

**APPENDIX 17: COMPLETED METHODOLOGY CHECKLISTS  
(ECONOMIC)**

**1.1 METHODOLOGY CHECKLIST FOR MAWHOOD  
AND HOWLIN**

<b>Study identification</b>			
Mawhood, L. & Howlin, P. (1999) 'The Outcome of a Supported Employment Scheme for High-Functioning Adults with Autism or Asperger Syndrome', Autism 3 (3): 229-54.			
<b>Guideline topic:</b> For adults with Autism, what is the effectiveness of vocational and supported employment programmes?			
			<b>Yes/ Partly/ No/Unclear /NA</b>
			<b>Comments</b>
1.1	Is the study population appropriate for the guideline?	Yes	Adults with high functioning autism
1.2	Are the interventions appropriate for the guideline?	Yes	
1.3	Is the healthcare system in which the study was conducted sufficiently similar to the current UK NHS context?	Yes	
1.4	Are costs measured from the NHS and personal social services (PSS) perspective?	NHS	Only includes intervention costs
1.5	Are all direct health effects on individuals included?	No	HRQoL not measured
1.6	Are both costs and health effects discounted at an annual rate of 3.5%?	NA	

1.7	Is the value of health effects expressed in terms of quality-adjusted life years (QALYs)?	No	No. of people employed
1.8	Are changes in health-related quality of life (HRQoL) reported directly from patients and/or carers?	NA	
1.9	Is the valuation of changes in HRQoL (utilities) obtained from a representative sample of the general public?	NA	
1.10 Overall judgement: Directly applicable/Partially applicable/Not applicable There is no need to use section 2 of the checklist if the study is considered 'not applicable'.			
Directly applicable.			
Other comments:			

<b>Section 2: Study limitations (the level of methodological quality) This checklist should be used once it has been decided that the study is sufficiently applicable to the context of the clinical guideline.</b>		<b>Yes/ Partly /No/ Unclear/ NA</b>	<b>Comments</b>
2.1	Does the model structure adequately reflect the nature of the health condition under evaluation?	NA	RCT
2.2	Is the time horizon sufficiently long to reflect all important differences in costs and outcomes?	No	Only covered two years
2.3	Are all important and relevant health outcomes included?	No	HRQoL not measured
2.4	Are the estimates of baseline health outcomes from the best available source?	Partly	RCT

2.5	Are the estimates of relative treatment effects from the best available source?	Partly	RCT
2.6	Are all important and relevant costs included?	No	Cost of standard service not reported; other cost implications not considered
2.7	Are the estimates of resource use from the best available source?	Partly	RCT, resource use of control group not reported
2.8	Are the unit costs of resources from the best available source?	Partly	Local prices
2.9	Is an appropriate incremental analysis presented or can it be calculated from the data?	Yes	
2.10	Are all important parameters whose values are uncertain subjected to appropriate sensitivity analysis?	No	Simple cost estimates
2.11	Is there no potential conflict of interest?	Yes	
2.12 Overall assessment: Minor limitations/Potentially serious limitations/Very serious limitations			
Potentially serious limitations			
Other comments:			

## 1.2 METHODOLOGY CHECKLIST OF ECONOMIC MODEL

<b>Study identification</b>			
Guideline economic model of employment support to adults with autism.			
<b>Economic question:</b> Employment support scheme versus standard care			
		<b>Yes/ Partly/ No/Unclear /NA</b>	<b>Comments</b>
1.1	Is the study population appropriate for the guideline?	Yes	High functioning autism
1.2	Are the interventions appropriate for the guideline?	Yes	
1.3	Is the healthcare system in which the study was conducted sufficiently similar to the current UK NHS context?	Yes	
1.4	Are costs measured from the NHS and personal social services (PSS) perspective?	Partly	Adult education costs included as alternative to employment support
1.5	Are all direct health effects on individuals included?	No	HRQoL not included
1.6	Are both costs and health effects discounted at an annual rate of 3.5%?	Yes	
1.7	Is the value of health effects expressed in terms of quality-adjusted life years (QALYs)?	No	
1.8	Are changes in health-related quality of life (HRQoL) reported directly from patients and/or carers?	NA	

1.9	Is the valuation of changes in HRQoL (utilities) obtained from a representative sample of the general public?	NA	
1.10 Overall judgement: Directly applicable/Partially applicable/Not applicable There is no need to use section 2 of the checklist if the study is considered 'not applicable'.			
Directly applicable			
Other comments:			

<b>Section 2: Study limitations (the level of methodological quality) This checklist should be used once it has been decided that the study is sufficiently applicable to the context of the clinical guideline.</b>		<b>Yes/ Partly /No/ Unclear/ NA</b>	<b>Comments</b>
2.1	Does the model structure adequately reflect the nature of the health condition under evaluation?	Yes	
2.2	Is the time horizon sufficiently long to reflect all important differences in costs and outcomes?	Partly	Only covers three years
2.3	Are all important and relevant health outcomes included?	No	HRQoL not included
2.4	Are the estimates of baseline health outcomes from the best available source?	Partly	One RCT
2.5	Are the estimates of relative treatment effects from the best available source?	Partly	One RCT and further estimates and assumptions
2.6	Are all important and relevant costs included?	Yes	
2.7	Are the estimates of resource use from the best available source?	Partly	Two UK published studies
2.8	Are the unit costs of resources from the best available source?	Yes	UK published studies and

			national reports
2.9	Is an appropriate incremental analysis presented or can it be calculated from the data?	Yes	
2.10	Are all important parameters whose values are uncertain subjected to appropriate sensitivity analysis?	Yes	
2.11	Is there no potential conflict of interest?	Yes	
2.12	Overall assessment: Minor limitations/Potentially serious limitations/Very serious limitations  Potentially serious limitations		
Other comments: Lack of data on the long-term benefits associated with provision of employment support schemes			