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

[H] Evidence review for preparation for employment

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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Preparation for employment

Recommendations supported by this evidence review

This evidence review supports recommendations 1.13.1 - 1.13.11, 1.17.15. Other evidence supporting these recommendations can be found in the evidence reviews on Views and experiences of service providers (evidence report M).

Review question

What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

Introduction

The review aims to identify the most effective models where health, social care and education services work together to prepare disabled children and young people with severe complex needs for employment.

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

Summary of the protocol

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

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

Population	Disabled children and young people from birth to 25 years with severe complex needs requiring health, social care and education support
Intervention	Any joint-working practices to prepare disabled children and young people with severe complex needs for employment. For example: • Supported internships and traineeships • Local authority independent travel training (involves multi agency assessment) • NHS learning disability employment program • Job coaching (e.g. adult services, access to work, DWP) • Curriculum and accreditation provider (e.g. T-levels and ASDAN) • Work experience coordinators • CEIAG (Careers education information advice and guidance) • Personalised budgets • Visual support hierarchy recommendations • Short breaks/respite care (those which support employment) • EHC plans (including goal setting) • Named responsible practitioner (e.g., keyworker, single point of contact, lead professional, named coordinator, transition lead) • Follow on support • Arrangements/links with third sector/community organisations (e.g., chambers of commerce and employment organisations)
Comparison	• Any other joint-working practices to prepare disabled children and young people with severe complex needs for employment • Separate practices to prepare disabled children and young people with severe complex needs for employment • No specific practices to prepare disabled children and young people with severe complex needs for employment

Outcome	Critical • Progress into employment (including paid or voluntary employment, work experience or trials, apprenticeships, job shadowing, traineeships, internships, student placements, sector-based work academy placements) • Independence as measured by validated scales • Competence (measured as Capability/Confidence to meet expectations in an identified workplace) Important • Self-efficacy as measured by validated scales • Successful completion of independent travel training (which is individually tailored) • Competence in skills relevant to job search and self-promotion in recruitment and selection processes

ASDAN: award scheme development and accreditation network; CEIAG: careers education information advice and guidance; DWP: Department for work and pensions; EHC: education, health and care; NHS: national health service.

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

Methods and processes

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

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

Effectiveness evidence

Included studies

Five studies were included for this review; 1 randomised controlled trial (Carter 2009), 1 quasi-RCT (Izzo 2000), and 3 non-randomised studies (McVeigh 2017, Winsor 2007 and Yamatani 2015).

The included studies are summarised in Table 2.

Three studies examined arrangements/links with third sector/community organisations as the intervention (Carter 2009, McVeigh 2017 and Winsor 2007). Of these, 1 study compared a multicomponent intervention package to typical transition education (Carter 2009); 1 study examined a Show-Me-Careers initiative which supported seamless transitions to integrated employment through a Practice Informing Policy-Policy Enabling Practice framework (McVeigh 2017); and 1 study compared a Jobs by 21 Partnership Project to nonparticipants and to no partnership project county clients (Winsor 2007).

One study examined a named responsible practitioner as the intervention (Yamatani 2015), specifically a Career Transition Liaison Project.

One study examined follow on support as the intervention (Izzo 2000), whereby the extension of transition services beyond graduation was compared to transition services ceasing at graduation.

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

1 Excluded studies

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

4 Summary of studies included in the effectiveness evidence

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

6 **Table 2: Summary of included studies.**

Study	Population	Intervention	Comparison	Outcomes	Comments
Carter 2009 RCT USA	N=67 Youth receiving special education services under the primary or secondary disability category of cognitive disability, autism, or multiple disabilities	Multicomponent Intervention Package Five strategies including; 1) summer-focused planning (assist youth to connect to specific summer work and other community experiences that might further their transition education); 2) community connectors (a person at each school to serve in the role); 3) employer liaisons (a person to serve in the role in the community); 4) community conversations (events to foster dialogue around ways that schools, businesses, agencies, organizations, families, youth, and others could work together to expand the employment opportunities and identify new partners willing to collaborate with participating schools); 5) resource mapping (identifying and compiling resources that might be harnessed to improve outcomes)	Typical transition education Not described	• Progress into employment	The extent to which each of the five strategies was used with each participant varied by community and by each student's need
Izzo 2000 Quasi RCT	N=98 Students with disabilities	Extension of transition services beyond graduation	Transition Services ceasing at graduation	• Independence	The disabilities of the participants

Study	Population	Intervention	Comparison	Outcomes	Comments
USA	enrolled in a vocational training program	A coordinated set of extended transition services to assist the student with entering and maintaining employment. Services were based on the young adult's needs and included vocational assessment (community-based job try-outs), agency contacts (interagency coordination services from rehabilitation agencies or local boards of intellectual disabilities/ developmental disabilities), Individualized Educational Program meetings (including the participant, parents, school personnel, and other service providers), extended vocational training (time spent in a vocational program after completion of the two-year high school program), employability counselling (focused on skills critical to gaining employment), job club (weekly sessions), job interview assistance (one-to-one prior to interview), job development (job training coordinators identified employers located within close proximity), and job coaching (on-the-job training to learn specific job tasks or social skills)	Transition services provided as part a secondary vocational program before graduation, which subsequently ceased following graduation. Instead participants received a small stipend to share their employment and independent living status.		were reported as learning disabilities, intellectual disabilities, and other. The study reports that a full spectrum of disabilities participate in the secondary vocational education program.
McVeigh 2017 Non RCT (evaluation) USA	N=429 Youth with intellectual and developmental disabilities (IDD)	Show-Me-Careers initiative Supported seamless transitions to integrated employment through	Before versus after intervention	• Progress into employment	The type of disability, and age of the participants were not reported

Study	Population	Intervention	Comparison	Outcomes	Comments
		a "Practice Informing Policy-Policy Enabling Practice" framework. Communities received funding and support to scale-up practices related to transition to employment within their communities using Guiding Principles, focussing on the principles most relevant to their community needs and goals. Communities developed a core team of cross-agency partners including school district personnel, district vocational rehabilitation counsellors, Division of Developmental Disabilities youth transition/ employment coordinators, Centers for Independent Living staff, Career Center staff, employment providers, local Chambers of Commerce representatives, family members, and individuals with IDD to plan, implement, and evaluate activities aimed to support relevant outcomes.			
Winsor 2011 Non RCT USA	N=687 (FY 2008) N=765 (FY 2009) Students turning 21 years of age during their final year of high school and eligible for the Division of Developmental	Jobs by 21 Partnership Project Develop collaborative relationships and activities between stakeholders (e.g. Division of Developmental Disabilities, county developmental disability offices, the	Non-participants Division of Developmental Disabilities eligible students who lived in counties that received Partnership Project funds	• Progress into employment	

Study	Population	Intervention	Comparison	Outcomes	Comments
	Disabilities funded services	Division of Vocational Rehabilitation, school administrators and teachers, employment vendors, family members, and young adults) that best met counties local needs, and develop specific employment and career activities that incorporated both school personnel and adult supported employment vendors	but did not participate in their county's project No Partnership Project county clients Division of Developmental Disabilities eligible students who lived in counties that did not receive Partnership Project funds		
Yamatani 2015 Non RCT (mixed methods evaluation) USA	N=12 Employees with disabilities	Career Transition Liaison Project A full-time career transition liaison that worked directly with the employer's human resources personnel, trainers, supervisors, and other employees to maintain a supportive culture for workers with disabilities, and provided a number of additional support services, including coordination with school and community job coaches, trainers, and refinement of the training program for the employer's team leaders (primarily supervisors of employees)	Before versus after intervention	• Competence	The type of disability, and age of the participants were not reported. The employer hired individuals identified by their high schools or vocational schools as having a disability and participants were described as 'youth'.

FY: fiscal year; IDD: intellectual and developmental disabilities; RCT: randomised controlled trial:

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

Summary of the effectiveness evidence

Overall, there was evidence of an important benefit of arrangements/links with third sector/community organisations for progress into employment. This included a multicomponent intervention package (when progress into employment was measured by participation in paid or unpaid community based work, paid competitive jobs, unpaid jobs, and those that did not work at any point during the summer, however there was evidence of an important harm when measured by exclusively held sheltered jobs shown by a meaningful reduction in employed participants in the intervention group), a Show-Me-Careers initiative, and a Jobs by 21 Partnership Project (when compared to both students living in counties receiving Partnership Project funds but not participating in the project, and students who lived in counties not receiving Partnership Project funds). There was also evidence of an important benefit, in terms of increased competence, of a named responsible practitioner, specifically a Career Transition Liaison Project which included a full-time career transition liaison and follow-on support including the extension of transition services beyond graduation for independence (when independence was measured by active in social groups, has savings or current account, and has credit cards, but not when measured by registered to vote or married). Further, there was evidence of an important harm when independence was measured by those participants with a driver's license shown by a meaningful reduction in participants with a license in the intervention group).

Overall, the evidence was very low to low quality due to concerns about risk of bias, indirectness and imprecision. Studies failed to report on any important outcomes including self-efficacy, successful completion of independent travel training (which is individually tailored), and competence in skills relevant to job search and self-promotion in recruitment and selection processes. Studies failed to report on a number of interventions of interest, for example, supported internships and traineeships, local authority independent travel training, NHS learning disability employment program, work experience coordinators, and short breaks/respite care (those which support employment).

See appendix F for full GRADE tables.

Economic evidence

Included studies

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

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

Excluded studies

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

Summary of included economic evidence

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

Economic model

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

Evidence statements

Economic

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

The committee's discussion and interpretation of the evidence

The outcomes that matter most

The outcomes progress into employment, independence and competence were prioritised as critical outcomes by the committee. Employment was prioritised because identifying joint-working practices to support employment was the primary focus of this review. Independence and competence were selected as critical outcomes because they represent benefits of employment which impact on quality of life.

The outcomes self-efficacy, successful completion of independent travel training and competence in skills relevant to job search and self-promotion in recruitment and selection processes were selected as important outcomes. These were important outcomes because they are part of the pathway towards employment, whereas employment itself may be applicable to a narrower population of disabled children and young people with severe complex needs.

The quality of the evidence

The quality of the evidence was assessed with GRADE and was rated as very low to low. Concerns about the risk of bias were "very serious". The most serious concerns for the RCT and quasi-RCT were bias arising from the randomisation process, deviations from intended interventions, and missing outcome data. The most serious concerns for the non-randomised, interrupted time series studies were biases arising from the intervention independent of other changes, shape of the intervention effect pre-specified, intervention unlikely to affect data collection, knowledge of the allocated interventions adequately prevented during the study, and other risks of bias. The most serious concerns for the non-randomised cohort study were confounding, selection of participants into the study, measurement of outcomes, and selection of the reported result. There were "no serious" concerns about inconsistency. This was because only one study reported each outcome of interest. Concerns about indirectness ranged from "no serious" to "serious" indirectness. For all outcomes rated as "serious", this was due to an indirect aspect of the PICO (population) in 1 study. Concerns about imprecision ranged from "no serious" to "very serious". This was due to the 95% confidence intervals crossing boundaries for minimally important differences.

Benefits and harms

There was evidence of an important benefit of arrangements/links with third sector/community organisations (multicomponent intervention package, show-me-careers initiative and jobs by 21 partnership project) in the progress into employment for disabled children and young people with severe complex needs. The evidence was very low and low quality. The committee agreed with the evidence and discussed how important it is that the local authority provide information about employment support in the local offer [1.17.15] in order to help disabled children and young people with severe complex needs move into adulthood, as specified in sections 4.52 and 4.53 of the SEND Code of Practice (2015). The committee explained how employment might be a daunting prospect for disabled children and young people with severe complex needs but how this can be reduced when local authorities make the process clear and transparent.

The committee discussed the current variation where some localities provided a guided questionnaire that assisted disabled children and young people with severe complex needs

and their families in navigating the employment options set out in the local offer, whilst others did not. The committee acknowledged that sometimes the information provided was not easily understandable. The committee recommended that education providers ensure that Information, Advice and Guidance on employment is provided using the Gatsby benchmarks of Good Career Guidance (as included in statutory guidance from the Department for Education on careers guidance and advice), in order to help young people think about their employment options and make informed decisions about their future [1.13.1].

There was evidence of a benefit in the competence (capability to meet expectations in an identified workplace) of disabled young people with severe complex needs when provided with a named responsible practitioner, specifically a full-time career transition liaison. The evidence was very low quality. Based on their experience, the committee agreed that an essential component of supported internships is the provision of support to the young person by a lead employment practitioner, often called a job coach. This lead practitioner provides 1:1 support to the intern, to coach them on the satisfactory level of performance in skills and operations that are required by the work place. Without this support, the committee felt strongly that achieving employment outcomes would be much less likely to be successful. The committee also noted that in order for each young person undertaking a supported internship to have this lead employment practitioner, this would need to be included as a requirement in the service specification for commissioning employment support services and this was reflected in the recommendation. The committee discussed, based on their experience, that the lead employment practitioner function would usually be fulfilled by an individual with the role of job coach. However, the committee discussed that the term job coach is not well understood across health, education and social care and there are other roles that could undertake this function, so they only gave it as an example in the recommendation [1.13.3]. The committee also agreed that young people who had employment as an outcome in their EHC plan, but who were not undertaking a supported internship would also be likely to benefit from the 1:1 support provided by a lead employment practitioner and more likely to achieve their employment outcomes, so they made a weaker recommendation for this to happen [1.13.4].

The committee agreed, based on their experience, that discussions about employment as a future option should begin early so that if this is something the child or young person wishes to explore, preparation can also start early, facilitating achievement of the best possible outcomes as specified in section 8 of the SEND Code of Practice (2015). However they noted that this does not always happen and relayed examples of parents and carers self-researching employment options at the point when the young person is looking to achieve employment, due to a lack of information and preparation provided beforehand. This was supported by qualitative evidence where both service users and providers reported that preparations for adulthood are insufficient, inconsistent and left too late (see evidence report K, sub-theme 17.1). The committee agreed that in line with the requirements in the SEND Code of Practice (2015) discussions should start when the child is around 13 to 14 years of age, when the year 9 review would take place. The committee also agreed that tailored follow-up discussion is needed as the young person may change their career aspirations as they mature [1.13.5].

Based on their experience, the committee discussed the benefits of vocational profiles in helping to understand the needs, skills and aspirations of disabled children and young people with severe complex needs who are considering employment. A number of committee members felt that the term vocational profile was not widely understood, and it was agreed that in practice a lot of those working in education, health and social care do not always use them. Due to the fact that vocational profiles would be particularly useful and beneficial for disabled children and young people with severe complex needs who want to achieve employment, the committee agreed a recommendation was needed to raise awareness of vocational profiles amongst professionals and encourage individuals working in education, health and social care to use them [1.13.6].

The committee discussed the importance of practitioners from all services working together to ensure that employment support holistically matches the needs of the young person. In their experience, if practitioners do not consider what support is needed outside their specific expertise to bridge the gaps between different services, this may create barriers to the young person effectively participating in employment support and sometimes even cause risk to the young person. The committee felt strongly that practitioners should do this so that the onus for providing comprehensive employment support doesn't fall on the young person and their family or carers [1.13.7].

No evidence was identified about supported internships, however there was evidence of a benefit of follow-on support (extension of transition services beyond successful completion of the programme) in the independence of disabled young people with severe complex needs. The committee agreed that the components of the follow-on support intervention such as a structured intervention prior to individualised applications (e.g. interview skills) were similar to those produced in supported internship programs in the UK, and felt it appropriate to extrapolate the evidence in order to make recommendations. Although they were not identified by the evidence searches because they did not meet the inclusion criteria, the committee were aware of evaluations of supported internship programmes, designed to help young people with learning disabilities acquire the capabilities needed to gain employment, that have been undertaken by the Department of Education and UK Government. These evaluations concluded that supported internships are effective at helping young people with severe complex needs to obtain employment. Progress into employment is one of the preparation for adulthood outcomes covered by the SEND code of practice. All children and young people with severe complex needs must have a focus on all four preparation for adulthood outcomes in their EHC plan from year 9 onwards. However, without assistance, young people with severe complex needs have a very low likelihood of progressing to employment. The committee felt strongly that supported internships would be an effective way to help young people into employment and therefore recommended that they are made available. [1.13.2]. Supported internships are cited in the SEND Code of Practice (2015) as a way for young people with special educational needs to get direct experience of work and help prepare them for employment.

There was evidence of a benefit of arrangements/links with third sector/community organisations (multicomponent intervention package, show-me-careers initiative and jobs by 21 partnership project) in the progress into employment for children and young people. The evidence was very low and low quality. The committee agreed based on this evidence and their experience that once a young person has completed a supported internship they will still have other hurdles to negotiate to get a job as they will be competing with non-disabled individuals. In the committee's experience, there is a need for supported internship providers to create links with local employers and encourage them to buy-in to provide or expand the opportunities available to disabled young people with severe and complex needs. Also that mechanisms should be in place whereby links with potential employers were actively pursued. Doing this will support employers to make reasonable adjustments around recruitment [1.13.8].

The committee agreed that as part of supported internships it was important to plan ahead so that the experiences gained from the internship can be used in a meaningful way, such as enabling the young person to enter into paid or volunteer work once the internship ends. Since the young person should still have an EHC plan in place until securing employment, the committee agreed that the planning of next steps should occur prior to ceasing the EHC plan, and be facilitated between the current provider and prospective employer to ensure continuity. They therefore made a recommendation about how to plan support for the young person after the internship ends [1.13.9].

From their experience, the committee discussed the benefit of both support workers and job coaches in supporting the young person during their employment, specifically by acting as a first point of contact, and providing information, advice, and emotional support. The

committee agreed that young people and their families are not always aware that this support is available and so made a recommendation for local authorities to signpost to these services in the Local Offer [1.13.10]. It is a requirement of the SEND Code of Practice (2015) that the Local Offer contains information about all services available in that local area. In addition, the committee discussed the role of workplace buddies, that is a colleague that can act as a friendly face for the young person during their work day. A workplace buddy might support the young person by providing them with information about the structure of the workplace and teams, introducing them to colleagues, showing them around the office and having lunch with them on a daily basis. The committee agreed that the role of a workplace buddy should not be a line manager because the young person has to be able to share their anxieties with their buddy so they can receive effective support before this results in a performance issue. Therefore, someone independent is needed to do this. The committee felt strongly that a colleague assigned to support the disabled young person would enable the employment situation to run smoothly for both parties so recommended that employers are encouraged to train and appoint workplace buddies for disabled young people [1.13.11].

Cost effectiveness and resource use

There was no existing economic evidence in this area.

The committee discussed supported internships and explained that there is funding available from the Education Skills Funding Agency, Department for Work and Pensions and social care adult services for young people to access supported internships. The committee explained that there are multiple providers across the country in response to the UK government policy. The committee explained that recommendations on making supported internships available are more about changing practice to ensure consistent delivery, coordination and improved outcomes, using existed allocated funding and so recommendations would therefore not incur additional resources to services. Similarly, the recommendations about planning after an internship ends would not have additional resource implications because this would happen as part of the support specified in the individuals EHC plan. The committee also noted that, whilst funding already exists for supported internship teams to function, not all areas have them and there is inconsistency in which sector takes responsibility for setting them up. Therefore, the recommendations would require a change in practice but not incur additional resources.

The committee discussed the recommendation on assigning a practitioner to lead on employment support for young people undertaking a supported internship. The committee noted that there are existing trained professionals to do this job. With supported internships, dedicated job coaches would take on this role. However, many people who are not trained are still delivering such employment support. The committee explained that job coaches/adult social care employment support teams/employment officers should exist everywhere; but that services may call them different things. The committee reiterated that it is important that the person leading on employment support is someone who has been trained in employment support. It is essential to have someone trained because of the complexity of this group of young people. It isn't as simple as helping them write a CV or getting some work experience. There is tailored and bespoke knowledge that is needed to support young people with complex needs into work. And if a practitioner hasn't been trained and doesn't have the required skills, for example, in job coaching or some other specific support models, that young person won't pick up the required skills as quickly, and they won't be successful in going into or sustaining employment / paid work. Additional people will need to be trained in order to provide this support to young people who are undertaking a supported internship. Further practitioners will need to be trained if local authorities also decide to provide a lead employment practitioner to those young people who have employment as an outcome in their EHC plan. However, because this is an outcome in the EHC plan, funding already exists to enable this training to happen. Therefore there will not be a significant resource implication.

In relation to the recommendation for local authorities to include information about support workers and job coaches in their Local Offer, the committee agreed this was unlikely to have resource implications as it is about information provision. Additionally they noted that funding is already available to provide support workers and job coaches through the Access to Work scheme run by the Department for Work and Pensions so if a young person decides they would like to have this additional support there should not be any cost implications of doing so.

The committee discussed the recommendation about having a vocational profile for young people who are considering employment. Use of vocational profiles will be a change in practice for those services that do not currently use them. However, preparation for adulthood is a requirement of the SEND Code of Practice. Vocational profiles are a way to do the work that is already required to help young people who have employment identified within their preparation for adulthood transition planning. Therefore there are not expected to be significant resource implications of this change in practice.

The committee believed that other recommendations in this area represent current good practice and are not anticipated to result in additional resource use to services.

Recommendations supported by this evidence review

This evidence review supports recommendations 1.13.1 - 1.13.11, 1.17.15. Other evidence supporting these recommendations can be found in the evidence reviews on Views and experiences of service providers (evidence report M).

References – included studies

Effectiveness

Carter 2009

Carter, E. W., Trainor, A. A., Ditchman, N., Swedeen, B., Owens, L., Evaluation of a Multicomponent Intervention Package to Increase Summer Work Experiences for Transition-Age Youth With Severe Disabilities, Research and Practice for Persons with Severe Disabilities, 34, 1-12, 2009

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Izzo, Margo Vreeburg, Cartledge, Gwendolyn, Miller, Larry, Growick, Bruce, Rutkowski, Susan. Increasing Employment Earnings: Extended Transition Services that Make a Difference. Career Development for Exceptional Individuals, Volume: 23 issue: 2, page(s): 139-156. Issue published: October 1, 2000

McVeigh 2017

McVeigh, T., Reighard, A., Day, A., Willis, D., Reynolds, M., Jenson, R., John, J., Gee, R., Show-Me-Careers: Missouri's transition to employment collaborative, Journal of Vocational Rehabilitation, 47, 337-350, 2017

Winsor 2011

Winsor, Jean E., Butterworth, John, Boone, Jane, Jobs by 21 Partnership Project: Impact of Cross-System Collaboration on Employment Outcomes of Young Adults with Developmental Disabilities, Intellectual and Developmental Disabilities, 49, 274-284, 2011

Yamatani 2015

Yamatani, Hide, Teixeira, Samantha, McDonough, Kathleen, Employing people with disabilities: a preliminary assessment of a start-up Initiative, Journal of Human Behavior in the Social Environment, 25, 830-842, 2015

Other

Department for Education and Department of Health and Social Care 2015

Department for Education and Department of Health and Social Care. Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities. Gov.UK website. Updated 30 April 2020. Available at: https://www.gov.uk/government/publications/send-code-of-practice-0-to-25

Appendices

Appendix A – Review protocol

Review protocol for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

Table 3: Review protocol

ID	Field	Content
0.	PROSPERO registration number	CRD42020167078
1.	Review title	What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?
2.	Review question	What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?
3.	Objective	To identify the most effective models where health, social care and education services work together to prepare disabled children and young people with severe complex needs for employment
4.	Searches	The following databases will be searched: • 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 • Sociological Abstracts

ID	Field	Content
		• PsycINFO • CINAHL • Emcare Searches will be restricted by: • Date: 2000 onwards • Language: English • Other searches: • 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) The full search strategies for all databases will be published in the final review.
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	• Inclusion: Disabled children and young people from birth to 25 years with severe complex needs requiring health, social care and education support • Exclusion: Disabled children and young people who do not have needs in all three areas of health, social care and education.
7.	Intervention/Exposure/Test	Any joint-working practices to prepare disabled children and young people with severe complex needs for employment. For example: • Supported internships and traineeships • Local authority independent travel training (involves multi agency assessment) • NHS learning disability employment program • Job coaching (e.g. adult services, access to work, DWP) • Curriculum and accreditation provider (e.g. T-levels and ASDAN) • Work experience coordinators • CEIAG (Careers education information advice and guidance) • Personalised budgets • Visual support hierarchy recommendations

ID	Field	Content
		• Short breaks/respite care (those which support employment) • EHC plans (including goal setting) • Named responsible practitioner (e.g., keyworker, single point of contact, lead professional, named coordinator, transition lead) • Follow on support • Arrangements/links with third sector/community organisations (e.g., chambers of commerce and employment organisations)
8.	Comparator/Reference standard/Confounding factors	• Any other joint-working practices to prepare disabled children and young people with severe complex needs for employment • Separate practices to prepare disabled children and young people with severe complex needs for employment • No specific practices to prepare disabled children and young people with severe complex needs for employment
9.	Types of study to be included	Systematic reviews of RCTs or non-randomised comparative studies (including cohort studies, before and after studies and interrupted time series), and RCTS will be included. Non-randomised studies will be included in the absence of RCTs for a given class of interventions. Service evaluations, process evaluations and audits will be included in the absence of comparative non-randomised studies. Conference abstracts will not be included. 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.
10.	Other exclusion criteria	Studies will not be included for the following reasons: • 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/) 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. Studies published in languages other than English will not be considered due to time and resource constraints with translation. 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.

ID	Field	Content
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. In addition, settings that collaborate with health, social care and education providers to provide work experience and employment opportunities for disabled children and young people from birth to 25 years with severe complex needs will be considered.
12.	Primary outcomes (critical outcomes)	Critical Outcomes: • Progress into employment (including paid or voluntary employment, work experience or trials, apprenticeships, job shadowing, traineeships, internships, student placements, sector-based work academy placements) • Independence as measured by validated scales • Competence (measured as Capability/Confidence to meet expectations in an identified workplace)
13.	Secondary outcomes (important outcomes)	Important Outcomes: • Self-efficacy as measured by validated scales • Successful completion of independent travel training (which is individually tailored) • Competence in skills relevant to job search and self-promotion in recruitment and selection processes
14.	Data extraction (selection and coding)	All references identified by the searches and from other sources will be uploaded into STAR and de-duplicated. Titles and abstracts of the retrieved citations will be screened to identify studies that potentially meet the inclusion criteria outlined in the review protocol. 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. 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.
15.	Risk of bias (quality) assessment	Quality assessment of individual studies will be performed using the following checklists: • 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

ID	Field	Content	
		The quality assessment will be performed by one reviewer and this will be quality assessed by a senior reviewer.	
16.	Strategy for data synthesis	Intervention review: 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 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%. 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/ Minimally important differences: • We will check the rehabilitation measures database (www.sralab.org) for published MIDs for scales reported by included studies and use these if available. If not, we will use GRADE default MIDs. • 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 a baseline). For all remaining dichotomous outcomes (RRs, ORs and HRs), we will use the GRADE default for RRs of 0.8 and 1.25 for consistency.	
17.	Analysis of sub-groups	N/A	
18.	Type and method of review	☒	Intervention
		☐	Diagnostic
		☐	Prognostic
		☐	Qualitative
		☐	Epidemiologic
		☒	Service Delivery

ID	Field	Content		
		☐	Other (please specify)	
19.	Language	English		
20.	Country	England		
21.	Anticipated or actual start date	28 January 2020		
22.	Anticipated completion date	12 May 2021		
23.	Stage of review at time of this submission	Review stage	Started	Completed
		Preliminary searches	☐	☐
		Piloting of the study selection process	☐	☐
		Formal screening of search results against eligibility criteria	☐	☐
		Data extraction	☐	☐
		Risk of bias (quality) assessment	☐	☐
		Data analysis	☐	☐
24.	Named contact	5a. Named contact National Guideline Alliance 5b Named contact e-mail CYPseverecomplexneeds@nice.org.uk 5e Organisational affiliation of the review National Institute for Health and Care Excellence (NICE) and National Guideline Alliance		
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		

ID	Field	Content	
		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?RecordID=167078	
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	
33.	Details of existing review of same topic by same authors	None	
34.	Current review status	☒	Ongoing
		☐	Completed but not published
		☐	Completed and published
		☐	Completed, published and being updated
		☐	Discontinued
35..	Additional information	None	
36.	Details of final publication	www.nice.org.uk	

AHDC: Aiming High for Disabled Children; ASDAN: Award Scheme Development and Accreditation Network; ASSIA: Applied Social Science Index and Abstracts; BEI: British Education Index; CAF: common assessment framework; CDSR: Cochrane Database of Systematic Reviews; CEIAG: Careers education information advice and guidance; CENTRAL: Cochrane Central Register of Controlled Trials; DARE: database of Abstracts of Reviews of Effects; DWP: Department for Work and Pensions; EHC: Education and Health care; EPOC: Effective Practice and Organisation of Care; ERIC: Educational Information Resources Center; GRADE: Grading of Recommendations Assessment, Development and Evaluation; HMIC: Health Management Information Consortium; HR: hazard ratio; HTA: Health Technology Assessment; MID: minimally important difference; NHS: National Health Service; NICE: National Institute for Health and Care Excellence; OECD: Organisation for Economic Co-operation and Development; OR: odds ratio; RCT: randomised controlled trial; RoB: risk of bias; RR: risk ratio; ROBINS-I: risk of bias in non-randomised studies – of interventions; ROBIS: Risk of Bias in Systematic Reviews; SD: standard deviation

Appendix B – Literature search strategies

Literature search strategies for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

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

Date of last search: 17/07/2020

#	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

#	Searches
	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
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$)).ti,ab.
47	or/44-46
48	STATE MEDICINE/og [Organization & Administration]
49	CHILD HEALTH SERVICES/og [Organization & Administration]
50	ADOLESCENT HEALTH SERVICES/og [Organization & Administration]
51	EDUCATION/og [Organization & Administration]
52	exp EDUCATION, SPECIAL/og [Organization & Administration]
53	exp SOCIAL WORK/og [Organization & Administration]
54	or/48-53
55	EMPLOYMENT/
56	EMPLOYMENT, SUPPORTED/
57	REHABILITATION, VOCATIONAL/
58	SHELTERED WORKSHOP/
59	UNEMPLOYMENT/
60	employment.ti.
61	unemployment.ti.
62	(transition$ adj3 employment).ti,ab.
63	(support$ adj3 employment).ti,ab.
64	(prepar$ adj5 employment).ti,ab.
65	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
66	((occupation$ or work or job?) adj3 rehab$).ti,ab.
67	(clubhouse? or club-house?).ti,ab.
68	(fountainhouse? or fountain-house?).ti,ab.
69	sheltered work$.ti,ab.
70	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
71	(individual? adj3 placement?).ti,ab.
72	(job adj3 shadow$).ti,ab.
73	work experience.ti,ab.
74	(job? adj3 (search$ or seek$)).ti,ab.
75	(internship? or traineeship?).ti,ab.
76	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
77	(travel adj3 train$).ti,ab.
78	(independen$ adj3 travel$).ti,ab.
79	employment program?.ti,ab.
80	job coach$.ti,ab.
81	job placement?.ti,ab.
82	"access to work".ti,ab.
83	T-level?.ti,ab.
84	ASDAN.ti,ab.
85	CEIAG.ti,ab.
86	"careers education information advice and guidance".ti,ab.
87	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
88	"chambers of commerce".ti,ab.
89	employment organi?ation$.ti,ab.
90	employment agenc$.ti,ab.
91	or/55-90

#	Searches
92	26 and (39 or 43 or 47 or 54) and 91
93	limit 92 to english language
94	limit 93 to yr="2000 -Current"
95	LETTER/
96	EDITORIAL/
97	NEWS/
98	exp HISTORICAL ARTICLE/
99	ANECDOTES AS TOPIC/
100	COMMENT/
101	CASE REPORT/
102	(letter or comment*).ti.
103	or/95-102
104	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
105	103 not 104
106	ANIMALS/ not HUMANS/
107	exp ANIMALS, LABORATORY/
108	exp ANIMAL EXPERIMENTATION/
109	exp MODELS, ANIMAL/
110	exp RODENTIA/
111	(rat or rats or mouse or mice).ti.
112	or/105-111
113	94 not 112

1

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

3 **Date of last search: 17/07/2020**

#	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 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

#	Searches
	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$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	EMPLOYMENT/
54	FULLTIME EMPLOYMENT/
55	PARTTIME EMPLOYMENT/
56	PERMANENT EMPLOYMENT/
57	TEMPORARY EMPLOYMENT/
58	SUPPORTED EMPLOYMENT/
59	VOCATIONAL REHABILITATION/
60	SHELTERED WORKSHOP/
61	employment.ti.
62	unemployment.ti.
63	(transition$ adj3 employment).ti,ab.
64	(support$ adj3 employment).ti,ab.
65	(prepar$ adj5 employment).ti,ab.
66	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
67	((occupation$ or work or job?) adj3 rehab$).ti,ab.
68	(clubhouse? or club-house?).ti,ab.
69	(fountainhouse? or fountain-house?).ti,ab.
70	sheltered work$.ti,ab.
71	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
72	(individual? adj3 placement?).ti,ab.
73	(job adj3 shadow$).ti,ab.
74	work experience.ti,ab.
75	(job? adj3 (search$ or seek$)).ti,ab.
76	(internship? or traineeship?).ti,ab.
77	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
78	(travel adj3 train$).ti,ab.
79	(independen$ adj3 travel$).ti,ab.
80	employment program?.ti,ab.
81	job coach$.ti,ab.
82	job placement?.ti,ab.
83	"access to work".ti,ab.
84	T-level?.ti,ab.

#	Searches
85	ASDAN.ti,ab.
86	CEIAG.ti,ab.
87	"careers education information advice and guidance".ti,ab.
88	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
89	"chambers of commerce".ti,ab.
90	employment organi?ation$.ti,ab.
91	employment agenc$.ti,ab.
92	or/53-91
93	25 and (38 or 42 or 46 or 52) and 92
94	limit 93 to english language
95	limit 94 to yr="2000 -Current"
96	letter.pt. or LETTER/
97	note.pt.
98	editorial.pt.
99	CASE REPORT/ or CASE STUDY/
100	(letter or comment*).ti.
101	or/96-100
102	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
103	101 not 102
104	ANIMAL/ not HUMAN/
105	NONHUMAN/
106	exp ANIMAL EXPERIMENT/
107	exp EXPERIMENTAL ANIMAL/
108	ANIMAL MODEL/
109	exp RODENT/
110	(rat or rats or mouse or mice).ti.
111	or/103-110
112	95 not 111

1

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

3 **Date of last search: 17/07/2020**

#	Searches
1	exp YOUNG PEOPLE/
2	(adolescen$ 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.
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/

#	Searches
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$)).ti,ab.
51	or/48-50
52	EMPLOYMENT/
53	FULL EMPLOYMENT/
54	FULL TIME WORK/
55	PART TIME WORK/
56	TEMPORARY EMPLOYMENT/
57	SHELTERED EMPLOYMENT/
58	SUPPORTED EMPLOYMENT/
59	VOLUNTARY WORK/
60	TRAINING POSTS/
61	OCCUPATIONAL REHABILITATION/
62	SHELTERED WORKSHOPS/
63	UNEMPLOYMENT/
64	UNEMPLOYMENT PROGRAMMES/
65	YOUTH OPPORTUNITIES PROGRAMMES/
66	employment.ti.
67	unemployment.ti.
68	(transition$ adj3 employment).ti,ab.
69	(support$ adj3 employment).ti,ab.
70	(prepar$ adj5 employment).ti,ab.
71	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
72	((occupation$ or work or job?) adj3 rehab$).ti,ab.

#	Searches
73	(clubhouse? or club-house?).ti,ab.
74	(fountainhouse? or fountain-house?).ti,ab.
75	sheltered work$.ti,ab.
76	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
77	(individual? adj3 placement?).ti,ab.
78	(job adj3 shadow$).ti,ab.
79	work experience.ti,ab.
80	(job? adj3 (search$ or seek$)).ti,ab.
81	(internship? or traineeship?).ti,ab.
82	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
83	(travel adj3 train$).ti,ab.
84	(independen$ adj3 travel$).ti,ab.
85	employment program?.ti,ab.
86	job coach$.ti,ab.
87	job placement?.ti,ab.
88	"access to work".ti,ab.
89	T-level?.ti,ab.
90	ASDAN.ti,ab.
91	CEIAG.ti,ab.
92	"careers education information advice and guidance".ti,ab.
93	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
94	"chambers of commerce".ti,ab.
95	employment organi?ation$.ti,ab.
96	employment agenc$.ti,ab.
97	or/52-96
98	22 and (43 or 47 or 51) and 97
99	limit 98 to yr="2000 -Current"

1

2 **Database: Social Policy and Practice**

3 **Date of last search: 17/07/2020**

#	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.
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$

#	Searches
	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$)).ti,ab.
30	or/27-29
31	employment.ti.
32	unemployment.ti.
33	(transition$ adj3 employment).ti,ab.
34	(support$ adj3 employment).ti,ab.
35	(prepar$ adj5 employment).ti,ab.
36	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
37	((occupation$ or work or job?) adj3 rehab$).ti,ab.
38	(clubhouse? or club-house?).ti,ab.
39	(fountainhouse? or fountain-house?).ti,ab.
40	sheltered work$.ti,ab.
41	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
42	(individual? adj3 placement?).ti,ab.
43	(job adj3 shadow$).ti,ab.
44	work experience.ti,ab.
45	(job? adj3 (search$ or seek$)).ti,ab.
46	(internship? or traineeship?).ti,ab.
47	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
48	(travel adj3 train$).ti,ab.
49	(independen$ adj3 travel$).ti,ab.
50	employment program?.ti,ab.
51	job coach$.ti,ab.
52	job placement?.ti,ab.
53	"access to work".ti,ab.
54	T-level?.ti,ab.
55	ASDAN.ti,ab.
56	CEIAG.ti,ab.
57	"careers education information advice and guidance".ti,ab.
58	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
59	"chambers of commerce".ti,ab.
60	employment organi?ation$.ti,ab.
61	employment agenc$.ti,ab.
62	or/31-61
63	16 and (26 or 30) and 62
64	limit 63 to yr="2000 -Current"

1

2 Database: PsycInfo

3 Date of last search: 17/07/2020

#	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/

#	Searches
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$)).ti.
36	or/25-35
37	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/)
38	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)
39	(exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)
40	or/37-39
41	((health$ 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	EMPLOYMENT/
46	SUPPORTED EMPLOYMENT/
47	VOCATIONAL REHABILITATION/
48	OCCUPATIONAL ADJUSTMENT/
49	WORK ADJUSTMENT TRAINING/

#	Searches
50	SCHOOL TO WORK TRANSITION/
51	SHELTERED WORKSHOPS/
52	UNEMPLOYMENT/
53	employment.ti.
54	unemployment.ti.
55	(transition$ adj3 employment).ti,ab.
56	(support$ adj3 employment).ti,ab.
57	(prepar$ adj5 employment).ti,ab.
58	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
59	((occupation$ or work or job?) adj3 rehab$).ti,ab.
60	(clubhouse? or club-house?).ti,ab.
61	(fountainhouse? or fountain-house?).ti,ab.
62	sheltered work$.ti,ab.
63	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
64	(individual? adj3 placement?).ti,ab.
65	(job adj3 shadow$).ti,ab.
66	work experience.ti,ab.
67	(job? adj3 (search$ or seek$)).ti,ab.
68	(internship? or traineeship?).ti,ab.
69	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
70	(travel adj3 train$).ti,ab.
71	(independen$ adj3 travel$).ti,ab.
72	employment program?.ti,ab.
73	job coach$.ti,ab.
74	job placement?.ti,ab.
75	"access to work".ti,ab.
76	T-level?.ti,ab.
77	ASDAN.ti,ab.
78	CEIAG.ti,ab.
79	"careers education information advice and guidance".ti,ab.
80	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
81	"chambers of commerce".ti,ab.
82	employment organi?ation$.ti,ab.
83	employment agenc$.ti,ab.
84	or/45-83
85	24 and (36 or 40 or 44) and 84
86	limit 85 to english language
87	limit 86 to yr="2000 -Current"
88	limit 87 to ("0100 journal" or "0110 peer-reviewed journal" or "0120 non-peer-reviewed journal")

1

2 Database: Emcare

3 Date of last search: 17/07/2020

#	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 dysfunct$).ti.
16	((sever$ or complex$ or special or high) adj3 need?).ti,ab.
17	SHCN.ti,ab.
18	or/12-17

#	Searches
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$)).ti.
38	or/26-37
39	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/)
40	(HEALTH SERVICE/ or CHILD HEALTH CARE/ or COMMUNITY CARE/ or HOME CARE/ or MENTAL HEALTH SERVICE/ or *NURSING/ or exp HEALTH CARE PERSONNEL/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
41	(SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
42	or/39-41
43	((health$ 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$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	EMPLOYMENT/
54	FULLTIME EMPLOYMENT/
55	PARTTIME EMPLOYMENT/
56	PERMANENT EMPLOYMENT/
57	TEMPORARY EMPLOYMENT/
58	SUPPORTED EMPLOYMENT/
59	VOCATIONAL REHABILITATION/
60	SHELTERED WORKSHOP/
61	employment.ti.
62	unemployment.ti.
63	(transition$ adj3 employment).ti,ab.
64	(support$ adj3 employment).ti,ab.

#	Searches
65	(prepar$ adj5 employment).ti,ab.
66	((vocation$ or prevocation$) adj3 (rehab$ or train$ or support$)).ti,ab.
67	((occupation$ or work or job?) adj3 rehab$).ti,ab.
68	(clubhouse? or club-house?).ti,ab.
69	(fountainhouse? or fountain-house?).ti,ab.
70	sheltered work$.ti,ab.
71	((voluntary or volunteer$) adj3 (employ$ or work$ or job?)).ti,ab.
72	(individual? adj3 placement?).ti,ab.
73	(job adj3 shadow$).ti,ab.
74	work experience.ti,ab.
75	(job? adj3 (search$ or seek$)).ti,ab.
76	(internship? or traineeship?).ti,ab.
77	(support$ adj3 (intern? or internee? or trainee?)).ti,ab.
78	(travel adj3 train$).ti,ab.
79	(independen$ adj3 travel$).ti,ab.
80	employment program?.ti,ab.
81	job coach$.ti,ab.
82	job placement?.ti,ab.
83	"access to work".ti,ab.
84	T-level?.ti,ab.
85	ASDAN.ti,ab.
86	CEIAG.ti,ab.
87	"careers education information advice and guidance".ti,ab.
88	(employment adj10 (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 follow on support or ((arrangement? or link?) adj3 (third sector or community organi?ation$ or charit$)))).ti,ab.
89	"chambers of commerce".ti,ab.
90	employment organi?ation$.ti,ab.
91	employment agenc$.ti,ab.
92	or/53-91
93	25 and (38 or 42 or 46 or 52) and 92
94	limit 93 to english language
95	limit 94 to yr="2000 -Current"
96	letter.pt. or LETTER/
97	note.pt.
98	editorial.pt.
99	CASE REPORT/ or CASE STUDY/
100	(letter or comment*).ti.
101	or/96-100
102	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
103	101 not 102
104	ANIMAL/ not HUMAN/
105	NONHUMAN/
106	exp ANIMAL EXPERIMENT/
107	exp EXPERIMENTAL ANIMAL/
108	ANIMAL MODEL/
109	exp RODENT/
110	(rat or rats or mouse or mice).ti.
111	or/103-110
112	95 not 111

1

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

4 **Date of last search: 17/07/2020**

#	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

#	Searches
#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"]
#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

#	Searches
#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 ^EMPLOYMENT]
#57	[mh ^"EMPLOYMENT, SUPPORTED"]
#58	[mh ^"REHABILITATION, VOCATIONAL"]
#59	[mh ^"SHELTERED WORKSHOP"]
#60	[mh ^UNEMPLOYMENT]
#61	employment:ti
#62	unemployment:ti
#63	(transition* near/3 employment):ti,ab
#64	(support* near/3 employment):ti,ab
#65	(prepar* near/5 employment):ti,ab
#66	((vocation* or prevocation*) near/3 (rehab* or train* or support*)):ti,ab
#67	((occupation* or work or job*) near/3 rehab*):ti,ab
#68	(clubhouse* or "club-house*"):ti,ab
#69	(fountainhouse* or "fountain-house*"):ti,ab
#70	"sheltered work*":ti,ab
#71	((voluntary or volunteer*) near/3 (employ* or work* or job*)):ti,ab
#72	((individual or individuals) near/3 placement*):ti,ab
#73	(job near/3 shadow*):ti,ab
#74	"work experience":ti,ab
#75	(job* near/3 (search* or seek*)):ti,ab
#76	(internship* or traineeship*):ti,ab
#77	(support* near/3 (intern or interns or internee* or trainee*)):ti,ab
#78	(travel near/3 train*):ti,ab
#79	(independen* near/3 travel*):ti,ab
#80	"employment program*":ti,ab
#81	"job coach*":ti,ab
#82	"job placement*":ti,ab
#83	"access to work":ti,ab
#84	"T-level*":ti,ab
#85	ASDAN:ti,ab
#86	CEIAG:ti,ab
#87	"careers education information advice and guidance":ti,ab
#88	(employment near/10 (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 "follow on support" or ((arrangement* or link*) near/3 ("third sector" or "community organisation*" or "community organization*" or charit*)))):ti,ab
#89	"chamber* of commerce":ti,ab
#90	("employment organisation*" or "employment organization*"):ti,ab
#91	"employment agenc*":ti,ab
#92	#56 or #57 or #58 or #59 or #60 or #61 or #62 or #63 or #64 or #65 or #66 or #67 or #68 or #69 or #70 or #71 or #72 or #73 or #74 or #75 or #76 or #77 or #78 or #79 or #80 or #81 or #82 or #83 or #84 or #85 or #86 or #87 or #88 or #89 or #90 or #91
#93	#27 and (#40 or #44 or #48 or #55) and #92
#94	#27 and (#40 or #44 or #48 or #55) and #92 with Cochrane Library publication date Between Jan 2000 and Jul 2020, in Cochrane Reviews
#95	#27 and (#40 or #44 or #48 or #55) and #92 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: 17/07/2020**

#	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

#	Searches
	(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))
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 EMPLOYMENT IN DARE
28	MeSH DESCRIPTOR EMPLOYMENT, SUPPORTED IN DARE
29	MeSH DESCRIPTOR REHABILITATION, VOCATIONAL IN DARE
30	MeSH DESCRIPTOR UNEMPLOYMENT IN DARE
31	((employment or unemployment or job* or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship* or traineeship* or "travel training" or "independent travel*"):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: 17/07/2020

#	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

#	Searches
27	MeSH DESCRIPTOR EMPLOYMENT IN HTA
28	MeSH DESCRIPTOR EMPLOYMENT, SUPPORTED IN HTA
29	MeSH DESCRIPTOR REHABILITATION, VOCATIONAL IN HTA
30	MeSH DESCRIPTOR SHELTERED WORKSHOPS IN HTA
31	MeSH DESCRIPTOR UNEMPLOYMENT IN HTA
32	(employment or unemployment or job* or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship* or traineeship* or "travel training" or "independent travel*"):TI IN HTA
33	#27 OR #28 OR #29 OR #30 OR #31 OR #32
34	#26 AND #33

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

Date of last search: 17/07/2020

#	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?)) OR (social* AND (educat* OR school* OR teach* OR headmaster? OR headmistress* OR SENCO? OR DfE?)))
6	TI(employment or unemployment or job? or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship? or traineeship? or "travel training" or "independent travel*")
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

Database: British Education Index

Date of last search: 17/07/2020

#	Searches
1	TX(employment or unemployment or job? or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship? or traineeship? or "travel training" or "independent travel*") 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

#	Searches
2	TX(employment or unemployment or job? or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship? or traineeship? or "travel training" or "independent travel*") 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: 20000101-20200731
3	1 or 2

1

2 Database: CINAHL Plus (Cumulative Index to Nursing and Allied Health 3 Literature)

4 Date of last search: 17/07/2020

#	Searches
1	TI(employment or unemployment or job? or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship? or traineeship? or "travel training" or "independent travel*") 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(employment or unemployment or job? or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship? or traineeship? or "travel training" or "independent travel*") 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

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6 Database: Social Sciences Citation Index (SSCI)

7 Date of last search: 17/07/2020

#	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

#	Searches
# 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
# 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: (employment or unemployment or job$ or "vocational rehab*" or "prevocational rehab*" or "occupational rehab*" or "work rehab*" or "job rehab*" or clubhouse or fountainhouse or "sheltered work*" or "work experience" or internship$ or traineeship$ or "travel training" or "independent travel*") 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: 17/07/2020

#	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: employment or unemployment or job or "vocational rehabilitation" or "prevocational rehabilitation" or "occupation rehabilitation" or "work rehabilitation" or "job rehabilitation" or clubhouse or fountainhouse or "sheltered work" or "work experience" or internship or traineeship or "travel training" or "independent travel"
	AND Publication Year: 2000 2020

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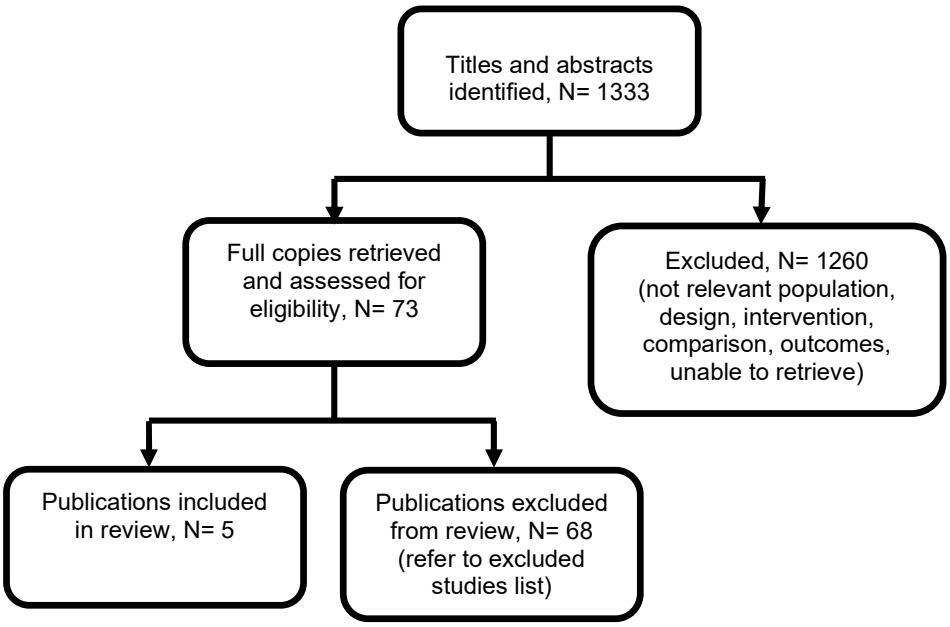
Appendix C – Effectiveness evidence study selection

Study selection for: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

Figure 1: Study selection flow chart



Appendix D – Effectiveness evidence

Evidence tables for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

Table 3: Evidence tables

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Full citation Carter, E. W., Trainor, A. A., Ditchman, N., Swedeen, B., Owens, L., Evaluation of a Multicomponent Intervention Package to Increase Summer Work Experiences for Transition-Age Youth With Severe Disabilities, Research and Practice for Persons with Severe Disabilities, 34, 1-12, 2009 **Ref Id** 1170659 **Country where the study was carried out** USA **Study type** RCT **Study dates** Not reported **Inclusion criteria** Youth with severe disabilities Inclusion criteria: Youth receiving special education services under the primary or secondary disability category of cognitive disability, autism, or multiple disabilities; attending one of the participating high schools; and providing parent consent and individual consent or assent to	**Results** n=67 youth with severe disabilities; n=38 intervention group, n=27 control group Participation in a paid or unpaid community-based work intervention group (n = 25, 65.8%) comparison group (n = 5, 18.5%) Held paid competitive jobs intervention group, n=17 (44.7%) comparison group, n=3 (11.1%) Held unpaid jobs intervention group, n=8 (21.1%) comparison group, n=2 (7.4%) Exclusively held sheltered jobs intervention group, n=3 (7.9%) comparison group, n=3 (11.1%) Did not work at any point during the summer. intervention group, n=10 (26.3%) comparison group, n=19 (70.4%) Held community-based jobs, Pre versus post summer

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
participate. **Exclusion criteria** Students who had mild disabilities (e.g., mild intellectual disabilities, Asperger's syndrome) **Patient characteristics** n=67 youth with severe disabilities n=38 intervention group, n=27 control group Age, Mean (SD): Intervention=18.4 (1.5), Control=17.6 (1.9) Gender, Frequency (%): Female, Intervention=21 (55.3%), Control=17 (58.6%) Male, Intervention=17 (44.7%), Control=12 (41.4%) Disability, Frequency (%): Note that Special education disability category youth is served under more than one category could be coded, resulting in totals exceeding 100%. Autism, Intervention=4 (13.8%), Control=5 (13.2%) Cognitive disability, Intervention=25 (86.2%), Control=32 (84.2%) Orthopaedic impairment, Intervention=1 (3.4%), Control=1 (2.6%) Other health impairment, Intervention=2 (6.9%), Control=5 (13.2%) Speech and language disability, Intervention=4 (13.8%), Control=9 (23.7%) Visual impairment, Intervention=1 (3.4%), Control=2 (5.3%) Race/ethnicity, Frequency (%): African American, Intervention=1 (2.6%), Control=2 (6.9%) Asian/Pacific Islander, Intervention=0 (0%), Control=2 (6.9%) European American, Intervention=34 (89.5%), Control=25 (86.2%) Latino, Intervention=2 (5.3%), Control=0 (0%) Native American, Intervention=1 (2.6%), Control=0 (0%) **Interventions** Multicomponent Intervention Package versus typical transition education in the participating high schools Multicomponent Intervention Package: Consisted of five strategies.	intervention, n=21 (pre) versus n=16 (76.2% post) Not working at the beginning of the summer versus post intervention, n=13 (pre) versus n=11 (84.6% post) [n=1 worked briefly between our two interviews]. comparison, n=21 (pre) versus n=19 (90.5% post) [n=2 (9.5%) could not be reached] Working sheltered jobs, pre versus post summer intervention, n=4 (pre) versus n=3(not working) and n=1 (switched to an unpaid, community based job) Working toward the beginning of the summer versus post summer comparison, n=5 (pre) versus n=5 (post) **1. Bias arising from the randomisation process (Low/High/Some concerns)** High risk: The allocation sequence was not adequately concealed (alternation used). There were no significant differences between intervention and comparison groups on the variables of gender, race/ethnicity, free/reduced lunch status, age, or adaptive behaviour composite scores. **2. Bias arising due to deviations from intended interventions (Low/High/Some concerns)** Some concerns: There is no information on blinding but it is likely that the participants and/or people delivering the intervention were aware of intervention groups during the trial. It was not specified which services, supports, experiences, or connections that participants should receive and schools were not required to follow through on summer plans in a specified way. Therefore, the extent to which each of the intervention components was used varied among the participants. An appropriate analysis was used. **3. Bias due to missing outcome data (Low/High/Some concerns)** Some concerns: Outcome data was available for nearly all participants. There is no evidence that the result was not biased by missing outcome data. Missingness

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Three strategies had individualized, active components specifically for youth in the intervention group (summer-focused planning, community connectors, and employer liaisons). Two strategies (community conversations and resource mapping) were broader, indirect components with potential to benefit all youth with disabilities attending a given high school, regardless of group assignment or participation in our project. Summer-focused planning; Planning with the students facilitated by community connectors, focused explicitly on the upcoming summer months, and was designed to assist youth in the intervention group to connect to specific summer work and other community experiences that might further their transition education Community connectors; Identification of a person at each school to serve in the role of ‘‘community connector’’ for youth with severe disabilities. Their role was to (a) attend their local community conversation and suggest others to invite; (b) facilitate the planning process for youth; (c) collaborate with the employer liaison, as needed; (d) serve as a link between parents, school staff, employer liaison, and others to facilitate progress toward meeting youths’ summer plans; and (e) follow up with the youth, parents, or others during the summer to help problem solve any challenges. Employer liaison; Identification of a person to serve as an employer liaison in each of the six communities. Their role was to (a) attend their local community conversation; (b) draw upon their existing networks and relationships to help community connectors make linkages between youths’ interests and employment, internship, or volunteer opportunities in the local community; (c) collaborate with the community connector, as needed; and (d) attend the planning process for youth with disabilities, when appropriate. Community conversations; Events in each community to foster dialogue around ways that schools, businesses, agencies, organizations, families, youth, and others could work together to expand the employment opportunities of youth with disabilities in their local community and to identify new partners willing to collaborate with participating schools. Resource mapping; Identifying and compiling the informal and formal resources that might be harnessed to improve outcomes for youth with	in the outcome could depend on its true value, however this is unlikely. **4. Bias in measurement of the outcome (Low/High/Some concerns)** Some concerns: The method of measuring the outcome was not inappropriate and ascertainment did not differ between groups. The assessment of the outcome could have been influenced by knowledge of the intervention received (employment outcomes were reported from interviews with parents/guardians/family members and/or the youth themselves; social validity ratings were provided by community connectors and employer liaisons) however this is unlikely. **5. Bias in selection of the reported result (Low/High/Some concerns)** Some concerns: There is no information on whether the result being assessed is likely to have been selected, on the basis of the results, from multiple eligible outcome measurements (e.g. scales, definitions, time points) within the outcome domain and from multiple eligible analyses of the data. **Overall risk of bias (Low/High/Some concerns)** High risk: The study is judged to be of high risk of bias in one domain **Source of funding** The research was supported by the Institute of Education Sciences **Other information** The extent to which each of the five intervention components was used with each participant varied by community and by each student’s need.

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
disabilities Typical transition education in the participating high schools: Not described **Follow-up** Information was gathered during the summer (beginning mid-June) with follow-up at the beginning of early August	
Full citation Izzo, Margo Vreeburg, Cartledge, Gwendolyn, Miller, Larry, Growick, Bruce, Rutkowski, Susan, Increasing Employment Earnings: Extended Transition Services that Make a Difference, Career Development for Exceptional Individuals, 23, 139-156, 2000 **Ref Id** 1282086 **Country where the study was carried out** USA **Study type** Quasi-RCT **Study dates** 1990-1992 **Inclusion criteria** Students with disabilities enrolled in vocational training programs across Ohio **Exclusion criteria** Not reported	**Results** n=122 (n=86 in 1990-1991, and n=36 in 1991-1992) n=24 dropouts; n=17 experimental group and n=7 control group N=98 final sample; n=62 experimental group, and n=36 control group Independent Living Experiences (n=30 experimental, n=17 control) Registered to vote: N (%); experimental= 18 (60), control= 9 (56.3) [Note from 16 participants in the control group] Married: N (%); experimental= 6 (20), control= 3 (17.6) Active in social groups: N (%); experimental= 17 (56.7), control= 3 (17.6) Has savings account: N (%); experimental= 20 (69), control= 3 (37.5) [Note from 29 participants in experimental group, and 16 participants in the control group] Has checkings (current) account: N (%); experimental= 15 (51.7), control= 5 (31.3) [Note from 29 participants in experimental group, and 16 participants in the control group] Has credit cards: N (%); experimental= 7 (24.1), control= 1 (6.3) [Note from 29 participants in experimental group, and 16 participants in the control group] Has driver's license: N (%); experimental= 18 (62.1), control= 14 (87.5) [Note from 29 participants in experimental group, and 16 participants in the control group] **1. Bias arising from the randomisation process (Low/High/Some concerns)** High risk: The allocation sequence was not adequately concealed. There were no significant differences between the two groups on gender, race, disability, and IQ variables. However, approximately 20% more of the experimental group was

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Patient characteristics Gender: n (%) Male; intervention=40 (64.5), control=23 (63.9) Female; intervention=22 (35.5), control=13 (36.1) Race: n (%) White; intervention=53 (85.5), control=27 (75.0) Non-white; intervention=9 (14.5), control=9 (25.0) Disability: n (%) Learning disability; intervention=17 (27.4), control=27 (75.0) Intellectual disabilities; intervention=40 (64.5), control=9 (25.0) Other; intervention=5 (8.0), control=0 (0) Full Scale IQ: Mean (SD); intervention=75.70 (12.1), control=80.5 (10.58) [Note that IQ scores were not available for 16 experimental participants, and 6 control participants] **Interventions** Extension of transition services beyond graduation versus Transition Services ceasing at graduation Extension of transition services: A coordinated set of extended transition services to assist the student with entering and maintaining employment. Services were based on the young adult's needs and included vocational assessment, agency contacts, Individualized Educational Program meetings, extended vocational training, employability counselling, job club, job interview assistance, job development, and job coaching. The intervention was delivered by a job training coordinator. Vocational assessment; Community-based assessment process which included job try-outs to determine if the participant's skills met specific job requirements.	made up of youth with intellectual disabilities and the control group had approximately 10% more of students who were learning disabled. **2. Bias arising due to deviations from intended interventions (Low/High/Some concerns)** High risk: There is no information on blinding but it is likely that the participants and/or people delivering the intervention were aware of intervention groups during the trial. Participants received specific transition services on an as-needed basis, therefore it was likely there were variations in the intervention received across participants (the study reports that when examining the total hours of transition services delivered, huge standard deviations resulted). An appropriate analysis was not used to estimate the effect of adhering to intervention. **3. Bias due to missing outcome data (Low/High/Some concerns)** High risk: Outcome data was not available for all, or nearly all randomised participants. Possible that the results were biased by missing outcome data; the research team randomly assigned other participants to experimental and control groups to maintain enough power to conduct analyses. **4. Bias in measurement of the outcome (Low/High/Some concerns)** Some concerns: The method of measuring outcomes was not inappropriate and did not differ by group. No information on the blinding of outcome; assessment could have been influenced by knowledge of the intervention however this is unlikely. **5. Bias in selection of the reported result (Low/High/Some concerns)** Some concerns: There is no information on whether the data has been analysed according to a pre-specified plan (no protocol available). The results may have been selected on the basis of multiple eligible outcome measurements within the outcome domain, however this is unlikely **Overall risk of bias (Low/High/Some concerns)** High risk: The study is judged to be of high risk of bias in three domains

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Agency contacts; Interagency coordination services from rehabilitation agencies or local boards of intellectual disabilities/developmental disabilities Individualized Educational Program (IEP) meetings; Since the youth were graduates, it was decided that an IEP was not required however if the coordinator felt that an IEP meeting was needed to coordinate numerous services, they would facilitate an IEP meeting including the participant, the parents, school personnel, and other service providers. A behavioural contract was incorporated into the IEP meeting for participants who had behavioural issues. The responsibilities and expectations of the youth would be clearly outlined. Extended vocational training; Spending time in a vocational program after the two-year high school program was completed. Experimental participants returned to their original vocational program for the purpose of remediating specific skills or enrolling in a different vocational program. Employability counselling; One-to-one meetings with the job training coordinator including instruction and counselling that focused on the skills critical to gaining employment including social skill instruction, job maintenance, and work-related interpersonal skills. The sessions would focus on specific issues related to improving the youth's employability such as hygiene, grooming, and social skills. Job club; Weekly sessions on an as-needed basis in small group settings consisting of 3 to 5 students. The job training coordinator assisted students in real-life job search activities such as identifying potential job openings, completing applications, and scheduling interviews. **Job** interview assistance; Each job training coordinator prepared students to meet with an employer to determine if there was a job match between the student's skills and interests and the employer's job demands. This assistance was delivered one-to-one prior to an actual interview. The coordinator would review how to dress for the interview, arrange transportation to the interview, if necessary, and rehearse specific answers to potential interview questions. Job development; Activities that led to job placement for students. Job training coordinators helped participants identify employers located	**Source of funding** Not reported **Other information** The disabilities of the participants were reported as learning disabilities, mental retardation, and other. The study reports that a full spectrum of disabilities participated in the secondary vocational education program. Since the terminology 'mental retardation' is not commonly used in the UK, the term 'intellectual disabilities' was utilised to describe the population.

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
within close proximity of their residence. Job coaching; On-the-job training to participants who needed additional instruction to learn specific job tasks or social skills at the job. Job coaches provided non-verbal and verbal prompts to assure that the job was completed to the employer's satisfaction. The job coach would fade their support and transfer needed supports to co-workers to assure that the participant completed the job at an acceptable level. Ceasing of Transition Services: Transition services provided as part of a secondary vocational program before graduation, which subsequently ceased following graduation. Instead participants received a small stipend to share their employment and independent living status **Follow-up** 5 years after study completion	
Full citation McVeigh, T., Reighard, A., Day, A., Willis, D., Reynolds, M., Jenson, R., John, J., Gee, R., Show-Me-Careers: Missouri's transition to employment collaborative, Journal of Vocational Rehabilitation, 47, 337-350, 2017 **Ref Id** 1105295 **Country where the study was carried out** USA **Study type** Non RCT (evaluation) **Study dates** Not reported	**Results** n=429 students Students who held part-time jobs (%) Baseline=12%, post=33% Students who had paid work experiences (%) Baseline=7%, post=20% Number of employers hiring students with I/DD Baseline=22, post=40 Number of employers providing paid work experiences Baseline=4, post=32 **EPOC Risk of bias for interrupted time series studies** **1. Intervention independent of other changes (Low/High/Unclear)**

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Inclusion criteria Youth with intellectual and developmental disabilities **Exclusion criteria** Not reported **Patient characteristics** Not reported **Interventions** **Evaluation of the Show-Me-Careers initiative** The initiative supported seamless transitions to integrated employment through a "Practice Informing Policy-Policy Enabling Practice" framework (whereby Practice described the pilot community teams, and Policy described the state consortium and stakeholder groups). The policies and strategies related to the Guiding Principles, were implemented by the pilot communities, and would inform and support state level policy change related to transition. Likewise, state level policies and strategies related to the Guiding Principles would enable the implementation of effective community level practice. Efforts at both the community and state level would lead to the overall outcome of seamless transition to employment for youth with IDD. The Guiding Principles were; 1. Career planning and early work experience: All students should have paid work experiences and participate in high-quality, person-centred career planning 2. Employer engagement and business partnerships: School-to-career initiatives should engage employers as active partners and should focus on the needs of both businesses and youth. 3. Family involvement: Families should be encouraged and equipped to have high expectations for their child's future and to participate actively in all parts of transition planning.	High risk: Intervention was not independent of other changes in time and the important confounding factors (dominant provision, definitions of eligibility and socioeconomic status) are not adequately adjusted for. **2. Shape of the intervention effect pre-specified (Low/High/Unclear)** High risk: It is unclear if the point of analysis is the point of intervention; follow-up occurred over a period of 3 and a half years. **3. Intervention unlikely to affect data collection (Low/High/Unclear)** High risk: It is unclear if the sources and methods of data collection were the same before and after the intervention; data was collected from a sample of students from each of the pilot communities that were followed through the project. **4. Knowledge of the allocated interventions adequately prevented during the study (Low/High/Unclear)** Unclear risk: This is not specified in the paper **5. Incomplete outcome data (Low/High/Unclear)** Unclear risk: This is not specified in the paper **6. Selective outcome reporting (Low/High/Unclear)** Unclear risk: This is not specified in the paper **7. Other risks of bias (Low/High/Unclear)** Low risk: No evidence of other biases **Overall risk of bias (Low/High/Some concerns)** High risk: The study is judged to be at high risk of bias in three domains **Source of funding** Show-Me-Careers was funded through a grant by the U.S. Department of Health and Human Services, Administration for Community Living, Administration on

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
4. Integration of systems: School-based and post-school service systems should coordinate efforts to make sure students can move seamlessly from school to career. 5. Post-secondary education and training: Students with IDD should get the support they need to aim for, apply to, enter, and succeed in post-secondary education/training. 6. Youth development: Students should have the opportunity to build self- determination skills and community connections. A Leadership Consortium of state agencies and organizations, was formed to provide the overall management and direction for the project. These included: UMKC Institute for Human Development (UCEDD, lead organization); Missouri Developmental Disabilities Council; Missouri Division of Developmental Disabilities; Missouri Division of Workforce Development; Missouri Office of Adult Learning and Rehabilitation (Vocational Rehabilitation); Missouri Office of Special Education; and Missouri Governor's Council on Disability People First of Missouri. In addition to these core partners, representatives from other agencies, organizations, or stakeholder groups were brought to the table as needed. The project sought to pilot and/or scale-up cross-systems approaches to transition within local communities across the state. The intent of these pilot demonstrations was to facilitate and increase collaboration between systems and organizations working in transition in local communities (i.e. school districts, Vocational Rehabilitation (VR) Counsellors, Developmental Disabilities Support Coordinators, Centers for Independent Living). Eight pilot communities were selected and received funding and support over a period of 3 and half years to scale-up practices related to transition to employment within their communities. Pilot communities were to develop a core team of cross-agency partners to plan, implement, and evaluate activities aimed to support relevant outcomes. The pilot communities used the project's Guiding Principles as a framework to guide their efforts and were able to focus more attention on those Principles most relevant to their community needs and goals. The selected pilot sites consisted of cross-agency partnerships that included school district personnel, district VR counsellors, Division	Intellectual and developmental Disabilities (AIDD), grant no. 90DN0288. **Other information** The type of disability, and age of the participants are not reported

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
of DD youth transition/employment coordinators, Centers for Independent Living staff, Career Center staff, employment providers, local Chambers of Commerce representatives, family members, and individuals with IDD. **Follow-up** Over a period of 3 and a half years	
Full citation Winsor, Jean E., Butterworth, John, Boone, Jane, Jobs by 21 Partnership Project: Impact of Cross-System Collaboration on Employment Outcomes of Young Adults with Developmental Disabilities, Intellectual and Developmental Disabilities, 49, 274-284, 2011 **Ref Id** 1140383 **Country where the study was carried out** USA **Study type** Non RCT **Study dates** 2008 and 2009 **Inclusion criteria** Young adults with developmental disabilities Inclusion criteria: Students turning 21 years of age during their final year of high school; and eligible for the Division of Developmental Disabilities funded services	**Results** Partnership project (PP) participants: Division of Developmental Disabilities eligible students who lived in counties that received Partnership Project funds and who participated in their county's project. Nonparticipants: Division of Developmental Disabilities eligible students who lived in counties that received Partnership Project funds but did not participate in their county's project. No Partnership Project county clients: Division of Developmental Disabilities eligible students who lived in counties that did not receive Partnership Project funds. Number employed in the fiscal year 2008 (total participants=687) PP participants: total n=160; employed n=72 Nonparticipants in PP counties: total n=315; employed n=18 No PP county clients: total n=212; employed n=14 Number employed in the fiscal year 2009 (total participants=765) PP participants: total n=230; employed n=26 Nonparticipants in PP counties: total n=341; employed n=2 No PP county clients: total n=194; employed n=11 Employment setting in the fiscal year 2008 Individual employment: PP participants: n=86% Nonparticipants in PP counties: n=77% No PP county clients: n=28.5%

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Exclusion criteria Not reported **Patient characteristics** In 2008: 9 counties received project funds and collaborated with 55 school districts. Nearly 35% of students who were eligible participated. In 2009: 11 counties received project funds and collaborated with 66 school districts. 40% of students who were eligible participated. Demographics of the participants were not reported **Interventions** Evaluation of the Jobs by 21 Partnership Project compared to Nonparticipants and No Partnership Project county clients The state legislature authorized $2,000,000 for the Jobs by 21 Partnership Project for the 2007–2009 biennium and authorized the Division of Developmental Disabilities to identify and demonstrate best practices in sustainable partnerships among Washington State's school districts, counties, employers, families, students with developmental disabilities, and adult service agencies. County level developmental disability offices applied for funds from the Partnership Project Counties were encouraged to develop collaborative relationships and activities between stakeholders (e.g. Division of Developmental Disabilities, county developmental disability offices, the Division of Vocational Rehabilitation, school administrators and teachers, employment vendors, family members, and young adults) that best met their local needs. Counties were required to incorporate memorandums of understanding with collaborative community partners focused on young adult job seekers and to develop specific employment and career activities that incorporated both school personnel and adult supported employment vendors. The projects were also required to establish a focus on information and outreach, including (a) the provision of Social Security Benefits Training for job seekers; (b) transition fairs for young adults and their	Group supported employment: PP participants: n=4% Nonparticipants in PP counties: n=17% No PP county clients: n=28.5% Person to person services: PP participants: n=10% Nonparticipants in PP counties: n=6% No PP county clients: n=28.5% Prevocational services: PP participants: n=0 Nonparticipants in PP counties: n=0 No PP county clients: n=14.5% Employment setting in the fiscal year 2009 Individual employment: PP participants: n=92% Nonparticipants in PP counties: n=100% No PP county clients: n=20% Group supported employment: PP participants: n=4% Nonparticipants in PP counties: n=0 No PP county clients: n=10% Person to person services: PP participants: n=4% Nonparticipants in PP counties: n=0 No PP county clients: n=20% Prevocational services: PP participants: n=0 Nonparticipants in PP counties: n=0 No PP county clients: n=50% **ROBINS-I** **1. Risk of bias due to confounding (Low/Moderate/Serious/Critical)**

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
families; (c) the dissemination of information about transition and postsecondary education opportunities for young adults; (d) technical assistance and training for teachers, employment vendors, families, students, and other stakeholders; (e) peer mentor groups or job clubs for young adults; and (f) employer-related initiatives targeting young adult job seekers. Goals of the Partnership Project were to (a) capitalize on the Individuals with Disabilities Education Improvement Act (IDEAIA) of 2004 requirement that students have a post school outcome plan; (b) expand and improve upon individual county's existing efforts at collaboration; (c) establish a state-wide partnership between Division of Developmental Disabilities, counties, and schools to enable students to make use of the supports available while still enrolled in school in order to achieve employment upon matriculation; and (d) ensure that counties and school districts make use of job training and job preparation opportunities, labour market guides, workforce development trends, and post-graduation outcome reports to achieve post school employment objectives for transition age students with developmental disabilities. Nonparticipants: Division of Developmental Disabilities eligible students who lived in counties that received Partnership Project funds but did not participate in their county's project. No Partnership Project county clients: Division of Developmental Disabilities eligible students who lived in counties that did not receive Partnership Project funds. **Follow-up** First 3 months after graduation	Serious risk: The important confounding factors (dominant provision, definitions of eligibility and socioeconomic status) are not adequately adjusted for. County developmental disability agencies who received Partnership Project funds made connections with local school districts and identified individuals who were eligible to participate in local projects. **2. Bias in selection of participants into the study (Low/Moderate/Serious/Critical)** Serious risk: The start of follow up and start of intervention do not coincide for all participants; data is reported for participants who received the intervention in fiscal years 2008 and 2009. Not all participants who would have been eligible for the target trial appear to be included in the study (Nearly 35% of students who were eligible participated in 2008 and 40% in 2009). **3. Bias in classification of interventions (Low/Moderate/Serious/Critical)** Low risk: Intervention status is well defined and based solely on information collected at the time of intervention **4. Bias due to deviations from intended interventions (Low/Moderate/Serious/Critical)** No information: Deviations from the intended intervention are not reported **5. Bias due to missing data (Low/Moderate/Serious/Critical)** No information: No information is reported about missing data or the potential for data to be missing **6. Bias in measurement of outcomes (Low/Moderate/Serious/Critical)** Serious risk: The outcome measure was subjective and assessed by assessors aware of the intervention received by study participants **7. Bias in selection of the reported result (Low/Moderate/Serious/Critical)** Serious risk: The protocol has not been published and analyses and outcomes are not clearly defined in the methods section. There is no indication of the selection of the reported analysis from among multiple analyses or the selection

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
	of the cohort or subgroups for analysis and reporting on the basis of the results however there is a risk of selective reporting. **Overall risk of bias (Low/High/Some concerns)** Serious risk: The study is judged to be at serious risk of bias in four domains, but not at critical risk of bias in any domain. **Source of funding** Supported in part by the legislative proviso contained within Substitute House Bill 1128, Section 205 (1)(f) of the 60th legislature of the State of Washington for the 2007–09 biennium effective May 15, 2007. **Other information**
Full citation Yamatani, Hide, Teixeira, Samantha, McDonough, Kathleen, Employing people with disabilities: a preliminary assessment of a start-up Initiative, Journal of Human Behavior in the Social Environment, 25, 830-842, 2015 **Ref Id** 1172048 **Country where the study was carried out** USA **Study type** Non RCT (mixed methods evaluation) **Study dates** Not reported **Inclusion criteria** Employees with disabilities	**Results** Work Performance Improvement Rates of improvement gains were made among the following five areas: ● Customer service skills (by +17.5%) ● Work behaviour (by +12.1%) ● Planning and organizing (by +11.4%) ● Professionalism (by +10.6%) ● Teamwork (by +10.5%) Work performance appraisals of youth employees with disabilities by supervisors. Attendance and punctuality: Baseline=4.1, Post=4.1 Work Behaviour: Baseline=3.5, Post=4.0 Professionalism: Baseline=3.5, Post=3.9 Job Performance: Baseline=3.4, Post=3.4 Teamwork: Baseline=3.2, Post=3.6 Customer Service Skills: Baseline=3.2, Post=3.7 Planning and Organizing: Baseline=2.8, Post=3.2 [Numeric rating code: 1 = Needs improvement (does not meet expectations); 2 = Developing (sometimes meets expectations, but not yet proficient); 3 = Proficient (consistently and adequately meets expectations); 4 = Strong

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Exclusion criteria Not reported **Patient characteristics** n=12 employees with disabilities Patient demographics are not reported **Interventions** Evaluation of the Career Transition Liaison Project Included a full-time career transition liaison that worked directly with the employer's human resources personnel, trainers, supervisors, and other employees to maintain a supportive culture for workers with disabilities. The Career Transition Liaison also provided a number of additional support services, including coordination with school and community job coaches, trainers, and refinement of the training program for the employer's team leaders (primarily supervisors of employees). **Follow-up** 3 months: Work performance appraisals of the employees were conducted during April for the baseline measurement and July as a 3-month post measurement	(often exceeds expectations); 5 = Distinctive (consistently exceeds expectations)] **EPOC Risk of bias for interrupted time series studies** **1. Intervention independent of other changes (Low/High/Unclear)** High risk: Intervention was not independent of other changes in time, and the important confounding factors (dominant provision, definitions of eligibility and socioeconomic status) are not adequately adjusted for **2. Shape of the intervention effect pre-specified (Low/High/Unclear)** Low risk: Point of analysis is the point of intervention; follow-up at 3 months **3. Intervention unlikely to affect data collection (Low/High/Unclear)** Low risk: The intervention itself was unlikely to affect data collection **4. Knowledge of the allocated interventions adequately prevented during the study (Low/High/Unclear)** High risk: Outcomes were not assessed blindly and were completed by supervisors, the participants themselves and advisory board members. **5. Incomplete outcome data (Low/High/Unclear)** Unclear risk: Not specified in the paper **6. Selective outcome reporting (Low/High/Unclear)** Low risk: All relevant outcomes specified in the methods section are reported in the results section (however the protocol has not been published). **7. Other risks of bias (Low/High/Unclear)** High risk: Funding sources are not reported. Demographics of the participants are not reported. **Overall risk of bias (Low/High/Some concerns)** High risk: The study is judged to be at high risk of bias in three domains

Study details	Results and risk of bias assessment using ROB 2/ ROBINS-I/ EPOC Risk of bias for interrupted time series studies
	Source of funding Not reported **Other information** Note that that the type of disability, and age of the participants are not reported. The employer previously offered job opportunities to people who are deaf or blind or have other physical or mental challenges. In the current study, the employer hired individuals identified by their high schools or vocational schools as having a disability, and participants are described as 'youth', therefore the assumption is that participants would be under 25 years of age.

AIDD: administration on intellectual and developmental disabilities; DD: developmental disabilities; EPOC: Effective Practice and Organisation of Care; FY: fiscal year; IDD: intellectual and developmental disabilities; IDEAIA: individuals with disabilities education improvement act; IEP: individualized educational program; PP: partnership project; RCT: randomised controlled trial; ROB 2: Cochrane risk of bias tool version 2; SD: standard deviation; UCEDD; university center for excellence in developmental disabilities; UMKC: university of Missouri Kansas city; USA: United States of America; VR: vocational rehabilitation

Appendix E – Forest plots

Forest plots for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

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

Appendix F – GRADE tables

GRADE tables for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

Table 4: Evidence profile for comparison 1: Multicomponent intervention package versus typical transition

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Multicomponent intervention package	Typical transition	Relative (95% CI)	Absolute		
Progress into employment as measured by participation in a paid or unpaid community based work (follow-up approximately 8 weeks; better indicated by higher values)												
1 (Carter 2009)	randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	25/38 (65.8%)	5/27 (18.5%)	RR 3.55 (1.56 to 8.10)	472 more per 1,000 (from 104 more to 1,000 more)	LOW	CRITICAL
Progress into employment as measured by held paid competitive jobs (follow-up approximately 8 weeks; better indicated by higher values)												
1 (Carter 2009)	randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	17/38 (44.7%)	3/27 (11.1%)	RR 4.03 (1.31 to 12.39)	337 more per 1,000 (from 34 more to 1,000 more)	LOW	CRITICAL
Progress into employment as measured by held unpaid jobs (follow-up approximately 8 weeks; better indicated by higher values)												
1 (Carter 2009)	randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	8/38 (21.1%)	2/27 (7.4%)	RR 2.84 (0.65 to 12.35)	136 more per 1,000 (from 26 fewer to 841 more)	VERY LOW	CRITICAL
Progress into employment as measured by those that exclusively held sheltered jobs (follow-up approximately 8 weeks; better indicated by higher values)												
1 (Carter 2009)	randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	3/38 (7.9%)	3/27 (11.1%)	RR 0.71 (0.16 to 3.26)	32 fewer per 1,000 (from 93 fewer to 251 more)	VERY LOW	CRITICAL
Progress into employment as measured by those that did not work at any point during the summer (follow-up approximately 8 weeks; better indicated by lower values)												

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Multicomponent intervention package	Typical transition	Relative (95% CI)	Absolute		
1 (Carter 2009)	randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	10/38 (26.3%)	19/27 (70.4%)	RR 0.37 (0.21 to 0.67)	10/38 (26.3%)	LOW	CRITICAL

CI: confidence interval; MID: minimal important difference; ROB 2: Cochrane risk of bias tool version 2; RR: risk ratio
[1]Evidence downgraded by 2 due to high risk of bias in one domain (randomisation process) as per RoB 2
[2]Evidence downgraded by 2 due to 95% CI crossed 2 MIDs (Default MIDs for dichotomous outcomes = 0.80 and 1.25)

Table 6: Evidence profile for comparison 2: Before and after the Show-Me-Careers initiative

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before the Show-Me-Careers initiative	After the Show-Me-Careers initiative	Relative (95% CI)	Absolute		
Progress into employment as measured by students who held part-time jobs (follow-up over a period of 3.5 years; better indicated by higher values)												
1 (McVeigh 2017)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	142/429 (33.1%)	51/429 (11.9%)	RR 2.78 (2.08 to 3.72)	212 more per 1,000 (from 128 more to 323 more)	VERY LOW	CRITICAL
Progress into employment as measured by students who had paid work experiences (follow-up over a period of 3.5 years; better indicated by higher values)												
1 (McVeigh 2017)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	86/429 (20.0%)	30/429 (7.0%)	RR 2.87 (1.93 to 4.25)	131 more per 1,000 (from 65 more to 227 more)	VERY LOW	CRITICAL

CI: confidence interval; EPOC: Effective Practice and Organisation of Care; RR: risk ratio
[1]Evidence downgraded by 2 due to high risk of bias in 3 domains (intervention independent of other changes, shape of the intervention effect pre-specified, and Intervention unlikely to affect data collection) as per EPOC risk of bias for interrupted time series studies

Table 7: Evidence profile for comparison 3: Jobs by 21 Partnership Project versus nonparticipants

Quality assessment	Number of participants	Effect	Quality	Importance

No of studies	**Design**	**Risk of bias**	**Inconsistency**	**Indirectness**	**Imprecision**	**Other considerations**	**Jobs by 21 Partnership Project**	**Nonparticipants**	**Relative (95% CI)**	**Absolute**		
Progress into employment as measured by number employed in the fiscal year 2008 (follow-up 3 months; better indicated by higher values)												
1 (Winsor 2011)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	72/160 (45.0%)	18/315 (5.7%)	RR 7.88 (4.87 to 12.73)	393 more per 1,000 (from 221 more to 670 more)	LOW	CRITICAL
Progress into employment as measured by number employed in the fiscal year 2009 (follow-up 3 months; better indicated by higher values)												
1 (Winsor 2011)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	26/230 (11.3%)	2/341 (0.6%)	RR 19.27 (4.62 to 80.42)	107 more per 1,000 (from 21 more to 466 more)	LOW	CRITICAL

CI: confidence interval; RR: risk ratio

[1]Evidence downgraded by 2 due to serious risk of bias in 4 domains (confounding, selection of participants into the study, measurement of outcomes, and selection of the reported result) as per ROBINS-I

Table 8: Evidence profile for comparison 4: Jobs by 21 Partnership Project versus no Partnership Project county clients

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	**Design**	**Risk of bias**	**Inconsistency**	**Indirectness**	**Imprecision**	**Other considerations**	**Jobs by 21 Partnership Project**	**No Partnership Project county clients**	**Relative (95% CI)**	**Absolute**		
Progress into employment as measured by number employed in the fiscal year 2008 (follow-up 3 months; better indicated by higher values)												
1 (Winsor 2011)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	72/160 (45.0%)	14/212 (6.6%)	RR 6.81 (3.99 to 11.63)	384 more per 1,000 (from 197 more to 702 more)	LOW	CRITICAL
Progress into employment as measured by number employed in the fiscal year 2009 (follow-up 3 months; better indicated by higher values)												
1 (Winsor 2011)	observational study	very serious[1]	no serious inconsistency	no serious indirectness	serious imprecision[2]	none	26/230 (11.3%)	11/194 (5.7%)	RR 1.99 (1.01 to 3.93)	56 more per 1,000 (from 1 more to 166 more)	LOW	CRITICAL

CI: confidence interval; RR: risk ratio
[1]Evidence downgraded by 2 due to serious risk of bias in 4 domains (confounding, selection of participants into the study, measurement of outcomes, and selection of the reported result) as per ROBINS-I
[2]Evidence downgraded by 1 due to 95% CI crossed 1 MID (Default MID for dichotomous outcomes = 1.25)

Table 9: Evidence profile for comparison 5: Before and after the Career Transition Liaison Project

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before the Career Transition Liaison Project	After the Career Transition Liaison Project	Relative (95% CI)	Absolute		
Competence as measured by work performance appraisals (follow-up 3 months; range of scores: 1-5; better indicated by higher values)												
1 (Yamatani 2015)	observational study	very serious[1]	no serious inconsistency	serious indirectness[2]	serious imprecision[3]	none	12	12	-	MD 0.3 higher (0.03 higher to 0.57 higher)	VERY LOW	CRITICAL

CI: confidence interval; EPOC: Effective Practice and Organisation of Care; MD: mean difference; MID: minimal important difference; SD: standard deviation
[1]Evidence downgraded by 2 due to high risk of bias in 3 domains (intervention independent of other changes, knowledge of the allocated interventions adequately prevented during the study, and other risks of bias) as per EPOC risk of bias for interrupted time series studies
[2]Evidence downgraded by 1 due to 1 indirect aspect of PICO (population)
[3]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD of the control group = 0.184)

Table 10: Evidence profile for comparison 6: Extension of transition services beyond graduation versus transition services ceasing at graduation

Quality assessment							Number of participants		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Extension of transition services beyond graduation	Transition services ceasing at graduation	Relative (95% CI)	Absolute		
Independence as measured by registered to vote (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	18/30 (60.0%)	9/16 (56.3%)	RR 1.07 (0.63 to 1.80)	39 more per 1,000 (from 208 fewer to 450 more)	VERY LOW	CRITICAL
Independence as measured by married (follow-up 5 years; better indicated by higher values)												

1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	6/30 (20.0%)	3/17 (17.6%)	RR 1.13 (0.32 to 3.96)	23 more per 1,000 (from 120 fewer to 522 more)	VERY LOW	CRITICAL
Independence as measured by active in social groups (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	serious imprecision[3]	none	17/30 (56.7%)	3/17 (17.6%)	RR 3.21 (1.10 to 9.39)	390 more per 1,000 (from 18 more to 1,000 more)	VERY LOW	CRITICAL
Independence as measured by has savings account (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	20/29 (69.0%)	3/16 (18.8%)	RR 3.68 (1.29 to 10.50)	503 more per 1,000 (from 54 more to 1,000 more)	LOW	CRITICAL
Independence as measured by has checkings account (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	15/29 (51.7%)	5/16 (31.3%)	RR 1.66 (0.74 to 3.71)	206 more per 1,000 (from 81 fewer to 847 more)	VERY LOW	CRITICAL
Independence as measured by has credit cards (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	very serious imprecision[2]	none	7/29 (24.1%)	1/16 (6.3%)	RR 3.86 (0.52 to 28.66)	179 more per 1,000 (from 30 fewer to 1,000 more	VERY LOW	CRITICAL
Independence as measured by has driver's license (follow-up 5 years; better indicated by higher values)												
1 (Izzo 2000)	quasi-randomised trial	very serious[1]	no serious inconsistency	no serious indirectness	serious imprecision[4]	none	18/29 (62.1%)	14/16 (87.5%)	RR 0.71 (0.51 to 1.00)	254 fewer per 1,000 (from 429 fewer to 0 fewer)	VERY LOW	CRITICAL

CI: confidence interval; MID: minimal important difference; ROB 2: Cochrane risk of bias tool version 2; RR: risk ratio

[1]Evidence downgraded by 2 due to high risk of bias in three domains (randomisation process, deviations from intended interventions, and missing outcome data) as per RoB 2

[2]Evidence downgraded by 2 due to 95% CI crossed 2 MIDs (Default MIDs for dichotomous outcomes = 0.80 and 1.25)

[3]Evidence downgraded by 1 due to 95% CI crossed 1 MID (Default MID for dichotomous outcomes = 1.25)

[4]Evidence downgraded by 1 due to 95% CI crossed 1 MID (Default MID for dichotomous outcomes = 0.80)

1

Appendix G – Economic evidence study selection

Economic evidence study selection for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

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

Appendix H – Economic evidence tables

Economic evidence tables for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

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

Appendix I – Economic model

Economic model for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

No economic analysis was conducted for this review question.

1 Appendix J – Excluded studies

2 Excluded studies for review question: What are the most effective models of 3 health, social care and education services working together to prepare 4 disabled children and young people with severe complex needs for 5 employment?

6 Effectiveness evidence

7 **Table 5: Excluded studies and reasons for their exclusion**

Study	Reason for Exclusion
Allott, Susan, Hicks, Tom, Raising aspiration: widening participation in supported internships, 12, 2016	Publication type: Report including case studies. No relevant data for extraction.
Anand, P., Honeycutt, T. C., Long-Term Outcomes for Transition-Age Youth With Mental Health Conditions Who Receive Postsecondary Education Support, Journal of Disability Policy Studies, 30, 223-232, 2020	Population: Do not appear to have severe complex needs requiring health, social care and education support. Youth with mental health conditions.
Andersen, A., Larsson, K., Pingel, R., Kristiansson, P., Anderzen, I., The relationship between self-efficacy and transition to work or studies in young adults with disabilities, Scandinavian Journal of Public Health, 46, 272-278, 2018	Outcomes/Population: Insufficient presentation of results - employment status is reported according to self-efficacy status. Likely the population did not require health, social care and education support (young adults with disabilities excluding those with serious physical illness or injury based on the Swedish National Board of Health and Welfare criteria).
Anderson, Caroline J., Vogel, Lawrence C., Employment outcomes of adults who sustained spinal cord injuries as children or adolescents, Archives of Physical Medicine and Rehabilitation, 83, 791-801, 2002	Population: Mean age at interview was 29 years (Age range 24 to 37 years)
Antonelli, K., O'Mally, J., Steverson, A., Participant experiences in an employment mentoring program for college students with visual impairments, Journal of Visual Impairment and Blindness, 112, 274-286, 2018	Population: Undergraduates with legal blindness ranging in age from 20 to 35 years (Mean=25.88)
Bal, M. I., Roelofs, P. P. D. M., Hiberink, S. R., van Meeteren, J., Stam, H. J., Roebroeck, M. E., Miedema, H. S., Entering the labor market: increased employment rates of young adults with chronic physical conditions after a vocational rehabilitation program, Disability and Rehabilitation, 1-8, 2019	Population: Participants had chronic physical conditions with no additional comorbidities. 20% of participants had severe physical limitations.
Beyer, Stephen, et, al, What works?: transition to employment for young people with learning disabilities, 34p., 2008	Outcomes: Insufficient presentation of results for analysis
Beyer, Stephen, Meek, Andrea, Davies, Amy, Supported work experience and its impact on young people with intellectual disabilities, their families and employers, Advances in Mental Health and Intellectual Disabilities, 10, 207-220, 2016	Comparison: Non relevant comparison. (First versus second work placements)
Beyer, Steve, Transition from school to	Article unavailable

Study	Reason for Exclusion
employment - what works?, Llais, 8-11, 2008	
Bjornson, Kristie, Kobayashi, Ana, Zhou, Chuan, Walker, William, Relationship of therapy to postsecondary education and employment in young adults with physical disabilities, Pediatric physical therapy : the official publication of the Section on Pediatrics of the American Physical Therapy Association, 23, 179-86, 2011	Study design: Longitudinal study with no comparative data
Bouck, E. C., Secondary students with moderate/severe intellectual disability: considerations of curriculum and post-school outcomes from the National Longitudinal Transition Study-2, Journal of intellectual disability research : JIDR, 56, 1175-86, 2012	Intervention: Not a joint-working practice to prepare disabled children and young people with severe complex needs for employment (Education only: functional versus academic curriculum).
Browne, Deborah J., Waghorn, Geoffrey, Employment services as an early intervention for young people with mental illness, Early Intervention in Psychiatry, 4, 327-35, 2010	Population: Young people with mental illness such as Schizophrenia, Generalized anxiety disorder and Bipolar affective disorder.
Butterworth, J., Christensen, J., Flippo, K., Partnerships in Employment: Building strong coalitions to facilitate systems change for youth and young adults, Journal of Vocational Rehabilitation, 47, 265-276, 2017	Publication type: Review article
Canham, Kathy, Jobs for the boys - and girls, Learning Disability Today, 16-18, 2008	Article unavailable
Carroll, C., Dockrell, J., Leaving special school: Post-16 outcomes for young adults with specific language impairment, European Journal of Special Needs Education, 25, 131-147, 2010	Study design: Survey with no relevant comparative data
Carter, E. W., McMillan, E., Willis, W., The TennesseeWorks Partnership: Elevating employment outcomes for people with intellectual and developmental disabilities, Journal of Vocational Rehabilitation, 47, 365-378, 2017	Publication type: Review article
Certo, Nicholas J., Luecking, Richard G., Blackorby, Boeltzig Braddock Brooke Brown Butterworth Certo Certo Connelly Fesko Hagen-Foley LaPlante Luecking Luecking Luecking Mank Martin Luecking Mount Pearpoint Silverstein Wehman Wehman, Service Integration and School to Work Transition: Customized Employment as an Outcome for Youth with Significant Disabilities, Special Issue: Customized employment for job seekers with significant disabilities, 37, 29-35, 2006	Outcomes: Insufficient presentation of results.
Cobb, B., Alwell, M., Transition planning/coordinating interventions for youth with disabilities: a systematic review, 1-65, 2007	Outcomes: Systematic review reporting no relevant outcome data for extraction. Relevant studies were checked for inclusion.
Conway, P., Clatworthy, J., Innovations in Practice: Grow2Grow - engaging hard-to-reach adolescents through combined mental health and vocational support outside the clinic setting, Child and Adolescent Mental Health, 20, 112-115, 2015	Outcomes: Insufficient presentation of results for analysis.
Coopergibson, Research, Disability Rights, U. K., Supported internship trial for 16 to 24 year	Outcomes: Insufficient presentation of results for

Study	Reason for Exclusion
old learners with learning difficulties and/or disabilities: an evaluation: research report, 149, 2013	analysis
Curtin, K. A., Garcia, J., Improving Work Performance for Adolescents with Emotional and Behavioral Disorders: A Comparison of Two Work-Based Learning Interventions, Journal of Rehabilitation, 77, 31-39, 2011	Population: Participants were unlikely to require health, social care and education support. (Emotionally and behaviourally disturbed adolescents were included and non-diploma track students were excluded indicating a less severe learning disability)
Ditchman, Nicole M., Miller, Jennifer L., Easton, Amanda B., Allen, Asselt-Goverts Barnett Barnhill Bates Becker Bolton Borgatti Borgatti Borgatti Bradley Burt Butterworth Carey Catalano Chen Cross Davis Ditchman Drake Dutta Everett Foley Freeman Freeman Fruchterman Hagner Hemsley Hendricks Hendricks Hill Hillier Howlin Kamstra Keel Kemp Kilduff Knoke Lee Marini Martin McDonough McLaren Migliore Muller Newman Pearce Porter Potts Riffel Robins Schall Schaller Shattuck Smith Sung Wasserman Wehman Wehman Zablotsky, Vocational rehabilitation service patterns: An application of social network analysis to examine employment outcomes of transition-age individuals with autism, Rehabilitation Counseling Bulletin, 61, 143-153, 2018	Study design/Outcomes: A network methodology using regression analysis. No relevant outcomes are reported.
Ellison, Marsha Langer, Huckabee, Sloan Smith, Stone, Rachel A., Sabella, Kathryn, Mullen, Michelle G., Career Services for Young Adults with Serious Mental Health Conditions: Innovations in the Field, The journal of behavioral health services & research, 46, 1-14, 2019	Population: Young adults with psychiatric disabilities
Faßmann, H., Lenk, E., Maier-Lenz, R., Steger, R., Chances and successes of vocational training of disabled youth in firm and vocational school -- findings of the BAR-pilot study 'Regional Networks for Vocational Rehabilitation of (Learning-) Disabled Juvenile (REGINE)', Rehabilitation, 44, 107-112, 2005	Language: Article in German
Foley, K. R., Jacoby, P., Girdler, S., Bourke, J., Pikora, T., Lennox, N., Einfeld, S., Llewellyn, G., Parmenter, T. R., Leonard, H., Functioning and post-school transition outcomes for young people with Down syndrome, Child: Care, Health and Development, 39, 789-800, 2013	Study design: Survey reporting no relevant comparative data
Garfitt, Joy, Merthyr Tydfil youth supported employment project, Llais, 12-13, 2008	Article unavailable
Gerrard, Stephen, Independent travel training, Llais, 12-14, 2013	Article unavailable
Grob, C. M., Lerman, D. C., Langlinais, C. A., Villante, N. K., Assessing and teaching job-related social skills to adults with autism spectrum disorder, Journal of Applied Behavior Analysis, 52, 150-172, 2019	Study design: Case studies of three adults with ASD or PDD-NOS aged 19 to 27 years
Harley, Debra A., Tice, Karen, Allen-Meares,	Article unavailable

Study	Reason for Exclusion
Apter Bailey Baker Barrett Bemak Bemak Bronfenbrenner Burnside Cochrane Danek Dinitto Dodson Donaldson Dupper Ellis Franklin Friend Granello Gray Handy Hanley-Maxwell Hanson Jones Keys Lawson Leslau Linden Lubeck Luongo McGoldrick Moxley Oliver Oppenheimer Patton Porter Poulin Rubin Ryan Stone Szymanski Walker Wright Zimmerman, Professional border crossings: Implications of collaboration between vocational rehabilitation counselors and social workers to assist students with disabilities and their families, Journal of Rehabilitation Administration, 25, 161-173, 2001	
Hart, Debra, Zimbrich, Karen, Ghiloni, Claire, Gajar, Peraino Tashie Gilmore Gilmore Blackorby Hall Wagner Certo Kohler Ianacone Stodden Gilson, Interagency partnerships and funding: Individual supports for youth with significant disabilities as they move into postsecondary education and employment options, Journal of Vocational Rehabilitation, 16, 145-154, 2001	Publication type: Review article
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, Disability and Rehabilitation, 1-12	Population: Participants with a visual impairment, excluding those with additional severe impairments. Unlikely to have needs in all three areas of health, social care and education.
Hunter, Jack, Plans that work: employment outcomes for people with learning disabilities, 26, 2019	Publication type: Review article
Jurcak, S. E., Wright, R., Successful transition for adolescents with ABI from high school to employment via a nontraditional sheltered workshop, Brain Injury, 30, 741, 2016	Publication type: Conference abstract
Kaehne Alex, et al.,, Rapid review: transition for young people with learning disabilities in housing, social care, and health care, education/training, and employment, 2018	Publication type: Review article
Kaehne, Axel, Project SEARCH: a new model of supported employment?, Learning Disability Today, 15, 22-24, 2015	Article unavailable
Kaehne, Axel, Project SEARCH UK: evaluating its employment outcomes, Journal of Applied Research in Intellectual Disabilities, 29, 519-530, 2016	Outcomes: Insufficient presentation of results for analysis.
Kaehne, Axel, Allan, Julie, Can peer support help with the employment challenge?, Learning Disability Today, 30-32, 2011	Article unavailable
Kaehne, Axel, Beyer, Stephen, Supported employment for young people with intellectual disabilities facilitated through peer support: A pilot study, Journal of Intellectual Disabilities, 17, 236-251, 2013	Outcomes: Mixed methods study reporting no relevant outcomes.
Karlsudd, Peter, E-collaboration for children with functional disabilities, Telemedicine journal and e-health : the official journal of the American	Intervention: Not a joint-working practice to prepare disabled children and young people with severe complex needs for employment

Study	Reason for Exclusion
Telemedicine Association, 14, 687-94, 2008	
Karpur, Arun, Brewer, David, Golden, Thomas, Adedokun, Austin Austin Bates Benz Benz Box Brewer Brookhart Carter D'Agostino Davis Fleming Haber Halpern Heinze Jasti Joffe Karpur Karpur Kohler Landmark Lanehart Lehman MacKinnon Mazzotti Murray Newman Newman Nietupski Preacher Rosenbaum Rutkowski Schur Smith Sum Svetaz Test Trainor Wagner Werner Winship Zurovac, Critical program elements in transition to adulthood: Comparative analysis of New York State and the NLTS2, Career Development and Transition for Exceptional Individuals, 37, 119-130, 2014	Outcomes: No relevant outcomes reported
Kaya, C., Chan, F., Rumrill, P., Hartman, E., Wehman, P., Iwanaga, K., Pai, C. H., Avellone, L., Vocational rehabilitation services and competitive employment for transition-age youth with autism spectrum disorders, Journal of Vocational Rehabilitation, 45, 73-83, 2016	Study design: Non comparative study
Kaya, Cahit, Hanleyâ€ Maxwell, Cheryl, Chan, Fong, Tansey, Timothy, Differential vocational rehabilitation service patterns and outcomes for transitionâ€ age youth with autism, Journal of Applied Research in Intellectual Disabilities, 31, 862-872, 2018	Study design: Non comparative study
King, Gillian A., Baldwin, Patricia J., Currie, Melissa, Evans, Jan, Anderson, Ashton-Shaeffer Austin Bailey Baird Bandura Bandura Beatty Bedini Blum Bremer Brim Brinckerhoff Brolin Brollier Bronfenbrenner Bronfenbrenner Brooks Brotherson Carr Clark Clark Clement-Heist Crowe Dattilo Davis Dillon Elder Endler Forbes Gaylord-Ross Goldfried Hallum Halpern Halpern Harbin Heal Hoge Holburn Holburn Hostler Hutchison Hyduk Jackson Jacobson Kielhofner King King King King King King King King King Law Lehman Levinson Marks McCarthy Miezio Miner O'Brien Odom Parmenter Peraino Pollock Reiss Rosenbaum Roth Ryan Ryder Sands Sax Schidlow Smith Steere Stevenson Stokols Stroul Szymanski Test VanDenberg Vandewater Victor Wachs Wagner Wagner Wampold Warda Wehmeyer Will, Planning Successful Transitions From School to Adult Roles for Youth With Disabilities, Children's Health Care, 34, 195-216, 2005	Publication type: Review article
Kirsh, B., Stergiou-Kita, M., Gewurtz, R., Dawson, D., Krupa, T., Lysaght, R., Shaw, L., From margins to mainstream: what do we know about work integration for persons with brain injury, mental illness and intellectual disability?, Work, 32, 391-405, 2009	Publication type: Review article
Leathers, Sonya J., Testa, Mark F., Foster youth emancipating from care: caseworkers' reports on needs and services, Child welfare, 85, 463-98, 2006	Study design/Population: Survey reporting no comparative data. Population unlikely to have needs in all three areas of health, social care and education (One third of participants had one

Study	Reason for Exclusion
	or more special mental health, medical, pregnancy/parenting, substance abuse or developmental needs).
Lee, E. A. L., Black, M. H., Falkmer, M., Tan, T. L., Sheehy, L., Bolte, S., Girdler, S., "We Can See a Bright Future": Parents' Perceptions of the Outcomes of Participating in a Strengths-Based Program for Adolescents with Autism Spectrum Disorder, Journal of Autism and Developmental Disorders	Population/Outcomes: Participants were parents of autistic children. No relevant outcomes reported. (Survey eliciting the views of parents of autistic adolescents who participated in a strengths based program).
Lynas, Lydia, Cederlund, Dillenburger Hendricks Hillier Howlin Kobayashi Landa Shattuck Stewart Taylor, Project ABLE (Autism: Building Links to Employment): A specialist employment service for young people and adults with an autism spectrum condition, Journal of Vocational Rehabilitation, 41, 13-21, 2014	Outcomes: Insufficient presentation of results for data extraction.
Mank, D., Cioffi, A., Yovanoff, P., Direct support in supported employment and its relation to job typicalness, coworker involvement, and employment outcomes, Mental Retardation, 38, 506-16, 2000	Population: Adults aged 18 years and above (majority aged 31-40 years)
Marshall, M., Crowther, R., Almaraz-Serrano, A., Creed, F., Sledge, W., Kluiter, H., Roberts, C., Hill, E., Wiersma, D., Bond, G. R., Huxley, P., Tyrer, P., Systematic reviews of the effectiveness of day care for people with severe mental disorders: (1) acute day hospital versus admission; (2) vocational rehabilitation; (3) day hospital versus outpatient care, Health Technology Assessment (Winchester, England)Health Technol Assess, 5, 1-75, 2001	Population: Participants were aged 18 to 65 years and suffering from a severe mental disorder (e.g. schizophrenia, bipolar disorder, or depression with psychotic features).
Murray, Christopher, Doren, Bonnie, The Effects of Working at Gaining Employment Skills on the Social and Vocational Skills of Adolescents with Disabilities: A School-Based Intervention, Rehabilitation Counseling Bulletin, 56, 96-107, 2013	Intervention: Not a joint-working practice to prepare disabled children and young people with severe complex needs for employment (Education only).
National Autistic, Society, School report 2015, 20, 2015	Study design/Outcomes: Survey reporting no relevant data for extraction.
Nicholas, David B., Zwaigenbaum, Lonnie, Zwicker, Jennifer, Clarke, Margaret E., Lamsal, Ramesh, Stoddart, Kevin P., Carroll, Cynthia, Muskat, Barbara, Spoelstra, Margaret, Lowe, Katelyn, Evaluation of Employment-Support Services for Adults with Autism Spectrum Disorder, Autism: The International Journal of Research and Practice, 22, 693-702, 2018	Study design/Outcomes: Survey reporting no relevant data for extraction.
Park, Jiyoon, Bouck, Emily C., Duenas, Ana, Using Video Modeling to Teach Social Skills for Employment to Youth with Intellectual Disability, Career Development and Transition for Exceptional Individuals, 43, 40-52, 2020	Study design: Case study
Raynor, Olivia, Hayward, Katharine, Rice, Kathleen, CECY: California's collaborative approach to increasing employment of youth and young adults with intellectual disabilities,	Publication type: Review article.

Study	Reason for Exclusion
Journal of Vocational Rehabilitation, 47, 307-316, 2017	
Rogers, Christopher, Lavin, Don, Tran, Tri, Gantenbein, Tony, Sharpe, Michael, Eisenman, Wehmeyer Wehmeyer Benz Izzo Zigmond Garza Cameto, Customized employment: Changing what it means to be qualified in the workforce for transition-aged youth and young adults, Journal of Vocational Rehabilitation, 28, 191-207, 2008	Outcomes: Insufficient presentation of results
Roux, Anne M., Rast, Jessica E., Shattuck, Paul T., Correction to: State-Level Variation in Vocational Rehabilitation Service Use and Related Outcomes Among Transition-Age Youth on the Autism Spectrum...Roux AM, Rast JE, Shattuck PT, et al. State-Level Variation in Vocational Rehabilitation Service Use and Related Outcomes Among Transition-Age Youth on the Autism Spectrum. Journal of Autism & Developmental Disorders. 2020; 50(7): 2449-2461, 50, 2462-2463, 2020	Corrected data table for Roux 2020 study
Roux, Anne M., Rast, Jessica E., Shattuck, Paul T., State-Level Variation in Vocational Rehabilitation Service Use and Related Outcomes Among Transition-Age Youth on the Autism Spectrum, Journal of Autism & Developmental Disorders, 50, 2449-2461, 2020	Study design: Non comparative analysis of Vocational Rehabilitation services
Sherring, Joanne, Robson, Emma, Morris, Adrienne, Frost, Barry, Tirupati, Srinivasan, A working reality: evaluating enhanced intersectoral links in supported employment for people with psychiatric disabilities, Australian occupational therapy journal, 57, 261-7, 2010	Population: Participants with psychiatric disabilities aged between 19-39 years (Mean age=27.8 years).
Smith, M. J., Pinto, R. M., Dawalt, L., Smith, J. D., Sherwood, K., Miles, R., Taylor, J., Hume, K., Dawkins, T., Baker-Ericzen, M., Frazier, T., Humm, L., Steacy, C., Using community-engaged methods to adapt virtual reality job-interview training for transition-age youth on the autism spectrum, Research in Autism Spectrum Disorders, 71, 101498, 2020	Outcomes: No relevant outcomes reported
Soenen, Sarah, van Berckelaer-Onnes, Ina, Scholte, Evert, Anderson, Benson Bexkens Black Campbell Claes Collot d'Escury Didden Embregts Embregts Embregts Embregts Embregts Emerson Fletcher Fuijara Greenspan Greenspan Greenspan Haring Harper Hartley Heyvaert Holwerda Joyce Khemka Kok Kozma Kregel Leffert Lemmens Lindsay Loumidis Luckasson Lysaght Mank Masi Maughan Mulder Murphy Patil Philips Richardson Rose Seltzer Seltzer Singh Snell Soenen Soenen Stancliff Stanley Taanila Taylor Tenneij Tymchuk Tynan van Asselt-Goverts van der Molen van Nieuwenhuijzen Verdonschot Wallander Zijlmans, A comparison of support for two groups of young adults with mild intellectual disability, British Journal of Learning Disabilities,	Intervention: Does not examine joint-working practices to prepare disabled children and young people with severe complex needs for employment.

Study	Reason for Exclusion
44, 146-158, 2016	
Szalda, D., Trachtenberg, S., Brown, L., Stollon, N., Steinway, C., DiIanni, J., Reach (rapport, empowerment and advocacy through connections and health), Journal of Adolescent Health, 56, S32, 2015	Publication type: Conference abstract
Taylor, Brian J., McGilloway, Sinead, Donnelly, Michael, Preparing young adults with disability for employment, Health & social care in the community, 12, 93-101, 2004	Study design/Outcomes: Evaluation documentary analysis with no comparative data
Transitions To Employment Group, Sub-Group, Through learning to earning: transitions into employment for young people with SEND, 33, 2016	Publication type: Report summarising key priorities and challenges
van Beurden, Karlijn M., Vermeulen, Sylvia J., Anema, Johannes R., van der Beek, Allard J., A participatory return-to-work program for temporary agency workers and unemployed workers sick-listed due to musculoskeletal disorders: a process evaluation alongside a randomized controlled trial, Journal of occupational rehabilitation, 22, 127-40, 2012	Population: Unemployed workers between 18 and 64 years of age
Wehman, P., Chan, F., Ditchman, N., Kang, H. J., Effect of Supported Employment on Vocational Rehabilitation Outcomes of Transition-Age Youth With Intellectual and Developmental Disabilities: A Case Control Study, Intellectual and Developmental Disabilities, 52, 296-310, 2014	Study design: Case-control study
Wehmeyer, M. L., Parent, W., Lattimore, J., Obremski, S., Poston, D., Rousso, H., Promoting Self-determination and self-directed employment planning for young women with disabilities, Journal of Social Work in Disability and Rehabilitation, 8, 117-131, 2009	Publication type: Review article overviewing the self-determined career development model
Westbrook, John D., et, al, Pre-graduation transition services for improving employment outcomes among persons with autism spectrum disorders: a systematic review, 71, 2013	Outcomes: Systematic review with no included studies. No data is presented
Westbrook, John D., Fong, Carlton J., Nye, Chad, Williams, Ann, Wendt, Oliver, Cortopassi, Tara, Pre-Graduation Transition Services for Improving Employment Outcomes among Persons with Autism Spectrum Disorders: A Systematic Review. Campbell Systematic Reviews 2013:11, 1-71, 2013	Duplicate record

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Appendix L – Research recommendations – full details

Research recommendations for review question: What are the most effective models of health, social care and education services working together to prepare disabled children and young people with severe complex needs for employment?

No research recommendations were made for this review question.