiveness of 1:1 support (George 2011, Hoehne 2020
18 and Selanikyo 2017), 1 study compared a multidisciplinary team to ad-hoc services
19 (Bent 2002) and 1 study compared a peer support network with no peer-mediated
20 intervention (Asmus 2017).

21 See the literature search strategy in appendix B and study selection flow chart in
22 appendix C.

23 **Excluded studies**

24 Studies not included in this review are listed, and reasons for their exclusion are
25 provided in appendix J.

26 **Summary of studies included in the effectiveness evidence**

27 Summaries of the studies that were included in this review are presented in Table 2.

28 **Table 2: Summary of included studies**

Study	Population	Intervention	Comparison	Outcomes	Comments
Asmus 2017 RCT USA	CYP who qualified for state's alternate assessment for significant cognitive impairment and/or receiving special education for intellectual disability or autism; enrolled in at least one general education class.	<u>Peer networks (n=47):</u> Group of peers without disabilities formed a social network for each student. Network meetings included social interactions around a shared activity and planning for other social contact between meetings.	<u>Standard practice (n=48):</u> Special education services were provided as stated in individualised education programs. No peer-mediated interventions were introduced.	<ul style="list-style-type: none"> • Participation and inclusion • Positive social relationships • Developmental progress 	Could not include parent-reported outcomes as the number of people with data in each arm was not reported.
Bent 2002 Cohort study	People with cerebral palsy, spina bifida, traumatic brain injury or	<u>Young Adult Team services (YAT) (n=119):</u>	<u>Ad-hoc services (n=135):</u>	<ul style="list-style-type: none"> • Participation and inclusion 	<ul style="list-style-type: none"> • Population is indirect as it included people aged up to 28

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Study	Population	Intervention	Comparison	Outcomes	Comments
UK	degenerative neuromuscular disease born between 1978 and 1982.	Authors only report a definition of YATs (Multidisciplinary specialist teams developed to facilitate transition from child to adults services).	Authors only report a definition of ad-hoc services (Individual professionals working in isolation with ad-hoc links between professionals /services).		years. <ul style="list-style-type: none"> Outcome is indirect as participation is not limited to education and social activities.
George 2011 Before and after study*† USA	Children and young people with disabilities aged 5 to 21 years who could move about with or without an assistive device.	<u>Fitness program (n=10)</u> 8-week fitness program involving: 1) supervised exercise ran by physical therapy and special education students; 2) home exercise program to occur on the nights when supervised exercise was not happening; and 3) parent education about exercise and nutrition. All activities were adapted to the individual needs of the participants.		<ul style="list-style-type: none"> Positive social relationships 	*Overall study design was a quasi-cluster RCT. However, data for outcome of interest (positive social interactions) was only available for the intervention group. †Comparison between first and second half of intervention rather than before and after intervention
Hoehne 2020 Before and after study Canada	Youth with mobility restrictions (with or without cognitive and/or communication impairments).	<u>Pathways and Resources for Engagement and Participation (PREP) (n=20):</u> 12-week intervention led by occupational therapist with the aim of improving participation by changing aspects of the environment and engaging/coaching youth and their parents. A participation team, comprising family members, teachers, community instructors and volunteers, assisted in execution of the plan.		<ul style="list-style-type: none"> Participation and inclusion 	Youth were excluded if they were within the first year after a severe brain injury or within the first 4 months following orthopaedic surgery
Selanikyo 2017 Cluster RCT	Students with moderate intellectual and developmental disability (IDD) who had been attending one of	<u>Co-PID* (n=35)</u> 20-week collaborative consultation model which	<u>In-service (n=34)</u> 3-hour workshop that aimed to	<ul style="list-style-type: none"> Participation and inclusion 	*In addition to in-service <ul style="list-style-type: none"> Population is indirect as those with moderate

Study	Population	Intervention	Comparison	Outcomes	Comments
Israel	two special education schools for at least a year.	included joint formulation of classroom goals for each student and activities that could enable students to meet these goals.	expand teachers' knowledge and awareness of participation of students with moderate IDD and brainstorm ways of implementing knowledge in the classroom.		IDD may not have severe, complex needs in all three areas.

1 *Co-PID: Collaborative Consultation Participation of Students With Intellectual and Developmental Disabilities;*
2 *CYP: children and young people; IDD: intellectual and developmental disability; PREP: Pathways and Resources*
3 *for Engagement and Participation; RCT: randomised controlled trial; YAT: young adult team*

4 See the full evidence tables in appendix D. No meta-analysis was conducted (and so
5 there are no forest plots in appendix E).

6 **Summary of the effectiveness evidence**

7 Overall, the 1:1 support interventions either showed an important benefit for
8 participation and social interaction or showed no important difference in these
9 outcomes. Specifically, there was evidence that the Pathways and Resources for
10 Engagement and Participation intervention possibly increased frequency and
11 diversity of participation in the community. There was some evidence of an important
12 reduction in frequency of participation at home following this intervention but this
13 was viewed as being due to an important increase in time spent within community
14 settings. There was no important difference in other measures of participation and
15 inclusion across the community, home and school settings before and after the
16 intervention. The Collaborative Consultation Participation of Students with Intellectual
17 and Developmental Disabilities intervention showed important improvements on
18 scores of communication and choosing behaviours in the classroom, but no
19 differences in scores for initiating. An adapted fitness programme showed an
20 important increase in the number of positive social interactions occurring during
21 group activity between the first and second half of this programme, but there were no
22 differences in the number of social interactions outside of group activities.
23 There was evidence of important increases in participation restriction scores (with
24 higher scores representing better outcomes) with young adult teams compared with
25 an ad-hoc service approach.
26 Peer support networks showed important increases in the number of social contact
27 and friendship gains relative to standard practice with no peer-mediated
28 interventions. However, there were no important differences in social skills between
29 groups or the number of school activities children and young people were involved in.
30 Five studies were identified for this review question but the evidence was very low to
31 low quality, from single studies and seriously imprecise. Further, none of the included
32 studies reported progress in learning or educational achievement or attainment.
33 See appendix F for full GRADE tables.

34 **Economic evidence**

35 **Included studies**

36 A systematic review of the economic literature was conducted but no economic
37 studies were identified which were applicable to this review question.

1 A single economic search was undertaken for all topics included in the scope of this
2 guideline. See Supplement B for details.

3 **Excluded studies**

4 Economic studies not included in this review are listed, and reasons for their
5 exclusion are provided in appendix J.

6 **Summary of included economic evidence**

7 No economic studies were identified which were applicable to this review question.

8 **Economic model**

9 No economic modelling was undertaken for this review because the committee
10 agreed that other topics were higher priorities for economic evaluation.

11 **Evidence statements**

12 **Economic**

13 No economic studies were identified which were applicable to this review question.

14 **The committee's discussion and interpretation of the evidence**

15 **The outcomes that matter most**

16 Participation and inclusion, progress in learning and positive social relationships were
17 selected as critical outcomes by the committee. Participation and inclusion was
18 prioritised because identifying joint-working practices to support participation was the
19 primary focus of this review. Progress in learning and positive social relationships
20 were selected as critical outcomes because they represent benefits of education and
21 social activities, respectively.

22 Educational achievement or attainment and developmental progress were included
23 as important outcomes. Educational achievement or attainment was included as an
24 outcome for the same reason as progress in learning, but was not considered as high
25 priority as it may be applicable to a narrower population of disabled children and
26 young people with severe complex needs. Developmental progress was included as
27 an outcome as this may both improve as a result of practices to support participation
28 and increase the likelihood of participation.

29 No evidence was found that reported progress in learning or educational
30 achievement or attainment.

31 **The quality of the evidence**

32 The quality of the evidence was assessed with GRADE and was rated as very low to
33 low. Concerns about risk of bias were "very serious" for all outcomes. The most
34 serious concerns for the randomised controlled trials were bias in measurement of
35 the outcome, whereas the most serious concerns for the cohort study were biases
36 arising from selection of participants, classification of interventions and confounding.
37 The most serious concerns for the before and after studies were biases arising from
38 random sequence generation, allocation concealment, knowledge of allocated
39 interventions and lack of a separate control group. There was "no serious
40 inconsistency" for all outcomes due to only one study reporting each outcome of
41 interest. Indirectness ranged from "very serious" to "no serious indirectness".
42 Indirectness was due to differences between the population and outcomes of interest
43 and those included in and reported by studies. Concerns about imprecision ranged
44 from "very serious" to "no serious imprecision". Imprecision was due to 95%
45 confidence intervals crossing boundaries for minimally important differences.

46 **Benefits and harms**

47 There was low quality evidence that a fitness programme, adapted to meet the
48 individual needs of the participants, increased the number of positive social
49 interactions occurring during group activities. Although the evidence was specific to a
50 fitness programme, the committee agreed that increases in positive social

1 interactions would likely be seen in other adapted group social activities and that a
2 range of activities should be considered as part of short break services, as not all
3 children and young people will be interested in fitness activities. Further, they were
4 aware of examples of inclusive drama and choir groups [1.7.2]. In the committee's
5 experience, short breaks are normally provided either in a 1:1 setting or very
6 specialist settings – there are limited opportunities for children and young people to
7 engage in group social activities, develop friendships and participate in their
8 community. Therefore, even though the evidence was very low quality, the committee
9 based a recommendation on it to consider group social activities as social inclusion is
10 a preparation for adulthood outcome. In addition, the committee agreed that the
11 intervention included in this evidence was more general and less niche than
12 interventions in other very low quality evidence and so it could be applied to the
13 whole population of this guideline. This recommendation was also supported by
14 qualitative evidence that short breaks benefit the child or young person and the
15 whole family (see evidence report A, sub-theme 13.1 and evidence reports M, sub-
16 theme 9.1). The committee were aware that the local authority has a duty to ensure
17 short breaks are provided as part of the local offer but agreed that collaboration with
18 voluntary and community organisations would be required to develop and fund a
19 range of group activities [1.7.2]. They also noted there needs to be a range of options
20 within these group activities to accommodate different cultural backgrounds and
21 family circumstances. Also there needs to be specific consideration of options for
22 those living in rural areas to prevent inequalities in accessing these social activities
23 [1.7.3]. The committee also discussed that some children and young people would
24 prefer individual activities over group activities. However, they did not make a
25 recommendation supporting individual activities as the evidence of benefit was only
26 shown during group activities. The committee agreed that the adaptations included in
27 the fitness programme were an important part of the intervention and, therefore,
28 recommended that providers adapt activities as required [1.7.4]. This would be
29 particularly relevant for children and young people with physical disabilities,
30 communication needs and disorders, learning disabilities and sensory impairments. It
31 could also be relevant for those where English is not their first language.
32 The committee were aware that some families do not know where to find information
33 about services and support available, and that this causes inequality in access as
34 some people will find the information themselves more easily than others. Therefore,
35 the committee recommended that the leisure activities (including social activities)
36 available should be specified in the Local Offer [1.17.15]. The committee agreed that
37 short break services may be the only way that such activities can be delivered due to
38 the support and care required by children and young people with severe complex
39 needs. However, there was evidence from one of the qualitative reviews (see
40 evidence report K, sub-theme 5.7) that opportunities to engage in activities at short
41 break services can be limited. Therefore, the committee made a recommendation in
42 support of short break services being used for the benefit of the child or young
43 person, as well as providing a break for families [1.7.6]. The importance of using
44 short breaks for the benefit of the child or young person was highlighted by the
45 qualitative evidence mentioned above (see evidence report A, sub-theme 13.1 and
46 evidence report M, sub-theme 9.1).
47 The committee wanted to raise awareness that social inclusion is likely to be more
48 difficult for children and young people who are not in education, employment or
49 training as this removes some of the opportunities for participation. The committee
50 were aware that the likelihood of completing a course or reaching other expected
51 outcomes can be a barrier to children and young people with severe complex needs

1 being able to engage in services, such as further education, so made a
2 recommendation highlighting that social participation gains may provide sufficient
3 justification for attendance, irrespective of any other expectations [1.7.1].
4 There was evidence that a coaching intervention, working with children and young
5 people and their parents, possibly improved frequency and diversity of participation in
6 the community. However, minimal information was provided about the goals set as
7 part of this intervention so the committee did not make a recommendation about it.
8 Social inclusion is a preparation for adulthood outcome that must be included in all
9 EHC plans/reviews from year 9 onwards. However the SEND Code of Practice
10 (2015) talks about doing this from the earliest years. The committee agreed that
11 helping children and young people to volunteer in the community, use the internet
12 and social media, make friends and access local community facilities would help
13 them to participate in social activities. These examples were chosen as they are
14 aspects of social participation that may be taken for granted as most children and
15 young people would be able to access social media, for example [1.7.5]. However,
16 assistance and adaptations may be required to enable disabled children and young
17 people to engage in these activities and these would not typically be covered by
18 existing service specifications [1.7.4].
19 The evidence showed that collaboration between health and education services can
20 improve communication in classroom settings. This was supported by evidence from
21 one of the qualitative reviews (see evidence report K, sub-theme 11.4) that showed
22 education practitioners valued the opportunity to learn from, observe and model
23 health professionals. The committee agreed that this collaboration between health
24 and education services is important to ensure that health needs are met, so that
25 unaddressed needs do not form a barrier to participation in education settings, and
26 approaches can be developed to enable student participation. The committee agreed
27 that similar benefits may be seen in other settings if health services collaborate with
28 social care services to better address the health needs of children and young people
29 and so broadened the recommendation to encompass social care. However, the
30 committee also had experience that the way in which health needs are addressed,
31 including where and when appointments are scheduled, can act as a barrier to
32 participation if it conflicts with other activities that children and young people like to
33 participate in or if it isolates them from other children and young people. Therefore,
34 the committee agreed it was important that needs are addressed flexibly to enable
35 participation which should have a consequential positive effect on quality of life
36 [1.7.7].
37 Based on their experience, the committee agreed with the evidence that having peer
38 networks confers benefits on positive social relationships. However, they noted that
39 whilst this approach may have some benefits, it could be perceived as discriminatory
40 as it is creating networks based on the presence or absence of a disability. The
41 committee thought that the recommendations made throughout the guideline would
42 be likely to achieve the same benefits more naturally by facilitating the formation of
43 friendships and networks and therefore did not make a recommendation based on
44 this evidence.

45 **Cost effectiveness and resource use**

46 There was no existing economic evidence in this area and no economic analysis was
47 undertaken.
48 The committee explained that the recommendation on interagency teams helping
49 children and young people to participate in social activities and working together to
50 find ways to address the health needs of children and young people, without
51 preventing them from participating in social activities might require services to be

1 more imaginative. However, it was not anticipated to result in a requirement for
2 additional resources. The recommendation for interagency teams to plan support to
3 help children and young people participate in social activities was not expected to
4 have significant resource implications because this already happens. However,
5 focussing this support on the areas identified in the recommendation may be a
6 change in practice for some teams.

7 The committee discussed the recommendation on developing and funding group
8 social activities. The committee explained that such activities would fall under short
9 break services, the provision of which is a statutory requirement, so there should not
10 be a significant resource impact, i.e. there may be a change in the composition of
11 short break services on offer depending on local needs, but this should happen within
12 existing funding. Also, group social activities, e.g. sports or theatre, are already
13 provided by some services.

14 The committee considered that there would not be any resource implications or
15 change in practice associated with the recommendation to adapt activities,
16 communication formats, the physical environment and participation methods. This
17 was because there is already a legal duty to make reasonable adjustments.

18 The committee discussed the benefits of social participation, including substantial
19 improvements in quality of life and wider wellbeing and that in this population, social
20 participation might be an end in itself. Due to these benefits, the committee
21 considered that promotion of social inclusion would represent a cost-effective use of
22 resources.

23 **Recommendations supported by this evidence review**

24 This evidence review supports recommendations 1.7.1 - 1.7.7, 1.17.15. Other
25 evidence supporting these recommendations can be found in the evidence reviews
26 on Views and experiences of service users (evidence report A), Barriers and
27 facilitators of joined-up care (evidence report K), Views and experiences of service
28 providers (evidence report M).

29
30

1

2 **References – included studies**

3 **Effectiveness**

4 **Asmus 2017**

5 Asmus, J. M., Carter, E. W., Moss, C. K., Biggs, E. E., Bolt, D. M., Bom, T. L.,
6 Bottema-Beutel, K., Brock, M. E., Cattet, G. N., Cooney, M., Fesperman, E. S.,
7 Hochman, J. M., Huber, H. B., Lequia, J. L., Lyons, G. L., Vincent, L. B., Weir, K.,
8 Efficacy and social validity of peer network interventions for high school students with
9 severe disabilities, *American Journal on Intellectual and Developmental Disabilities*,
10 122, 118-137, 2017

11 **Bent 2002**

12 Bent, N., Tennant, A., Swift, T., Posnett, J., Scuffham, P., Chamberlain, M. A., Team
13 approach versus ad hoc health services for young people with physical disabilities: a
14 retrospective cohort study, *Lancet (London, England)*, 360, 1280-6, 2002

15 **George 2011**

16 George, C. L., Oriel, K. N., Blatt, P. J., Marchese, V., Impact of a community-based
17 exercise program on children and adolescents with disabilities, *Journal of allied
18 health*, 40, e55-60, 2011

19 **Hoehne 2020**

20 Hoehne, C., Baranski, B., Benmohammed, L., Bienstock, L., Menezes, N.,
21 Margolese, N., Anaby, D., Changes in overall participation profile of youth with
22 physical disabilities following the prep intervention, *International Journal of
23 Environmental Research and Public Health*, 17, 1-18, 2020

24 **Selanikyo 2017**

25 Selanikyo, E., Yalon-Chamovitz, S., Weintraub, N., Enhancing classroom
26 participation of students with intellectual and developmental disabilities, *Canadian
27 journal of occupational therapy. Revue canadienne d'ergotherapie*, 84, 76-86, 2017
28

1 Appendices

2 *Appendix A – Review protocol*

3 **Review protocol for review question: What are the most effective ways that health, social care and education services can**
 4 **work together to support disabled children and young people with severe complex needs to participate in and benefit**
 5 **from education and social activities?**

6 **Table 3: Review protocol**

ID	Field	Content
0.	PROSPERO registration number	CRD42020164793
1.	Review title	What are the most effective ways that health, social care and education services can work together to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities?
2.	Review question	What are the most effective ways that health, social care and education services can work together to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities?
3.	Objective	To determine effective combined approaches to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities.
4.	Searches	The following databases will be searched: <ul style="list-style-type: none"> • Cochrane Central Register of Controlled Trials (CENTRAL) • Cochrane Database of Systematic Reviews (CDSR) • Embase • MEDLINE • Health Technology Assessment (HTA) • Database of Abstracts of Reviews of Effects (DARE) • British Education Index (BEI) • Educational Information Resources Center (ERIC) • Health Management Information Consortium (HMIC) • Applied Social Science Index and Abstracts (ASSIA) • Social Care Online • Social Policy and Practice • Social Science Citation Index • Social Services Abstracts

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ID	Field	Content
		<ul style="list-style-type: none"> • Sociological Abstracts • PsycINFO • CINAHL • Emcare <p>Searches will be restricted by:</p> <ul style="list-style-type: none"> • Date: 2000 onwards • Language: English <p>Other searches:</p> <ul style="list-style-type: none"> • Inclusion lists of systematic reviews • Kings Fund Reports (https://www.kingsfund.org.uk/publications) • National Audit Office • Audit Commission • Open Grey (if insufficient studies are found from other sources) <p>The full search strategies for all databases will be published in the final review.</p>
5.	Condition or domain being studied	Disabled children and young people from birth to 25 years with severe complex needs requiring health, social care and education support.
6.	Population	<p>Inclusion: Disabled children and young people from birth to 25 years with severe complex needs who require health, social care and education support.</p> <p>Exclusion: Children and young people who do not have needs in all three areas of health, social care and education.</p>
7.	Intervention/Exposure/Test	<p>Any joint-working practices to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities.</p> <p>For example:</p> <ul style="list-style-type: none"> • 1:1 support • Personalised budgets • Visual support hierarchy recommendations (or total communication guidance) • Short breaks/respite and holiday clubs • EHC plans

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ID	Field	Content
		<ul style="list-style-type: none"> • Named responsible practitioners (e.g., keyworker, single point of contact, lead professional, named coordinator, transition worker) • Arrangements/links with third sector/community organisations (e.g., football clubs, theatre groups)
8.	Comparator/Reference standard/Confounding factors	Any other practices to support disabled children and young people with severe complex needs to participate in and benefit from education and social activities
9.	Types of study to be included	<p>Systematic reviews of test and treat RCTs or non-randomised comparative test and treat studies (including cohort studies, before and after studies and interrupted time series), and test and treat RCTS will be included. Non-randomised studies will be included in the absence of RCTs. Service evaluations, process evaluations and audits will be included in the absence of comparative non-randomised studies.</p> <p>Conference abstracts will not be included.</p> <p>Non-randomised studies should adjust for confounders in their analysis such as: dominant provision (e.g. primarily autism, primarily physical disability), definitions of eligibility for service (e.g. for primary SEN), socioeconomic status. Studies will be downgraded for risk of bias if important confounding factors are not adequately adjusted for but will not be excluded for this reason.</p>
10.	Other exclusion criteria	<p>Studies will not be included for the following reasons:</p> <ul style="list-style-type: none"> • Published prior to 2000 • Not published in the English language • Non Organisation for Economic Co-operation and Development (OCED) country (https://www.oecd.org/about/members-and-partners/) <p>Studies published prior to 2000 will not be considered due to legislative changes, specifically the Children and Families Care Act 2014, and the Aiming High for Disabled Children (AHDC) programme 2007.</p> <p>Studies published in languages other than English will not be considered due to time and resource constraints with translation.</p> <p>Studies published by non OCED countries will not be considered due to differences in health, social care and education services to those implemented in the UK.</p>
11.	Context	All settings will be considered where health, social care and education is provided for disabled children and young people from birth to 25 years with severe complex needs.
12.	Primary outcomes (critical outcomes)	<p>Critical Outcomes:</p> <ul style="list-style-type: none"> • Person focused:

ID	Field	Content
		<ul style="list-style-type: none"> ○ Participation and inclusion as measured by validated scales or assisted communication aids (such as talking mats or ‘it’s all about me’) ○ Progress in learning (e.g., measured by progress towards outcomes/goals specific in EHC plans) ○ Positive social relationships (e.g., friends)
13.	Secondary outcomes (important outcomes)	<p>Important Outcomes:</p> <ul style="list-style-type: none"> ● Person focused: <ul style="list-style-type: none"> ○ Educational achievement or attainment ○ Developmental progress (including social and emotional development)
14.	Data extraction (selection and coding)	<p>All references identified by the searches and from other sources will be uploaded into STAR 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>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, inclusion and exclusion criteria, details of the interventions, setting and follow-up, relevant outcome data 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>
15.	Risk of bias (quality) assessment	<p>Quality assessment of individual studies will be performed using the following checklists:</p> <ul style="list-style-type: none"> ● ROBIS tool for systematic reviews ● Cochrane RoB tool v.2 for RCTs and quasi-RCTs ● Cochrane ROBINS-I tool for non-randomised (clinical) controlled trials and cohort studies ● Effective Practice and Organisation of Care (EPOC) RoB Tool for before and after studies ● Effective Practice and Organisation of Care (EPOC) RoB Tool for interrupted time series <p>The quality assessment will be performed by one reviewer and this will be quality assessed by a senior reviewer.</p>
16.	Strategy for data synthesis	<p>Intervention review (test and treat):</p> <p>Depending on the availability of the evidence, the findings will be summarised narratively or quantitatively. Where possible, meta-analyses will be conducted using Cochrane Review Manager software. A fixed effect meta-analysis will be conducted and data will be presented as risk ratios or odds ratios for dichotomous outcomes, and mean differences or standardised mean differences for continuous outcomes. Heterogeneity in the effect estimates of the</p>

ID	Field	Content		
		<p>individual studies will be assessed using the I2 statistic. I2 values of greater than 50% and 80% will be considered as significant and very significant heterogeneity, respectively. Heterogeneity will be explored as appropriate using sensitivity analyses. If heterogeneity cannot be explained through sensitivity analysis then a random effects model will be used for meta-analysis, or the data will not be pooled if the I2 statistic is greater than 80%.</p> <p>The confidence in the findings across all available evidence will be evaluated for each outcome using an adaptation of the ‘Grading of Recommendations Assessment, Development and Evaluation (GRADE) toolbox’ developed by the international GRADE working group: http://www.gradeworkinggroup.org/</p> <p>Minimally important differences:</p> <p>We will check the rehabilitation measures database (www.sralab.org) for published MID values for scales reported by included studies and use these if available. If not, we will use GRADE default MID values.</p> <p>For all remaining continuous outcomes, we will use GRADE default MID of 0.5 times SD of the control groups at baseline (or at follow-up if the SD is not available at baseline). For all remaining dichotomous outcomes (RRs, ORs and HRs), we will use the GRADE default for RR of 0.8 and 1.25 for consistency.</p>		
17.	Analysis of sub-groups	N/A		
18.	Type and method of review	<input checked="" type="checkbox"/>	Intervention	
		<input type="checkbox"/>	Diagnostic	
		<input type="checkbox"/>	Prognostic	
		<input type="checkbox"/>	Qualitative	
		<input type="checkbox"/>	Epidemiologic	
		<input checked="" type="checkbox"/>	Service Delivery	
		<input type="checkbox"/>	Other (please specify)	
19.	Language	English		
20.	Country	England		
21.	Anticipated or actual start date	08/01/20		
22.	Anticipated completion date	May 2021		
23.	Stage of review at time of this submission	Review stage	Started	Completed
		Preliminary searches	<input type="checkbox"/>	<input type="checkbox"/>

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ID	Field	Content
		Piloting of the study selection process <input type="checkbox"/>
		Formal screening of search results against eligibility criteria <input type="checkbox"/>
		Data extraction <input type="checkbox"/>
		Risk of bias (quality) assessment <input type="checkbox"/>
		Data analysis <input type="checkbox"/>
24.	Named contact	<p>5a. Named contact National Guideline Alliance</p> <p>5b Named contact e-mail CYPseverecomplexneeds@nice.org.uk</p> <p>5e Organisational affiliation of the review National Institute for Health and Care Excellence (NICE) and National Guideline Alliance</p>
25.	Review team members	National Guideline Alliance
26.	Funding sources/sponsor	This systematic review is being completed by the National Guideline Alliance which receives funding from NICE.
27.	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.
28.	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-ng10113
29.	Other registration details	None
30.	Reference/URL for published protocol	https://www.crd.york.ac.uk/prospero/display_record.php?ID=CRD42020164793

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ID	Field	Content
31.	Dissemination plans	NICE may use a range of different methods to raise awareness of the guideline. These include standard approaches such as: 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.
32.	Keywords	Child, infant, young person, disability, health care, education, social care, service delivery, service organisation, assessment
33.	Details of existing review of same topic by same authors	None
34.	Current review status	<input checked="" type="checkbox"/> Ongoing
		<input type="checkbox"/> Completed but not published
		<input type="checkbox"/> Completed and published
		<input type="checkbox"/> Completed, published and being updated
		<input type="checkbox"/> Discontinued
35..	Additional information	None
36.	Details of final publication	www.nice.org.uk

1 AHDC: Aiming High for Disabled Children; ASSIA: Applied Social Science Index and Abstracts; BEI: British Education Index; CDSR: Cochrane Database of Systematic
2 Reviews; CENTRAL: Cochrane Central Register of Controlled Trials; CINAHL: Cumulative Index to Nursing & Allied Health; DARE: Database of Abstracts of Reviews of
3 Effects; EHC: education, health and care; EPOC: Effective Practice and Organisation of Care; ERIC: Educational Information Resources Center; ERIC: Educational Information
4 Resources Center; GRADE: Grading of Recommendations Assessment, Development and Evaluation; HMIC: Health Management Information Consortium; HR: hazard ratio;
5 HTA: Health Technology Assessment; MID: minimally important difference; NICE: National Institute for Health and Care Excellence; OECD: Organisation for Economic Co-
6 operation and Development; OR: odds ratio; RCT: randomised controlled trial; RoB: risk of bias; ROBINS-I: risk of bias in non-randomised studies – of interventions; ROBIS:
7 Risk of Bias in Systematic Reviews; RR: risk ratio; SD: standard deviation; SEN: special educational needs

1 **Appendix B – Literature search strategies**

2 **Literature search strategies for review question: What are the most effective**
 3 **ways that health, social care and education services can work together to**
 4 **support disabled children and young people with severe complex needs to**
 5 **participate in and benefit from education and social activities?**

6 **Databases: Medline; Medline EPub Ahead of Print; and Medline In-Process &**
 7 **Other Non-Indexed Citations**

8 **Date of last search: 03/07/2020**

#	Searches
1	ADOLESCENT/ or MINORS/
2	(adolescen\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$.ti,ab.
3	exp CHILD/
4	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
5	exp INFANT/
6	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
7	exp PEDIATRICS/
8	p?ediatric\$.ti,ab.
9	YOUNG ADULT/
10	young\$ adult?.ti,ab.
11	or/1-10
12	exp DISABLED PERSONS/
13	exp MENTAL DISORDERS/
14	exp COMMUNICATION DISORDERS/
15	exp INTELLECTUAL DISABILITY/
16	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunct\$.ti.
17	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.
18	SHCN.ti,ab.
19	or/12-18
20	11 and 19
21	DISABLED CHILDREN/
22	CSHCN.ti,ab.
23	"Education Health and Care plan?".ti,ab.
24	EHC plan?.ti,ab.
25	EHCP?.ti,ab.
26	or/20-25
27	INTERINSTITUTIONAL RELATIONS/
28	INTERSECTORAL COLLABORATION/
29	"DELIVERY OF HEALTH CARE, INTEGRATED"/
30	(interinstitution\$ or multiinstitution\$ or jointinstitution\$.ti,ab.
31	(interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$.ti,ab.
32	(intersector\$ or multisector\$ or jointsector\$.ti,ab.
33	(interagenc\$ or multiagenc\$ or jointagenc\$.ti,ab.
34	(interprovider? or multiprovider? or jointprovider?).ti,ab.
35	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
36	(interprofession\$ or multiprofession\$ or jointprofession\$.ti,ab.
37	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$).ti,ab.
38	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$).ti,ab.
39	or/27-38
40	(HEALTH SERVICES/ or CHILD HEALTH SERVICES/ or ADOLESCENT HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or HOME CARE SERVICES/ or HEALTH SERVICES FOR PEOPLE WITH DISABILITIES/ or MENTAL HEALTH SERVICES/ or NURSING SERVICES/ or exp HEALTH PERSONNEL/) and (exp SOCIAL WORK/ or SOCIAL WORK, PSYCHIATRIC/ or SOCIAL WORKERS/)
41	(HEALTH SERVICES/ or CHILD HEALTH SERVICES/ or ADOLESCENT HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or HOME CARE SERVICES/ or HEALTH SERVICES FOR PEOPLE WITH DISABILITIES/ or MENTAL HEALTH SERVICES/ or NURSING SERVICES/ or exp HEALTH PERSONNEL/) and (EDUCATION/ or exp EDUCATION, SPECIAL/ or SCHOOLS/ or SCHOOL HEALTH SERVICES/ or SCHOOLS, NURSERY/ or exp NURSERIES/ or CHILD DAY CARE CENTERS/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or SCHOOL TEACHERS/)
42	(exp SOCIAL WORK/ or SOCIAL WORK, PSYCHIATRIC/ or SOCIAL WORKERS/) and (EDUCATION/ or exp EDUCATION, SPECIAL/ or SCHOOLS/ or SCHOOL HEALTH SERVICES/ or SCHOOLS, NURSERY/ or exp NURSERIES/ or CHILD DAY CARE CENTERS/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or SCHOOL TEACHERS/)
43	or/40-42

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#	Searches
44	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
45	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
46	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
47	or/44-46
48	STATE MEDICINE/og [Organization & Administration]
49	CHILD HEALTH SERVICES/og [Organization & Administration]
50	ADOLESCENT HEALTH SERVICES/og [Organization & Administration]
51	EDUCATION/og [Organization & Administration]
52	exp EDUCATION, SPECIAL/og [Organization & Administration]
53	exp SOCIAL WORK/og [Organization & Administration]
54	or/48-53
55	*SOCIAL PARTICIPATION/
56	*PATIENT PARTICIPATION/
57	*LEISURE ACTIVITIES/
58	*RECREATION/
59	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.
60	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
61	((participat\$ or benefi\$) adj5 (education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
62	or/55-61
63	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
64	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
65	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
66	or/63-65
67	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
68	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
69	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.

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#	Searches
70	or/67-69
71	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
72	26 and (39 or 43 or 47 or 54) and 62
73	26 and 66
74	26 and 70
75	26 and (39 or 43 or 47 or 54) and 71
76	or/72-75
77	limit 76 to english language
78	limit 77 to yr="2000 -Current"
79	LETTER/
80	EDITORIAL/
81	NEWS/
82	exp HISTORICAL ARTICLE/
83	ANECDOTES AS TOPIC/
84	COMMENT/
85	CASE REPORT/
86	(letter or comment*).ti.
87	or/79-86
88	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
89	87 not 88
90	ANIMALS/ not HUMANS/
91	exp ANIMALS, LABORATORY/
92	exp ANIMAL EXPERIMENTATION/
93	exp MODELS, ANIMAL/
94	exp RODENTIA/
95	(rat or rats or mouse or mice).ti.
96	or/89-95
97	78 not 96

1

2 **Databases: Embase; and Embase Classic**

3 **Date of last search: 03/07/2020**

#	Searches
1	exp ADOLESCENT/
2	(adolescen\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$).ti,ab.
3	exp CHILD/
4	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
5	exp INFANT/
6	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
7	exp PEDIATRICS/
8	p?ediatric\$.ti,ab.
9	YOUNG ADULT/
10	young\$ adult?.ti,ab.
11	or/1-10
12	exp DISABLED PERSON/
13	exp MENTAL DISEASE/
14	INTELLECTUAL IMPAIRMENT/
15	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunc\$.ti.
16	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.
17	SHCN.ti,ab.
18	or/12-17
19	11 and 18
20	HANDICAPPED CHILD/
21	CSHCN.ti,ab.
22	"Education Health and Care plan?".ti,ab.
23	EHC plan?.ti,ab.
24	EHCP?.ti,ab.
25	or/19-24
26	PUBLIC RELATIONS/
27	INTERSECTORAL COLLABORATION/
28	INTEGRATED HEALTH CARE SYSTEM/
29	(interinstitution\$ or multiinstitution\$ or jointinstitution\$).ti,ab.
30	(interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$).ti,ab.
31	(intersector\$ or multisector\$ or jointsector\$).ti,ab.
32	(interagenc\$ or multiagenc\$ or jointagenc\$).ti,ab.

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#	Searches
33	(interprovider? or multiprovider? or jointprovider?).ti,ab.
34	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
35	(interprofession\$ or multiprofession\$ or jointprofession\$).ti,ab.
36	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$)).ti,ab.
37	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$)).ti.
38	or/26-37
39	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/)
40	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
41	(SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
42	or/39-41
43	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social\$ adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
44	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
45	(social\$ adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	*SOCIAL PARTICIPATION/
54	*PATIENT PARTICIPATION/
55	*LEISURE/
56	*RECREATION/
57	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.
58	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
59	((participat\$ or benefi\$) adj5 (education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
60	or/53-59
61	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
62	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
63	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead

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Supporting participation in education and social activities

#	Searches
	professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
64	or/61-63
65	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
66	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
67	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
68	or/65-67
69	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
70	25 and (38 or 42 or 46 or 52) and 60
71	25 and 64
72	25 and 68
73	25 and (38 or 42 or 46 or 52) and 69
74	or/70-73
75	limit 74 to english language
76	limit 75 to yr="2000 -Current"
77	letter.pt. or LETTER/
78	note.pt.
79	editorial.pt.
80	CASE REPORT/ or CASE STUDY/
81	(letter or comment*).ti.
82	or/77-81
83	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
84	82 not 83
85	ANIMAL/ not HUMAN/
86	NONHUMAN/
87	exp ANIMAL EXPERIMENT/
88	exp EXPERIMENTAL ANIMAL/
89	ANIMAL MODEL/
90	exp RODENT/
91	(rat or rats or mouse or mice).ti.
92	or/84-91
93	76 not 92

1

2 **Database: Health Management Information Consortium (HMIC)**

3 **Date of last search: 03/07/2020**

#	Searches
1	exp YOUNG PEOPLE/
2	(adolescenc\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$).ti,ab.
3	exp CHILDREN/
4	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
5	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
6	exp PAEDIATRICS/
7	p?ediatric\$.ti,ab.
8	YOUNG ADULTS/
9	young\$ adult?.ti,ab.
10	or/1-9
11	DISABLED PEOPLE/
12	exp DISABILITIES/
13	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunct\$).ti.
14	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.

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Supporting participation in education and social activities

#	Searches
15	SHCN.ti,ab.
16	or/11-15
17	10 and 16
18	CSHCN.ti,ab.
19	"Education Health and Care plan?".ti,ab.
20	EHC plan?.ti,ab.
21	EHCP?.ti,ab.
22	or/17-21
23	COLLABORATION/
24	exp INTERAGENCY COLLABORATION/
25	INTERPROFESSIONAL COLLABORATION/
26	COLLABORATIVE CARE/
27	INTEGRATED PROVIDERS/
28	INTEGRATED CARE/
29	INTERDISCIPLINARY SERVICES/
30	JOINT WORKING/
31	HEALTH & SOCIAL SERVICES INTERACTION/
32	COMMUNICATION/
33	HEALTH SERVICE PROVISION/
34	(interinstitution\$ or multiinstitution\$ or jointinstitution\$).ti,ab.
35	(interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$).ti,ab.
36	(intersector\$ or multisector\$ or jointsector\$).ti,ab.
37	(interagenc\$ or multiagenc\$ or jointagenc\$).ti,ab.
38	(interprovider? or multiprovider? or jointprovider?).ti,ab.
39	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
40	(interprofession\$ or multiprofession\$ or jointprofession\$).ti,ab.
41	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$)).ti,ab.
42	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$)).ti.
43	or/23-42
44	(HEALTH SERVICES/ or exp CHILD HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or exp MENTAL HEALTH SERVICES/ or NURSING CARE/ or exp HEALTH SERVICE STAFF/) and (exp SOCIAL WORK/ or SOCIAL WORK SERVICE/ or SOCIAL WORK PROFESSION/ or SOCIAL WORKERS/ or exp SOCIAL WORKER TEAMS/ or SOCIAL CARE/ or exp SOCIAL CARE SERVICES/ or SOCIAL SERVICES/ or SOCIAL SERVICES DEPARTMENTS/ or SUPPORTIVE SOCIAL WORK/)
45	(HEALTH SERVICES/ or exp CHILD HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or exp MENTAL HEALTH SERVICES/ or NURSING CARE/ or exp HEALTH SERVICE STAFF/) and (EDUCATION/ or PRIMARY EDUCATION/ or SECONDARY EDUCATION/ or exp SPECIAL EDUCATION/ or exp SCHOOLS/ or exp SCHOOL HEALTH SERVICES/ or exp NURSERIES/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or TEACHERS/)
46	(exp SOCIAL WORK/ or SOCIAL WORK SERVICE/ or SOCIAL WORK PROFESSION/ or SOCIAL WORKERS/ or exp SOCIAL WORKER TEAMS/ or SOCIAL CARE/ or exp SOCIAL CARE SERVICES/ or SOCIAL SERVICES/ or SOCIAL SERVICES DEPARTMENTS/ or SUPPORTIVE SOCIAL WORK/) and (EDUCATION/ or PRIMARY EDUCATION/ or SECONDARY EDUCATION/ or exp SPECIAL EDUCATION/ or exp SCHOOLS/ or exp SCHOOL HEALTH SERVICES/ or exp NURSERIES/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or TEACHERS/)
47	or/44-46
48	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social\$ adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
49	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
50	(social\$ adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
51	or/48-50
52	PARTICIPATION/
53	PATIENT PARTICIPATION/
54	LEISURE ACTIVITIES/
55	SOCIAL ACTIVITIES/
56	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.

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Supporting participation in education and social activities

#	Searches
57	((education\$ or school\$ or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
58	((participat\$ or benefi\$) adj5 (education\$ or school\$ or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
59	or/52-58
60	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
61	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
62	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
63	or/60-62
64	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
65	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
66	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
67	or/64-66
68	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
69	22 and (43 or 47 or 51) and 59
70	22 and 63
71	22 and 67
72	22 and (43 or 47 or 51) and 68
73	or/69-72
74	limit 73 to yr="2000 -Current"

1

2 **Database: Social Policy and Practice**

3 **Date of last search: 03/07/2020**

#	Searches
1	(adolescen\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$).ti,ab.
2	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
3	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
4	p?ediatric\$.ti,ab.
5	young\$ adult?.ti,ab.
6	or/1-5
7	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunct\$).ti.
8	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.
9	SHCN.ti,ab.
10	or/7-9
11	6 and 10
12	CSHCN.ti,ab.
13	"Education Health and Care plan?".ti,ab.

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Supporting participation in education and social activities

#	Searches
14	EHC plan?.ti,ab.
15	EHCP?.ti,ab.
16	or/11-15
17	((interinstitution\$ or multiinstitution\$ or jointinstitution\$).ti,ab.
18	((interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$).ti,ab.
19	((intersector\$ or multisector\$ or jointsector\$).ti,ab.
20	((interagenc\$ or multiagenc\$ or jointagenc\$).ti,ab.
21	((interprovider? or multiprovider? or jointprovider?).ti,ab.
22	((interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
23	((interprofession\$ or multiprofession\$ or jointprofession\$).ti,ab.
24	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$)).ti,ab.
25	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$)).ti.
26	or/17-25
27	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social\$ adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
28	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
29	(social\$ adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
30	or/27-29
31	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.
32	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
33	((participat\$ or benefi\$) adj5 (education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
34	or/31-33
35	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
36	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
37	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
38	or/35-37
39	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
40	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
41	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-

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#	Searches
	2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
42	or/39-41
43	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
44	16 and (26 or 30) and 34
45	16 and 38
46	16 and 42
47	16 and (26 or 30) and 43
48	or/44-47
49	limit 48 to yr="2000 -Current"

1

2 **Database: PsycInfo**

3 **Date of last search: 03/07/2020**

#	Searches
1	(adolescen\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$).ti,ab.
2	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
3	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
4	PEDIATRICS/
5	p?ediatric\$.ti,ab.
6	young\$ adult?.ti,ab.
7	or/1-6
8	DISORDERS/
9	exp DISABILITIES/
10	PHYSICAL DISORDERS/
11	exp SENSE ORGAN DISORDERS/
12	exp MENTAL DISORDERS/
13	exp COMMUNICATION DISORDERS/
14	SPECIAL NEEDS/
15	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunct\$).ti.
16	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.
17	SHCN.ti,ab.
18	or/8-17
19	7 and 18
20	CSHCN.ti,ab.
21	"Education Health and Care plan?".ti,ab.
22	EHC plan?.ti,ab.
23	EHCP?.ti,ab.
24	or/19-23
25	INTEGRATED SERVICES/
26	INTERDISCIPLINARY TREATMENT APPROACH/
27	(interinstitution\$ or multiinstitution\$ or jointinstitution\$).ti,ab.
28	(interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$).ti,ab.
29	(intersector\$ or multisector\$ or jointsector\$).ti,ab.
30	(interagenc\$ or multiagenc\$ or jointagenc\$).ti,ab.
31	(interprovider? or multiprovider? or jointprovider?).ti,ab.
32	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
33	(interprofession\$ or multiprofession\$ or jointprofession\$).ti,ab.
34	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$)).ti,ab.
35	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$)).ti.
36	or/25-35
37	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/)
38	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)

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#	Searches
39	(exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)
40	or/37-39
41	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social\$ adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
42	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
43	(social\$ adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
44	or/41-43
45	*PARTICIPATION/
46	*SOCIAL INTERACTION/
47	*CLIENT PARTICIPATION/
48	*LEISURE TIME/
49	*RECREATION/
50	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.
51	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
52	((participat\$ or benefi\$) adj5 (education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
53	or/45-52
54	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
55	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
56	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
57	or/54-56
58	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
59	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
60	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead

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#	Searches
	professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$)).ti,ab.
61	or/58-60
62	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
63	24 and (36 or 40 or 44) and 53
64	24 and 57
65	24 and 61
66	24 and (36 or 40 or 44) and 62
67	or/63-66
68	limit 67 to english language
69	limit 68 to yr="2000 -Current"
70	limit 69 to ("0100 journal" or "0110 peer-reviewed journal" or "0120 non-peer-reviewed journal")

1

2 **Database: Emcare**

3 **Date of last search: 03/07/2020**

#	Searches
1	exp ADOLESCENT/
2	(adolescenc\$ or teen\$ or youth\$ or young or juvenile? or minors or highschool\$).ti,ab.
3	exp CHILD/
4	(child\$ or schoolchild\$ or "school age" or "school aged" or preschool\$ or toddler\$ or kid? or kindergar\$ or boy? or girl?).ti,ab.
5	exp INFANT/
6	(infan\$ or neonat\$ or newborn\$ or baby or babies).ti,ab.
7	exp PEDIATRICS/
8	p?ediatric\$.ti,ab.
9	YOUNG ADULT/
10	young\$ adult?.ti,ab.
11	or/1-10
12	exp DISABLED PERSON/
13	exp MENTAL DISEASE/
14	INTELLECTUAL IMPAIRMENT/
15	(disable? or disabilit\$ or handicap\$ or retard\$ or disorder? or impair\$ or condition? or difficulty or difficulties or deficit? or dysfunct\$).ti.
16	((sever\$ or complex\$ or special or high) adj3 need?).ti,ab.
17	SHCN.ti,ab.
18	or/12-17
19	11 and 18
20	HANDICAPPED CHILD/
21	CSHCN.ti,ab.
22	"Education Health and Care plan?".ti,ab.
23	EHC plan?.ti,ab.
24	EHCP?.ti,ab.
25	or/19-24
26	PUBLIC RELATIONS/
27	INTERSECTORAL COLLABORATION/
28	INTEGRATED HEALTH CARE SYSTEM/
29	(interinstitution\$ or multiinstitution\$ or jointinstitution\$).ti,ab.
30	(interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$).ti,ab.
31	(intersector\$ or multisector\$ or jointsector\$).ti,ab.
32	(interagenc\$ or multiagenc\$ or jointagenc\$).ti,ab.
33	(interprovider? or multiprovider? or jointprovider?).ti,ab.
34	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
35	(interprofession\$ or multiprofession\$ or jointprofession\$).ti,ab.
36	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$)).ti,ab.
37	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$)).ti.
38	or/26-37
39	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/)
40	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
41	(SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or

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#	Searches
	SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
42	or/39-41
43	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social\$ adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$) or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
44	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
45	(social\$ adj5 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj5 (care or service? or department? or institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or policy or policies or collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partnership? or partnering or network\$ or inter or multi or joint\$ or across or share? or sharing or together or communicat\$ or barrier? or facilitat\$ or deliver\$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	*SOCIAL PARTICIPATION/
54	*PATIENT PARTICIPATION/
55	*LEISURE/
56	*RECREATION/
57	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 participat\$).ti.
58	((education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj3 activit\$).ti.
59	((participat\$ or benefi\$) adj5 (education\$ or school? or academic or social\$ or leisure or extracurricular or extra-curricular or recreation\$ or sport\$ or physical\$ or art\$ or creative) adj5 activit\$).ti,ab.
60	or/53-59
61	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 social\$ adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
62	((health\$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
63	(social\$ adj10 (educat\$ or school\$ or teach\$ or headmaster? or headmistress\$ or SENCO? or DfE?) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
64	or/61-63
65	((interinstitution\$ or multiinstitution\$ or jointinstitution\$ or interorgani?ation\$ or multiorgani?ation\$ or jointorgani?ation\$ or intersector\$ or multisector\$ or jointsector\$ or interagenc\$ or multiagenc\$ or jointagenc\$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession\$ or multiprofession\$ or jointprofession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
66	((inter or multi\$ or joint) adj3 (institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$) adj10 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or (respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$))).ti,ab.
67	((institution\$ or organi?ation\$ or sector\$ or agenc\$ or provider? or stakeholder? or profession\$ or care or service? or department\$) adj5 (collaborat\$ or coordinat\$ or co-ordinat\$ or cooperat\$ or co-operat\$ or integrat\$ or partner\$) adj5 (1-2-1 support or one-to-one support or personal\$ budget? or visual support or total communication or short break? or

#	Searches
	(respite adj3 (care or break?)) or holiday club? or named practitioner? or keyworker? or single point of contact or lead professional? or named coordinator? or transition worker? or ((arrangement? or link?) adj3 (third sector or community organi?ation\$ or charit\$)).ti,ab.
68	or/65-67
69	((promot\$ or optim\$ or facilitat\$ or enhanc\$ or support\$) adj3 participat\$).ti,ab.
70	25 and (38 or 42 or 46 or 52) and 60
71	25 and 64
72	25 and 68
73	25 and (38 or 42 or 46 or 52) and 69
74	or/70-73
75	limit 74 to english language
76	limit 75 to yr="2000 -Current"
77	letter.pt. or LETTER/
78	note.pt.
79	editorial.pt.
80	CASE REPORT/ or CASE STUDY/
81	(letter or comment*).ti.
82	or/77-81
83	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
84	82 not 83
85	ANIMAL/ not HUMAN/
86	NONHUMAN/
87	exp ANIMAL EXPERIMENT/
88	exp EXPERIMENTAL ANIMAL/
89	ANIMAL MODEL/
90	exp RODENT/
91	(rat or rats or mouse or mice).ti.
92	or/84-91
93	76 not 92

1

2 **Databases: Cochrane Central Register of Controlled Trials (CCTR); and**
3 **Cochrane Database of Systematic Reviews (CDSR)**

4 **Date of last search: 03/07/2020**

#	Searches
#1	[mh ^"ADOLESCENT"]
#2	[mh ^"MINORS"]
#3	(adolescen* or teen* or youth* or young or juvenile* or minors or highschool*):ti,ab
#4	[mh "CHILD"]
#5	(child* or schoolchild* or "school age" or "school aged" or preschool* or toddler* or kid* or kindergar* or boy* or girl*):ti,ab
#6	[mh "INFANT"]
#7	(infan* or neonat* or newborn* or baby or babies):ti,ab
#8	[mh "PEDIATRICS"]
#9	(pediatric* or paediatric*):ti,ab
#10	[mh ^"YOUNG ADULT"]
#11	"young\$ adult*":ti,ab
#12	#1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 or #11
#13	[mh "DISABLED PERSONS"]
#14	[mh "MENTAL DISORDERS"]
#15	[mh "COMMUNICATION DISORDERS"]
#16	[mh "INTELLECTUAL DISABILITY"]
#17	(disable* or disabilit* or handicap* or retard* or disorder* or impair* or condition* or difficulty or difficulties or deficit* or dysfunct*):ti
#18	((sever* or complex* or special or high) near/3 (need or needs)):ti,ab
#19	SHCN:ti,ab
#20	#13 or #14 or #15 or #16 or #17 or #18 or #19
#21	#12 and #20
#22	[mh ^"DISABLED CHILDREN"]
#23	CSHCN:ti,ab
#24	"Education Health and Care plan*":ti,ab
#25	EHC plan*:ti,ab
#26	EHCP*:ti,ab
#27	#21 or #22 or #23 or #24 or #25 or #26
#28	[mh ^"INTERINSTITUTIONAL RELATIONS"]
#29	[mh ^"INTERSECTORAL COLLABORATION"]
#30	[mh ^"DELIVERY OF HEALTH CARE, INTEGRATED"]

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#	Searches
#31	(interinstitution* or multiinstitution* or jointinstitution*):ti,ab
#32	(interorganisation* or interorganization* or multiorganisation* or multiorganization* or jointorganisation* or jointorganization*):ti,ab
#33	(intersector* or multisector* or jointsector*):ti,ab
#34	(interagenc* or multiagenc* or jointagenc*):ti,ab
#35	(interprovider* or multiprovider* or jointprovider*):ti,ab
#36	(interstakeholder* or multistakeholder* or jointstakeholder*):ti,ab
#37	(interprofession* or multiprofession* or jointprofession*):ti,ab
#38	((inter or multi or joint) near/3 (institution* or organisation* or organization* or sector* or agenc* or provider? or stakeholder? or profession*)):ti,ab
#39	((institution* or organisation* or organization* or sector* or agenc* or provider? or stakeholder? or profession* or care or service* or department*) near/5 (collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partner*)):ti
#40	#28 or #29 or #30 or #31 or #32 or #33 or #34 or #35 or #36 or #37 or #38 or #39
#41	([mh ^"HEALTH SERVICES"] or [mh ^"CHILD HEALTH SERVICES"] or [mh ^"ADOLESCENT HEALTH SERVICES"] or [mh ^"COMMUNITY HEALTH SERVICES"] or [mh ^"HOME CARE SERVICES"] or [mh ^"HEALTH SERVICES FOR PEOPLE WITH DISABILITIES"] or [mh ^"MENTAL HEALTH SERVICES"] or [mh ^"NURSING SERVICES"] or [mh ^"HEALTH PERSONNEL"]) and ([mh "SOCIAL WORK"] or [mh ^"SOCIAL WORK, PSYCHIATRIC"] or [mh ^"SOCIAL WORKERS"] or [mh ^"SOCIAL SUPPORT"])
#42	([mh ^"HEALTH SERVICES"] or [mh ^"CHILD HEALTH SERVICES"] or [mh ^"ADOLESCENT HEALTH SERVICES"] or [mh ^"COMMUNITY HEALTH SERVICES"] or [mh ^"HOME CARE SERVICES"] or [mh ^"HEALTH SERVICES FOR PEOPLE WITH DISABILITIES"] or [mh ^"MENTAL HEALTH SERVICES"] or [mh ^"NURSING SERVICES"] or [mh ^"HEALTH PERSONNEL"]) and ([mh ^EDUCATION] or [mh ^"EDUCATION, SPECIAL"] or [mh ^SCHOOLS] or [mh ^"SCHOOL HEALTH SERVICES"] or [mh ^"SCHOOLS, NURSERY"] or [mh NURSERIES] or [mh ^"CHILD DAY CARE CENTERS"] or [mh ^UNIVERSITIES] or [mh ^TEACHING] or [mh ^"REMEDIAL TEACHING"] or [mh ^"SCHOOL TEACHERS"])
#43	([mh "SOCIAL WORK"] or [mh ^"SOCIAL WORK, PSYCHIATRIC"] or [mh ^"SOCIAL WORKERS"] or [mh ^"SOCIAL SUPPORT"]) and ([mh ^EDUCATION] or [mh ^"EDUCATION, SPECIAL"] or [mh ^SCHOOLS] or [mh ^"SCHOOL HEALTH SERVICES"] or [mh ^"SCHOOLS, NURSERY"] or [mh NURSERIES] or [mh ^"CHILD DAY CARE CENTERS"] or [mh ^UNIVERSITIES] or [mh ^TEACHING] or [mh ^"REMEDIAL TEACHING"] or [mh ^"SCHOOL TEACHERS"])
#44	#41 or #42 or #43
#45	((health* or NHS or clinical or clinician* or medical or medic or medics or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/5 social* near/5 (care or service* or department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#46	((health* or NHS or clinical or clinician* or medical or medic or medics or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/5 (educat* or school* or teach* or headmaster* or headmistress* or SENCO or SENCOs or DfE*) near/5 (care or service* or department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#47	(social* near/5 (educat* or school* or teach* or headmaster* or headmistress* or SENCO or SENCOs or DfE*) near/5 (care or service* or department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#48	#45 or #46 or #47
#49	[mh ^"STATE MEDICINE"/og]
#50	[mh ^"CHILD HEALTH SERVICES"/og]
#51	[mh ^"ADOLESCENT HEALTH SERVICES"/og]
#52	[mh ^EDUCATION/og]
#53	[mh ^"EDUCATION, SPECIAL"/og]
#54	[mh ^"SOCIAL WORK"/og]
#55	#49 or #50 or #51 or #52 or #53 or #54
#56	[mh ^"SOCIAL PARTICIPATION"]
#57	[mh ^"PATIENT PARTICIPATION"]
#58	[mh ^"LEISURE ACTIVITIES"]
#59	[mh ^RECREATION]
#60	((education* or school* or academic or social* or leisure or extracurricular or extra-curricular or recreation* or sport* or physical* or art* or creative) near/3 participat*):ti
#61	((education* or school* or academic or social* or leisure or extracurricular or extra-curricular or recreation* or sport* or physical* or art* or creative) near/3 activit*):ti
#62	((participat* or benefi*) near/5 (education* or school* or academic or social* or leisure or extracurricular or extra-curricular or recreation* or sport* or physical* or art* or creative) near/5 activit*):ti,ab
#63	#56 or #57 or #58 or #59 or #60 or #61 or #62
#64	((health* or NHS or clinical or clinician* or medical or medic or medics or physician* or consultant* or nurse* or "general practitioner*" or GP or GPs or "occupational therapist*" or OT or OTs or "allied health professional*" or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/10 social* near/10 ("1-2-1 support" or "one-

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#	Searches
	to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#65	((health* or NHS or clinical or clinician* or medical or medic* or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/10 (educat* or school* or teach* or headmaster* or headmistress* or SENCO* or DfE*) near/10 ("1-2-1 support" or "one-to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#66	(social* near/10 (educat* or school* or teach* or headmaster* or headmistress* or SENCO* or DfE*) near/10 ("1-2-1 support" or "one-to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#67	#64 or #65 or #66
#68	((interinstitution* or multiinstitution* or jointinstitution* or interorganisation* or interorganization* or multiorganisation* or multiorganization* or jointorganisation* or jointorganization* or intersector* or multisector* or jointsector* or interagenc* or multiagenc* or jointagenc* or interprovider* or multiprovider* or jointprovider* or interstakeholder* or multistakeholder* or jointstakeholder* or interprofession* or multiprofession* or jointprofession*) near/10 ("1-2-1 support" or "one-to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#69	((inter or multi* or joint) near/3 (institution* or organisation* or organization* or sector* or agenc* or provider* or stakeholder* or profession*) near/10 ("1-2-1 support" or "one-to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#70	((institution* or organisation* or organization* or sector* or agenc* or provider* or stakeholder* or profession* or care or service* or department*) near/5 (collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partner*) near/5 ("1-2-1 support" or "one-to-one support" or "personal* budget*" or "visual support" or "total communication" or "short break*" or (respite near/3 (care or break*)) or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)):ti,ab
#71	#68 or #69 or #70
#72	((promot* or optim* or facilitat* or enhanc* or support*) near/3 participat*):ti,ab
#73	#27 and (#40 or #44 or #48 or #55) and #63
#74	#27 and #67
#75	#27 and #71
#76	#27 and (#40 or #44 or #48 or #55) and #72
#77	#73 or #74 or #75 or #76
#78	#73 or #74 or #75 or #76 with Cochrane Library publication date Between Jan 2000 and Jul 2020, in Cochrane Reviews
#79	#73 or #74 or #75 or #76 with Publication Year from 2000 to 2020, in Trials

1

2 **Database: Database of Abstracts of Reviews of Effects (DARE)**

3 **Date of last search: 03/07/2020**

#	Searches
1	MeSH DESCRIPTOR ADOLESCENT IN DARE
2	MeSH DESCRIPTOR MINORS IN DARE
3	((adolescen* or teen* or youth* or young or juvenile* or minors or highschool*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
4	MeSH DESCRIPTOR CHILD EXPLODE ALL TREES IN DARE
5	((child* or schoolchild* or "school age" or "school aged" or preschool* or toddler* or kid* or kindergar* or boy* or girl*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
6	MeSH DESCRIPTOR INFANT EXPLODE ALL TREES IN DARE
7	((infan* or neonat* or newborn* or baby or babies)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
8	MeSH DESCRIPTOR PEDIATRICS EXPLODE ALL TREES IN DARE
9	((pediatric* or paediatric*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
10	MeSH DESCRIPTOR YOUNG ADULT IN DARE
11	(("young* adult*")) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))

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#	Searches
12	#1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7 OR #8 OR #9 OR #10 OR #11
13	MeSH DESCRIPTOR DISABLED PERSONS EXPLODE ALL TREES IN DARE
14	MeSH DESCRIPTOR MENTAL DISORDERS EXPLODE ALL TREES IN DARE
15	MeSH DESCRIPTOR COMMUNICATION DISORDERS EXPLODE ALL TREES IN DARE
16	MeSH DESCRIPTOR INTELLECTUAL DISABILITY EXPLODE ALL TREES IN DARE
17	((disable* or disabilit* or handicap* or retard* or disorder* or impair* or condition* or difficulty or difficulties or deficit* or dysfunct*):TI) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
18	((((sever* or complex* or special or high) adj3 need*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS)))
19	#13 OR #14 OR #15 OR #16 OR #17 OR #18
20	#12 AND #19
21	MeSH DESCRIPTOR DISABLED CHILDREN IN DARE
22	((CSHCN)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
23	((("Education Health" adj2 "Care plan*")) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS)))
24	((("EHC plan*")) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS)))
25	((EHCP*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
26	#20 OR #21 OR #22 OR #23 OR #24 OR #25
27	MeSH DESCRIPTOR SOCIAL PARTICIPATION IN DARE
28	MeSH DESCRIPTOR PATIENT PARTICIPATION IN DARE
29	MeSH DESCRIPTOR LEISURE ACTIVITIES IN DARE
30	MeSH DESCRIPTOR RECREATION IN DARE
31	((participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or "keyworker*" or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*"):TI) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
32	#27 OR #28 OR #29 OR #30 OR #31
33	#26 AND #32

1

2 **Database: Health Technology Abstracts (HTA)**

3 **Date of last search: 03/07/2020**

#	Searches
1	MeSH DESCRIPTOR ADOLESCENT IN HTA
2	MeSH DESCRIPTOR MINORS IN HTA
3	(adolescen* or teen* or youth* or young or juvenile* or minors or highschool*) IN HTA
4	MeSH DESCRIPTOR CHILD EXPLODE ALL TREES IN HTA
5	(child* or schoolchild* or "school age" or "school aged" or preschool* or toddler* or kid* or kindergar* or boy* or girl*) IN HTA
6	MeSH DESCRIPTOR INFANT EXPLODE ALL TREES IN HTA
7	(infan* or neonat* or newborn* or baby or babies) IN HTA
8	MeSH DESCRIPTOR PEDIATRICS EXPLODE ALL TREES IN HTA
9	(pediatric* or paediatric*) IN HTA
10	MeSH DESCRIPTOR YOUNG ADULT IN HTA
11	("young* adult*") IN HTA
12	#1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7 OR #8 OR #9 OR #10 OR #11
13	MeSH DESCRIPTOR DISABLED PERSONS EXPLODE ALL TREES IN HTA
14	MeSH DESCRIPTOR MENTAL DISORDERS EXPLODE ALL TREES IN HTA
15	MeSH DESCRIPTOR COMMUNICATION DISORDERS EXPLODE ALL TREES IN HTA
16	MeSH DESCRIPTOR INTELLECTUAL DISABILITY EXPLODE ALL TREES IN HTA
17	(disable* or disabilit* or handicap* or retard* or disorder* or impair* or condition* or difficulty or difficulties or deficit* or dysfunct*):TI IN HTA
18	((sever* or complex* or special or high) adj3 need*) IN HTA
19	#13 OR #14 OR #15 OR #16 OR #17 OR #18
20	#12 AND #19
21	MeSH DESCRIPTOR DISABLED CHILDREN IN HTA
22	(CSHCN) IN HTA
23	((("Education Health" adj2 "Care plan*")) IN HTA
24	("EHC plan*") IN HTA
25	(EHCP*) IN HTA
26	#20 OR #21 OR #22 OR #23 OR #24 OR #25
27	MeSH DESCRIPTOR SOCIAL PARTICIPATION IN HTA
28	MeSH DESCRIPTOR PATIENT PARTICIPATION IN HTA
29	MeSH DESCRIPTOR LEISURE ACTIVITIES IN HTA
30	MeSH DESCRIPTOR RECREATION IN HTA
31	((participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or

#	Searches
	"named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*"):TI IN HTA
32	#27 OR #28 OR #29 OR #30 OR #31
33	#26 AND #32

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2
3
4

Databases: Applied Social Sciences Index & Abstracts (ASSIA); Social Services Abstracts; Sociological Abstracts; and ERIC (Education Resources Information Centre)

5 **Date of last search: 03/07/2020**

#	Searches
1	AB,TI(adolescen* OR teen* OR youth* OR young OR juvenile? OR minors OR highschool* OR child* OR schoolchild* OR "school age" OR "school aged" OR preschool* OR toddler* OR kid? OR kindergar* OR boy? OR girl? OR infan* OR neonat* OR newborn* OR baby OR babies OR p?ediatric* OR "young* adult?")
2	TI(disable? OR disabilit* OR handicap* OR retard* OR disorder? OR impair* OR condition? OR difficulty OR difficulties OR deficit? OR dysfunct* OR ((sever* OR complex* OR special OR high) NEAR/3 need?) OR SHCN OR CSHCN OR "Education Health and Care plan?" OR "EHC plan?" OR EHCP?)
3	AB,TI((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND social* AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?))
4	TI(interinstitution* OR multiinstitution* OR jointinstitution* OR interorgani?ation* OR multiorgani?ation* OR jointorgani?ation* OR intersector* OR multisector* OR jointsector* OR interagenc* OR multiagenc* OR jointagenc* OR interprovider* OR multiprovider* OR jointprovider* OR interstakeholder* OR multistakeholder* OR jointstakeholder* OR interprofession* OR multiprofession* OR jointprofession* OR service? OR collaborat* OR "care coordinat*" OR "coordinat* care" OR partnership? OR partnering OR network*)
5	TI((((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND social*) OR ((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)))
6	TI(participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*")
7	1 AND 2 AND 3 AND 6 Additional limits - Date: From January 2000 to July 2020
8	1 AND 2 AND 4 AND 6 Additional limits - Date: From January 2000 to July 2020
9	1 AND 2 AND 5 AND 6 Additional limits - Date: From January 2000 to July 2020
10	7 OR 8 OR 9

6
7

Database: British Education Index

8 **Date of last search: 03/07/2020**

#	Searches
1	TX(participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*") AND TX (adolescen* OR teen* OR youth* OR young OR juvenile? OR minors OR highschool* OR child* OR schoolchild* OR "school age" OR "school aged" OR preschool* OR toddler* OR kid? OR kindergar* OR boy? OR girl? OR infan* OR neonat* OR newborn* OR baby OR babies OR p#ediatric* OR "young* adult?") AND TI (disable? OR disabilit* OR handicap* OR retard* OR disorder? OR impair* OR condition? OR difficulty OR difficulties OR deficit? OR dysfunct* OR "sever* need?" OR "complex* need?" OR "special need?" OR "special educat* need?" OR "high need?" OR SHCN OR CSHCN OR "Education Health and Care plan?" OR "EHC plan?" OR EHCP?) AND TI (interinstitution* OR multiinstitution* OR jointinstitution* OR interorgani?ation* OR multiorgani?ation* OR jointorgani?ation* OR intersector* OR multisector* OR jointsector* OR interagenc* OR multiagenc* OR jointagenc* OR interprovider* OR multiprovider* OR jointprovider* OR interstakeholder* OR multistakeholder* OR jointstakeholder* OR interprofession* OR multiprofession* OR jointprofession* OR service? OR collaborat* OR "care coordinat*" OR "care co-ordinat*" OR "coordinat* care" OR "coordinat* care" OR partnership? OR partnering OR network*) Limiters - Publication Date: 20000101-20200731
2	TX(participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*") AND TX (adolescen* OR teen* OR youth* OR young OR juvenile? OR minors OR highschool* OR child* OR schoolchild* OR "school age" OR "school aged"

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#	Searches
1	OR preschool* OR toddler* OR kid? OR kindergar* OR boy? OR girl? OR infan* OR neonat* OR newborn* OR baby OR babies OR p#ediatric* OR "young* adult?") AND TI (disable? OR disabilit* OR handicap* OR retard* OR disorder? OR impair* OR condition? OR difficulty OR difficulties OR deficit? OR dysfunct* OR "sever* need?" OR "complex* need?" OR "special need?" OR "special educat* need?" OR "high need?" OR SHCN OR CSHCN OR "Education Health and Care plan?" OR "EHC plan?" OR EHCP?) AND TI (((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND social*) OR ((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)) OR (social* AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)))) Limiters - Publication Date: 20000101-20200731
3	1 or 2

1

2 **Database: CINAHL Plus (Cumulative Index to Nursing and Allied Health Literature)**

3

4 **Date of last search: 03/07/2020**

#	Searches
1	TI(participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*") AND TI (adolescen* OR teen* OR youth* OR young OR juvenile? OR minors OR highschool* OR child* OR schoolchild* OR "school age" OR "school aged" OR preschool* OR toddler* OR kid? OR kindergar* OR boy? OR girl? OR infan* OR neonat* OR newborn* OR baby OR babies OR p#ediatric* OR "young* adult?") AND TX (disable? OR disabilit* OR handicap* OR retard* OR disorder? OR impair* OR condition? OR difficulty OR difficulties OR deficit? OR dysfunct* OR "sever* need?" OR "complex* need?" OR "special need?" OR "special educat* need?" OR "high need?" OR SHCN OR CSHCN OR "Education Health and Care plan?" OR "EHC plan?" OR EHCP?) AND TI (interinstitution* OR multiinstitution* OR jointinstitution* OR interorgani?ation* OR multiorgani?ation* OR jointorgani?ation* OR intersector* OR multisector* OR jointsector* OR interagenc* OR multiagenc* OR jointagenc* OR interprovider* OR multiprovider* OR jointprovider* OR interstakeholder* OR multistakeholder* OR jointstakeholder* OR interprofession* OR multiprofession* OR jointprofession* OR service? OR collaborat* OR "care coordinat*" OR "care co-ordinat*" OR "coordinat* care" OR "coordinat* care" OR partnership? OR partnering OR network*) Limiters - Publication Date: 2000- 2020
2	TI(participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*") AND TX (adolescen* OR teen* OR youth* OR young OR juvenile? OR minors OR highschool* OR child* OR schoolchild* OR "school age" OR "school aged" OR preschool* OR toddler* OR kid? OR kindergar* OR boy? OR girl? OR infan* OR neonat* OR newborn* OR baby OR babies OR p#ediatric* OR "young* adult?") AND TI (disable? OR disabilit* OR handicap* OR retard* OR disorder? OR impair* OR condition? OR difficulty OR difficulties OR deficit? OR dysfunct* OR "sever* need?" OR "complex* need?" OR "special need?" OR "special educat* need?" OR "high need?" OR SHCN OR CSHCN OR "Education Health and Care plan?" OR "EHC plan?" OR EHCP?) AND TI (((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND social*) OR ((health* OR NHS OR clinical OR clinician? OR medical OR medic? OR physician? OR consultant? OR nurse? OR "general practitioner?" OR GP? OR "occupational therapist?" OR OT? OR "allied health professional?" OR AHP? OR "speech therapist?" OR "language therapist?" OR SLT?) AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)) OR (social* AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)))) Limiters - Publication Date: 2000- 2020
3	1 or 2

5

6 **Database: Social Sciences Citation Index (SSCI)**

7

Date of last search: 03/07/2020

#	Searches
# 1	TOPIC: ((adolescen* or teen* or youth* or young or juvenile\$ or minors or highschool*)) Indexes=SSCI Timespan=2000-2020
# 2	TOPIC: ((child* or schoolchild* or "school age" or "school aged" or preschool* or toddler* or kid\$ or kindergar* or boy\$ or girl\$)) Indexes=SSCI Timespan=2000-2020
# 3	TOPIC: ((infan* or neonat* or newborn* or baby or babies)) Indexes=SSCI Timespan=2000-2020
# 4	TOPIC: (p\$ediatric*) Indexes=SSCI Timespan=2000-2020
# 5	TOPIC: ("young* adult\$") Indexes=SSCI Timespan=2000-2020
# 6	#5 OR #4 OR #3 OR #2 OR #1 Indexes=SSCI Timespan=2000-2020
# 7	TITLE: ((disable\$ or disabilit* or handicap* or retard* or disorder\$ or impair* or condition\$ or difficulty or difficulties or deficit\$ or dysfunct*)) Indexes=SSCI Timespan=2000-2020

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#	Searches
# 8	TOPIC: (((sever* or complex* or special or high) near/3 need\$)) Indexes=SSCI Timespan=2000-2020
# 9	TOPIC: (SHCN) Indexes=SSCI Timespan=2000-2020
# 10	#9 OR #8 OR #7 Indexes=SSCI Timespan=2000-2020
# 11	#10 AND #6 Indexes=SSCI Timespan=2000-2020
# 12	TOPIC: (CSHCN) Indexes=SSCI Timespan=2000-2020
# 13	TOPIC: ("Education Health and Care plan\$") Indexes=SSCI Timespan=2000-2020
# 14	TOPIC: ("EHC plan\$") Indexes=SSCI Timespan=2000-2020
# 15	TOPIC: (EHCP\$) Indexes=SSCI Timespan=2000-2020
# 16	#15 OR #14 OR #13 OR #12 OR #11 Indexes=SSCI Timespan=2000-2020
# 17	TOPIC: (((health or healthcare or NHS or clinical or medical or medic or medics or nurse or nurses) near/5 social)) Indexes=SSCI Timespan=2000-2020
# 18	TOPIC: ((health or healthcare or NHS or clinical or medical or medic or medics or nurse or nurses) near/5 (education or educating or educator or educators or school or schools or teach or teaching or teachers)) Indexes=SSCI Timespan=2000-2020
# 19	TOPIC: ((social near/5 (education or educating or educator or educators or school or schools or teach or teaching or teachers))) Indexes=SSCI Timespan=2000-2020
# 20	#19 OR #18 OR #17 Indexes=SSCI Timespan=2000-2020
# 21	TITLE: (participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget*" or "visual support" or "total communication" or "short break*" or "respite care" or "respite break" or "holiday club*" or "named practitioner*" or keyworker* or "single point of contact" or "lead professional*" or "named coordinator*" or "transition worker*" or "third sector link*" or "community organisation link*" or "charity link*") Indexes=SSCI Timespan=2000-2020
# 22	#21 AND #20 AND #16 Indexes=SSCI Timespan=2000-2020

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2 **Database: Social Care Online**

3 **Date of last search: 03/07/2020**

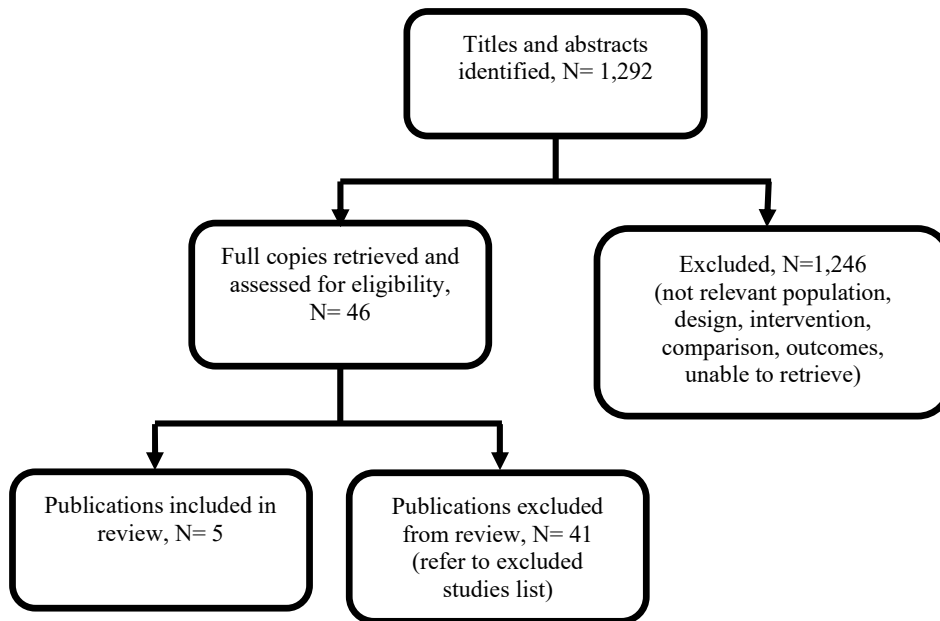
#	Searches
	Title: disabled or disability or disabilities or handicap or retard or disorder or impaired or impairment or difficulty or difficulties or deficit or dysfunction or "special need" or "complex need"
	AND All fields: child or children or schoolchild or schoolchildren or "school age" or "school aged" or preschool or toddler or kid or kindergarden or boy or girl or infant or neonate or newborn or baby or babies or pediatric or paediatric or "young people" or "young adults"
	AND Title: participate or participation or activity or activities or "1-2-1 support" or "one-to-one support" or "personal budget" or "visual support" or "total communication" or "short break" or "respite care" or "respite break" or "holiday club" or "named practitioner" or keyworker or "single point of contact" or "lead professional" or "named coordinator" or "transition worker" or "third sector link" or "community organisation link" or "charity link"
	AND Publication Year: 2000 2020

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1 **Appendix C – Effectiveness evidence study selection**
2 **Study selection for review question: What are the most effective ways that**
3 **health, social care and education services can work together to support**
4 **disabled children and young people with severe complex needs to participate**
5 **in and benefit from education and social activities?**

6 **Figure 1: Study selection flow chart**
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1 **Appendix D – Effectiveness evidence**

2 **Evidence tables for review question: What are the most effective ways that health, social care and education services can**
 3 **work together to support disabled children and young people with severe complex needs to participate in and benefit from**
 4 **education and social activities?**

5 **Table 4: Evidence tables**

Study details	Results and risk of bias assessment
<p>Full citation Asmus, Jennifer M., Carter, Erik W., Moss, Colleen K., Biggs, Elizabeth E., Bolt, Daniel M., Bom, Tiffany L., Bottema-Beutel, Kristen, Brock, Matthew E., Cattet, Gillian N., Cooney, Molly, Fesperman, Ethan S., Hochman, Julia M., Huber, Heartley B., Lequia, Jenna L., Lyons, Gregory L., Vincent, Lori B., Weir, Katie, Asmus, Carter Carter Carter Carter Cohen de Boer Farmer Feldman Fryxell Gardner Giangreco Gresham Haring Hochman Hughes Kamps Kennedy Kennedy Kleinert Koegel Koegel Koegel Laursen Nowicki Raudenbush Raudenbush Rubin Shalev Strain Wagner Webster, Efficacy and social validity of peer network interventions for high school students with severe disabilities, American Journal on Intellectual and Developmental Disabilities, 122, 118-137, 2017</p> <p>Ref Id 1219358</p> <p>Country/ies where the study was carried out USA</p> <p>Study type RCT</p> <p>Study dates 2011 to 2013</p> <p>Inclusion criteria Qualified for state's alternate assessment for significant cognitive impairment</p>	<p>Results</p> <p>Peer support network Participation and inclusion: Number of school activities involved in (reported by teachers) Peer network: M=0.74, SD=0.64, N=47 versus Control: M=0.79, SD=0.74, N=48</p> <p>Positive social relationships: Number of social contact gains (reported by teachers) Peer network: M=3.15, SD=1.74*, N=47 versus Control: M=0.73, SD=1.74*, N=48</p> <p>Positive social relationships: Number of friendship gains (reported by teachers) Peer network: M=3.51, SD=2.09*, N=47 versus Control: M=0.60, SD=2.09*, N=48</p> <p>Developmental progress: Social skills Effect size for difference between peer network and control group: Cohen's d=-0.13, N=95†</p> <p>*Pooled standard deviations calculated from mean difference and Cohen's d. †Insufficient information available to calculate mean and SD.</p> <p>1. Bias arising from the randomisation process (Low/High/Some concerns)</p>

Study details	Results and risk of bias assessment
<p>and/or receiving special education for intellectual disability or autism; enrolled in at least one general education class (with paraprofessional or special educator support).</p> <p>Exclusion criteria No additional criteria reported.</p> <p>Patient characteristics Intervention group (Peer network): n=47 Age: Not reported Grade: n=11 (23.4%) 9th; n=18 (37.3%); n=10 (21.6%); n=8 (23.5%) Gender: n=30 (63.8%) male; n=17 (36.3%) female Race/ethnicity: n=34 (72.3%) European American; n=6 (12.8%) African American; n=1 (2.1%) Asian American; n=4 (8.5%) Hispanic or Latino/a Disability: n=22 (46.8%) Autism; n=21 (44.7%) intellectual disability; n=3 (6.4%) Autism and intellectual disability</p> <p>Control group (standard practice): n=48 Age: Not reported Grade: n=9 (18/8%) 9th; n=19 (39.6%) 10th; n=15 (31.3%) 11th; n=5 (10.4%) 12th Gender: n=33 (68.8%) male; n=16 (31.2%) female Race/ethnicity: n=32 (66.7%) European American; n=8 (16.7%) African American; n=4 (8.3%) Asian American; n=1 (2.1%) Native or Alaskan American Disability: n=17 (35.4%) Autism; n=21 (44.7%) intellectual disability; n=3 (6.3%) Autism and intellectual disability</p> <p>Interventions Peer networks: Group of three to six peers without disabilities who formed a social network for each student. Network meetings were facilitated by school staff, occurred approximately once a week for up to one semester. Network meetings included social interactions around a shared activity and planning for other social contact between network meetings.</p>	<p>Some concerns: No information was provided about randomisation methods (other than students were assigned randomly assigned to each condition).</p> <p>2. Bias arising due to deviations from intended interventions (Low/High/Some concerns) Some concerns: Low concerns for effect of assignment: participants, and people delivering intervention, aware of assigned intervention; High concerns for effect of adhering: not enough information to judge whether non-protocol interventions were balanced or whether non-adherence affected outcomes. No estimate of effect of adhering to intervention.</p> <p>3. Bias due to missing outcome data (Low/High/Some concerns) Low risk: Outcome data available for all participants;</p> <p>4. Bias in measurement of the outcome (Low/High/Some concerns) High risk: Likely that assessment of outcome would have been affected by knowledge of intervention.</p> <p>5. Bias in selection of the reported result (Low/High/Some concerns) Some concerns: Unclear if trial was analysed in accordance with a pre-specified plan.</p> <p>Overall risk of bias (Low/High/Some concerns) High risk: The study is judged to be at high risk of bias in at least one domain.</p> <p>Source of funding Not industry funded.</p> <p>Other information Could not include parent-reported outcomes or time 3 and 4 outcomes as the number of people with data in each arm was not reported.</p>

Study details	Results and risk of bias assessment
<p>Control (standard practice): Special education services were provided as stated in individualised education programs. No peer-mediated interventions were introduced.</p> <p>Follow-up Data was collected at 4 time points: pre-intervention (start of semester), post intervention (end of semester), one semester later, two semesters later.</p>	
<p>Full citation Bent, N., Tennant, A., Swift, T., Posnett, J., Scuffham, P., Chamberlain, M. A., Team approach versus ad hoc health services for young people with physical disabilities: a retrospective cohort study, Lancet (London, England), 360, 1280-6, 2002</p> <p>Ref id 1094975</p> <p>Country/ies where the study was carried out UK</p> <p>Study type Retrospective cohort study</p> <p>Study dates 1999</p> <p>Inclusion criteria People with cerebral palsy, spina bifida, traumatic brain injury or degenerative neuromuscular disease born between 1978 and 1982.</p> <p>Exclusion criteria Moderate or severe learning disability.</p>	<p>Results</p> <p>Multidisciplinary team Participation and inclusion: Participation restriction (measured by London Handicap Scale; 0 to 100; better outcomes indicated by higher scores) YAT: Median=81.5, IQR=66.5-91.5), N=119 versus Ad-hoc: Median=68.1, IQR=49.9-82.0, N=135</p> <p>1. Bias due to confounding (Low/Moderate/Serious/Critical/No information) Serious - at least one known important domain was not appropriately measured, or not controlled for.</p> <p>2. Bias in selection of participants into the study (Low/Moderate/Serious/Critical/No information) Serious - selection into the study may have been related to intervention and outcomes and this could not be adjusted for in analyses and start of follow and start of intervention do not coincide.</p> <p>3. Bias in classification of interventions (Low/Moderate/Serious/Critical/No information) Serious - intervention status is not well defined</p> <p>4. Bias due to deviations from intended interventions (Low/Moderate/Serious/Critical/No information) No information - No information is reported on whether there is deviation from</p>

Study details	Results and risk of bias assessment
<p>Patient characteristics N=254 Age (mean; SD; range): 20.4; 2.3; 17 to 28 years Gender: n=134 (52.8%) male; n=120 (47.2%) female Communication difficulties: n=58 (23%)</p> <p>Interventions Young Adult Team services (YAT): Authors only report a definition of YATs (Multidisciplinary specialist teams developed to facilitate transition from child to adults services). They do not provide a description of actual YATs included in the current study.</p> <p>Ad-hoc services: Authors only report a definition of ad-hoc services (Individual professionals working in isolation with ad-hoc links between professionals/services). They do not provide a description of actual ad-hoc services included in the current study.</p> <p>Follow-up Not applicable.</p>	<p>the intended intervention.</p> <p>5. Bias due to missing data (Low/Moderate/Serious/Critical/No information) Low - proportions of missing participants were similar across intervention groups.</p> <p>6. Bias in measurement of outcomes (Low/Moderate/Serious/Critical/No information) Low - the methods of outcome assessment were comparable across intervention groups and the outcome assessors were unaware of the intervention received by study participants and any error in measuring the outcome is unrelated to intervention status.</p> <p>7. Bias in selection of the reported result (Low/Moderate/Serious/Critical/No information) Moderate - there is no indication of selection of the reported analysis from among multiple analyses.</p> <p>Overall risk of bias (Low/Moderate/Serious/Critical/No information) Serious - The study is judged to be at serious risk of bias in at least one domain, but not at critical risk of bias in any domain.</p> <p>Source of funding Not industry funded.</p> <p>Other information Population is indirect as it included people aged up to 28 years. Outcome is indirect as participation is not limited to education and social activities.</p>
<p>Full citation George, Cheryl L., Oriol, Kathryn N., Blatt, Philip J., Marchese, Victoria, Impact of a community-based exercise program on children and adolescents with disabilities, Journal of allied health, 40, e55-60, 2011</p>	<p>Results 1:1 support</p>

Study details	Results and risk of bias assessment
<p>Ref Id 1280275</p> <p>Country/ies where the study was carried out USA</p> <p>Study type Before and after study*†</p> <p>*Overall study design was a quasi-cluster RCT. However, data for outcome of interest (positive social interactions) was only available for the intervention group. †Comparison between first and second half of intervention rather than before and after intervention</p> <p>Study dates Not reported</p> <p>Inclusion criteria Children and young people with disabilities aged 5 to 21 years who could move about with or without an assistive device.</p> <p>Exclusion criteria No additional criteria reported.</p> <p>Patient characteristics N=10* Age (mean; range): 12 years; 5 to 19 Gender: Not reported Diagnosis: n=4 (40%) autism; n=2 (20%) spina bifida; n=1 (10%) Down syndrome; n=1 (10%) cerebral palsy; n=1 (10%) Noonan's syndrome</p>	<p>Positive social relationships: Number of positive social interactions during group activity 2nd half: M=8.3, 95% CI=3.6 to 13.0, N=10 versus 1st half: M=1.4, 95% CI=0.3 to 2.4, N=10</p> <p>Positive social relationships: Number of positive social interactions during track activity 2nd half: M=5.2, 95% CI=2.7 to 7.6, N=10 versus 1st half: M=3.7, 95% CI=1.4 to 6.1, N=10</p> <p>Positive social relationships: Number of positive social interactions during stretching activity 2nd half: M=1.1, 95% CI=0.4 to 1.9, N=10 versus 1st half: M=1.1, 95% CI=0.2 to 2.1, N=10</p> <p>Positive social relationships: Number of positive social interactions during fitness centre activity 2nd half: M=3.6, 95% CI=1.8 to 5.4, N=10 versus 1st half: M=3.7, 95% CI=2.0 to 5.3, N=10</p> <p>1. Random sequence generation High risk, controlled before-after study - no randomisation</p> <p>2. Allocation concealment High risk, controlled before-after study - no randomisation</p> <p>3. Baseline outcome measurements similar Unclear risk, no baseline data presented for outcomes of interest</p> <p>4. Baseline characteristics similar Low risk, only one baseline measurement was taken</p> <p>5. Incomplete outcome data</p>

Study details	Results and risk of bias assessment
<p>*An additional 9 children and young people were included in the control group but their characteristics were not extracted as outcome of interest is only reported for the experimental group</p> <p>Interventions Fitness program: 8-week fitness program involving: 1) supervised exercise 2 nights per week ran by physical therapy and special education students (comprising warm-up, stretching, group activities, cardiovascular activity and strength training); 2) home exercise program to occur on the nights when supervised exercise was not happening; and 3) parent education about exercise and nutrition. All activities were adapted to the individual needs of the participants.</p> <p>Follow-up Comparative data presented for the first and second half (4-week period each) of the program.</p>	<p>Low risk, no missing outcome data</p> <p>6. Knowledge of the allocated interventions adequately prevented during the study High risk, outcomes were not assessed blindly</p> <p>7. Protection against contamination High risk, control group was receiving the intervention as comparison is between first and second half of the program</p> <p>8. Selective outcome reporting Low risk, all outcomes reported sufficiently</p> <p>9. Other risks of bias High risk, no separate control group (first half outcomes act as control group for second half outcomes)</p> <p>Source of funding No sources of funding reported.</p> <p>Other information</p>
<p>Full citation Hoehne, C., Baranski, B., Benmohammed, L., Bienstock, L., Menezes, N., Margolese, N., Anaby, D., Changes in overall participation profile of youth with physical disabilities following the prep intervention, International Journal of Environmental Research and Public Health, 17, 1-18, 2020</p> <p>Ref Id 1272106</p> <p>Country/ies where the study was carried out Canada</p>	<p>Results</p> <p>1:1 support Participation and inclusion: Frequency of participation at home (measured by PEM-CY; scale of 0 [never] to 7 [daily]) After PREP: M=3.05, SD=1.02, N=20 versus Before PREP: M=5.43, SD=1.11, N=20</p> <p>Participation and inclusion: Frequency of participation at school (measured by PEM-CY; scale of 0 [never] to 7 [daily]) After PREP: M=3.05, SD=1.02, N=20 versus Before PREP: M=2.84, SD=1.13, N=20</p>

Study details	Results and risk of bias assessment
<p>Study type Before and after study</p>	<p>Participation and inclusion: Frequency of participation in the community (measured by PEM-CY; scale of 0 [never] to 7 [daily]) After PREP: M=2.15, SD=0.78, N=20 versus Before PREP: M=1.68, SD=0.91, N=20</p>
<p>Study dates Not reported</p>	
<p>Inclusion criteria Youth with mobility restrictions (with or without cognitive and/or communication impairments).</p>	<p>Participation and inclusion: Diversity of participation at home (measured by PEM-CY; scale of 0 to 10; higher scores indicate participating in more activities) After PREP: M=9.00, SD=1.45, N=20 versus Before PREP: M=9.20, SD=1.24, N=20</p>
<p>Exclusion criteria Within the first year after a severe brain injury or within the first 4 months following orthopaedic surgery.</p>	<p>Participation and inclusion: Diversity of participation at school (measured by PEM-CY; scale of 0 to 5; higher scores indicate participating in more activities) After PREP: M=3.10, SD=1.25, N=20 versus Before PREP: M=3.05, SD=0.94, N=20</p>
<p>Patient characteristics N=20 Age (mean; standard deviation; range): 14.4 years; 1.82; 12 to 18 Gender: n=10 (50%) male; n=10 (50%) female Conditions: n=15 (70%) orthopaedic/movement impairments; n=10 (50%) speech/language impairments; n=5 (25%) intellectual delay; n=5 (25%) visual impairment Number of functional issues (mean; SD; range): 5.1; 3.01; 1 to 11</p>	<p>Participation and inclusion: Diversity of participation in the community (measured by PEM-CY; scale of 0 to 10; higher scores indicate participating in more activities) After PREP: M=5.75, SD=1.83, N=20 versus Before PREP: M=4.50, SD=2.44, N=20</p>
<p>Interventions Pathways and Resources for Engagement and Participation (PREP): 12 week intervention led by occupational therapist with the aim of improving participation by changing aspects of the environment and engaging/coaching youth and their parents. Comprises five steps: 1) make goals, 2) map out a plan; 3) make it happen; 4) measure process and outcomes; and 5) move forward. A participation team, comprising family members, teachers, community instructors and volunteers, assisted in execution of the plan.</p>	<p>Participation and inclusion: Level of involvement at home (measured by PEM-CY; scale of 1 [minimally involved] to 5 [very involved]) After PREP: M=3.97, SD=0.82, N=20 versus Before PREP: M=4.06, SD=0.48, N=20</p> <p>Participation and inclusion: Level of involvement at school (measured by PEM-CY; scale of 1 [minimally involved] to 5 [very involved]) After PREP: M=3.55, SD=1.17, N=20 versus Before PREP: M=3.70, SD=1.08, N=20</p>
<p>Follow-up Data collected at start of baseline period (which lasted 4 weeks) and 4 weeks</p>	<p>Participation and inclusion: Level of involvement in the community (measured</p>

Study details	Results and risk of bias assessment
<p>after the intervention (20 weeks post-baseline measurement).</p>	<p>by PEM-CY; scale of 1 [minimally involved] to 5 [very involved]) After PREP: M=3.97, SD=0.82, N=20 versus Before PREP: M=3.73, SD=1.15, N=20</p> <p>1. Random sequence generation High risk, controlled before-after study - no randomisation</p> <p>2. Allocation concealment High risk, controlled before-after study - no randomisation</p> <p>3. Baseline outcome measurements similar Low risk, one baseline measurement was taken before the start of the intervention</p> <p>4. Baseline characteristics similar Low risk, only one baseline measurement was taken</p> <p>5. Incomplete outcome data High risk, 29% of sample excluded due to missing assessments/data</p> <p>6. Knowledge of the allocated interventions adequately prevented during the study High risk, outcomes were not assessed blindly</p> <p>7. Protection against contamination Low risk, controlled before-after study so control group was pre-intervention</p> <p>8. Selective outcome reporting Low risk, all outcomes reported sufficiently</p> <p>9. Other risks of bias High risk, no separate control group (pre-intervention scores act as control group for post-intervention scores)</p>

Study details	Results and risk of bias assessment
	<p>Source of funding Not industry funded.</p> <p>Other information</p>
<p>Full citation Selanikyo, Efrat, Yalon-Chamovitz, Shira, Weintraub, Naomi, Enhancing classroom participation of students with intellectual and developmental disabilities, Canadian journal of occupational therapy. Revue canadienne d'ergotherapie, 84, 76-86, 2017</p> <p>Ref Id 1272335</p> <p>Country/ies where the study was carried out Israel</p> <p>Study type Cluster RCT</p> <p>Study dates Not reported</p> <p>Inclusion criteria Students with moderate intellectual and developmental disability (IDD) who had been attending one of two special education schools in Israel for at least a year.</p> <p>Exclusion criteria Unable to move around the classroom without assistance; secondary diagnosis of autism or sensory impairments.</p> <p>Patient characteristics Intervention group (Co-PID & In-Service): n=35</p>	<p>Results</p> <p>1:1 support (Additional classification relevant to review question on communication and training - Implementation strategies: Interventions targeted at health, social care and education workers: Ongoing inter agency competency/clinical supervision versus educational meetings)</p> <p>Participation and inclusion: Communication in the classroom (measured by the SOSPiC; scale of 0 [does not participate] to 4 [participates fully]) Co-PID & In-service: M=2.42, SD=0.73, N=35 versus In-service: M=1.92, SD=0.88, N=34</p> <p>Participation and inclusion: Choosing in the classroom (measured by the SOSPiC; scale of 0 [does not participate] to 4 [participates fully]) Co-PID & In-service: M=3.02, SD=0.83, N=35 versus In-service: M=1.78, SD=1.04, N=34</p> <p>Participation and inclusion: Initiating in the classroom (measured by the SOSPiC; scale of 0 [does not participate] to 4 [participates fully]) Co-PID & In-service: M=1.40 SD=0.71, N=35 versus In-service: M=0.72, SD=2.98, N=34</p> <p>1. Bias arising from the randomisation process (Low/High/Some concerns) Some concerns: No information was provided about randomisation methods (other than that the schools were assigned randomly assigned to each condition). Significant differences in students' initiating behaviour at baseline.</p> <p>2. Bias arising due to deviations from intended interventions (Low/High/Some concerns)</p>

Study details	Results and risk of bias assessment
<p>Age (mean; standard deviation; range): 12.76 years; 3.51; 8 to 20 Gender: n=25 (73%) male; n=10 (27%) female</p> <p>Control group (In-service): n=34 Age (mean; standard deviation; range): 13.29 years; 3.50; 8 to 20 Gender: n=15 (57%) male; n=19 (43%) female</p> <p>Interventions Collaborative Consultation Participation of Students With Intellectual and Developmental Disabilities (Co-PID) & In-service: In addition to the workshop described below, teachers participated in a 20-week collaborative consultation model which included joint formulation between the occupational therapist and teachers of classroom goals for each student and activities that could enable students to meet these goals. These activities were then executed by the teachers. Occupational therapists modelled desired behaviour for encouraging classroom participation, encouraged the teachers' efforts, provided written resources about encouraging participation, and reframed student's perceived negative behaviour in a more positive way.</p> <p>In-service: 3-hour workshop ran by an occupational therapist that aimed to expand teachers' knowledge and awareness of participation of students with moderate IDD and brainstorm ways of implementing the knowledge in the classroom.</p> <p>Follow-up Data collected at two time points (1 to 2 weeks apart) in the two months following the intervention</p>	<p>Some concerns: Low concerns for effect of assignment: participants, and people delivering intervention, aware of assigned intervention; High concerns for effect of adhering: not enough information to judge whether non-protocol interventions were balanced or whether non-adherence affected outcomes. No estimate of effect of adhering to intervention.</p> <p>3. Bias due to missing outcome data (Low/High/Some concerns) Low risk: Outcome data available for all participants.</p> <p>4. Bias in measurement of the outcome (Low/High/Some concerns) High risk: Likely that assessment of outcome would have been affected by knowledge of intervention.</p> <p>5. Bias in selection of the reported result (Low/High/Some concerns) Some concerns: Unclear if trial was analysed in accordance with a pre-specified plan.</p> <p>Overall risk of bias (Low/High/Some concerns) High risk: The study is judged to be at high risk of bias in at least one domain.</p> <p>Source of funding Not industry funded.</p> <p>Other information Population is indirect as those with moderate IDD may not have severe, complex needs in all three areas. Interventions have additionally been classified according to intervention framework used for the review question on communication and training practices due to the nature of the interventions.</p>

1 Co-PID: Collaborative Consultation Participation of Students With Intellectual and Developmental Disabilities; IDD: intellectual and developmental disability; IQR: interquartile
2 range; M: mean; N: number of participants; PEM:CY: Participation and Environment Measure - Children and Youth; PREP: Pathways and Resources for Engagement and
3 Participation; RCT: randomised controlled trial; RoB: risk of bias; SD: standard deviation; SOSPiC: Structured Observations of Students Participation in Classrooms; YAT:
4 young adult team

5 ***Appendix E – Forest plots***

6 **Forest plots for review question: What are the most effective ways that health,**
7 **social care and education services can work together to support disabled**
8 **children and young people with severe complex needs to participate in and**
9 **benefit from education and social activities?**

10 No meta-analysis was conducted for this review question and so there are no forest
11 plots.

1 **Appendix F – GRADE tables**

2 **GRADE tables for review question: What are the most effective ways that health, social care and education services can**
 3 **work together to support disabled children and young people with severe complex needs to participate in and benefit from**
 4 **education and social activities?**

5 **Table 5: Evidence profile for comparison 1: 1:1 support versus control**

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	1:1 support	Control	Relative (95% CI)	Absolute		
Participation and inclusion: Frequency of participation (measured by PEM-CY) - At home (range of scores: 0-7; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	20	20	-	MD 2.38 lower (3.04 to 1.72 lower)	VERY LOW	CRITICAL
Participation and inclusion: Frequency of participation (measured by PEM-CY) - At school (range of scores: 0-7; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	serious ²	none	20	20	-	MD 0.21 higher (0.46 lower to 0.88 higher)	VERY LOW	CRITICAL
Participation and inclusion: Frequency of participation (measured by PEM-CY) - In the community (range of scores: 0-7; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	serious ³	none	20	20	-	MD 0.47 higher (0.06 lower to 1 higher)	VERY LOW	CRITICAL
Participation and inclusion: Diversity of participation (measured by PEM-CY) - At home (range of scores: 0-10; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ⁷	none	20	20	-	MD 0.2 lower (1.04 lower to 0.64 higher)	VERY LOW	CRITICAL
Participation and inclusion: Diversity of participation (measured by PEM-CY) - At school (range of scores: 0-5; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ⁸	none	20	20	-	MD 0.05 higher (0.64)	VERY LOW	CRITICAL

DRAFT FOR CONSULTATION

Supporting participation in education and social activities

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	1:1 support	Control	Relative (95% CI)	Absolute		
										lower to 0.74 higher)		
Participation and inclusion: Diversity of participation (measured by PEM-CY) - In the community (range of scores: 0-1; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴	none	20	20	-	MD 1.25 higher (0.09 lower to 2.59 higher)	VERY LOW	CRITICAL
Participation and inclusion: Level of involvement (measured by PEM-CY) - At home (range of scores: 1-5; Better indicated by higher values)												
1(Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ⁹	none	20	20	-	MD 0.09 lower (0.51 lower to 0.33 higher)	VERY LOW	CRITICAL
Participation and inclusion: Level of involvement (measured by PEM-CY) - At school (range of scores: 1-5; Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ¹⁰	none	20	20	-	MD 0.15 lower (0.85 lower to 0.55 higher)	VERY LOW	CRITICAL
Participation and inclusion: Level of involvement (measured by PEM-CY) - In the community (Better indicated by higher values)												
1 (Hoehne 2020)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁵	none	20	20	-	MD 0.24 higher (0.38 lower to 0.86 higher)	VERY LOW	CRITICAL
Participation and inclusion: Communication in the classroom (measured by SOSPiC) (range of scores: 0-4; Better indicated by higher values)												
1 (Selanikyo 2017)	randomised trials	very serious ¹ ₃	no serious inconsistency	serious ¹⁴	serious ¹⁵	none	35	34	-	MD 0.5 higher (0.12 to 0.88 higher)	VERY LOW	CRITICAL
Participation and inclusion: Choosing in the classroom (measured by SOSPiC) (range of scores: 0-4; Better indicated by higher values)												
1	randomised	very	no serious	serious ¹⁴	serious ¹⁶	none	35	34	-	MD 1.24	VERY	CRITICAL

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Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	1:1 support	Control	Relative (95% CI)	Absolute		
(Selanikyo 2017)	trials	serious ¹ ₃	inconsistency							higher (0.8 to 1.68 higher)	LOW	
Participation and inclusion: Initiating in the classroom (measured by SOSPIC) (range of scores: 0-4; Better indicated by higher values)												
1 (Selanikyo 2017)	randomised trials	very serious ¹ ₃	no serious inconsistency	serious ¹⁴	serious ¹⁵	none	35	34	-	MD 0.68 higher (0.35 lower to 1.71 higher)	VERY LOW	CRITICAL
Positive social relationships: Number of positive social interactions - Group activity (Better indicated by higher values)												
1 (George 2011)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	10	10	-	MD 6.9 higher (2.72 to 11.08 higher)	VERY LOW	CRITICAL
Positive social relationships: Number of positive social interactions - Track activity (Better indicated by higher values)												
1 (George 2011)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	serious ²	none	10	10	-	MD 1.5 higher (1.44 lower to 4.44 higher)	VERY LOW	CRITICAL
Positive social relationships: Number of positive social interactions - Stretching activity (Better indicated by higher values)												
1 (George 2011)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ³	none	10	10	-	MD 0 higher (0.99 lower to 0.99 higher)	VERY LOW	CRITICAL
Positive social relationships: Number of positive social interactions - Fitness centre activity (Better indicated by higher values)												
1 (George 2011)	observational studies	very serious ¹	no serious inconsistency	no serious indirectness	very serious ³	none	10	10	-	MD 0.1 lower (2.25 lower to 2.05 higher)	VERY LOW	CRITICAL

1 *CI: confidence interval; EPOC: Effective Practice and Organisation of Care; MD: mean difference; MID: minimally important difference; PEM-CY: Participation and Environment*
 2 *Measure - Children and Youth; RoB: risk of bias; SD: standard deviation; SOSPiC: Structured Observations of Students Participation in Classrooms*
 3 ¹ *Very serious risk of bias in the evidence contributing to the outcomes as per EPOC RoB tool for before and after studies*
 4 ² *95% CI crosses 1 MID (0.5x control group SD, for 'frequency of participation at school' = 0.57)*
 5 ³ *95% CI crosses 1 MID (0.5x control group SD, for 'frequency of participation in the community' = 0.46)*
 6 ⁴ *95% CI crosses 1 MID (0.5x control group SD, for 'diversity of participation in the community' = 1.22)*
 7 ⁵ *95% CI crosses 1 MID (0.5x control group SD, for 'level of involvement in the community' = 0.58)*
 8 ⁶ *95% CI crosses 1 MID (0.5x control group SD, for 'number of positive social interactions: track' = 1.61)*
 9 ⁷ *95% CI crosses 2 MIDs (0.5x control group SD, for 'diversity of participation at home' = 0.62)*
 10 ⁸ *95% CI crosses 2 MIDs (0.5x control group SD, for 'diversity of participation at school' = 0.47)*
 11 ⁹ *95% CI crosses 2 MIDs (0.5x control group SD, for 'level of involvement at home' = 0.24)*
 12 ¹⁰ *95% CI crosses 2 MIDs (0.5x control group SD, for 'level of involvement at school' = 0.54)*
 13 ¹¹ *95% CI crosses 2 MIDs (0.5x control group SD, for 'number of social interactions: stretching' = 0.63)*
 14 ¹² *95% CI crosses 2 MIDs (0.5x control group SD, for 'number of social interactions: fitness centre' = 1.19)*
 15 ¹³ *Very serious risk of bias in the evidence contributing to the outcomes as per RoB 2*
 16 ¹⁴ *Population is indirect*
 17 ¹⁵ *95% CI crosses 1 MID (0.5x control group SD, for 'communication in the classroom' = 0.44; for 'initiating in the classroom' = 1.49) and study provided insufficient information*
 18 *to adjust sample size for cluster design*
 19 ¹⁶ *Study provided insufficient information to adjust sample size for cluster design*

20 **Table 6: Evidence profile for comparison 2: Young adult teams versus ad-hoc services**

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	YAT	Ad-hoc	Relative (95% CI)	Absolute		
Participation and inclusion: Participation restriction (measured by London Handicap Scale) (range of scores: 0-100; Better indicated by higher values)												
1 (Bent 2002)	observational studies	very serious ¹	no serious inconsistency	very serious ²	serious ³	none	119	135	-	Median 13.4 higher (9.5 higher to 16.6 higher)	VERY LOW	CRITICAL

21 *CI: confidence interval; IQR: interquartile range; MID: minimally important difference; ROBINS-I: Risk Of Bias In Non-randomized Studies - of Interventions; YAT: young adult*
 22 *team*
 23 ¹ *Very serious risk of bias in the evidence contributing to the outcomes as per ROBINS-I*
 24 ² *Population and outcome is indirect*
 25 ³ *Serious imprecision due to sample size <400*

1 **Table 7: Evidence profile for comparison 3: Peer support network versus standard practice (no peer-mediated**
 2 **intervention)**

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Peer support network	Standard practice	Relative (95% CI)	Absolute		
Participation and inclusion: Number of school activities involved in (reported by teachers) (Better indicated by higher values)												
1 (Asmus 2017)	randomised trials	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	47	48	-	MD 0.05 lower (0.33 lower to 0.23 higher)	LOW	CRITICAL
Positive social relationships: Number of social contact gains (reported by teachers) (Better indicated by higher values)												
1 (Asmus 2017)	randomised trials	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	47	48	-	MD 2.42 higher (1.72 to 3.12 higher)	LOW	CRITICAL
Positive social relationships: Number of friendship gains (reported by teachers) (Better indicated by higher values)												
1 (Asmus 2017)	randomised trials	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	47	48	-	MD 2.91 higher (2.07 to 3.75 higher)	LOW	CRITICAL
Developmental progress: Social skills (Better indicated by higher values)												
1 (Asmus 2017)	randomised trials	very serious ¹	no serious inconsistency	no serious indirectness	very serious ²	none	47	48	-	SMD 0.13 lower (Distribution NR)	VERY LOW	IMPORTANT

3 *CI: confidence interval; MD: mean difference; NR: not reported; RoB: risk of bias; SMD: standardised mean difference*

4 ¹ *Very serious risk of bias in the evidence contributing to the outcomes as per RoB 2*

5 ² *Very serious imprecision due to sample size <200; no information provided about distribution around effect size*

1 ***Appendix G – Economic evidence study selection***

2 **Economic evidence study selection for review question: What are the most**
3 **effective ways that health, social care and education services can work**
4 **together to support disabled children and young people with severe complex**
5 **needs to participate in and benefit from education and social activities?**

6 One global search was undertaken – please see Supplement B for details on study
7 selection.

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1 ***Appendix H – Economic evidence tables***

2 **Economic evidence tables for review question: What are the most effective ways that health, social care and education**
3 **services can work together to support disabled children and young people with severe complex needs to participate in**
4 **and benefit from education and social activities?**

5 No evidence was identified which was applicable to this review question.

6

1 ***Appendix I – Economic model***

2 **Economic model for review question: What are the most effective ways that**
3 **health, social care and education services can work together to support**
4 **disabled children and young people with severe complex needs to participate**
5 **in and benefit from education and social activities?**

6 No economic analysis was conducted for this review question.

7

1 **Appendix J – Excluded studies**

2 **Excluded studies for review question: What are the most effective ways that**
 3 **health, social care and education services can work together to support**
 4 **disabled children and young people with severe complex needs to participate**
 5 **in and benefit from education and social activities?**

6 **Effectiveness studies**7 **Table 8: Excluded studies and reasons for their exclusion**

Study	Reason for Exclusion
Leisure activities during school break among children with learning disabilities: preference vs. performance, <i>British Journal of Learning Disabilities</i> , 34, 42-48, 2006	Study design/comparison: No relevant comparative data (comparisons based on age and gender)
Adair, B., Ullenhag, A., Keen, D., Granlund, M., Imms, C., The effect of interventions aimed at improving participation outcomes for children with disabilities: a systematic review, <i>Developmental Medicine and Child Neurology</i> , 57, 1093-1104, 2015	Population, intervention and county: Includes populations that are unlikely to have needs in all three areas (Developmental coordination disorder), interventions that do not involve joint working and non-OECD countries (Taiwan)
Anaby, Dana R., Campbell, Wenonah N., Missiuna, Cheryl, Shaw, Steven R., Bennett, Sheila, Khan, Sitara, Tremblay, Stephanie, Kalubi-Lukusa, Jean-Claude, Camden, Chantal, Golds,, Recommended practices to organize and deliver school-based services for children with disabilities: A scoping review, <i>Child: Care, Health and Development</i> , 45, 15-27, 2019	Study design, population and intervention: Includes non-empirical papers, populations without sever complex needs and interventions that do not involve joint working
Andrews, J., Falkmer, M., Girdler, S., Community participation interventions for children and adolescents with a neurodevelopmental intellectual disability: a systematic review, <i>Disability and Rehabilitation</i> , epub, 2014	Population and study design: Includes populations unlikely to have needs in all three areas (e.g., high functioning ASD) and single-subject experimental designs
Bassett-Gunter, R., Angevaare, K., Tomasone, J., Leo, J., Varughese, B., Langvee, J., Ginis, K. M., A systematic scoping review: Resources targeting the training and education of health and recreation practitioners to support physical activity among people with physical disabilities, <i>Disability and Health Journal</i> , 12, 542-550, 2019	Population: Adults or unspecified people with physical disabilities
Black, Lesley-Ann, et, al, Developing a person-centred support service for families caring for children with severe learning disabilities in rural and urban areas, <i>Journal of Intellectual Disabilities</i> , 14, 111-131, 2010	Study design: Qualitative
Boren, Taylor, et, al, Sweden's LSS and social integration: an exploration of the relationship between personal assistant type, activities, and participation for children with PIMD, <i>Journal of Policy and Practice in Intellectual Disabilities</i> , 13, 50-60, 2016	Intervention: Personal assistants. Does not involve joint-working
Brett, Jane, Complex needs: improving access to out-of-school activities, <i>Paediatric nursing</i> , 19, 36-9, 2007	Publication type: Overview and implementation of training package. No data on effectiveness
Bult, M. K., et, al, What influences participation in leisure activities of children and youth with	Study design: Intervention Studies including an intervention were excluded from the review

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Study	Reason for Exclusion
physical disabilities? A systematic review, <i>Research in Developmental Disabilities</i> , 32, 1521-1529, 2011	
Centre For, Excellence, Outcomes In, Children, Young People'S, Services, Improving the wellbeing of disabled children and young people through improving access to positive and inclusive activities: progress map summary number 5 version 1, 5p., 2009	Publication type and study design: Summary of qualitative research
Craston Meera, et al., Evaluation of the Special Educational Needs and Disability Pathfinder Programme: thematic report: collaborative working with health: research report, 26, 2014	Study design: Qualitative
Dugas, Eric, Moreton, Jean-Philippe, What choice of sports and physical activities within a learning perspective for youngsters with cognitive impairments or mental disorders?, <i>ALTER. European Journal of Disability Research</i> , 6, 39-56, 2012	Publication language: Non-English (French)
Egilson, Snaefridur, Hemmingsson, Helena, School participation of pupils with physical and psychosocial limitations: a comparison, <i>British Journal of Occupational Therapy</i> , 72, 144-152, 2009	Comparison: No relevant comparison. Comparison between children with physical and psychosocial disabilities
Greco, Veronica, et, al, An exploration of different models of multi-agency partnerships in key worker services for disabled children: effectiveness and costs, 206p., bibliog., 2005	Outcomes: No relevant outcomes reported
Heppe, E. C. M., Willemen, A. M., Kef, S., Schuengel, C., Improving social participation of adolescents with a visual impairment with community-based mentoring: results from a randomized controlled trial, <i>Disability and Rehabilitation</i> , 1-12	Population: CYP with visual impairment, excluding those with additional severe impairments. Unlikely to have needs in all three areas
Imms, C., Adair, B., Keen, D., Ullenhag, A., Rosenbaum, P., Granlund, M., Influencing participation outcomes for disabled children: A systematic review of conceptual challenges and intervention effects, <i>Developmental Medicine and Child Neurology</i> , 58, 26-27, 2016	Conference Abstract
In, Control, Report on the use of the Personal Outcomes Evaluation Tool (POET) for children with education health and care plans, 82, 2016	Study design: Survey with descriptive and qualitative data only
Keehner Engelke, M., Guttu, M., Warren, M. B., Swanson, M., School nurse case management for children with chronic illness: health, academic, and quality of life outcomes, <i>The Journal of school nursing : the official publication of the National Association of School Nurses</i> , 24, 205-214, 2008	Study design and outcomes: No comparative data for outcomes of interest
Liabo, Kirstin, et, al, A review of key worker systems for disabled children and the development of information guides for parents, children and professionals: a report for the Wales Office of Research and Development, 50p., 2001	Publication type: Narrative review
Maciver, Donald, Rutherford, Marion, Arakelyan,	Study design: Includes qualitative studies and

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Study	Reason for Exclusion
Stella, Kramer, Jessica M., Richmond, Janet, Todorova, Liliya, Romero-Ayuso, Dulce, Nakamura-Thomas, Hiromi, Ten Velden, Marjon, Finlayson, Ian, O'Hare, Anne, Forsyth, Kirsty, Participation of children with disabilities in school: A realist systematic review of psychosocial and environmental factors, PloS one, 14, e0210511, 2019	non-comparative quantitative studies
McConkey, Roy, Working out of the box: an evaluation of short breaks and intensive support services to families and disabled young people whose behaviour is severely challenging: summary report, 46p., 2011	Study design: Mixed methods. Quantitative component is non-comparative
Miller-Kuhaneck, Heather, Watling, Renee, Parental or Teacher Education and Coaching to Support Function and Participation of Children and Youth With Sensory Processing and Sensory Integration Challenges: A Systematic Review, The American journal of occupational therapy : official publication of the American Occupational Therapy Association, 72, 7201190030p1-7201190030p11, 2018	Intervention and outcomes: Interventions do not involve joint working and no outcomes of interest are reported
O'Brien, Thomas D., Noyes, Jane, Spencer, Llinos Haf, Kubis, Hans-Peter, Hastings, Richard P., Edwards, Rhiannon T., Bray, Nathan, Whitaker, Rhiannon, 'Keep fit' exercise interventions to improve health, fitness and well-being of children and young people who use wheelchairs: mixed-method systematic review protocol, Journal of advanced nursing, 70, 2942-51, 2014	Publication type: Systematic review protocol
Ott, Marilyn, Browne, Gina, Byrne, Carolyn, Roberts, Jacqueline, Gafni, Amiram, Bateman, Amanda H., Recreation for children on social assistance, 4-17 years old, pays for itself the same year, Journal of public health (Oxford, England), 28, 203-8, 2006	Population: Single-parent families receiving social assistance
Prabhakar, Meera, et, al, Individual budgets for families with disabled children: scoping study: literature review report, 46p., bibliog., 2008	Publication type: Narrative review
Prabhakar, Meera, Thom, Graham, Evaluation of the extended individual budget programme for families with disabled children: the extended packages, 71p., 2012	Publication: Overview of available individual budget packages. No data on effectiveness
Robertson, Janet, et, al, The impacts of short break provision on families with a disabled child: an international literature review, Health and Social Care in the Community, 19, 337-371, 2011	Study design: Includes qualitative studies
Sahlin, K. Barbara, Lexell, Jan, Impact of Organized Sports on Activity, Participation, and Quality of Life in People With Neurologic Disabilities, PM & R : the journal of injury, function, and rehabilitation, 7, 1081-1088, 2015	Population, publication date and intervention: Studies conducted with CYP were published pre-2000 and/or did not include a relevant intervention
Saitta, M., Devan, H., Boland, P., Perry, M. A., Park-based physical activity interventions for persons with disabilities: A mixed-methods	Population and study designs: Includes adults with disabilities and qualitative designs

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Study	Reason for Exclusion
systematic review, Disability and Health Journal, 12, 11-23, 2019	
Sloper, P., et al, Key worker services for disabled children: what characteristics of services lead to better outcomes for children and families?, Child: Care, 32, 147-157, 2006	Outcomes: No relevant outcomes reported
Spivack Rhian, Craston Meera, Redman Rachel, Evaluation of the Special Educational Needs and Disability Pathfinder Programme: thematic report: collaborative working with social care: research report, 2014	Study design: Qualitative
Thom Graham, et al., The Special Educational Needs and Disability Pathfinder Programme evaluation: final impact research report, 238, 2015	Intervention: Intervention is not focused on improving participation
Thom, Graham, Prabhakar, Meera, Individual budgets for families with disabled children: final evaluation report: recommendations and implications, 33p., 2011	Study design: Non-comparative
Thomson, A., Bridges, S., Corrins, B., Pham, J., White, C., Buchanan, A., The impact of physical activity and sport programs on community participation for people with intellectual disability: A systematic review, Journal of Intellectual & Developmental Disability	Population and study designs: Includes adults with disabilities and qualitative designs
Trute, B., Hiebert-Murphy, D., Wright, A., Family-centred service coordination in childhood health and disability services: The search for meaningful service outcome measures, Child: Care, Health and Development, 34, 367-372, 2008	Outcomes: No relevant outcomes reported
Vasileiadis, Ilias, Doikouâ Avlidou, Maro, Enhancing social interaction of pupils with intellectual disabilities with their general education peers: the outcomes of an intervention programme, Journal of Research in Special Educational Needs, 18, 267-277, 2018	Population: Children with mild intellectual disabilities. Unlikely to have needs in all three areas
von Granitz, Helene, Reine, Ieva, Sonnander, Karin, Winblad, Ulrika, Do personal assistance activities promote participation for persons with disabilities in Sweden?, Disability and Rehabilitation, 39, 2512-2521, 2017	Outcomes: No relevant outcomes reported
Waters John, et al., Report on the development and use of POET for children and young people with SEND, 133, 2015	Study design: Survey with descriptive and qualitative data only
Watson, Debbie, Tarleton, Beth, Feiler, Anthony, Participation in education (PIE): full report on the findings from research on the involvement of children with little or no verbal communication, 24p., 2006	Study design: Survey with descriptive data only
Wendelborg, Christian, Tøssebro, Jan, Educational Arrangements and Social Participation with Peers amongst Children with Disabilities in Regular Schools, International Journal of Inclusive Education, 15, 497-512, 2011	Study design and outcomes: No relevant comparative data reported

Study	Reason for Exclusion
Yang, Y. J., Siao, M. R., Tsai, F. T., Luo, H. J., Effect of physical activity interventions on children and adolescents with autism spectrum disorder: A systematic review and meta-analysis, <i>Physiotherapy (United Kingdom)</i> , 101, eS1685-eS1686, 2015	Conference Abstract

1 ASD: autistic spectrum disorder; CYP: children and young people; OECD: Organisation for Economic Co-
 2 operation and Development

3 Economic studies

4 No economic evidence was identified for this review. See Supplement B for further
 5 information.

6

- 1 ***Appendix K – Research recommendations – full details***
- 2 **Research recommendations for review question: What are the most effective**
- 3 **ways that health, social care and education services can work together to**
- 4 **support disabled children and young people with severe complex needs to**
- 5 **participate in and benefit from education and social activities?**
- 6 No research recommendations were made for this review question.