National Institute for Health and Care Excellence

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

[G] Evidence review for promoting and maintaining inclusion, independence and wellbeing

NICE guideline NG213

Evidence reviews

March 2022

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Contents

Promoting inclusion, independence and wellbeing

Recommendations supported by this evidence review

This evidence review supports recommendations 1.8.2, 1.16.1, 1.16.3, 1.18.2, 1.18.4 and the research recommendation on assistive technology. Other evidence supporting these recommendations can be found in the evidence reviews on Barriers and facilitators of joined-up care (evidence report K), Views and experiences of service providers (evidence report M).

Review question

What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Introduction

The review aims to identify the optimal approaches for the delivery of health, social care and education services for disabled children and young people with severe complex needs, specifically in terms of promoting inclusion, independence and wellbeing.

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

Population	Disabled children and young people from birth to 25 years with severe complex needs who require health, social care and education support.

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Intervention	Approaches, where 2 or more of the following services work together: health, social care and education. For example:
	• Equipment including adaptations
	• Information and Communication Technology (ICT)
	    o Assistive technology
	    o Low tech Augmentative and Alternative Communication (AAC)
	• Special needs coordinator/Care coordinator
	• Support from health professionals (e.g. speech and language therapist, specialist)
	• Workforce skills and knowledge (to develop or extend inclusive services)
	• Training around every day healthcare needs
	• Positive behaviour support (PBS)
	• Applied behavioural analysis (ABA)
	• Team around the family/Team around the child or young person
	• Shared assessment and planning (e.g., Common assessment framework, linked to troubled families or early help framework)
	• Early support project (preschool/early years)
	• Signs of safety
	• Short breaks
	• Continuing care
	• Personal budgets including person centred planning
	• Purposeful engagement (e.g. careers)
	• Public awareness
	• Supported internships
	• Sleep clinic and feeding clinic
	• Integrated working (education model)

Comparison	• Any other joined-up approaches used by health, social care or education services • Separate health, social and education services (without joined-up working)
Outcome	**Critical** • Participation and inclusion (including progress into paid or voluntary employment/productive engagement) • Independence (e.g. financial stability such as disability living allowance, personal independent payment) • Wellbeing (including safety) **Important** • Quality of life (both health- and social-related quality) (• Educational achievement or attainment • Self-efficacy • Communication

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

Table 1: Summary of the protocol (PICO table)

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Population	Disabled children and young people from birth to 25 years with severe complex needs who require health, social care and education support.

Intervention	Approaches, where 2 or more of the following services work together: health, social care and education. For example:
	• Equipment including adaptations
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Outcome	**Critical**
	• Participation and inclusion (including progress into paid or voluntary employment/productive engagement)
	• Independence (e.g. financial stability such as disability living allowance, personal independent payment)
	• Wellbeing (including safety)
	Important
	• Quality of life (both health- and social-related quality) (
	• Educational achievement or attainment
	• Self-efficacy
	• Communication

AAC: augmentative and alternative communication; ABA: applied behavioural analysis; ICT: information and communication technology; PIP: personal independent payment; PBS: positive behaviour support;

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 non-randomised studies were included in this review; 1 retrospective cohort study (Bent 2002) and 4 before and after studies (Borgestig 2016, Pfiffner 2013, Stewart 2000, and Vasileiadis 2018)

The included studies are summarised in Table 2.

All studies included health professionals in the intervention, however three studies appeared to examine support from health professionals as the approach (Bent 2002, Stewart 2000, and Vasileiadis 2018). Of these, 1 study compared a young adult team involving multidisciplinary specialist teams to an ad hoc service (Bent 2002); 1 study examined occupational therapy while maintaining regular contact with schools and other therapy professionals (Stewart 2000); and 1 study examined a Social Coexistence Programme' which included a speech therapist, psychologist and special education teacher (Vasileiadis 2018).

One study examined Information and Communication Technology, Assistive technology as the approach including gaze-based assistive technology and access to the services from a multi-professional communication team (Borgestig 2016).

One study examined skills and knowledge training as the approach, specifically a Collaborative Life Skills Program which included behavioural teacher consultation and use of daily report cards, behavioural parent training and child social and life skills training (Pfiffner 2016);

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

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Excluded studies

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

Summary of studies included in the effectiveness evidence

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

Table 2: Summary of included studies.

Study	Population	Intervention	Comparison	Outcomes	Comments
Bent 2002 Non RCT (Retrospective cohort study) UK	N=254 Young people with physical and complex disabilities born between 1978 and 1982 with records from Leeds, Stoke on Trent, Leicester, and Birmingham	<u>Young adult team (YAT) approach</u> Multidisciplinary specialist teams which typically included a consultant in rehabilitation medicine, a psychologist, therapists, and a social worker	<u>Ad hoc service approach</u> Existing, uncoordinated services	• Participation and inclusion • Quality of life • Self-efficacy	The YAT approach was conducted in Leeds and Stoke on Trent. Ad hoc services were conducted in Leicester and Birmingham
Borgestig 2016 Non RCT (Before and after study) Sweden	N=10 Children with severe physical impairments without speaking ability	<u>Gaze-based assistive technology (AT) plus a multi-professional communication (MPC) team</u> Gaze-based AT and access to the services from the MPC team including an occupational therapist, speech and language pathologist, special education teacher, and IT support person	Before versus after intervention	• Participation and inclusion	
Pfiffner 2013 Non RCT (Before and after study) USA	N=57 Children who met screening criteria for ADHD	<u>Collaborative Life Skills Program (CLS)</u> Group behavioural parent training, classroom behavioural intervention, and child skills group	Before versus after intervention	• Participation and inclusion • Educational achievement or attainment	

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Study	Population	Intervention	Comparison	Outcomes	Comments
		with active partnership of parents, teachers, and school clinicians			
Stewart 2000 Non RCT (Before and after study) UK	N=33 Children who had been referred to the occupational therapy service or had been newly allocated to a therapist (presented with a wide range of disabilities, including neurological and degenerative disorders, moderate to severe learning difficulties, diseases such as arthritis and brittle bone disease and a variety of rare syndromes)	Occupational therapy Clinical occupational therapist who maintained regular contact with schools and other therapy professionals	Before versus after intervention	• Independence	
Vasileiadis 2018 Non RCT (Before and after study) Greece	N=4 Pupils with mild intellectual disability between 6 and 7 years of age attending a primary special school on a Dodecanese island in Greece	Social Coexistence Programme Structured activities and participation in social activities in the neighbourhood with the inclusion of a speech therapist, psychologist and teachers	Before versus after intervention	• Participation and inclusion	A mixed methods approach was implemented (quantitative and qualitative data)

ADHD: attention deficit hyperactivity disorder; AT: assistive technology; CLS: collaborative life skills; IT: information technology; MPC: multi-professional communication; RCT: randomised controlled trial; YAT: young adult team

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

There was evidence of an important benefit of support from a health professional (specifically occupational therapy) on independence. There was also evidence of an important benefit of a young adult team based approach (as opposed to an ad hoc service approach) and a social coexistence programme on participation and inclusion. However, there was no important difference on quality of life or self-efficacy from the young adult team approach.

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There was also evidence of an important benefit of gaze-based assistive technology plus a multi-professional communication team intervention for participation and inclusion.

Workforce skills and knowledge training (specifically a collaborative life skills program) showed an important benefit for participation and inclusion and educational achievement or attainment. For educational achievement or attainment, the important benefit was identified when measured with the Woodcock Johnson Tests of Achievement third edition (WJ-III) and Homework Problems Checklist (and school grades). However, there was no evidence of a benefit when other measures of educational achievement or attainment were used indicating there is some uncertainty as to whether or not there is actually a benefit for this outcome. Therefore, the results should be interpreted with caution.

Overall, only five studies were identified for inclusion in this review and the evidence was very low quality. Concerns were identified about the risk of bias, indirectness and imprecision. In addition, studies failed to report on a critical outcome (wellbeing) and an important outcome (communication), and evidence was not available for a number of interventions of interest such as training around every day healthcare needs, positive behaviour support, early support project (preschool/early years), and personal budgets including person centred planning.

See appendix F for full GRADE tables.

Economic evidence

Included studies

One economic study was identified which was relevant to this question (Bent 2002).

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

The systematic search of the economic literature undertaken for the guideline identified:

- One UK study on the cost effectiveness of Young Adult Teams (YAT) i.e. multidisciplinary specialist teams which typically included a consultant in rehabilitation medicine, a psychologist, therapists, and a social worker.

See the economic evidence table in appendix H. See Table 3 for the economic evidence profile of the included study.

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Table 3: Economic evidence profiles for Young Adult Team (YAT) approach.

Study and country	Limitations	Applicability	Other comments	Incremental costs	Incremental effects	ICER	Uncertainty
Bent 2002 UK	Potentially serious limitations[1]	Partially applicable[2]	Type of economic analysis: cost-effectiveness Intervention: Young Adult Team (multidisciplinary specialist teams designed to facilitate transition from childhood to adulthood services) Comparator: Ad-hoc services - individual professionals, usually working in isolation.Time horizon: 6 months Primary measure of outcome: participation in society (London handicap scale), Barthel activity limitation scale	-£79-114	13.4 – London Handicap improvement scale 2.0 - Barthel activity limitation scale	YAT dominant	The differences in London handicap improvement scale and Barthel activity limitation scale were significant, p<0.05 When the most costly estimate of providing YAT services was used the cost savings were £79 per participant over the 6-month period

Abbreviations: YAT: Young adult team
1. Short time horizon which may not be sufficiently long enough to capture all important differences in costs and outcomes; hasn't included inpatient and respite care
2. UK study, however, no quality adjusted-life years, the study is old and unclear how well the cost structure reflect current health and care arrangements, nothing on education sector

Economic model

This review question was identified as an economic priority, however, no economic modelling was undertaken because there was insufficient effectiveness data.

Evidence statements

Economic

- There was evidence from one cost effectiveness study showing that a Young Adult Team (team-based approach) was dominant or cost-minimising when compared with ad-hoc services in young people with long-term disabilities and severe complex needs. The result was dependant on the outcome used. This economic analysis was based on a retrospective cohort (N=254). This evidence, although derived from a UK study, is partially applicable to the NICE decision-making context as it was unclear how well service configuration and delivery captures current service arrangements for this population and is characterised by potentially serious limitations, including a short time horizon (6 months), excluding costs associated with admissions to hospital for inpatient treatment or respite care.

The committee's discussion and interpretation of the evidence

The outcomes that matter most

Critical outcomes for this review were participation and inclusion, independence, and wellbeing. This is because identifying joint working practices for promoting and maintaining inclusion, independence and wellbeing were the objective of this review question.

The outcomes quality of life, educational achievement or attainment, self-efficacy and communication were considered as important outcomes. Quality of life was considered an important outcome due to the importance of providing person-centred services. Educational achievement or attainment, and self-efficacy were considered as important outcomes because they measure the benefits of education and social activities and have implications for successful independent living. Communication was considered an important outcome due to its role in ensuring that children and young people can express themselves and make sense of the world around them, and the impact this has on inclusion, independence and wellbeing.

No evidence was found for the outcomes of wellbeing and communication.

The quality of the evidence

The quality of the evidence was assessed with GRADE and was rated as low and very low. Concerns about the risk of bias were "very serious". The most serious concerns for the non-randomised study assessed per ROBINS-I were biases arising from confounding, and in the selection of participants. For the non-randomised studies assessed per EPOC for interrupted time series, the most serious concerns were the intervention independent of other changes, knowledge of the allocated interventions, incomplete outcome data, selective outcome reporting, and other risks of bias. 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". The serious concern was due to an indirect aspect of the PICO (population) reported in 1 study. Concerns about imprecision ranged from "no serious" to "serious". This was due to the 95% confidence intervals crossing boundaries for minimally important differences.

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Workforce skills and knowledge training (specifically a collaborative life skills program) showed an important benefit for participation and inclusion and educational achievement or attainment. For the latter, this benefit was identified when measured with the Woodcock Johnson Tests of Achievement third edition (WJ-III) for calculations, academic functioning measured with the Homework Problems Checklist (completed by parents), and school grades measured with the San Francisco Unified School District report cards for Language arts and Math. However, there was no evidence of a benefit in other measures of education achievement or attainment including the WJ-III for reading fluency, passage comprehension and math fluency, and the Academic Competence Evaluation Scale (completed by teachers). Therefore, the results were interpreted with caution.

Benefits and harms

There was very low quality evidence of an important benefit when practitioners work together as part of an interagency team (social coexistence program, collaborative life skills program, and a young adult team approach), rather than working individually, specifically in increasing the participation and inclusion and education achievement or attainment in disabled children and young people with severe complex needs. The committee felt strongly that working together in a co-ordinated way across education, health and social care services would improve the care and support received by children and young people. Therefore, it was recommended that services organise the existing practitioners working with the child or young person into an interagency team. The committee discussed the importance of interagency teams including practitioners with the skills and experience to address all of the child or young person's needs in order to operate effectively as qualitative evidence reflected that a lack of skills, knowledge and training amongst professionals and staff was a barrier to working effectively with children and young people to meet their needs and manage behaviour (see evidence report K, sub-theme 11.1) [1.16.1]. Based on their experience, the committee agreed that in order for interagency team working to happen, there need to be mechanisms in place that provide a formal commitment, obligating practitioners and services to work together. The committee felt strongly that effective interagency team working is of central importance to improving the support received by disabled children and young people with severe complex needs and so made recommendations on how to achieve this. To be most effective in supporting disabled children and young people with severe complex needs, the committee agreed that arrangements or agreements should be made at the provider level [1.18.4], and contractual requirements at the commissioning level [1.18.2] which set out how education, health and social care services would work together in an integrated way.

There was evidence of an important benefit of a young adult team approach (consisting of an interagency team who facilitated transition from childhood to adult services) on increasing the participation and inclusion of disabled children and young people with severe complex needs. This evidence was of low and very low quality so the committee did not recommend this specific intervention. However, they agreed that participation and inclusion are likely to increase when focus is placed on the emerging young adult and their own individual priorities. Further, this was reflected in the qualitative evidence where service providers valued a child or young person centred approach that encouraged an interagency team working around the child or young person to identify and meet their needs, and perceived this to also be valued by parents (see evidence report M, sub-theme 1.1). The SEND Code of Practice (2015) states that high aspirations are crucial to success and discussions about the long term goals of the child or young person should start early and focus on their strengths, capabilities and outcomes they want to achieve. However the committee discussed how this does not always happen in practice. Without focus, the committee agreed that some professionals may default to their own agenda and provide short-term support which can be achieved more easily. However, this is not always in the best interests of the young person. Therefore, the committee recommended that interagency teams should focus on the young person's goals for adulthood, preparation for adult life and maximising their independence [1.8.2].

There was evidence of an important benefit of a collaborative life skills program involving an active partnership of parents, teachers and school clinicians in increasing the participation and inclusion and education achievement or attainment in disabled children and young people with severe complex needs. This evidence was very low quality so the committee did not recommend this specific intervention. However, they discussed the importance of collaborative working across education, health and social care services to ensure that the child or young person's needs are accounted for in all settings. For example, when a child or young person is experiencing difficulties at school, they may also require resolutions when at home, or in hospital. If these needs are not met in the other settings, it is likely to result in a detriment to the child or young person. Therefore, the committee recommended that interagency teams ensure that the child or young person's needs are met in all settings [1.16.3].

There was evidence of an important benefit of gaze-based assistive technology plus an interagency team for participation and inclusion in children and young people with severe complex needs. As this evidence was very low quality and assistive technology is not needed by all individuals, the committee decided not to make a recommendation based on this evidence. However, they noted that assistive technology potentially has a role in enabling disabled children and young people with severe complex needs to express their views and participate in decision making. Since expressing their views and participating in decision making is central to the education, health and social care (EHC) needs assessment and plan process, the committee agreed further research was required into the effectiveness of assistive technology.

Cost effectiveness and resource use

There was evidence from one UK-based study showing that Young Adult Teams (multidisciplinary specialist teams which typically included a consultant in rehabilitation medicine, a psychologist, therapists, and a social worker) may potentially be cost-effective. However, this study was only partially applicable to the NICE decision making context and was characterised by potentially serious limitations. As a result, the committee could not draw any conclusions from this evidence.

The committee discussed the recommendations for service providers to make arrangements/agreements that set out how they will work together in an integrated way and for commissioners to specify in their contract requirements that services should work together in an integrated way. They agreed that there is currently a lot of variability in the amount of integration between services across the country. Therefore these recommendations may require a change in practice for some services as they develop mechanisms for working together effectively. However, the committee considered that these recommendations were unlikely to have significant resource implications because they are not about providing new services, but developing more integrated ways of working. They agreed that there might also be some cost savings from reducing inefficiency and interagency conflict

The committee was of a view that all other recommendations represent current practice for most services and would not have resource implications. There may be modest resource implications where practices are sub-optimal or services are underperforming.

Recommendations supported by this evidence review

This evidence review supports recommendations 1.8.2, 1.16.1, 1.16.3, 1.18.2, 1.18.4 and the research recommendation on assistive technology. Other evidence supporting these recommendations can be found in the evidence reviews on Barriers and facilitators of joined-up care (evidence report K), Views and experiences of service providers (evidence report M).

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References – included studies

Effectiveness

Borgestig 2016

Borgestig, M., Sandqvist, J., Ahlsten, G., Falkmer, T., Hemmingsson, H., Gaze-based assistive technology in daily activities by children with severe physical impairments, Developmental Medicine and Child Neurology, 58, 46-47, 2016

Pfiffner 2013

Pfiffner, Linda J., Villodas, Miguel, Kaiser, Nina, Rooney, Mary, McBurnett, Keith, Educational outcomes of a collaborative school-home behavioral intervention for ADHD, School psychology quarterly: the official journal of the Division of School Psychology, American Psychological Association, 28, 25-36, 2013

Stewart 2000

Stewart, Sandra, Neyerlin-Beale, Janet, The impact of community paediatric occupational therapy on children with disabilities and their carers, British Journal of Occupational Therapy, 63, 373-379, 2000

Vasileiadis 2018

Vasileiadis, Ilias, Doikou-Avlidou, Maro, Enhancing social interaction of pupils with intellectual disabilities with their general education peers: the outcomes of an intervention programme, Journal of Research in Special Educational Needs, 18, 267-277, 2018

Economic

Bent 2002

Bent, N., Team approach versus ad hoc health services for young people with physical disabilities: a retrospective cohort study, Lancet, 360, 1280-1286, 2002

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

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Appendices

Appendix A – Review protocol

Review protocol for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Table 4: Review protocol

ID	Field	Content
0.	PROSPERO registration number	CRD42019155778
1.	Review title	What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?
2.	Review question	What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?
3.	Objective	To identify the optimal approaches for the delivery of health, social care and education services for disabled children and young people with severe complex needs, specifically in terms of promoting inclusion, independence and wellbeing.
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)

ID	Field	Content
		- Social Care Online - Social Policy and Practice - Social Science Citation Index - Social Services Abstracts - Sociological Abstracts - 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 who require health, social care and education support. Exclusion: Children and young people who do not have needs in all three areas of health, social care and education.
7.	Intervention/Exposure/Test	Approaches, where 2 or more of the following services work together: health, social care and education. For example: Equipment including adaptations

ID	Field	Content
		- Information and Communication Technology (ICT) ➢ Assistive technology ➢ Low tech Augmentative and Alternative Communication (AAC) - Special needs coordinator/Care coordinator - Support from health professionals (e.g. speech and language therapist, specialist) - Workforce skills and knowledge (to develop or extend inclusive services) - Training around every day healthcare needs - Positive behaviour support (PBS) - Applied behavioural analysis (ABA) - Team around the family (TAF)/Team around the child or young person - Shared assessment and planning (e.g., Common assessment framework (CAF), linked to troubled families or early help framework) - Early support project (preschool/early years) - Signs of safety (SOS) - Short breaks - Continuing care - Personal budgets including person centred planning - Purposeful engagement (e.g. careers) - Public awareness - Supported internships - Sleep clinic and feeding clinic - Integrated working (education model)
8.	Comparator/Reference standard/Confounding factors	- Any other joined-up approaches used by health, social care or education services - Separate health, social and education services (without joined-up working)
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.

ID	Field	Content
		Non-randomised studies should adjust for confounders in their analysis such as: dominant provision (e.g. primarily autism, primarily physical disability etc.), definitions of eligibility (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.
11.	Context	All settings will be considered where health, social care and education is provided for disabled children and young people from birth to 25 years with severe complex needs.
12.	Primary outcomes (critical outcomes)	Critical Outcomes: • Participation and inclusion (including progress into paid or voluntary employment/productive engagement) • Independence (e.g. financial stability such as disability living allowance, personal independent payment [PIP]) • Wellbeing (including safety) (e.g., as measured by validated scales or assisted communication aids such as talking mats or 'it's all about me')
13.	Secondary outcomes (important outcomes)	Important Outcomes: • Quality of life (both health- and social-related quality) (e.g., as measured by validated scales or assisted communication aids such as talking mats or 'it's all about me') • Educational achievement or attainment • Self-efficacy (e.g., as measured by validated scales or assisted communication aids such as talking mats or 'it's all about me') • Communication (e.g., as measured by validated scales or assisted communication aids such

ID	Field	Content
		as talking mats or 'it's all about me')
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 remaining 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
		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 and pre-specified subgroup analyses. If heterogeneity cannot be explained through subgroup 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

ID	Field	Content		
		(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	In the case of heterogeneity, the following groups may be investigated: • Setting (e.g. co-located vs not) • Country • Age group (≥16 years versus <16 years)		
18.	Type and method of review	☒	Intervention	
		☐	Diagnostic	
		☐	Prognostic	
		☐	Qualitative	
		☐	Epidemiologic	
		☒	Service Delivery	
		☐	Other (please specify)	
19.	Language	English		
20.	Country	England		
21.	Anticipated or actual start date	22 October 2019		
22.	Anticipated completion date	12 May 2021		
23.	Stage of review at time of this submission	Review stage	Started	Completed
		Preliminary searches	☑	☐

ID	Field	Content		
		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 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		

ID	Field	Content	
29.	Other registration details	None	
30.	Reference/URL for published protocol	https://www.crd.york.ac.uk/prospero/display_record.php?RecordID=155778	
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	

AAC: Augmentative and Alternative Communication; ABA: applied behavioural analysis; AHDC: Aiming High for Disabled Children; ASSIA: Applied Social Science Index and Abstracts BEI: British Education Index; CAF: common assessment framework; CDSR: Cochrane Database of Systematic Reviews; CENTRAL: Cochrane Central Register of Controlled Trials; DARE: database of Abstracts of Reviews of Effects; 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; ICT: Information and Communication Technology; MID: minimally important difference; NICE: National Institute for Health and Care Excellence; OECD: Organisation for Economic Co-operation and Development; OR: odds ratio; PBS: Positive behaviour support; PIP: personal independent payment; 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; SOS: signs of safety; TAF: team around the family

Appendix B – Literature search strategies

Literature search strategies for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

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

Date of last search: 05/06/2020

#	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.
39	or/27-38
40	(HEALTH SERVICES/ or CHILD HEALTH SERVICES/ or ADOLESCENT HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or HOME CARE SERVICES/ or HEALTH SERVICES FOR PEOPLE WITH DISABILITIES/ or MENTAL HEALTH SERVICES/ or NURSING SERVICES/ or exp HEALTH PERSONNEL/) and (exp SOCIAL WORK/ or SOCIAL WORK, PSYCHIATRIC/ or SOCIAL WORKERS/)
41	(HEALTH SERVICES/ or CHILD HEALTH SERVICES/ or ADOLESCENT HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or HOME CARE SERVICES/ or HEALTH SERVICES FOR PEOPLE WITH DISABILITIES/ or MENTAL HEALTH SERVICES/ or NURSING SERVICES/ or exp HEALTH PERSONNEL/) and (EDUCATION/ or exp EDUCATION, SPECIAL/ or SCHOOLS/ or SCHOOL HEALTH SERVICES/ or SCHOOLS, NURSERY/ or exp NURSERIES/ or CHILD DAY CARE CENTERS/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or SCHOOL TEACHERS/)

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#	Searches
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?) 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$)).ti,ab.
45	((health$ 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?) 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$)).ti,ab.
46	(social$ 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$)).ti,ab.
47	or/44-46
48	STATE MEDICINE/og [Organization & Administration]
49	CHILD HEALTH SERVICES/og [Organization & Administration]
50	ADOLESCENT HEALTH SERVICES/og [Organization & Administration]
51	EDUCATION/og [Organization & Administration]
52	exp EDUCATION, SPECIAL/og [Organization & Administration]
53	exp SOCIAL WORK/og [Organization & Administration]
54	or/48-53
55	*SOCIAL PARTICIPATION/
56	*SOCIAL DISTANCE/
57	*SOCIAL ISOLATION/
58	*SOCIAL MARGINALIZATION/
59	inclus$.ti.
60	(social$ adj3 inclus$).ab.
61	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
62	*ACTIVITIES OF DAILY LIVING/
63	*INDEPENDENT LIVING/
64	*SELF CARE/
65	*SELF MANAGEMENT/
66	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.
67	((social$ or live or live? or living) adj3 indepen$).ab.
68	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
69	("well being" or wellbeing).ti.
70	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
71	or/55-70
72	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
73	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
74	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or

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#	Searches
	((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
75	or/72-74
76	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
77	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
78	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
79	or/76-78
80	26 and (39 or 43 or 47 or 54) and 71
81	26 and 75
82	26 and 79
83	or/80-82
84	limit 83 to english language
85	limit 84 to yr="2000 -Current"
86	LETTER/
87	EDITORIAL/
88	NEWS/
89	exp HISTORICAL ARTICLE/
90	ANECDOTES AS TOPIC/
91	COMMENT/
92	CASE REPORT/
93	(letter or comment*).ti.
94	or/86-93
95	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
96	94 not 95
97	ANIMALS/ not HUMANS/
98	exp ANIMALS, LABORATORY/
99	exp ANIMAL EXPERIMENTATION/
100	exp MODELS, ANIMAL/
101	exp RODENTIA/
102	(rat or rats or mouse or mice).ti.
103	or/96-102
104	85 not 103

Databases: Embase; and Embase Classic

Date of last search: 05/06/2020

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#	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 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$

#	Searches
	or deliver$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	*SOCIAL PARTICIPATION/
54	*SOCIAL DISTANCE/
55	*SOCIAL ISOLATION/
56	*SOCIAL EXCLUSION/
57	inclus$.ti.
58	(social$ adj3 inclus$).ab.
59	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
60	*DAILY LIFE ACTIVITY/
61	*INDEPENDENT LIVING/
62	*SELF CARE/
63	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.
64	((social$ or live or live? or living) adj3 indepen$).ab.
65	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
66	*WELLBEING/
67	*PHYSICAL WELL-BEING/
68	*PSYCHOLOGICAL WELL-BEING/
69	("well being" or wellbeing).ti.
70	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
71	or/53-70
72	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
73	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
74	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
75	or/72-74
76	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
77	((health$ 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

#	Searches
	language) adj3 therapist?) or SLT?) adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
78	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
79	or/76-78
80	25 and (38 or 42 or 46 or 52) and 71
81	25 and 75
82	25 and 79
83	or/80-82
84	limit 83 to english language
85	limit 84 to yr="2000 -Current"
86	letter.pt. or LETTER/
87	note.pt.
88	editorial.pt.
89	CASE REPORT/ or CASE STUDY/
90	(letter or comment*).ti.
91	or/86-90
92	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
93	91 not 92
94	ANIMAL/ not HUMAN/
95	NONHUMAN/
96	exp ANIMAL EXPERIMENT/
97	exp EXPERIMENTAL ANIMAL/
98	ANIMAL MODEL/
99	exp RODENT/
100	(rat or rats or mouse or mice).ti.
101	or/93-100
102	85 not 101

Database: Health Management Information Consortium (HMIC)

Date of last search: 05/06/2020

#	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.

Disabled children and young people up to 25 with severe complex needs: evidence reviews
for promoting inclusion, independence and wellbeing (March 2022)

32

#	Searches
20	EHC plan?.ti,ab.
21	EHCP?.ti,ab.
22	or/17-21
23	COLLABORATION/
24	exp INTERAGENCY COLLABORATION/
25	INTERPROFESSIONAL COLLABORATION/
26	COLLABORATIVE CARE/
27	INTEGRATED PROVIDERS/
28	INTEGRATED CARE/
29	INTERDISCIPLINARY SERVICES/
30	JOINT WORKING/
31	HEALTH & SOCIAL SERVICES INTERACTION/
32	COMMUNICATION/
33	HEALTH SERVICE PROVISION/
34	(interinstitution$ or multiinstitution$ or jointinstitution$).ti,ab.
35	(interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$).ti,ab.
36	(intersector$ or multisector$ or jointsector$).ti,ab.
37	(interagenc$ or multiagenc$ or jointagenc$).ti,ab.
38	(interprovider? or multiprovider? or jointprovider?).ti,ab.
39	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
40	(interprofession$ or multiprofession$ or jointprofession$).ti,ab.
41	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$)).ti,ab.
42	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$)).ti.
43	or/23-42
44	(HEALTH SERVICES/ or exp CHILD HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or exp MENTAL HEALTH SERVICES/ or NURSING CARE/ or exp HEALTH SERVICE STAFF/) and (exp SOCIAL WORK/ or SOCIAL WORK SERVICE/ or SOCIAL WORK PROFESSION/ or SOCIAL WORKERS/ or exp SOCIAL WORKER TEAMS/ or SOCIAL CARE/ or exp SOCIAL CARE SERVICES/ or SOCIAL SERVICES/ or SOCIAL SERVICES DEPARTMENTS/ or SUPPORTIVE SOCIAL WORK/)
45	(HEALTH SERVICES/ or exp CHILD HEALTH SERVICES/ or COMMUNITY HEALTH SERVICES/ or exp MENTAL HEALTH SERVICES/ or NURSING CARE/ or exp HEALTH SERVICE STAFF/) and (EDUCATION/ or PRIMARY EDUCATION/ or SECONDARY EDUCATION/ or exp SPECIAL EDUCATION/ or exp SCHOOLS/ or exp SCHOOL HEALTH SERVICES/ or exp NURSERIES/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or TEACHERS/)
46	(exp SOCIAL WORK/ or SOCIAL WORK SERVICE/ or SOCIAL WORK PROFESSION/ or SOCIAL WORKERS/ or exp SOCIAL WORKER TEAMS/ or SOCIAL CARE/ or exp SOCIAL CARE SERVICES/ or SOCIAL SERVICES/ or SOCIAL SERVICES DEPARTMENTS/ or SUPPORTIVE SOCIAL WORK/) and (EDUCATION/ or PRIMARY EDUCATION/ or SECONDARY EDUCATION/ or exp SPECIAL EDUCATION/ or exp SCHOOLS/ or exp SCHOOL HEALTH SERVICES/ or exp NURSERIES/ or UNIVERSITIES/ or TEACHING/ or REMEDIAL TEACHING/ or TEACHERS/)
47	or/44-46
48	((health$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social$ adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
49	((health$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
50	(social$ adj5 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
51	or/48-50
52	PARTICIPATION/
53	SOCIAL ISOLATION/
54	SOCIAL EXCLUSION/
55	inclus$.ti.
56	(social$ adj3 inclus$).ab.
57	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
58	"ACTIVITIES OF DAILY LIVING"/
59	INDEPENDENT LIVING/
60	SELF CARE/
61	SELF MANAGEMENT/
62	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.

#	Searches
63	((social$ or live or live? or living) adj3 indepen$).ab.
64	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
65	("well being" or wellbeing).ti.
66	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
67	or/52-66
68	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
69	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
70	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
71	or/68-70
72	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
73	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
74	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
75	or/72-74
76	22 and (43 or 47 or 51) and 67
77	22 and 71
78	22 and 75
79	or/76-78
80	limit 79 to yr="2000 -Current"

Disabled children and young people up to 25 with severe complex needs: evidence reviews for promoting inclusion, independence and wellbeing (March 2022)

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Database: Social Policy and Practice

Date of last search: 05/06/2020

#	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$ 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$)).ti,ab.
30	or/27-29
31	inclus$.ti.
32	(social$ adj3 inclus$).ab.
33	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
34	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.
35	((social$ or live or live? or living) adj3 indepen$).ab.
36	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
37	("well being" or wellbeing).ti.
38	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
39	or/31-38
40	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or

Disabled children and young people up to 25 with severe complex needs: evidence reviews for promoting inclusion, independence and wellbeing (March 2022)

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#	Searches
	(Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
41	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
42	((institution$ 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$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
43	or/40-42
44	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
45	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
46	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
47	or/44-46
48	16 and (26 or 30) and 39
49	16 and 43
50	16 and 47
51	or/48-50
52	limit 51 to yr="2000 -Current"

Database: PsycInfo

Date of last search: 05/06/2020

#	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.

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#	Searches
4	PEDIATRICS/
5	p?ediatric$.ti,ab.
6	young$ adult?.ti,ab.
7	or/1-6
8	DISORDERS/
9	exp DISABILITIES/
10	PHYSICAL DISORDERS/
11	exp SENSE ORGAN DISORDERS/
12	exp MENTAL DISORDERS/
13	exp COMMUNICATION DISORDERS/
14	SPECIAL NEEDS/
15	(disable? or disabilit$ or handicap$ or retard$ or disorder? or impair$ or condition? or difficulty or difficulties or deficit? or dysfunct$).ti.
16	((sever$ or complex$ or special or high) adj3 need?).ti,ab.
17	SHCN.ti,ab.
18	or/8-17
19	7 and 18
20	CSHCN.ti,ab.
21	"Education Health and Care plan?".ti,ab.
22	EHC plan?.ti,ab.
23	EHCP?.ti,ab.
24	or/19-23
25	INTEGRATED SERVICES/
26	INTERDISCIPLINARY TREATMENT APPROACH/
27	(interinstitution$ or multiinstitution$ or jointinstitution$).ti,ab.
28	(interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$).ti,ab.
29	(intersector$ or multisector$ or jointsector$).ti,ab.
30	(interagenc$ or multiagenc$ or jointagenc$).ti,ab.
31	(interprovider? or multiprovider? or jointprovider?).ti,ab.
32	(interstakeholder? or multistakeholder? or jointstakeholder?).ti,ab.
33	(interprofession$ or multiprofession$ or jointprofession$).ti,ab.
34	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$)).ti,ab.
35	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$)).ti.
36	or/25-35
37	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/)
38	(HEALTH CARE SERVICES/ or COMMUNITY SERVICES/ or HOME CARE/ or MENTAL HEALTH SERVICES/ or COMMUNITY MENTAL HEALTH SERVICES/ or NURSING/ or exp HEALTH PERSONNEL/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)
39	(exp SOCIAL CASEWORK/ or exp SOCIAL WORKERS/) and (EDUCATION/ or ELEMENTARY EDUCATION/ or MIDDLE SCHOOL EDUCATION/ or HIGH SCHOOL EDUCATION/ or SECONDARY EDUCATION/ or HIGHER EDUCATION/ or SPECIAL EDUCATION/ or "MAINSTREAMING (EDUCATIONAL)"/ or REMEDIAL EDUCATION/ or exp SCHOOLS/ or TEACHING/ or TEACHERS/ or PRESCHOOL TEACHERS/ or ELEMENTARY SCHOOL TEACHERS/ or JUNIOR HIGH SCHOOL TEACHERS/ or MIDDLE SCHOOL TEACHERS/ or HIGH SCHOOL TEACHERS/ or COLLEGE TEACHERS/ or VOCATIONAL EDUCATION TEACHERS/ or SPECIAL EDUCATION TEACHERS/)
40	or/37-39
41	((health$ 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.

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#	Searches
44	or/41-43
45	*SOCIAL INTERACTION/
46	*SOCIAL ISOLATION/
47	*MARGINALIZATION/
48	inclus$.ti.
49	(social$ adj3 inclus$).ab.
50	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
51	*"ACTIVITIES OF DAILY LIVING"/
52	*SELF-CARE SKILLS/
53	*SELF-MANAGEMENT/
54	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.
55	((social$ or live or live? or living) adj3 indepen$).ab.
56	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
57	*WELL BEING/
58	("well being" or wellbeing).ti.
59	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
60	or/45-59
61	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
62	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
63	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
64	or/61-63
65	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
66	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
67	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or

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#	Searches
	alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
68	or/65-67
69	24 and (36 or 40 or 44) and 60
70	24 and 64
71	24 and 68
72	or/69-71
73	limit 72 to english language
74	limit 73 to yr="2000 -Current"
75	limit 74 to ("0100 journal" or "0110 peer-reviewed journal" or "0120 non-peer-reviewed journal")

Database: Emcare

Date of last search: 05/06/2020

#	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 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

#	Searches
	PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
41	(SOCIAL CARE/ or SOCIAL WORK/ or SOCIAL WORKER/) and (EDUCATION/ or exp SPECIAL EDUCATION/ or SCHOOL/ or SCHOOL HEALTH SERVICE/ or NURSERY SCHOOL/ or NURSERY/ or KINDERGARTEN/ or PRIMARY SCHOOL/ or MIDDLE SCHOOL/ or HIGH SCHOOL/ or COLLEGE/ or COMMUNITY COLLEGE/ or UNIVERSITY/ or TEACHING/ or exp TEACHER/)
42	or/39-41
43	((health$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 social$ adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
44	((health$ or NHS or clinical or clinician? or medical or medic? or physician? or consultant? or nurse? or general practitioner? or GP? or occupational therapist? or OT? or allied health professional? or AHP? or ((speech or language) adj3 therapist?) or SLT?) adj5 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
45	(social$ adj5 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj5 (care or service? or department? or institution$ or organi?ation$ or sector$ or agenc$ or provider? or policy or policies or collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partnership? or partnering or network$ or inter or multi or joint$ or across or share? or sharing or together or communicat$ or barrier? or facilitat$ or deliver$)).ti,ab.
46	or/43-45
47	NATIONAL HEALTH SERVICE/ and ORGANIZATION/
48	CHILD HEALTH CARE/ and ORGANIZATION/
49	EDUCATION/ and ORGANIZATION/
50	exp SPECIAL EDUCATION/ and ORGANIZATION/
51	SOCIAL WORK/ and ORGANIZATION/
52	or/47-51
53	*SOCIAL PARTICIPATION/
54	*SOCIAL DISTANCE/
55	*SOCIAL ISOLATION/
56	*SOCIAL EXCLUSION/
57	inclus$.ti.
58	(social$ adj3 inclus$).ab.
59	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 inclus$).ab.
60	*DAILY LIFE ACTIVITY/
61	*INDEPENDENT LIVING/
62	*SELF CARE/
63	(indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$).ti.
64	((social$ or live or live? or living) adj3 indepen$).ab.
65	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 (indepen$ or self car$ or selfcar$ or self manag$ or selfmanag$)).ab.
66	*WELLBEING/
67	*PHYSICAL WELL-BEING/
68	*PSYCHOLOGICAL WELL-BEING/
69	("well being" or wellbeing).ti.
70	((support$ or promot$ or facilitat$ or enhanc$ or improv$ or increas$ or optimis$) adj3 ("well being" or wellbeing)).ab.
71	or/53-70
72	((interinstitution$ or multiinstitution$ or jointinstitution$ or interorgani?ation$ or multiorgani?ation$ or jointorgani?ation$ or intersector$ or multisector$ or jointsector$ or interagenc$ or multiagenc$ or jointagenc$ or interprovider? or multiprovider? or jointprovider? or interstakeholder? or multistakeholder? or jointstakeholder? or interprofession$ or multiprofession$ or jointprofession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
73	((inter or multi$ or joint) adj3 (institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.

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#	Searches
74	((institution$ or organi?ation$ or sector$ or agenc$ or provider? or stakeholder? or profession$ or care or service? or department$) adj5 (collaborat$ or coordinat$ or co-ordinat$ or cooperat$ or co-operat$ or integrat$ or partner$) adj5 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
75	or/72-74
76	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
77	((health$ 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 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
78	(social$ adj10 (educat$ or school$ or teach$ or headmaster? or headmistress$ or SENCO? or DfE?) adj10 ((equipment adj3 adapt$) or ((information or communication) adj3 technolog$) or ICT or assistive technolog$ or ((augmentat$ or alternative$) adj3 communicat$) or AAC or special needs coordinator? or care coordinator? or (support$ adj3 (health professional? or therapist? or specialist?)) or inclusive service? or (every day adj3 need?) or positive behavio?r support or PBS or applied behavio?ral analysis or ABA or (Team around adj3 (famil$ or child$ or young person?)) or TAF or assessment framework? or CAF or early help framework? or early support project or ((preschool$ or pre-school$ or early years) adj3 support$) or signs of safety or short break? or continuing care or personal budget? or person centred planning or purposeful engagement or public awareness or disability awareness or supported internship? or sleep clinic? or feeding clinic? or integrated working)).ti,ab.
79	or/76-78
80	25 and (38 or 42 or 46 or 52) and 71
81	25 and 75
82	25 and 79
83	or/80-82
84	limit 83 to english language
85	limit 84 to yr="2000 -Current"
86	letter.pt. or LETTER/
87	note.pt.
88	editorial.pt.
89	CASE REPORT/ or CASE STUDY/
90	(letter or comment*).ti.
91	or/86-90
92	RANDOMIZED CONTROLLED TRIAL/ or random*.ti,ab.
93	91 not 92
94	ANIMAL/ not HUMAN/
95	NONHUMAN/
96	exp ANIMAL EXPERIMENT/
97	exp EXPERIMENTAL ANIMAL/
98	ANIMAL MODEL/
99	exp RODENT/
100	(rat or rats or mouse or mice).ti.
101	or/93-100
102	85 not 101

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

Date of last search: 05/06/2020

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

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#	Searches
	department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#46	((health* or NHS or clinical or clinician* or medical or medic or medics or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/5 (educat* or school* or teach* or headmaster* or headmistress* or SENCO or SENCOs or DfE*) near/5 (care or service* or department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#47	(social* near/5 (educat* or school* or teach* or headmaster* or headmistress* or SENCO or SENCOs or DfE*) near/5 (care or service* or department* or institution* or organisation* or organization* or sector* or agenc* or provider* or policy or policies or collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partnership* or partnering or network* or inter or multi or joint* or across or share* or sharing or together or communicat* or barrier* or facilitat* or deliver*)):ti,ab
#48	#45 or #46 or #47
#49	[mh ^"STATE MEDICINE"/og]
#50	[mh ^"CHILD HEALTH SERVICES"/og]
#51	[mh ^"ADOLESCENT HEALTH SERVICES"/og]
#52	[mh ^EDUCATION/og]
#53	[mh "EDUCATION, SPECIAL"/og]
#54	[mh "SOCIAL WORK"/og]
#55	#49 or #50 or #51 or #52 or #53 or #54
#56	[mh ^"SOCIAL PARTICIPATION"]
#57	[mh ^"SOCIAL DISTANCE"]
#58	[mh ^"SOCIAL ISOLATION"]
#59	[mh ^"SOCIAL MARGINALIZATION"]
#60	inclus*:ti
#61	(social* near/3 inclus*):ab
#62	((support* or promot* or facilitat* or enhanc* or improv* or increas* or optimis*) near/3 inclus*):ab
#63	[mh ^"ACTIVITIES OF DAILY LIVING"]
#64	[mh ^"INDEPENDENT LIVING"]
#65	[mh ^"SELF CARE"]
#66	[mh ^"SELF MANAGEMENT"]
#67	(indepen* or "self car*" or selfcar* or "self manag*" or selfmanag*):ti
#68	((social* or live or live* or living) near/3 indepen*):ab
#69	((support* or promot* or facilitat* or enhanc* or improv* or increas* or optimis*) near/3 (indepen* or "self car*" or selfcar* or "self manag*" or selfmanag*)):ab
#70	("well being" or wellbeing):ti
#71	((support* or promot* or facilitat* or enhanc* or improv* or increas* or optimis*) near/3 ("well being" or wellbeing)):ab
#72	#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
#73	((interinstitution* or multiinstitution* or jointinstitution* or interorganisation* or interorganization* or multiorganisation* or multiorganization* or jointorganisation* or jointorganization* or intersector* or multisector* or jointsector* or interagenc* or multiagenc* or jointagenc* or interprovider* or multiprovider* or jointprovider* or interstakeholder* or multistakeholder* or jointstakeholder* or interprofession* or multiprofession* or jointprofession*) near/10 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school* or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#74	((inter or multi* or joint) near/3 (institution* or organisation* or organization* or sector* or agenc* or provider* or stakeholder* or profession*) near/10 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school* or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#75	((institution* or organisation* or organization* or sector* or agenc* or provider* or stakeholder* or profession* or care or service* or department*) near/5 (collaborat* or coordinat* or co-ordinat* or cooperat* or co-operat* or integrat* or partner*) near/5 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school*

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#	Searches
	or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#76	#73 or #74 or #75
#77	((health* or NHS or clinical or clinician* or medical or medic* or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/10 social* near/10 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school* or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#78	((health* or NHS or clinical or clinician* or medical or medic* or physician* or consultant* or nurse* or general practitioner* or GP or GPs or occupational therapist* or OT or OTs or allied health professional* or AHP or AHPs or ((speech or language) near/3 therapist*) or SLT or SLTs) near/10 (educat* or school* or teach* or headmaster* or headmistress* or SENCO* or DfE*) near/10 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school* or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#79	(social* near/10 (educat* or school* or teach* or headmaster* or headmistress* or SENCO* or DfE*) near/10 ((equipment near/3 adapt*) or ((information or communication) near/3 technolog*) or ICT or "assistive technolog*" or ((augmentat* or alternative*) near/3 communicat*) or AAC or "special needs coordinator*" or "care coordinator*" or (support* near/3 (health professional* or therapist* or specialist*)) or "inclusive service*" or (every day near/3 need*) or "positive behavior support" or "positive behaviour support" or PBS or "applied behavioral analysis" or "applied behavioural analysis" or ABA or (Team around near/3 (famil* or child* or young person*)) or TAF or "assessment framework*" or CAF or "early help framework*" or "early support project" or ((preschool* or pre-school* or early years) near/3 support*) or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")):ti,ab
#80	#77 or #78 or #79
#81	#27 and (#40 or #44 or #48 or #55) and #72
#82	#27 and #76
#83	#27 and #80
#84	#81 or #82 or #83
#85	#81 or #82 or #83 with Cochrane Library publication date Between Jan 2000 and Jun 2020, in Cochrane Reviews
#86	#81 or #82 or #83 with Publication Year from 2000 to 2020, in Trials

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

Date of last search: 05/06/2020

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

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#	Searches
16	MeSH DESCRIPTOR INTELLECTUAL DISABILITY EXPLODE ALL TREES IN DARE
17	((disable* or disabilit* or handicap* or retard* or disorder* or impair* or condition* or difficulty or difficulties or deficit* or dysfunct*):TI) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
18	((((sever* or complex* or special or high) adj3 need*))) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
19	#13 OR #14 OR #15 OR #16 OR #17 OR #18
20	#12 AND #19
21	MeSH DESCRIPTOR DISABLED CHILDREN IN DARE
22	((CSHCN)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
23	((("Education Health" adj2 "Care plan*"))) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
24	(("EHC plan*")) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
25	((EHCP*)) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
26	#20 OR #21 OR #22 OR #23 OR #24 OR #25
27	MeSH DESCRIPTOR SOCIAL PARTICIPATION IN DARE
28	MeSH DESCRIPTOR SOCIAL DISTANCE IN DARE
29	MeSH DESCRIPTOR SOCIAL ISOLATION IN DARE
30	MeSH DESCRIPTOR SOCIAL MARGINALIZATION IN DARE
31	MeSH DESCRIPTOR ACTIVITIES OF DAILY LIVING IN DARE
32	MeSH DESCRIPTOR INDEPENDENT LIVING IN DARE
33	MeSH DESCRIPTOR SELF CARE IN DARE
34	((inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working"):TI) and ((Systematic review:ZDT and Bibliographic:ZPS) OR (Systematic review:ZDT and Abstract:ZPS))
35	#27 OR #28 OR #29 OR #30 OR #31 OR #32 OR #33 OR #34
36	#26 AND #35

Database: Health Technology Abstracts (HTA)

Date of last search: 05/06/2020

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

Disabled children and young people up to 25 with severe complex needs: evidence reviews for promoting inclusion, independence and wellbeing (March 2022)

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#	Searches
28	MeSH DESCRIPTOR SOCIAL DISTANCE IN HTA
29	MeSH DESCRIPTOR SOCIAL ISOLATION IN HTA
30	MeSH DESCRIPTOR SOCIAL MARGINALIZATION IN HTA
31	MeSH DESCRIPTOR ACTIVITIES OF DAILY LIVING IN HTA
32	MeSH DESCRIPTOR INDEPENDENT LIVING IN HTA
33	MeSH DESCRIPTOR SELF CARE IN HTA
34	(inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working"):TI IN HTA
35	#27 OR #28 OR #29 OR #30 OR #31 OR #32 OR #33 OR #34
36	#26 AND #35

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

Date of last search: 05/06/2020

#	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?)) 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?")
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(inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working")
7	1 AND 2 AND 3 AND 6 Additional limits - Date: From January 2000 to June 2020
8	1 AND 2 AND 4 AND 6 Additional limits - Date: From January 2000 to June 2020
9	1 AND 2 AND 5 AND 6 Additional limits - Date: From January 2000 to June 2020
10	7 OR 8 OR 9

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Database: British Education Index

Date of last search: 05/06/2020

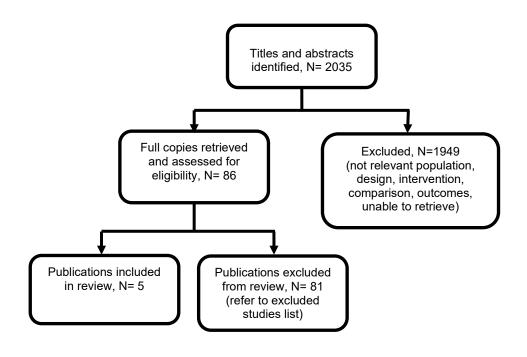| #	Searches
1	TX(inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working") 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: 20000101-20200631
2	TX(inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working") 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: 20000101-20200631
3	1 or 2

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

Date of last search: 05/06/2020

#	Searches
1	TI (inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working") 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*

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#	Searches
	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 (inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or "sleep clinic*" or "feeding clinic*" or "integrated working") 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

Database: Social Sciences Citation Index (SSCI)

Date of last search: 05/06/2020

#	Searches
# 1	TOPIC: ((adolescen* or teen* or youth* or young or juvenile$ or minors or highschool*)) Indexes=SSCI Timespan=2000-2020
# 2	TOPIC: ((child* or schoolchild* or "school age" or "school aged" or preschool* or toddler* or kid$ or kindergar* or boy$ or girl$)) Indexes=SSCI Timespan=2000-2020
# 3	TOPIC: ((infan* or neonat* or newborn* or baby or babies)) Indexes=SSCI Timespan=2000-2020
# 4	TOPIC: (p$ediatric*) Indexes=SSCI Timespan=2000-2020
# 5	TOPIC: ("young* adult$") Indexes=SSCI Timespan=2000-2020
# 6	#5 OR #4 OR #3 OR #2 OR #1 Indexes=SSCI Timespan=2000-2020
# 7	TITLE: ((disable$ or disabilit* or handicap* or retard* or disorder$ or impair* or condition$ or difficulty or difficulties or deficit$ or dysfunct*)) Indexes=SSCI Timespan=2000-2020
# 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	TOPIC: (inclus* or indepen* or "self car*" or selfcar* or "self manag*" or selfmanag* or "well being" or wellbeing or "adapt* equipment" or "equipment adapt*" or "information technolog*" or "communication technolog*" or ICT or "assistive technolog*" or "augmentative communication" or "alternative communication" or AAC or "special needs coordinator*" or "care coordinator*" or "health support" or "therapist support" or "specialist support" or "inclusive service*" or "every day need*" or "positive behavio* support" or PBS or "applied behavio* analysis" or ABA or "team around the family" or "team around the child" or "team around the young person" or TAF or "assessment framework" or CAF or "early help framework" or "early support project*" or "preschool support" or "pre-school support" or "early years support" or "signs of safety" or "short break*" or "continuing care" or "personal budget*" or "person centred planning" or "purposeful engagement" or "public awareness" or "disability awareness" or "supported internship*" or

#	Searches
	"sleep clinic*" or "feeding clinic*" or "integrated working") Indexes=SSCI Timespan=2000-2020
# 22	#21 AND #20 AND #16 Indexes=SSCI Timespan=2000-2020

Database: Social Care Online

Date of last search: 05/06/2020

#	Searches
	All fields: disabled or disability or disabilities or handicap or retard or disorder or impaired or impairment or condition 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 All fields: education or school or teacher or headmaster or headmistress or SENCO or DfE
	AND All fields: 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 All fields: social
	AND All fields: inclusion or independence or independent or "well being" or wellbeing
	AND PublicationYear: 2000 2020

Appendix C – Effectiveness evidence study selection

Study selection for: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Figure 1: Study selection flow chart

Titles and abstracts
identified, N= 2035

Full copies retrieved
and assessed for
eligibility, N= 86

Excluded, N=1949
(not relevant population,
design, intervention,
comparison, outcomes,
unable to retrieve)

Publications included
in review, N= 5

Publications excluded
from review, N= 81
(refer to excluded
studies list)

Appendix D – Effectiveness vidence

Evidence tables for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Table 5: Evidence tables

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Full citation Bent, N., Team approach versus ad hoc health services for young people with physical disabilities: a retrospective cohort study, Lancet, 360, 1280-1286, 2002 **Ref Id** 1266175 **Country where the study was carried out** UK **Study type** Non RCT (Retrospective cohort study) **Study dates** 1999 **Inclusion criteria** Young people with records from Leeds, Stoke on Trent, Leicester, and Birmingham, that indicated long-term physical disability; born between 1978 and 1982; with a mild or no learning disability; and who were in the target diagnostic groups of cerebral palsy, spina bifida, traumatic brain injury, or degenerative neuromuscular disease. Records included young adult team (YAT) case files and from a list of	**Results** Total, n=254 Team based approach (Leeds + Stoke on Trent), n=119 Ad hoc services (Leicester + Birmingham), n=135 London handicap scale (limitation in participation in various aspects of society, such as self-care, work, and leisure) YAT, Median score (IQR): 81.5 (66.5-91.5) [calculated SD=18.52] Ad hoc, Median score (IQR): 68.1 (49.9-82.0) [calculated SD=23.78] EuroQol (Health related quality of life) YAT, Median score (IQR): 72.5 (50.0-90.0) [calculated SD=29.63] Ad hoc, Median score (IQR): 70.0 (50.0-80.0) [calculated SD=22.22] Self-efficacy YAT, Median score (IQR): 32 (28.0-35.0) [calculated SD=5.18] Ad hoc, Median score (IQR): 31.0 (27.0-35.0) [calculated SD=5.93] **1. Bias due to confounding (Low/Moderate/Serious/Critical/No information)** Serious risk: The important confounding factors (dominant provision, definitions of eligibility and socioeconomic status) are not adequately adjusted for. **2. Bias in selection of participants into the study (Low/Moderate/Serious/Critical/No information)**

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
all young people who had recently received or were receiving paediatric care in the UK National Health Service. Additionally, for Leeds only, by review of 600 case notes of past paediatric patients **Exclusion criteria** Individuals who had only sensory or learning disabilities. **Patient characteristics** total n=254 with physical and complex disabilities UK region: Leeds, n=74; Stoke on Trent, n=45; Leicester, n=76; Birmingham, n=59 Gender: female n=120; men n=134 Age: mean (SD); 20.4 (2.3) years, range 17-28 years Disabled since birth: n=173 68% (173) Communication difficulties sufficient to warrant a full proxy interview: n=58 (23%) Needed help with interview questions: n=21 (8%) Interviews duration: 35-1000 min (Mean=2h 39min) **Interventions** Young adult team (YAT) approach versus ad hoc services YAT: Involves multidisciplinary specialist teams developed specifically to facilitate transition from childhood to adulthood services, which typically include a consultant in rehabilitation medicine, a psychologist, therapists, and a social worker. Ad hoc services (existing, uncoordinated services): Same professionals as in the YAT services but the pattern of service delivery here is characterised by individual professionals, usually working in isolation, with links between them being of an ad hoc nature. **Follow-up** Not reported for effectiveness data (interviews conducted in 1999). The economic evaluation was based on the health-care service use and cost in the 6 months preceding interviews.	Serious risk: Selection into the study was related to intervention and outcome; retrospective cohort from Leeds, Stoke on Trent, Leicester, and Birmingham who we identified from young adult team case files, and a list of young people who had recently received or were receiving paediatric care in the UK National Health Service. **3. Bias in classification of interventions (Low/Moderate/Serious/Critical/No information)** 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) No information: Deviations from the intended intervention are not reported **5. Bias due to missing data (Low/Moderate/Serious/Critical/No information)** Moderate risk: Outcome data was not available for all participants (approximately 78% of recruited participants were interviewed) and analysis was based on participants who completed the study. **6. Bias in measurement of outcomes (Low/Moderate/Serious/Critical/No information)** Moderate risk: Face-to-face interviews were conducted by interviewers did not know whether participants received a YAT or an ad hoc service. **7. Bias in selection of the reported result (Low/Moderate/Serious/Critical/No information)** Moderate risk: It appears as though the protocol has not been published, however outcome measurements and analyses are clearly defined and there is no indication of the selection of the reported analysis from among multiple analyses or the selection of the cohort or subgroups for analysis and reporting on the basis of the results. **Overall risk of bias (Low/Moderate/Serious/Critical/No information)**

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
	Serious risk: The study is judged to be at serious risk of bias in two domains, but not at critical risk of bias in any domain. **Source of funding** Funded by the NHS National R&D Programme for People with Physical and Complex Disabilities. **Other information** None
Full citation Borgestig, M., Sandqvist, J., Ahlsten, G., Falkmer, T., Hemmingsson, H., Gaze-based assistive technology in daily activities by children with severe physical impairments, Developmental Medicine and Child Neurology, 58, 46-47, 2016 **Ref Id** 1219430 **Country where the study was carried out** Sweden **Study type** Non RCT (Before and after study) **Study dates** 2010–2013 **Inclusion criteria** Children with severe physical impairments without speaking ability; up to 18 years; with access to gaze-based AT; and whose parents and teacher agreed to participate in the gaze-based AT intervention and in data collection.	**Results** Computer activities children performed in home and at school Baseline Range of activities: 0-7 Mean (median): 1.8 (0.5) n=5 children performed computer activities at home and/or in school **Follow-up** Range of activities: 1-6 Mean (median): 3.8 (4) n=10 children performed computer activities at home and/or in school The computer activity most children performed was to talk with someone, in school (n=7), as well as at home (n=6). 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.

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Exclusion criteria Not reported **Patient characteristics** n total=10 Gender: female, n=2; male, n=8 Age range: 1-15 years Diagnoses: Cerebral palsy dyskinesia, n=4; Cerebral palsy spastic displegia, n=3; Cerebral palsy spastic tetraplegia, n=2; High Cervical spinal cord injury, n=1 School: special preschool, n=1; Mainstream school special class, n=2; special school, n=6; NA, n=1 **Interventions** Gaze-based assistive technology (AT) Gaze based AT: Integration of gaze based AT in the child's everyday life and access to the services from the multi-professional communication (MPC) team specializing in the use of AT, consisting of an occupational therapist, speech and language pathologist, special education teacher, and IT support person. A paediatric neurologist was involved as a medical expert. **Follow-up** Endpoint (9–10 months) and follow-up (5–10 months after withdrawal of the services related to the gaze-based AT intervention)	**3.Intervention unlikely to affect data collection (Low/High/Unclear)** Low risk: Sources and methods of data collection were the same before and after the intervention. **4. Knowledge of the allocated interventions adequately prevented during the study (Low/High/Unclear)** High risk: Computer use diaries were filled in by parents, teachers, and assistants. None of the researchers, parents, teachers, or assistants were blind to the intervention. **5. Incomplete outcome data (Low/High/Unclear)** High risk: Outcome data was available for 94% of participants (Home and school diaries were returned with 25 missing days in total) **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: Small sample size (n=10), and change in number of performed computer activities per day and duration of computer activities (min/day) over time reported as figure only. **Overall risk of bias (Low/High/Unclear)** High risk: The study is judged to be at high risk of bias in four domains **Source of funding** Funded by the Swedish Research Council, Jimmy Dahlstens Fond, and Stiftelsen Sunnerdahls Handikappfond **Other information** The variables in computer diaries were calculated in each 14-day period
Full citation	**Results**

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Pfiffner, Linda J., Villodas, Miguel, Kaiser, Nina, Rooney, Mary, McBurnett, Keith, Educational outcomes of a collaborative school-home behavioral intervention for ADHD, School psychology quarterly: the official journal of the Division of School Psychology, American Psychological Association, 28, 25-36, 2013 **Ref Id** 1266703 **Country where the study was carried out** USA **Study type** Non RCT (Before and after study) **Study dates** Not reported; Over a 3-year time period **Inclusion criteria** Presence of ADHD symptoms (i.e., six or more inattention symptoms and/or six or more hyperactive/impulsive symptoms endorsed on the Child Symptom Inventory (CSI) by either the parent or teacher as occurring often or very often); cross-situational impairment (home and school), documented as a score of 3 or greater in at least one domain of functioning on both parent and teacher Impairment Rating Scales; a Full Scale IQ equivalent of >79 on the Wechsler Abbreviated Scale of Intelligence; a caretaker available to participate in treatment; and a primary classroom teacher who agreed to participate in the classroom component of the intervention. Children taking medication were eligible as long as their regimens were stable. **Exclusion criteria** Students who initiated psychoactive medication at the start of the	Academic functioning assessed with the Homework Problems Checklist (HPC) completed by parents, and the Academic Competence Evaluation Scale (ACES) completed by teachers HPC: Mean (SD) Baseline: 52.77 (10.46) Post treatment: 41.54 (12) ACES-Academic skills: Mean (SD) Baseline: 82.48 (23.70) Post treatment: 87.35 (24.40) School grade obtained from SFUSD report cards. Language arts report card grades: Mean (SD) Baseline: 2.07 (0.59) Post treatment: 2.56 (0.63) Math report card grades: Mean (SD) Baseline: 2.11 (0.56) Post treatment: 2.47 (0.68) Academic achievement assessed with Four subtests from the Woodcock Johnson Tests of Achievement (WJ-III) WJ-Reading fluency: Mean (SD) Baseline: 33.19 (12.70) Post treatment: 36.35 (13.39) WJ-Passage comprehension: Mean (SD) Baseline: 24.75 (4.79) Post treatment: 26.95 (4.83) WJ-Calculations: Mean (SD) Baseline: 13.49 (3.96) Post treatment: 15.74 (4.58)

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
study; those with ADHD symptoms below the eligibility threshold; Students with significant visual or hearing impairments, severe language delay, psychosis, or pervasive developmental disorder, or who were in full-day special classroom; and those who declined participation **Patient characteristics** Number of students who were referred to the program by learning support professionals, n=67 (Seven students were excluded: two students initiated psychoactive medication at the start of the study, three students had ADHD symptoms below the eligibility threshold, and parents of two students declined participation due to scheduling. Three families discontinued early: one family moved away, one dropped out due to perceived lack of need, and one dropped out due to medical problems) Number who met screening criteria for ADHD and completed the study, n=57 Grades: 2 through 5 Mean age: 8.1 years Race/ethnicity: Caucasian, 40%; mixed race/ethnicity, 21%; Asian or Pacific Islander, 14%; African American, 12%; Hispanic/Latino, 11%; American Indian, 2%. Single-parent families: 26% Education level of the primary parent participating in the treatment: 2% (1 parent) had not completed high school, 14% had a high school degree, 37% had some college, and 47% had a college degree. Participants taking medication for attention or behaviour concerns: n=4 (7%) **Interventions** Collaborative Life Skills Program (CLS) CLS: Components included group behavioural parent training, classroom behavioural intervention, and child skills group, led by school-based mental health professionals known as learning support professionals (LSPs).	WJ-Math fluency: Mean (SD) Baseline: 41.82 (16.11) Post treatment: 46.30 (19.37) Active and passive engagement (Participation) assessed with the Behavioural Observation of Students in Schools (BOSS) BOSS-Engagement: Mean (SD) Baseline: 64.43 (14.99) Post treatment: 74.77 (13.46) 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 (e.g. maturation, and/or nonspecific treatment effects) 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: The point of analysis is the point of intervention **3. Intervention unlikely to affect data collection (Low/High/Unclear)** Low risk: The intervention itself was unlikely to affect data collection (sources and methods of data collection were the same before and after the intervention) **4. Knowledge of the allocated interventions adequately prevented during the study (Low/High/Unclear)** Low risk: Outcome measures were assessed by both parents and teachers, and observational measures were completed by research assistants blind to group assignment and the purpose of the study. **5. Incomplete outcome data (Low/High/Unclear)**

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Behavioural parent training: 10 group sessions (1-hour duration) comprised of modules to teach skills covered in traditional parent training programs, including effective use of commands, rewards, and discipline, and strategies for managing areas of difficulty commonly associated with ADHD covered in the child group Classroom behavioural training: School–home daily report card (which included two to three target behaviours such as academic work, classroom deportment and social interactions) rated up to three times per day) and a homework plan. Meeting target goals earned stars which were brought to the child group each week for group-based reinforcement, and exchanged for daily home rewards. Target behaviours were refined throughout the 12-week intervention period during two or three individual 30-min meetings attended by teacher, parent, student, and LSP. Child skills group: 10 group sessions (40-mins duration) held during the school day which included modules targeted at social functioning and independence. Skills were taught through didactic instruction, behaviour rehearsal, and in vivo practice. A reward-based contingency management program was utilized and children earned stars and rewards for accomplishing target goals at home and school. Reinforcement contingencies were set both within and across settings (e.g., parents reward behaviours that occur at home and school, school clinicians reward behaviours that occur at home, school, and group), and the net effect is around-the-clock support of child behaviour across impairment domains via an active partnership of parents, teachers, and school clinicians. **Follow-up** 12 weeks	Low risk: Outcome data was reported for 96% of participants (BOSS outcome data was missing from two students due to absences during the observational period, and complete report cards were not available from six participants due to school transfers or teachers not using the standard reporting system) **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)** Low risk: No evidence of other biases **Overall risk of bias (Low/High/Unclear)** High risk: The study is judged to be at high risk of bias in one domain **Source of funding** Supported by the Institute of Education Sciences, U.S. Department of Education, through Grant R324A080041 to University of California, San Francisco **Other information** 12-week intervention period Scales used: Homework Problems Checklist (HPC) total scores; 20-items rated on a 4-point scale (completed by parents) Academic Competence Evaluation Scale (ACES) total scores; 33 items rated on a 5-point scale (completed by teachers) Woodcock Johnson Tests of Achievement (WJ-III); Four subsets including Paragraph Comprehension, Reading Fluency, Math Fluency, and Math Calculation Behavioural Observation of Students in Schools (BOSS); Observational measure of Active Engaged Time, Passive Engaged Time, Off-Task Motor, Off-Task Verbal, and Off-Task Passive
Full citation Stewart, Sandra, Neyerlin-Beale, Janet, The impact of community paediatric occupational therapy on children with disabilities and their	**Results** The Community Dependency Index (CDI) (Independence) N=33 children

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
carers, British Journal of Occupational Therapy, 63, 373-379, 2000 **Ref Id** 1100436 **Country where the study was carried out** UK **Study type** Non RCT (Before and after study) **Study dates** Not reported; The sample was built up over a period of 18 months **Inclusion criteria** Children who had been referred to the occupational therapy service or had been newly allocated to a therapist; where the child and/or parents were willing to take part in the study. **Exclusion criteria** Not reported **Patient characteristics** Baseline data, n=46 children; (Two families withdrew from the study and 11 families were still awaiting complete implementation of the occupational therapy recommendations and therefore were not included) Main sample, n=33 children Gender: n=16 girls, n=17 boys Age range: 2-18 years (18% aged 2-5 years, 21% aged 6-10 years, 49% aged 11-15, 12% aged 16-18 years) Children disabilities included: neurological and degenerative disorders, moderate to severe learning difficulties, diseases such as arthritis and	CDI: Mean (SD) Baseline: 27.27 (25.38); Range of scores 0-100 Post intervention: 46.82 (30.05); Range of scores 0-100 <u>EPOC Risk of bias for interrupted time series studies</u> **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 (range in time between 6-9 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: The occupational therapist was not blind to the interventions and completed the CDI and COPM measures with the children at baseline and post intervention. A researcher with no knowledge of the children or their conditions obtained a second set of carer outcomes and satisfaction with the occupational therapy service. **5. Incomplete outcome data (Low/High/Unclear)** Low risk: The CDI was completed by all 33 children prior to and immediately after the occupational therapy. Other outcome measures were reported for 25 children (75%). **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).

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
brittle bone disease and a variety of rare syndromes **Interventions** Paediatric occupational therapy The clinical occupational therapist maintained regular contact with both the children's schools and other therapy professionals so that interventions were not given in isolation, and carer education and support. The occupational therapist provided or arranged for the necessary interventions for the child including Equipment advice and/or provision, Moving and handling issues, Advice on management of ADL, Seating assessment and provision, Habilitation or rehabilitation, Minor adaptations, Major adaptations, Management of progressive deteriorating illness, and Moving to alternative accommodation with/without further alteration. **Follow-up** Between 6 and 9 months after completing of the interventions	**7. Other risks of bias (Low/High/Unclear)** High risk: Funding sources not reported **Overall risk of bias (Low/High/Unclear)** High risk: The study is judged to be at high risk of bias in three domains **Source of funding** Not reported **Other information** The Community Dependency Index (CDI) measures an individual's independence on 10 activities of daily living and registers changes over time. A maximum score of 100 indicates full independence, while low scores indicate that the individual is dependent on others for many daily living activities.
Full citation Vasileiadis, Ilias, Doikou-Avlidou, Maro, Enhancing social interaction of pupils with intellectual disabilities with their general education peers: the outcomes of an intervention programme, Journal of Research in Special Educational Needs, 18, 267-277, 2018 **Ref Id** 1105959 **Country where the study was carried out** Greece **Study type** Non RCT (Before and after study) **Study dates**	**Results** Social interaction between target pupils and typically developing peers at the beginning and at the end of the intervention programme (N = 4) Negative interaction: mean (SD) At the beginning of the programme: 11.75 (1.26) At the end of the programme: 2.00 (0.17) Positive interaction: mean (SD) At the beginning of the programme: 1.25 (0.5) At the end of the programme: 11.0 (2.16) Verbal initiations: mean (SD) At the beginning of the programme: 2.00 (0.82) At the end of the programme: 8.50 (1.30)

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
During a school year (November to May) **Inclusion criteria** Not reported: Pupils with mild intellectual disability between 6 and 7 years of age attending a primary special school on a Dodecanese island in Greece. **Exclusion criteria** Not reported **Patient characteristics** n=4 pupils with mild intellectual disability attending the special school Gender: n=3 males, n=1 female Age: 6-7 years of age (n=2 first graders, n=2 second graders) n=16 pupils attending the co-located general school Gender: n=7 males, n=9 female Age: first graders **Interventions** Social Coexistence Programme Social Coexistence Programme: Consisted of (1) the implementation of structured activities designed to promote emotion regulation and appropriate expression, self-confidence and cooperation, and (2) participation of the target pupils in social activities in the neighbourhood, with the active involvement of school staff members. The target pupils (with mild intellectual disability) and the first-grade pupils of the co-located general school formed a 'coexistence and self-regulation group' which met for 2 hours, 14 times in total. During the meetings, experiential exercises, in which the participants addressed issues of communication, personal relations, as well as school and social everyday life, were implemented. The group was coordinated by the special school psychologist accompanied by the general education teacher. Emphasis was placed on shaping conditions that enhance communication and promote the active participation of all children.	Non-engagement: mean (SD) At the beginning of the programme: 11.75 (1.7) At the end of the programme: 2.00 (2.82) <u>EPOC Risk of bias for interrupted time series studies</u> **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. **3. Intervention unlikely to affect data collection (Low/High/Unclear)** Low risk: Sources and methods of data collection were the same before and after the intervention. **4. Knowledge of the allocated interventions adequately prevented during the study (Low/High/Unclear)** High risk: Observations were carried out by the first author. **5. Incomplete outcome data (Low/High/Unclear)** Low risk: End of programme outcome data was available for all participants. **6. Selective outcome reporting (Low/High/Unclear)** High risk: Reported outcomes are not clearly specified in the methods section; occurrence of interaction (verbal or nonverbal, and positive, neutral or negative), initiated/received interaction, solitary activity and non-engagement were observed. It does not appear that the protocol has been published. **7. Other risks of bias (Low/High/Unclear)** High risk of bias: Very small sample size (n=4); baseline observations were carried out 3 weeks after the programme commenced; and sources of funding are

Study details	Results and risk of bias assessment using ROBINS-I/ EPOC Risk of bias for interrupted time series studies
Neighbourhood inclusion involved the target pupils, as well as the general education teachers. Pupils' inclusion in their neighbourhood was promoted, by focusing on the development of their social skills and on the enhancement of their social interaction with peers and community members. An individualised programme was created for each pupil based on his/her capabilities, needs and desires, in cooperation with all interested parties (parents, teachers and the pupils themselves). Teachers and pupils would meet twice a week for about two hours, for a 6-month period (from October to May) The programme included participation of the speech therapist, special education teacher, and the first and second grade general education teachers. **Follow-up** Observation in the schoolyard was conducted 1 week before the end of the programme, and observation in the 'self-regulation room' was held during the last month of the programme's implementation.	not reported **Overall risk of bias (Low/High/Unclear)** High risk: The study is judged to be at high risk of bias in four domains **Source of funding** Not reported **Other information** The special school was co-located with a general primary school Baseline observation was carried out 3 weeks after the programme had started so that pupils would get familiarised with the school environment and circumstances that might influence observation could be checked

ACES: academic competence evaluation scale; ADHD: attention deficit hyperactivity disorder; AT: assistive technology; BOSS: behavioural observation of students in schools; CDI: community dependency index; CLS: collaborative life Skills program; COPM: Canadian occupational performance measure; CSI: child symptom inventory; EPOC: effective practice and organisation of care; HPC: homework problems checklist; IQR: interquartile range; LSPs: learning support professionals; NHS: national health service; RCT: randomised controlled trial; SD: standard deviation; WJ: woodcock johnson tests of achievement; YAT: young adult team.

Appendix E – Forest plots

Forest plots for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

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

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Appendix F – GRADE tables

GRADE tables for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Table 6: Evidence profile for comparison 1: Young adult team approach versus ad hoc services

No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Young adult team approach	Ad hoc services	Relative (95% CI)	Absolute	Quality	Importance
Quality assessment							**No of patients**		**Effect**		**Quality**	**Importance**
Participation and inclusion (Participation restriction measured with the London Handicap Scale) (follow-up not reported; range of scores: 0-100; Better indicated by higher values)												
1 (Bent 2002)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[2]	none	119	135	-	MD 13.4 higher (8.19 to 18.61 higher)	VERY LOW	CRITICAL
Health related quality of life (Health status measured with the Euroqol visual analogue scale) (follow-up not reported; range of scores: 0-100; Better indicated by higher values)												
1 (Bent 2002)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	119	135	-	MD 2.5 higher (4.01 lower to 9.01 higher)	LOW	IMPORTANT
Self-efficacy (follow-up not reported; range of scores: 10-40; Better indicated by higher values)												
1 (Bent 2002)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	119	135	-	MD 1 higher (0.37 lower to 2.37 higher)	LOW	IMPORTANT

CI: confidence interval; MD: mean difference; MID: minimal important difference; SD: standard deviation

[1]Evidence downgraded by 2 due to serious risk of bias in 2 domains (confounding, and selection of participants) as per ROBINS-I

[2]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD of the control group at baseline = 11.89)

Table 7   Evidence profile for comparison 2: Before and after gaze based assistive technology plus a multi-professional communication team

Quality assessment	No of patients	Effect	Quality	Importance

No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before	After	Relative (95% CI)	Absolute		
Participation and inclusion (number of computer activities performed at home and school) (follow-up 5-10 months; range of scores not reported; Better indicated by higher values)												
1 (Borgestig 2016)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[2]	none	10	10	-	MD 2 higher (0.23 to 3.77 higher)	VERY LOW	CRITICAL

CI: confidence interval; MD: mean difference; MID: minimal important difference; SD: standard deviation

[1]Evidence downgraded by 2 due to high risk of bias in 4 domains (intervention independent of other changes, knowledge of the allocated interventions, incomplete outcome data, and other risks of bias) as per EPOC risk of bias for interrupted time series studies

[2]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 1.18)

Table 8: Evidence profile for comparison 3: Before and after the Collaborative Life Skills Program

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before	After	Relative (95% CI)	Absolute		
Participation and inclusion (Active and passive engagement measured with the Behavioural Observation of Students in Schools) (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[2]	none	55	55	-	MD 10.34 higher (5.02 to 15.66 higher)	VERY LOW	CRITICAL
Educational achievement or attainment (Academic achievement measured with the Woodcock Johnson Tests of Achievement 3rd ed. - Reading fluency) (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[3]	none	57	57	-	MD 3.16 higher (1.63 lower to 7.95 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (Academic achievement measured with the Woodcock Johnson Tests of Achievement 3rd ed. - Passage comprehension) (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[4]	none	57	57	-	MD 2.2 higher (0.43 to 3.97 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (Academic achievement measured with the Woodcock Johnson Tests of Achievement 3rd ed. - Calculations (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												

1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[5]	none	57	57	-	MD 2.25 higher (0.68 to 3.82 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (Academic achievement measured with the Woodcock Johnson Tests of Achievement 3rd ed. - Math fluency (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[6]	none	57	57	-	MD 4.48 higher (2.06 lower to 11.02 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (Academic functioning measured with the Homework Problems Checklist) (follow-up 12 weeks; range of scores: 0-60; Better indicated by lower values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	57	57	-	MD 11.23 lower (15.36 to 7.1 lower)	VERY LOW	IMPORTANT
Educational achievement or attainment (Academic functioning measured with the Academic Competence Evaluation Scale) (follow-up 12 weeks; range of scores not reported; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[7]	none	57	57	-	MD 4.87 higher (3.96 lower to 13.7 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (School grades measured with San Francisco Unified School District report cards for Language arts) (follow-up 12 weeks; range of scores: 1-4; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[8]	none	57	57	-	MD 0.49 higher (0.27 to 0.71 higher)	VERY LOW	IMPORTANT
Educational achievement or attainment (School grades measured with San Francisco Unified School District report cards for Math) (follow-up 12 weeks; range of scores: 1-4; Better indicated by higher values)												
1 (Pfiffner 2013)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[9]	none	57	57	-	MD 0.36 higher (0.13 to 0.59 higher)	VERY LOW	IMPORTANT

CI: confidence interval; MD: mean difference; MID: minimal important difference; SD: standard deviation

[1]Evidence downgraded by 2 due to high risk of bias in 1 domain (intervention independent of other changes) as per EPOC risk of bias for interrupted time series studies

[2]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 7.49)

[3]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 6.35)

[4]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 2.39)

[5]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 1.98)

[6]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 8.05)

[7]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 11.85)

[8]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 0.29)

[9]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 0.28)

Table 9: Evidence profile for comparison 4: Before and after occupational therapy

No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before	After	Relative (95% CI)	Absolute	Quality	Importance
Quality assessment							No of patients		Effect			
Independence (measured with the Community Dependency Index) (follow-up 6-9 months; range of scores: 0-100; Better indicated by higher values)												
1 (Stewart 2000)	observational studies	very serious[1]	no serious inconsistency	no serious indirectness	serious[2]	none	33	33	-	MD 19.55 higher (6.13 to 32.97 higher)	VERY LOW	CRITICAL

CI: confidence interval; 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, and other risks of bias) as per EPOC risk of bias for interrupted time series studies

[2]Evidence downgraded by 1 due to 95% CI crossed 1 MID (0.5x SD at baseline = 12.69)

Table 10: Evidence profile for comparison 5: Before and after the Social Coexistence Programme

No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Before	After	Relative (95% CI)	Absolute	Quality	Importance
Quality assessment							No of patients		Effect			
Participation and inclusion (Negative interaction) (follow-up 6 months; range of scores not reported; Better indicated by lower values)												
1 (Vasileiadis 2018)	observational studies	very serious[1]	no serious inconsistency	serious[2]	no serious imprecision	none	4	4	-	MD 9.75 lower (11 to 8.5 lower)	VERY LOW	CRITICAL
Participation and inclusion (Positive interaction) (follow-up 6 months; range of scores not reported; Better indicated by higher values)												
1 (Vasileiadis 2018)	observational studies	very serious[1]	no serious inconsistency	serious[2]	no serious imprecision	none	4	4	-	MD 9.75 higher (7.58 to 11.92 higher)	VERY LOW	CRITICAL
Participation and inclusion (Verbal initiations) (follow-up 6 months; range of scores not reported; Better indicated by higher values)												
1 (Vasileiadis 2018)	observational studies	very serious[1]	no serious inconsistency	serious[2]	no serious imprecision	none	4	4	-	MD 6.5 higher (4.99 to 8.01 higher)	VERY LOW	CRITICAL
Participation and inclusion (Non engagement) (follow-up 6 months; range of scores not reported; Better indicated by lower values)												

| 1 (Vasileiadis 2018) | observational studies | very serious[1] | no serious inconsistency | serious[2] | no serious imprecision | none | 4 | 4 | - | MD 9.75 lower (12.98 to 6.52 lower) | VERY LOW | CRITICAL |

CI: confidence interval; MD: mean difference; MID: minimal important difference; SD: standard deviation

[1]Evidence downgraded by 2 due to high risk of bias in 4 domains (intervention independent of other changes, knowledge of the allocated interventions, selective outcome reporting, and other risks of bias) as per EPOC risk of bias for interrupted time series studies

[2]Evidence downgraded by 1 due to an indirect aspect of PICO (population); pupils with mild intellectual disability

Appendix G – Economic evidence study selection

Economic evidence study selection for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

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

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Appendix H – Economic evidence tables

Economic evidence tables for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Table 11: Economic evidence tables for Young adult team (YAT) approach

Study country and type	Intervention and comparator	Study population, design and data sources	Costs and outcomes (descriptions and values)	Results	Comments
Bent 2002 UK Cost-effectiveness analysis Conflict of interest: None declared Funding: NHS National R&D Programme for People with Physical and Complex Disabilities	YAT services (team-based approaches) -multidisciplinary specialist teams designed to facilitate transition from childhood to adulthood services -include a consultant in rehabilitation medicine, a psychologist, therapists, and a social worker Ad-hoc services - individual professionals, usually working in isolation, with links between them being of an ad hoc nature	Young people with long-term disabilities, who had mild or no learning disability, and who were in the target diagnostic groups of cerebral palsy, spina bifida, traumatic brain injury, or degenerative neuromuscular disease; 17–28 years (mean 20.4 years) Source of effectiveness data: retrospective cohort, Bent 2002 (N=254) Source of resource use data: retrospective cohort, Bent 2002 (N=254) Source of unit costs: national	Costs: intervention (running a team), family doctors, other doctors, physiotherapists, occupational therapists, social workers, speech therapists, and other health-care professionals The mean weighted average intervention cost for the 6-month duration: £34-69 per participant The mean health care costs per participant over 6-months: YAT: £650 Ad-hoc: £798 Difference: -£148 Total costs per participant at 6 months	YAT dominant using participation in society (London handicap scale) and activity limitation scale (Barthel) as outcome measures YAT preferred on the basis of cost-minimisation using other outcome measures including Body function impairment (Nottingham health profile subscales for pain, energy and sleep), Health status (EQ-5D-VAS), psychosocial measures (self-esteem, self-efficacy, proactive attitude, and stress) Sensitivity analyses	Perspective: NHS and PSS Currency: UK£ Cost year: 2000 Time horizon: 6 months Discounting: NA Applicability: partially applicable (UK study, an old retrospective study, unclear how service configuration and delivery captures current service arrangements) Quality: potentially serious limitations (short time horizon, excluded costs associated with admissions to hospital for inpatient treatment or respite care)

Study country and type	Intervention and comparator	Study population, design and data sources	Costs and outcomes (descriptions and values)	Results	Comments
			YAT: £684-719 Ad-hoc: £798 Difference: -£79-114 Primary outcome measure: participation in society (London handicap scale). Other measures included Body function impairment (Nottingham health profile subscales for pain, energy and sleep), activity limitation (Barthel), Health status (EQ-5D-VAS), psychosocial measures (self-esteem, self-efficacy, proactive attitude, and stress) London handicap scale, median (IQR) YAT: 81.5 (66.5-91.5) Ad-hoc: 68.1 (49.9-82.0) Difference: 13.4 (improvement), p<0.0001 *Barthel activity limitation scale*, median	When the most costly estimate of providing YAT services was used the cost savings were £79 per participant over the 6-month period	

Study country and type	Intervention and comparator	Study population, design and data sources	Costs and outcomes (descriptions and values)	Results	Comments
			(IQR): YAT: 19.0 (16.0-20.0) Ad-hoc: 17.0 (12.5-20.0) Difference: 2.0 (improvement), p<0.013 There was no difference on any other outcome measures		

Abbreviations: EQ-5D: EuroQol-5 dimensions; IQR: interquartile range; N: Number of people; NA: Not applicable NHS: National Health Service; PSS: Personal social services; R&D: Research and Development; VA: Visual analogue scale; YAT: Young adult team

Appendix I – Economic model

Economic model for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

No economic analysis was conducted for this review question.

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Appendix J – Excluded studies

Excluded studies for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Effectiveness studies

Table 12: Excluded studies and reasons for their exclusion

Study	Reason for Exclusion
Aldiss, Susie, Baggott, Christina, Gibson, Faith, Mobbs, Sarah, Taylor, Rachel M., A critical review of the use of technology to provide psychosocial support for children and young people with long-term conditions, Journal of pediatric nursing, 30, 87-101, 2015	Population: Children and young people who do not have needs in all three areas of health, social care and education. Relevant RCTs were checked against the inclusion criteria.
Asmus, Jennifer M., Carter, Erik W., Moss, Colleen K., Biggs, Elizabeth E., Bolt, Daniel M., Bom, Tiffany L., Bottema-Beutel, Kristen, Brock, Matthew E., Cattey, Gillian N., Cooney, Molly, Fesperman, Ethan S., Hochman, Julia M., Huber, Heartley B., Lequia, Jenna L., Lyons, Gregory L., Vincent, Lori B., Weir, Katie, Asmus, Carter Carter Carter Carter Carter Cohen de Boer Farmer Feldman Fryxell Gardner Giangreco Gresham Haring Hochman Hughes Kamps Kennedy Kennedy Kleinert Koegel Koegel Koegel Laursen Nowicki Raudenbush Raudenbush Rubin Shalev Strain Wagner Webster, Efficacy and social validity of peer network interventions for high school students with severe disabilities, American Journal on Intellectual and Developmental Disabilities, 122, 118-137, 2017	Intervention: The approach does not include two or more services working together (education only)
Barnes, Jonathan, Drama to promote social and personal well-being in six- and seven-year-olds with communication difficulties: the Speech Bubbles project, Perspectives in Public Health, 134, 101-109, 2014	Study design: Qualitative
Bauminger-Zviely, Nirit, Eden, Sigal, Zancanaro, Massimo, Weiss, Patrice L., Gal, Eynat, Nirit Bauminger-Zviely, Sigal Eden Massimo Zancanaro Patrice L. Weiss, Eynat, Gal, Increasing social engagement in children with high-functioning autism spectrum disorder using collaborative technologies in the school environment, 17, 317-339, 2013	Intervention: The approach does not include two or more services working together (education only)
Bee, Penny, Pedley, Rebecca, Rithalia, Amber, Richardson, Gerry, Pryjmachuk, Steven, Kirk, Susan, Bower, Peter, Self-care support for children and adolescents with long-term conditions: the REfOCUS evidence synthesis, Health Services and Delivery Research, 6, 2018	Population: Children and young people who do not have needs in all three areas of health, social care and education. (Majority of diagnoses were asthma, or long-term mental health conditions)
Bolte, S., Social skills group training: Kontakt for children and adolescents with highfunctioning	Publication type: Conference abstract

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Study	Reason for Exclusion
autism spectrum disorder: A pragmatic multicenter and randomized controlled trial, Journal of the American Academy of Child and Adolescent Psychiatry, 55 (10 Supplement 1), S101-S102, 2016	
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: The approach does not include two or more services working together (education only)
Brain, Thea, Mirenda, Pat, Bambara, Barlow Bene Carter Carter Carter Chan Chang Cooper Dawson Grondhuis Haring Hochman Horner Hughes Hughes Loftin McCambridge Miltenberger Newcomb Parker Parker Petrina Reynolds-Keefer Roid Scattone Scattone Schmidt Watkins Watson, Effectiveness of a low-intensity peer-mediated intervention for middle school students with autism spectrum disorder, Research in Autism Spectrum Disorders, 62, 26-38, 2019	Intervention: The approach does not include two or more services working together (education only)
Bray, Nathan, Noyes, Jane, Edwards, Rhiannon T., Harris, Nigel, Wheelchair interventions, services and provision for disabled children: a mixed-method systematic review and conceptual framework, BMC health services research, 14, 309, 2014	Study design: Narrative Systematic review. Relevant studies were checked against the inclusion criteria.
Brown Helen, et al.,, What works in the delivery of independent support? Final report from the national evaluation of the Independent Support Programme 2014 - 2016, 93, 2017	Outcomes: No relevant data reported for extraction
Council For Disabled, Children, Hear us out!, 24p., 2012	Study design: Policy paper with qualitative data only
Creedy, Debra, Collis, Dianne, Ludlow, Tracey, Cosgrove, Shelli, Houston, Kym, Irvine, David, Fraser, Jenny, Moloney, Susan, Development and evaluation of an intensive intervention program for children with a chronic health condition: a pilot study, Contemporary nurse, 18, 46-56, 2004	Population: Children and young people who do not have needs in all three areas of health, social care and education.
de Verdier, Kim, Adams, Aviles Bamberg Braun Cochrane de Verdier Dix Ek Erikson Foreman Gish Goodman Gray Hess Huure Huure Israelite Klinkosz MacCuspie Pinquart Preisler Roe Ronnback Stinson Tuttle Whitburn Wong Woodward Zambo, Inclusion in and out of the classroom: A longitudinal study of students with visual impairments in inclusive education, British Journal of Visual Impairment, 34, 132-142, 2016	Study design: Qualitative
Easton, C., et al.,, Supporting families with complex needs: findings from LARC4: report for the Local Authority Research Consortium (LARC), 42p., 2012	Outcomes: No relevant data reported for extraction
European Foundation For The Improvement Of, Living, Working, Conditions, Active inclusion of young people with disabilities or health	Publication type: Review article

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Study	Reason for Exclusion
problems, 132p., 2012	
Evans, Peter, Educating Students with Special Needs: A Comparison of Inclusion Practices in OECD Countries, Education Canada, 44, 32-35, 2004	Publication type: Review article
Evans, Ruth, Plumridge, Gill, Inclusion, Social Networks and Resilience: Strategies, Practices and Outcomes for Disabled Children and their Families, Social Policy and Society, 6, 231-241, 2007	Publication type: Review article
Fage, C., Consel, C. Y., Balland, E., Etchegoyhen, K., Amestoy, A., Bouvard, M., Sauzeon, H., Tablet Apps to Support First School Inclusion of Children With Autism Spectrum Disorders (ASD) in Mainstream Classrooms: A Pilot Study, Frontiers in Psychology, 9, 2018	Intervention: The approach does not include two or more services working together (education only)
Finnvold, Jon Erik, School segregation and social participation: the case of Norwegian children with physical disabilities, European Journal of Special Needs Education, 33, 187-204, 2018	Intervention: The approach does not include two or more services working together (education only)
Fisher, Marisa H., et, al, Applying the selfâ€determination theory to develop a schoolâ€toâ€work peer mentoring programme to promote social inclusion, Journal of Applied Research in Intellectual Disabilities, 33, 296-309, 2020	Publication type: Review article
Franco, Jessica H., Davis, Barbara L., Davis, John L., Acredolo, Altman Bakeman Barton Bates Brady Brady Brady Bruner Byrt Bzoch Calandrella Campbell Chiang Christ Cohen Colgan Cooper Fey Goldstein Gros-Louis Higgins Hintze Horner Iverson Iverson Kashinath Kazdin Keen Kratochwill Lancioni Maljaars McCathren McCauley McCormick Mundy Mundy Murphy Olive Paparella Parker Ratner Sameroff Schopler Schuler Sheinkopf Smith Snow Spiker Tomasello Warren Warren Warren Watson Watt Westling Wetherby Whalen Yoder Yoder Yoder Yoder Yoder Yoder Yoder Yoder, Increasing social interaction using prelinguistic milieu teaching with nonverbal school-age children with autism, American Journal of Speech-Language Pathology, 22, 489-502, 2013	Intervention: The approach does not include two or more services working together (Prelinguistic milieu teaching in the home environment)
Gagnon-Roy, M., Jasmin, E., Camden, C., Social participation of teenagers and young adults with developmental co-ordination disorder and strategies that could help them: results from a scoping review, Child: Care, 42, 840-851, 2016	Study design: Scoping review reporting qualitative themes
Ganz, J. B., Earles-Vollrath, T. L., Heath, A. K., Parker, R. I., Rispoli, M. J., Duran, J. B., A meta-analysis of single case research studies on aided augmentative and alternative communication systems with individuals with autism spectrum disorders, Journal of Autism	Study design: Systematic review of single-case studies

Study	Reason for Exclusion
and Developmental Disorders, 42, 60-74, 2012	
Gilroy, S. P., McCleery, J. P., Leader, G., Systematic Review of Methods for Teaching Social and Communicative Behavior with High-Tech Augmentative and Alternative Communication Modalities, Review Journal of Autism and Developmental Disorders, 4, 307-320, 2017	Outcomes: No relevant data reported for extraction
Haack, Lauren M., Villodas, Miguel, McBurnett, Keith, Hinshaw, Stephen, Pfiffner, Linda J., Parenting as a Mechanism of Change in Psychosocial Treatment for Youth with ADHD, Predominantly Inattentive Presentation, Journal of Abnormal Child Psychology, 45, 841-855, 2017	Outcomes: No relevant data reported for extraction
Hamill, Paul, Boyd, Brian, Paul, Hamill, Brian, Boyd, Striving for inclusion: evaluation of provision for young people with social, emotional and behavioural difficulties (SEBD) in secondary schools in a Scottish Council, 33, 142-156, 2001	Outcomes: No relevant data reported for extraction
Handleman, Jan S., Harris, Sandra L., Binder, Cohen Dykens Frost Green Handleman Handleman Harris Harris Harris Hart Koegel Lord Lord Romanczyk Schopler Sundberg Thorndike Zager Zimmerman, Douglass Developmental Disabilities Center: An ABA program for children and adults with autism spectrum disorders, International Journal of Behavioral Consultation and Therapy, 1, 301-311, 2005	Publication type: Review article
Hewett Rachel, Douglas Graeme, Keil Sue, Transition to adulthood. Final summary report for project 'Longitudinal study of transitions experiences of blind and partially sighted young people (Phase 2)', 27, 2016	Study design: Qualitative
Houtrow, Amy, Jones, Jessica, Ghandour, Reem, Strickland, Bonnie, Newacheck, Paul, Participation of children with special health care needs in school and the community, Academic Pediatrics, 12, 326-34, 2012	Comparison: Children with special health care needs are compared to children without special health care needs on participation measures
Hunt, Pam, Soto, Gloria, Maier, Julie, Liboiron, Nicole, Bae, Soung, Beckman, Erwin Gaylord-Ross Giangreco Giangreco Guralnick Hanson Hanson Hanson Hunt Hunt Hunt Hunt Hunt Janney Kalyanpur Kazdin Krueger LeLaurin Lieber Lincoln Merritt Morgan Odom Odom Odom Odom Rafferry Salisbury Siegel Strauss West, Collaborative Teaming to Support Preschoolers With Severe Disabilities Who Are Placed in General Education Early Childhood Programs, Topics in Early Childhood Special Education, 24, 123-142, 2004	Intervention: The approach does not include two or more services working together (education only)
In, Control, Report on the use of the Personal Outcomes Evaluation Tool (POET) for children with education health and care plans, 82, 2016	Outcomes: No relevant data reported for extraction
Jamwal, Rebecca, Enticott, Joanne, Farnworth, Louise, Winkler, Di, Callaway, Libby, The use of	Population: Adults aged over 18 years

Study	Reason for Exclusion
electronic assistive technology for social networking by people with disability living in shared supported accommodation, Disability & Rehabilitation: Assistive Technology, 15, 101-108, 2020	
Kalyva, E., Avramidis, E., Improving communication between children with autism and their peers through the 'circle of friends': A small-scale intervention study, Journal of Applied Research in Intellectual Disabilities, 18, 253-261, 2005	Intervention: The approach does not include two or more services working together (education only)
Kingsnorth, S., Healy, H., Macarthur, C., Preparing for adulthood: a systematic review of life skill programs for youth with physical disabilities, Journal of Adolescent Health, 41, 323-332, 2007	Outcomes: Insufficient presentation of results for extraction
Koyama, T., Wang, H. T., Use of activity schedule to promote independent performance of individuals with autism and other intellectual disabilities: a review, Research in Developmental Disabilities, 32, 2235-2242, 2011	Intervention: The approach does not include two or more services working together (activity schedule)
Kramer, J., Hwang, I., Helfrich, C., Samuel, P., Carrellas, A., Youth and parent perspectives of a problem solving intervention to increase participation of transition-age youth with developmental disabilities, Developmental Medicine and Child Neurology, 58, 96-97, 2016	Publication type: Conference abstract
Kryzak, L. A., Jones, E. A., Sibling self-management: Programming for generalization to improve interactions between typically developing siblings and children with autism spectrum disorders, Developmental Neurorehabilitation, 20, 525-537, 2017	Intervention: The approach does not include two or more services working together (sibling self-management in the home environment)
Lau, Cynthia, Higgins, Kyle, Gelfer, Jeff, Hong, Eunsook, Miller, Susan, Anderson, Behrmann Bredekamp Brett Brown Brown Butz Clements Crook Davidson DeKlyen Elliott Frea Gresham Guralnick Hitchcock Howard Hutinger Hutinger Hyatt Kinsley Kohler Kreimeyer LeBlanc McConnell McCormick Nastasi Odom Odom Odom Odom Parette Perlmutter Peterson Spiegel-McGill Storey Woodward, The effects of teacher facilitation on the social interactions of young children during computer activities, Topics in Early Childhood Special Education, 25, 208-217, 2005	Intervention: The approach does not include two or more services working together (education only)
Lavelle, G., Noorkoiv, M., Theis, N., Ryan, J., An examination of the factors that influence participation in social activities and activities of daily living (ADLs), for young people with cerebral palsy (CP), Developmental Medicine and Child Neurology, 61, 19, 2019	Publication type: Conference abstract
Lee, S. H., Simpson, R. L., Shogren, K. A., Effects and implications of self-management for students with autism: a meta-analysis, Focus on Autism and Other Developmental Disabilities, 22, 2-13, 2007	Outcomes: No relevant data reported for extraction. Relevant studies were checked against the inclusion criteria.

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Study	Reason for Exclusion
Lindsay, S., Hounsell, K. G., Cassiani, C., A scoping review of the role of LEGO therapy for improving inclusion and social skills among children and youth with autism, Disability and Health Journal, 10, 173-182, 2017	Study design: Scoping review not reporting quantitative data for extraction. Relevant studies were checked against the inclusion criteria.
Lindsay, S., Kingsnorth, S., McDougall, C., Keating, H., A systematic review of self-management interventions for children and youth with physical disabilities, Disability and Rehabilitation, 36, 276-288, 2014	Population: Children and young people who do not have needs in all three areas of health, social care and education. (Diagnoses include juvenile rheumatoid arthritis, juvenile idiopathic arthritis and spina bifida). Relevant studies were checked against the inclusion criteria.
Louw, J., Leader, G., Quality of life of young adults with intellectual disabilities with the support of assistive technology, Journal of Intellectual Disability Research, 63, 828, 2019	Publication type: Conference abstract
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 extraction
Martin, Kerry, et, al, Improving the wellbeing of disabled children through early years interventions (age 0-18): scoping review 1, 61p., bibliog., 2009	Study design: Scoping review. Relevant studies were checked against the inclusion criteria.
McMahon, S. D., Keys, C. B., Berardi, L., Crouch, R., Coker, C., SCHOOL INCLUSION: A MULTIDIMENSIONAL FRAMEWORK AND LINKS WITH OUTCOMES AMONG URBAN YOUTH WITH DISABILITIES, Journal of Community Psychology, 44, 656-673, 2016	Intervention: The approach does not include two or more services working together (education only)
McNaughton, David, Bryen, Diane Nelson, AAC technologies to enhance participation and access to meaningful societal roles for adolescents and adults with developmental disabilities who require AAC, Augmentative and alternative communication (Baltimore, Md. : 1985), 23, 217-29, 2007	Publication type: Review article
Meresman, S., Drake, L., Are School Feeding Programs Prepared to Be Inclusive of Children with Disabilities?, Frontiers in Public Health, 4, 2016	Publication type: Review article
Metzinger, Courtney, Berg, Christine, Work readiness tools for young adults with chronic conditions, Work (Reading, Mass.), 52, 605-15, 2015	Publication type: Review article
Mitchell, Wendy, Mitchell, Wendy, Better for the Break? Short Break Services for Children and Teenagers with Autistic Spectrum Disorders and Their Families, Child and Family Social Work, 9, 125-126, 2004	Publication type: Book review
Morin, K. L., Ganz, J. B., Gregori, E. V., Foster, M. J., Gerow, S. L., Genc-Tosun, D., Hong, E. R., A systematic quality review of high-tech AAC interventions as an evidence-based practice, Augmentative and Alternative Communication,	Outcomes: No relevant data reported for extraction.

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Study	Reason for Exclusion
34, 104-117, 2018	
Myklebust, Jon Olav, How disability and school-related variables influence social security dependence among vulnerable young people in their late twenties, Emotional & Behavioural Difficulties, 20, 252-264, 2015	Population: Young people aged 28-29 years
Ng, S. Y., Dinesh, S. K., Tay, S. K. H., Lee, E. H., Decreased access to health care and social isolation among young adults with cerebral palsy after leaving school, Journal of Orthopaedic Surgery, 11, 80-89, 2003	Non-OECD country: Singapore
Nittrouer, Christine L., Shogren, Karrie A., Pickens, Julie L., Using a Collaborative Process to Develop Goals and Self-Management Interventions to Support Young Adults with Disabilities at Work, Rehabilitation Research, Policy, and Education, 30, 110-128, 2016	Population: Three participants aged 22, 26 and 29 years.
Osborne, L. A., Reed, P., School factors associated with mainstream progress in secondary education for included pupils with Autism Spectrum Disorders, Research in Autism Spectrum Disorders, 5, 1253-1263, 2011	Intervention: The approach does not include two or more services working together (education only)
Pawson, N., Raghavan, R., Small, N., Craig, S., Spencer, M., Social inclusion, social networks and ethnicity: the development of the Social Inclusion Interview Schedule for young people with learning disabilities, BRITISH JOURNAL OF LEARNING DISABILITIES, 33, 15-22, 2005	Study design: Qualitative
Peters, Sanne, Hopkins, Liza, Barnett, Tony, Education for children with a chronic health condition: An evidence-informed approach to policy and practice decision making, British Journal of Special Education, 43, 142-158, 2016	Publication type: Review article
Pulschen, Simone, Pulschen, Dietrich, Preparation for teacher collaboration in inclusive classrooms - stress reduction for special education students via acceptance and commitment training: A controlled study, Journal of molecular psychiatry, 3, 8, 2015	Population: Intervention targeted at students studying special education.
Raghavendra, P., Newman, L., Grace, E., Wood, D., Enhancing social participation in young people with communication disabilities living in rural Australia: outcomes of a home-based intervention for using social media, Disability and Rehabilitation, 37, 1576-1590, 2015	Outcomes: Insufficient presentation of results for extraction
Reynolds, Brooke M., Gast, David L., Luscre, Deanna, Self-Management of Social Initiations by Kindergarten Students with Disabilities in the General Education Classroom, Journal of Positive Behavior Interventions, 16, 137-148, 2014	Intervention: The approach does not include two or more services working together (education only)
Ristevski, E., Burkett, C., SPiT: A framework for promoting social inclusion and improved mental health for young people with disabilities, Journal of Intellectual & Developmental Disability, 33, 282-282, 2008	Publication type: Conference abstract

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Study	Reason for Exclusion
Rodriguez, Kerri E., Bibbo, Jessica, O'Haire, Marguerite E., The effects of service dogs on psychosocial health and wellbeing for individuals with physical disabilities or chronic conditions, Disability & Rehabilitation, 42, 1350-1358, 2020	Population: Adults (mean age 26 years)
Rosenfeld, Lindsay, Kramer, Jessica M., Levin, Melissa, Barrett, Kimberly, Acevedo-Garcia, Dolores, Scoping Review: Social Determinants of Young Children's Participation in the United States, OTJR : occupation, participation and health, 38, 225-234, 2018	Study design: Scoping review. Relevant studies were checked against the inclusion criteria.
Sahlin, K. Barbara, Lexell, Jan, Impact of Organized Sports on Activity, Participation, and Quality of Life in People With Neurologic Disabilities, PM & R : the journal of injury, function, and rehabilitation, 7, 1081-1088, 2015	Study design: Narrative review. Relevant studies were checked against the inclusion criteria.
Sandjojo, J., Zedlitz, A. M. E. E., Gebhardt, W. A., Hoekman, J., Dusseldorp, E., den Haan, J. A., Evers, A. W. M., Training staff to promote self-management in people with intellectual disabilities, Journal of applied research in intellectual disabilities : JARID, 31, 840-850, 2018	Population: Adults with intellectual disabilities (Mean age 33 years)
Saxena, Shikha, et, al, Online peer mentorship programmes for children and adolescents with neurodevelopmental disabilities: a systematic review, Child: Care, 46, 132-148, 2020	Outcomes: Insufficient presentation of results for extraction. Relevant studies were checked against the inclusion criteria.
Schlosser, R. W., Wendt, O., Effects of augmentative and alternative communication intervention on speech production in children with autism: a systematic review, American Journal of Speech-Language Pathology, 17, 212-30, 2008	Outcomes: No relevant data reported for extraction. Relevant RCTs were checked against the inclusion criteria.
Sreckovic, Melissa A., Hume, Kara, Able, Harriet, Bauminger, Blumberg Campbell Cappadocia Carter Carter Carter Fein Gardner Haring Helseth Hochman Horner Horner Hughes Hughes Humphrey Kasari Kazdin Koegel Koegel Koegel Lee Little Lynch Morrison Orsmond Paul Petrina Reynolds Ross Rubin Schmidt Schopler Shattuck Siperstein Sperry Sreckovic Tantam Taylor Tobias Twyman Wagner Wainscot Weiss Wentzel Wolf, Examining the efficacy of peer network interventions on the social interactions of high school students with autism spectrum disorder, Journal of Autism and Developmental Disorders, 47, 2556-2574, 2017	Intervention: The approach does not include two or more services working together (education only)
Stanton-Chapman, Tina L., Brown, Tiara S., Achenbach, Bakeman Barton Beilinson Brinton Cohen Craig-Unkefer Delano Dishion Elliott Fleiss Fujiki Gertner Girolametto Goldstein Goldstein Goldstein Goldstein Goldstein Greenwood Gresham Guralnick Hine Hohman Howes Hughes Hussey-Gardner Johnson Kazdin Kazdin Koegel Kohler Lifter Lifter Lillard Lloyd Nabors Page Parker Parker Rice Robertson Rogers Schneider Spohn Stagnitti Stahmer Stanton-Chapman Stanton-Chapman	Intervention: The approach does not include two or more services working together (education only)

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Study	Reason for Exclusion
Stanton-Chapman Stanton-Chapman Stanton-Chapman Stanton-Chapman Stanton-Chapman Stanton-Chapman Storey Strain Tapp Tawney Tsai Wong Zimmerman, A strategy to increase the social interactions of 3-year-old children with disabilities in an inclusive classroom, Topics in Early Childhood Special Education, 35, 4-14, 2015	
Tavares Wendy, An evaluation of the Kids Are Kids disability awareness program: increasing social inclusion among children with physical disabilities, Journal of Social Work in Disability and Rehabilitation, 10, 25-35, 2011	Population: Intervention targeted at children and young people who do not have needs in all three areas of health, social care and education to improve attitudes towards their peers with disabilities.
Taylor, Brian J., McGilloway, Sinead, Donnelly, Michael, Preparing young adults with disability for employment, Health & social care in the community, 12, 93-101, 2004	Intervention/Outcomes: Vocational Opportunities in Training for Employment and key vocational outcomes relevant to RQ 8.2
Therrien, M. C., Light, J., Pope, L., Systematic Review of the Effects of Interventions to Promote Peer Interactions for Children who use Aided AAC, Augmentative and alternative communication (Baltimore, Md. : 1985), 32, 81-93, 2016	Intervention: The approach does not include two or more services working together (education only)
Thompson, R. M., Johnston, S., Use of social stories to improve self-regulation in children with Autism spectrum disorders, Physical and Occupational Therapy in Pediatrics, 33, 271-284, 2013	Outcomes: No relevant data reported for extraction
Travlos, V., Patman, S., Wilson, A., Simcock, G., Downs, J., Quality of Life and Psychosocial Well-Being in Youth With Neuromuscular Disorders Who Are Wheelchair Users: A Systematic Review, Archives of Physical Medicine and Rehabilitation, 98, 1004-1017, 2017	Study design: Systematic review of survey data presenting comparative data of wheelchair users versus healthy controls
Vasset, B., Inclusion and educating people with intellectual disability and autism in the community through a fairy trail in the forest, Journal of Intellectual Disability Research, 63, 884, 2019	Publication type: Abstract only
von der Embse, N., Brown, A., Fortain, J., Facilitating inclusion by reducing problem behaviors for students with autism spectrum disorders, Intervention in School and Clinic, 47, 22-30, 2011	Publication type: Literature review
Voss, Catalin, Schwartz, Jessey, Daniels, Jena, Kline, Aaron, Haber, Nick, Washington, Peter, Tariq, Qandeel, Robinson, Thomas N., Desai, Manisha, Phillips, Jennifer M., Feinstein, Carl, Winograd, Terry, Wall, Dennis P., Effect of Wearable Digital Intervention for Improving Socialization in Children With Autism Spectrum Disorder: A Randomized Clinical Trial, JAMA pediatrics, 173, 446-454, 2019	Intervention: The approach does not include two or more services working together (health only)
Vreeburg Izzo, M., Ohio's statewide consortia: Enhancing employment outcomes through inclusive postsecondary education, Journal of	Publication type: Abstract only

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Study	Reason for Exclusion
Intellectual Disability Research, 60, 758, 2016	
Walker, Sue, Berthelsen, Donna, Children with Autistic Spectrum Disorder in Early Childhood Education Programs: A Social Constructivist Perspective on Inclusion, International Journal of Early Childhood, 40, 33-51, 2008	Intervention: The approach does not include two or more services working together (education only)
Warms, Catherine A., Belza, Basia L., Whitney, JoAnne D., Correlates of physical activity in adults with mobility limitations, Family & community health, 30, S5-16, 2007	Population: Adults (mean age 46.3 years)
Wennberg, Birgitta, Kjellberg, Anette, Participation when using cognitive assistive devices--from the perspective of people with intellectual disabilities, Occupational therapy international, 17, 168-76, 2010	Study design: Qualitative

Economic studies

See Supplement B for the list of excluded studies across all reviews.

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Appendix K – Research recommendations – in full

Research recommendations for review question: What are the most effective approaches for health, social care and education services to work together to promote inclusion, independence and wellbeing of disabled children and young people with severe complex needs?

Research recommendation

How effective is assistive technology in enabling disabled children and young people with severe complex needs to express their views to education, health, and social care services?

Why this is important

Disabled children and young people with severe complex needs who are pre-verbal or have limited verbal ability often have their views overlooked without fully exploring the use of assistive technology (from low-tech talking mats to high-tech communication aids) to enable them to express their views. Obtaining the views of disabled children and young people with severe complex needs is central to the EHC needs assessment and plan process; without knowing their opinions and preferences, there could be reduced positive outcomes of allocated services and resources. Evidence is therefore needed about the effectiveness of using assistive technology to enable this population to participate in decision making

Rationale for research recommendation

Table 13: Research recommendation rationale

Importance to the population	Many children and young people with disabilities and severe and complex needs use assistive technology to communicate. The 'pupil voice' is an essential component in planning and delivering services and outcomes. To be truly person-centred, their views must be garnered in whatever is the optimal method for them, whether that is low- or high-tech assistive technology.
Relevance to NICE guidance	This evidence would be essential to inform future updates of recommendations in the current guideline to enable evidence-based recommendations about the effectiveness of assistive technology in enabling disabled children and young people with severe complex needs to communicate and participate in decision making.
Relevance to the NHS	This research would enable children and young people to more actively participate in their care, leading to an improved provision of care that is ultimately more person centred. Additionally, it would improve the communication of children and young people which would aid in assessing their mental capacity and consent.
National priorities	The House of Commons Education Committee's inquiry into SEND reported in 2019 that many disabled children, young people and their families felt let down and abandoned by the services that should be providing them with essential support.
Current evidence base	There is currently no good quality published evidence about the effectiveness of using

	assistive technology to enable children or young people with complex disabilities to participate in the decision-making processes, despite the widespread availability of these technologies.
Equality considerations	The research would promote equality by helping children and young people with disabilities and severe complex needs to be involved in planning their care.

CCGs: clinical commissioning groups; NICE: national institute for health and care excellence; NHS: national health service; SEND: special educational needs and disability.

Modified PICO table

Table 14:   Research recommendation modified PICO table

Population	Disabled children and young people (aged from birth to 25 years) with severe complex needs who require education, health and social care support
Intervention	• The use of assistive technology to communicate the views of disabled children and young people with severe complex needs to two or more of the following services: education, health, and social care.
Comparator	• The use of any other intervention(s) to communicate the views of disabled children and young people with severe complex needs to two or more of the following services: education, health and social care. • No intervention(s) used to communicate the views of disabled children and young people with severe complex needs to two or more of the following services: education, health and social care. • The use of assistive technology, any other intervention(s), or no intervention to communicate the views of disabled children and young people with severe complex needs to only one of the following services (no joined-up working): education, health and social care.
Outcomes	• Communication (including providing views, e.g., as measured by validated scales or assisted communication aids such as talking mats or 'it's all about me') • Independence (e.g. financial stability such as disability living allowance, personal independent payment [PIP]) • Wellbeing (including safety) (e.g., as measured by validated scales or assisted communication aids such as talking mats or 'it's all about me') • Quality of life (both health- and social-related quality) • Inclusion (e.g. in society and the local community) • Acquisition of new skills/ further learning
Study design	Randomised controlled trials (RCTs), non-

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	randomised comparative studies (including cohort studies, before and after studies and interrupted time series), service evaluations and audits
Timeframe	N/A
Additional information	N/A

NA: not applicable; PIP: personal independent payment; RCT: randomised controlled trial.