



Department  
for Education

# **Identifying and supporting the needs of children and young people with SEND: rapid evidence methodology**

## **Technical report**

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## Disclaimer

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## Executive summary

This document reports on the methodology used to approach a series of six evidence reviews on the best practices in the identification, support, and collaborative practices of children and young people with SEND aged 0-25 available to teachers and early year practitioners working in mainstream education in England. These reviews were commissioned by the Department for Education in the Autumn of 2024.

The evidence informing each review was collected by means of a rapid evidence assessment (REA). A search of the literature aimed at drawing out key findings for educational outcomes for children and young people with SEND. The literature search focused on systematic reviews and meta-analyses evaluating effective tools and strategies for the identification and support for children and young people with SEND in mainstream settings as well as reviews evaluating collaborative practices between families, schools, and healthcare providers or specialists. In total, we retrieved 82 studies across the areas of SEND informing our identification and assessment strand of the research, 196 studies informing the support and intervention strand, and finally 58 studies were found to support the evidence around collaborative practices.

Our search efforts prioritised high-quality and relevant research, ensuring the inclusion of peer-reviewed studies and robust methodologies. All studies identified in the final sample were either systematic reviews or meta-analyses. To evaluate the quality of these studies, we used the Assessing the Methodology Quality of Systematic Reviews tool 2 (AMSTAR2) (Shea et al., 2017). Findings suggest that the evidence base is mixed according to this tool. Most studies were rated as high or moderate confidence in the results, with some rated as low due to a 'critical flaw'. The typical critical flaw was that many studies did not conduct a formal risk of bias assessment using a recognised tool (e.g., ROBINS-I, Cochrane Risk of Bias).

# Introduction

## Background and rationale

The Department for Education (DfE) commissioned our team at the Institute of Education at University College London (UCL) to produce a series of rapid evidence assessments (REA) to identify evidence-based practices in mainstream settings for children and young people with Special Educational Needs and Disabilities (SEND) across 5 key areas: (1) Social, Emotional, and Mental Health (SEMH), (2) Sensory and/or physical needs, (3) Cognition and Learning, (4) Autism, and (5) Speech, Language, and Communication Needs (SLCN). To address identification and support strategies with collaborative practice that span multiple areas of need, we have also included a sixth report on cross-cutting themes, which outlines tools and approaches and collaborative practices that can be used to identify, assess, or support children and young people across more than one type of SEND.

The current evidence base for supporting children and young people with SEND in mainstream settings includes a range of valuable resources, though notable gaps remain. The Education Endowment Foundation (EEF) provides widely used evidence-based resources such as the Teaching and Learning Toolkit and accompanying guidance reports. These tools help educators improve practice and learning outcomes through synthesised research and actionable recommendations. In June 2023, according to the DfE School and College Panel survey, 24% of primary and secondary teachers working with pupils with SEND report using the EEF or other academic sources for advice (DfE, 2023). However, the EEF resources offer limited specific recommendations tailored to teaching children with SEND and do not systematically incorporate input from specialist professionals. As such, they provide an important but partial foundation for developing practice in this area.

Beyond the EEF, other non-governmental and non-profit organisations offer guidance focused on particular areas of SEND, such as NASEN's teacher handbook, the Nuffield Early Language Intervention, Speech and Language UK's resources, the Autism Education Trust, and the Royal National Institute of Blind People Curriculum Framework for Vision Impairment. Government guidance on mental health and wellbeing also contributes to the broader evidence landscape. These materials offer important contextual insight but vary in scope, strength of evidence, and accessibility.

Our work follows earlier efforts such as the 2017 DfE-commissioned [rapid evidence assessment](#), which reviewed support for learners on SEN Support. The [MetaSENse](#) project, funded by the Nuffield Foundation, offers a major contribution by synthesising international evidence on effective educational interventions for children with SEND in

mainstream schools by means of a meta-analysis and also investigates implementation factors through practitioner interviews. The current reviews extend these contributions by systematically examining not only support strategies but also the tools and approaches available to practitioners for the identification and assessment of SEND. In doing so, they also underscores the importance of collaborative working, identifying when and where specialist input is needed.

We build on this landscape by conducting a targeted synthesis of best practices in identification, support, and collaboration for children with SEND, with a particular focus on strategies that are feasible in mainstream education settings. Importantly, the review acknowledges areas where evidence remains limited. The absence of strong or statistically significant findings in some domains should not be interpreted as evidence of ineffectiveness but rather as an indication that more robust research is required. Taken together, this review offers a timely and practical addition to the evidence base, directly aligned with the priorities of practitioners and policy makers.

The evidence summaries for each REA draws on a series of rapid evidence reviews completed in the Summer of 2025. Each REA synthesises evidence on the best practices for: (i) identifying the needs of children and young people with SEND, (ii) implementing effective universal and targeted support strategies, and (iii) fostering collaborative practices in mainstream educational settings for children with SEND. Findings for each review were categorised either by need (e.g., 'literacy difficulties' rather than 'Dyslexia') or by approach (e.g., literacy interventions). The goal of these reviews is to build a robust evidence base that informs future policy, while providing practical guidance for mainstream teaching staff to support inclusive education and positive outcomes for all learners with SEND.

This technical report summarises the approach taken to identify studies discussed in [each of the rapid review reports](#).

## **Research questions**

### **Identification and assessment research questions**

The aim of the identification and assessment section in each evidence review was to identify evidence-based formal and informal methods and tools that educational practitioners (e.g., teachers, teaching assistants, Special Educational Needs Coordinators (SENCOs)) can use to assess and identify specific educational needs of children and young people. The research questions guiding this strand were as follows:

- Which formal and informal methods and measurement tools are available to practitioners to identify different educational needs within diverse classroom settings?
  - For which ages or age ranges can these tools be used?
  - What are the performance parameters of these measurement tools (e.g., reliability/validity/specificity)?
- How can these tools be used to guide decisions regarding the provision of universal, targeted or specialist support?

## Support and intervention research questions

The aim of the support and intervention section in each review was to identify evidence-based approaches that effectively support children and young people with a range of special educational needs and disabilities. This includes universal high-quality teaching strategies and whole-class or whole-school approaches, as well as targeted and specialist interventions. The research questions guiding this strand were as follows:

- What are the most effective universal and targeted strategies, approaches, or adaptations for supporting children and young people with SEND to improve educational outcomes?
  - What is the most appropriate level of delivery (universal, targeted or specialist) for each of these interventions?
  - What specific age groups are targeted by these interventions?
- What types of approaches/interventions do children with [x] needs respond best to?

## Working with others research questions

Effective collaborative practices involve coordinated efforts between families, educational settings, and practitioners. Given the central role of collaboration across both the identification and intervention processes, this strand is not presented as a standalone section. Instead, within each review strand, we highlighted where collaborative practices are necessary and effective, specifically in relation to identification, assessment, support, intervention planning, and progress monitoring. The research questions guiding this strand were as follows:

- What components and characteristics foster effective collaboration between teachers, specialists, and parents/caregivers in the identification and support for children and young people with SEND, and how can clear role boundaries and knowledge-sharing frameworks support this process?

- What examples are there of different models of collaboration between the multidisciplinary team?

## Scope

The evidence was collected by means of a rapid evidence assessment (REA); a search of the literature aimed at drawing out key findings in an area. However, our goal for these reviews was to provide the most practical and impactful guidance for professionals in mainstream education. Therefore, to avoid lengthy and unfocused reports, we chose to include only systematic reviews and meta-analyses.

Our initial search of the literature was designed to be broad to determine the extent of the evidence base. We identified over 12,000 studies of which we screened titles and abstracts against our inclusion criteria and identified 336 systematic reviews and meta-analyses eligible for inclusion, this extensive evidence base provides a strong foundation for addressing each area of SEND.

The intended audience for these reviews are mainstream educators, and as such, all findings are framed within their professional remit. Given this focus, the reviews specifically examine tools, measures, and assessments that can be administered by mainstream teachers, early years professionals, and/or teaching assistants, excluding clinical or diagnostic assessments or tools requiring specialist qualifications or training. The reason for this is that diagnostic-level assessments and assessments for exam access arrangements are governed by specific guidelines and standards (e.g., The Specific Learning Difficulty (SpLD) Assessment Standards Committee is a standard-setting group which promotes good practice and monitors standards for SpLD assessors and practitioners). Additionally, the administration (and even purchase) of such tools typically requires specialised training, making them less applicable for use in mainstream settings. We will, however, include specific recommendations for the circumstances under which specialist involvement and collaboration is necessary for identification, assessment, and support.

Additionally, for the support strand in each REA, we narrowed our search to include only studies that examine educational outcomes (i.e., literacy, writing, maths, and general attainment) apart from the Speech, Language, and Communication Needs REA, which also included outcomes related directly to speech, language, and communication. While it is acknowledged that behavioural outcomes, functional skills, and occupational support are relevant and often necessary for inclusion and educational success, we maintain a narrower focus to align with the practitioner-focused aims of the review.

Finally, the review also excludes interventions that require extensive resources beyond what is typically available in a mainstream classroom, ensuring that all recommendations

remain practical, accessible, and feasible for mainstream educators. Specifically, we refer here to the use of animals, robotics, virtual reality, and augmented reality. Beyond the financial constraints of these resources, access to animal therapy networks is often limited in most schools, and while IT solutions can be highly engaging, smaller schools or those outside academy chains often lack the necessary IT infrastructure and support to implement these solutions or address issues when they arise. In addition, we will not review research solely focused on interventions outside the mainstream classroom or school-setting (e.g., clinical or home-based interventions) and pharmacological interventions.

## Methodology

To address our research questions, a Rapid Evidence Assessment (REA) was conducted following Cochrane rapid review guidance (Garritty et al., 2024). The steps involved in conducting the rapid reviews included the following:

1. Defining the research questions.
2. Developing a search protocol: Establish a review protocol that outlines the purpose, inclusion/exclusion criteria, databases to search, and review timelines.
  - a. These first two steps involved completing a needs assessment with DfE to establish the specific needs and interests of the SEND reviews as well as priorities and objectives.
  - b. We also consulted knowledge users through an advisory board meeting to help further refine our research questions, eligibility criteria, and outcomes of interest.
3. Searching for evidence: Conduct a targeted search of academic databases, grey literature, and relevant sources using specific keywords related to the research question. In rapid reviews, the search is often restricted to fewer databases and a more recent time span compared to traditional reviews.
4. Screening studies for relevance: Use a predefined inclusion and exclusion criteria to screen titles, abstracts, and full-text articles.
5. Data extraction: Extract key data from the selected studies, including study design, population, intervention details, and main findings.
6. Quality assessment: Assess the quality of included studies.
7. Synthesising findings: Summarise and synthesise the findings in a narrative format, highlighting the main results and identifying any gaps or inconsistencies in the evidence.
  - a. Here we again consulted an advisory board to help with the interpretation and dissemination of our findings for an audience of educational practitioners.
8. Report Writing: Prepare a concise report that summarises the key findings and their implications for practice or policy.

The reviews adhered to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines for rapid review (Page et al., 2021).

## Ethical approval

Ethical approval for this project was granted by the Institute of Education's research ethics board.

## Search protocol

To meet the objectives of each REA, we conducted three separate searches (between October 2024 and November 2024), addressing (1) identification, (2) support and interventions, and (3) collaboration with others. Rather than conducting separate searches for each category of need, we developed a unified pool of search terms incorporating terminology from across all five SEND areas. This ensured consistency and reduced redundancy across searches. During the title and abstract screening stage, each reference was reviewed and tagged according to the area of need it addressed based on its primary focus. This tagging allowed us to assign studies to the appropriate review for data extraction and synthesis.

Search terms were comprehensive to ensure we captured as much evidence as possible, and to be able to map the gaps in the literature. The search strategy to identify relevant papers included two approaches:

1. Database search: After discussion with an information specialist based at the Institute of Education, two databases most likely to yield relevant literature were searched for reviews of identification tools and intervention methods (Scopus: PsychINFO and EBSCO: ERIC). Search strategies for these databases used both indexing terms and free text searching and were designed for rapid retrieval by searching titles and records published in English. Search terms were developed by the team with input from knowledge users and further refined with a specialist librarian at the Institute of Education to ensure that the terms were balanced for both sensitivity and specificity. Search terms are comprehensive and follow the PICOS (Population, Intervention, Comparison, Outcome, Study Type) criteria. The search terms are listed in [Appendix A: Search terms](#).
2. The following additional sources of grey literature were also searched: Nuffield Foundation research reports, Education Endowment Foundation completed projects, What Works Clearinghouse, Council for Exceptional Children, Blueprints for Healthy Youth Development, Early Intervention Foundation, Evidence for ESSA/Best Evidence Encyclopaedia, European Platform for Investing in Children, National Dropout Prevention Centre, British Psychological Society, Nesta, National Foundation for Educational Research (NFER).

For the support and intervention strand, we initially included search terms related to different types of intervention outcomes (e.g., behavioural, social, inclusion,

communication, and educational). However, given the large volume of papers identified in our search, we chose to focus on interventions and support strategies that addressed educational outcomes only, with the exception of the SLCN review which also reported outcomes in language and communication. Educational outcomes included reading, writing, maths, science, and general academic attainment.

## **Inclusion/Exclusion criteria**

These inclusion criteria are the specific criteria we set to determine which studies should be included in the review. These criteria filtered our selection to only the most relevant and reliable research that addressed our specific research questions to ensure that the review focused on high-quality evidence that directly informed our topic, making the findings more accurate and useful. These criteria were applied to each evidence review.

- **Publication type:** We applied a multi-tiered evidence inclusion framework, based on a hierarchy of evidence, to guide the selection of studies. Systematic reviews (both qualitative and quantitative) and meta-analyses were prioritised to ensure a rapid review drawing from high-quality sources.
- **Publication year:** We included studies between 2014-2024 (research since the publication of the 2014 Children and Families Act and the 2015 SEND code of practice: 0 to 25 years).
- **Location and language:** No restriction was placed on geographical location, but all studies were published in English.
- **Population:** Studies that report on students with special educational needs aged between 0 and 25 years old in mainstream educational settings. Excluding adults and university or higher education populations. Where participants were children and young people with SEND, we included studies in which participants were identified as having SEND based on a pre-existing, independently verified indicator or diagnosis that classified them within a recognised SEND category. This could be from a clinical diagnosis of a SEND condition or indicated by an Education, Health and Care (EHC) plan or a standardised measure (e.g., ADOS). Studies that use clinical measures to identify participants who may fall within a SEND category were included, provided these measures were used to characterise the sample even if they were not standardised tools specifically designed for participant inclusion within the trial. The rationale for doing this was that some evaluations may use participants who approach the clinical threshold for a SEND diagnosis or who may fall into a SEND category on the specific measure chosen but who may not be considered in this category in an independent assessment, and this may moderate the reported intervention effect size.

- Identification and assessment tools: The reviews focused exclusively on tools, measures, and assessments that can be administered by mainstream educators, excluding clinical or diagnostic assessments or tools requiring specialist qualifications or training. The reason for this is that diagnostic-level assessments and assessments for exam access arrangements are governed by specific guidelines and standards (e.g., The Specific Learning Difficulty (SpLD) Assessment Standards Committee is a standard-setting group which promotes good practice and monitors standards for SpLD assessors and practitioners). Additionally, the administration (and even purchase) of such tools typically requires specialised training to reliably administer and interpret results, making them less applicable for use in mainstream settings. We did, however, include specific recommendations for the circumstances under which specialist involvement might be necessary for identification and assessment.
- Intervention: We included research focused on (1) identification, (2) support, or (3) collaborative practices for children and young people with SEND, ensuring direct relevance to practice in mainstream settings. Studies must have evaluated either formal or informal identification and assessment methods or examine universal (e.g., Tier 1<sup>1</sup> or quality first teaching) and targeted intervention approaches (e.g., Tier 2 or Tier 3 strategies) that can be implemented within a mainstream educational setting.
- Mainstream context: Studies were included if they were applicable to the UK mainstream education context. We included interventions and support strategies that can be implemented in the mainstream classroom. We excluded research solely focused on tools, assessments, or interventions delivered outside the mainstream classroom or school-setting (e.g., clinical, or home-based interventions).
  - We excluded interventions that were not applicable or feasible within the UK mainstream educational context (e.g., interventions requiring a specialised professional that is not typically part of UK school staffing).
  - We excluded studies assessing medical or pharmacological interventions without a direct link to educational practice.
  - Interventions requiring extensive resources that are not typically accessible to an average mainstream classroom were excluded. Specifically, we refer here to the use of animals, virtual reality, and augmented reality. Beyond the financial constraints of these resources, we argue that access to animal

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<sup>1</sup> The graduated or tiered approach is a framework that describes how support is often provided to children and young people with SEND. It is from a response to intervention (RTI) and is a structured, multi-tiered approach to help identify and support struggling students. It focuses on providing high-quality instruction and interventions, typically at three different levels (i.e., tiers).

therapy networks is limited in most schools, and while IT solutions can be highly engaging, smaller schools or those outside academy chains often lack the necessary IT infrastructure and support to implement these solutions or address issues when they arise.

- We excluded studies not aligned with UK education policy and procedure. For example, studies evaluating interventions delivered exclusively within healthcare settings, or those based on international education systems with significantly different structures (e.g., U.S. Individualised Education Programs), were not included.
- Outcomes: Interventions identified for all areas of SEND apart from SLCN were included if they measured and aimed to improve educational attainment or academic performance outcomes. For example, improved reading ability as measured using standardised testing (e.g., GCSE's) or reading assessment tools (e.g., number of words read per minute, ability to read and articulate words etc).
  - Studies measuring only outcomes that can be considered to be predictors of educational outcomes (e.g., visuo-spatial or motor abilities have been linked to mathematical outcomes and vocabulary has been linked to reading abilities), but not direct measures of educational performance or attainment were excluded (e.g., intervention studies that focus on vocabulary training but do not include wider reading outcomes).
  - Studies that measure educational outcomes using observational protocols or holistic teacher judgements (e.g., teacher perceptions of improvement), as opposed to quantitative aggregation of marks from multiple test items were excluded. This is justified because of various studies showing systematic bias in teacher assessment in these kinds of studies.
  - Studies measuring only the following outcomes only were excluded:
    - Behavioural outcomes (e.g., disciplinary referrals, aggression and other externalising behaviours, compliance etc.).
    - Social emotional outcomes (e.g., anxiety, stress, engagement, social skills, self-esteem, emotion regulation, grit, internalising behaviours etc.).
    - Bullying or victimisation outcomes (e.g., experience of bullying, perpetration of bullying,).
    - Motivational or attitudinal outcomes when not linked to educational outcomes (e.g., general view of school or educational setting, motivation to learn, enjoyment of educational setting or educational content etc.).

- Physiological & physical development outcomes (e.g., cortisol, heart rate, brain activity, motor skills development, physical activity, BMI, consumption of fruit and vegetables etc.).
- School attendance (e.g., rate of attendance over any given time-period (e.g., number of days attended in a term/academic year).
- However, where studies measure multiple outcomes such as behavioural or mental health outcomes, we recorded these providing that the studies also measured educational outcomes, the primary focus of the reviews.
- We have included language and communication outcomes for papers reporting on children and young people with SLCN. This was because a small number of studies that investigated academic outcomes only were identified from our search.

## Search results

We present here the outcomes of our search, structured around the three distinct searches we conducted: identification, support and intervention strategies, and collaborative practices.

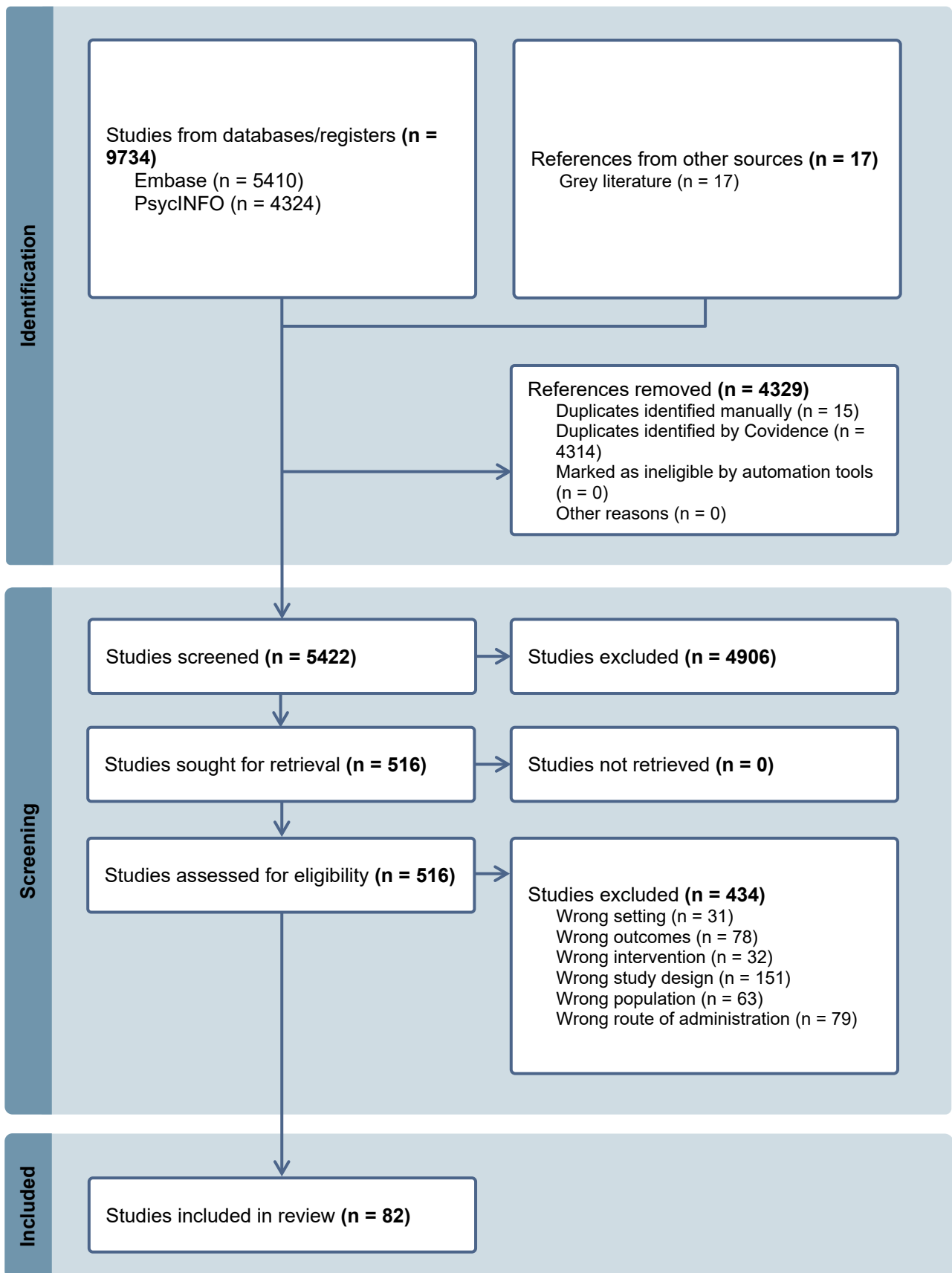
### Identification and assessment search results

The results of the systematic search for identification and assessment are documented in a PRISMA flow diagram in Figure 1. Initial database searches yielded 9,734 potential records across the five SEND areas. The identified records from each SEND area search were pooled into the Covidence systematic review management platform, where 4,329 duplicate entries were removed resulting in 5,405 unique records. A further 17 were identified by hand searching the grey literature.

Titles and abstracts of the 5,422 studies were independently reviewed by two researchers, with exclusions applied sequentially based on the predefined eligibility criteria. At this stage, studies were tagged according to the specific area of SEND they addressed (i.e., one of the five review categories). These initial tags were later reviewed and validated during the full-text screening phase to ensure accurate classification. Any disagreements regarding the eligibility of specific studies were resolved through consultation with a third reviewer to ensure consistency and rigour. This resulted in a total of 516 eligible studies screened for full-text against the inclusion criteria. Full-text papers were retrieved and independently reviewed by two researchers resulting in a total of 82 studies included across the five REAs and a sixth cross-cutting themes review (Figure 1).

Table 1 provides a breakdown of studies informing each review, with 24 studies for autism, 8 studies for cognition and learning, 11 studies for sensory and/or physical needs, 21 for SLCN, 15 for SEMH, and 3 studies that were general SEND or across multiple SEND areas.

**Figure 1. PRISMA flowchart for identification/assessment search**



**Table 1. Studies identified for inclusion in the identification/assessment by SEND category**

<b>SEND category</b>	<b>Number of studies</b>
Autism	24
Cognition and Learning	8
Sensory and/or Physical Impairment	11
Speech, Language, Communication Needs	21
Social, Emotional, Mental Health needs	15
SEND General or Multiple SEND areas	3

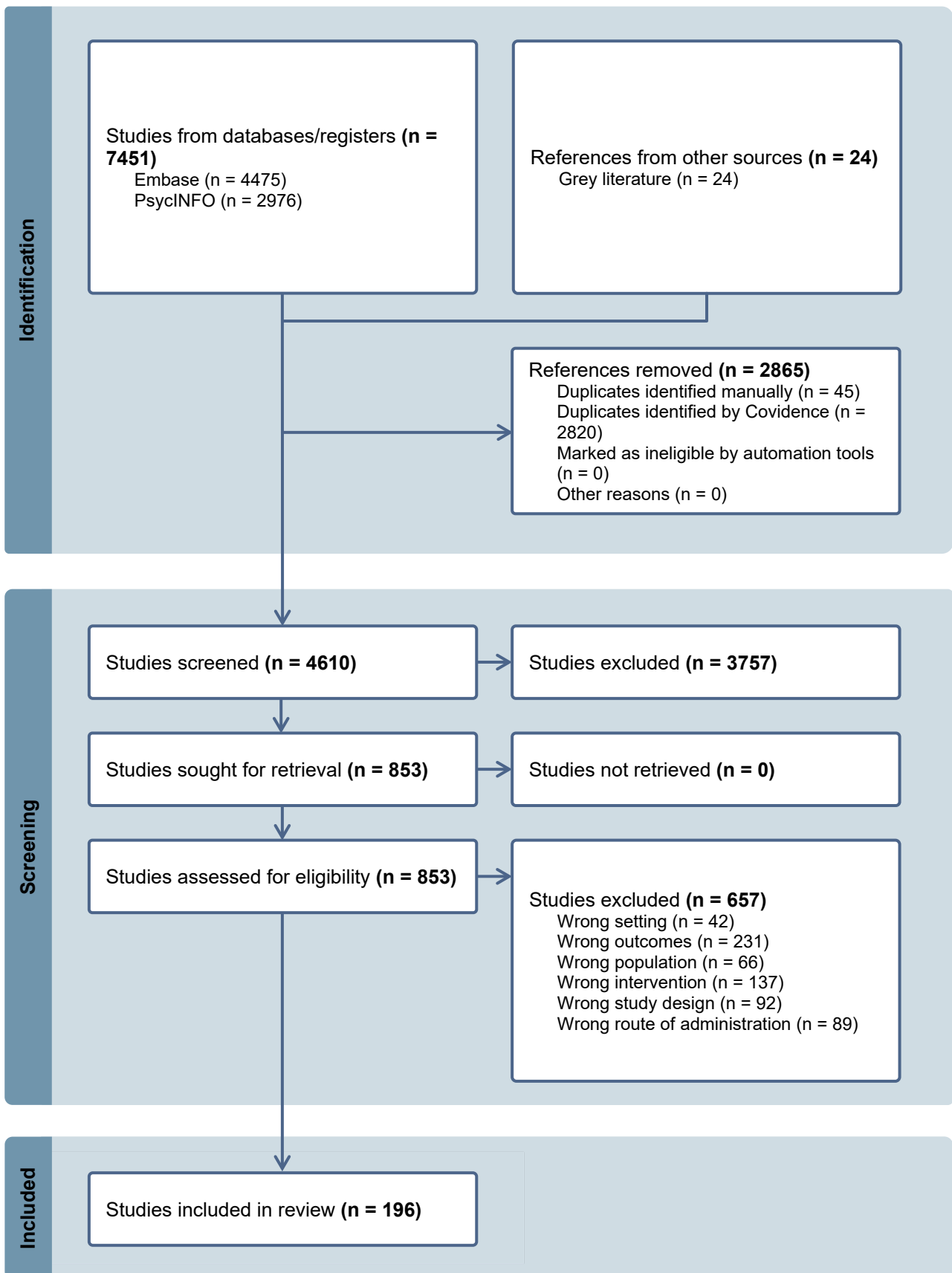
## Support and intervention search results

The results of the systematic search for support and intervention are documented in a PRISMA flow diagram in Figure 2. Initial database searches yielded 7,451 potential records across the five SEND areas. The identified records were pooled into the Covidence systematic review management platform, where 2865 duplicate entries were removed resulting in 4,586 unique records. A further 24 were identified by hand searching the grey literature.

Titles and abstracts of the 4,610 studies were independently screened by two researchers, with exclusions applied based on the predefined eligibility criteria. At this stage, studies were tagged according to the specific area of SEND they addressed (i.e., one of the five review categories). These initial tags were later reviewed and validated during the full-text screening phase to ensure accurate classification. Any disagreements regarding the eligibility of specific studies were resolved through consultation with a third reviewer to ensure consistency and rigour. This resulted in a total, 853 eligible studies screened for full-text against the inclusion criteria. Full-text papers were retrieved and independently reviewed by two researchers resulting in a total of 196 studies included across the five REAs and a sixth cross-cutting themes report (Figure 2).

Table 2 provides a breakdown of studies per review, with 65 studies for autism, 54 studies for cognition and learning, 18 studies for sensory and/or physical needs, 16 for SLCN, 33 for SEMH, and 10 studies that were general SEND or across multiple SEND areas.

**Figure 2. PRISMA flowchart for support/intervention search**



**Table 2. Studies identified for inclusion in the support/intervention strand by SEND category**

<b>SEND category</b>	<b>Number of studies</b>
Autism	65
Cognition and Learning	54
Sensory and/or Physical Impairment	18
Speech, Language, Communication Needs	16
Social, Emotional, Mental Health needs	33
SEND General or Multiple SEND areas	10

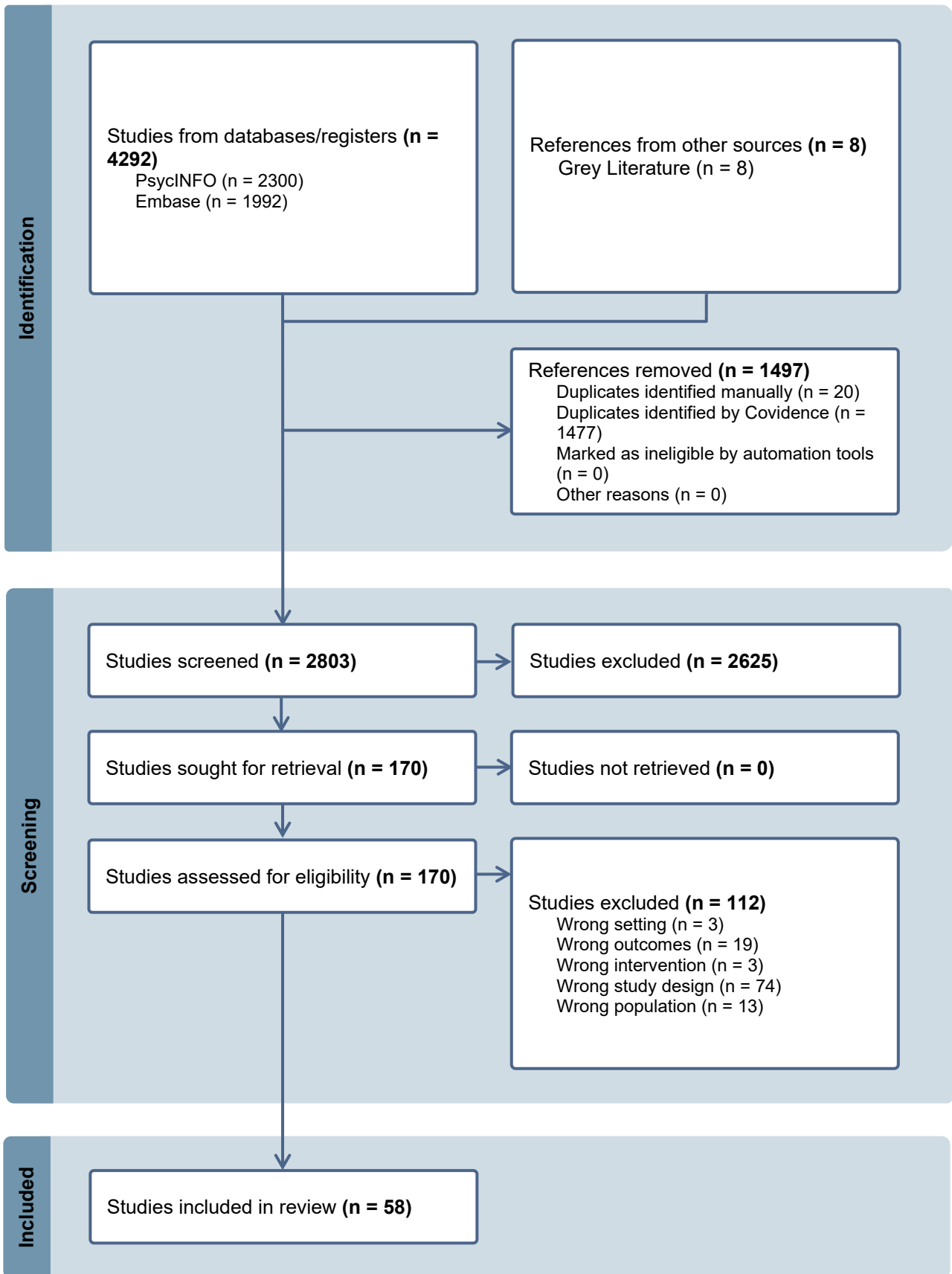
## **Working with others search results**

The results of the systematic search for working with others are documented in a PRISMA flow diagram in Figure 3. Initial database searches yielded 4,292 potential records across the five SEND areas. The identified records were imported into the removed resulting in 2,796 unique records. A further 8 were identified by hand searching the grey literature.

Titles and abstracts of the 2,803 studies were independently reviewed by two researchers, with exclusions applied sequentially based on the predefined eligibility criteria. Any disagreements regarding the eligibility of specific studies were resolved through consultation with a third reviewer to ensure consistency and rigour. In total 170 eligible studies were identified (Figure 3).

A breakdown of studies by SEND need is not included here as many studies identified for inclusion relate to collaborative practices in general SEND provision or across different areas of need. Full-text papers were retrieved and independently reviewed by two researchers resulting in a total of 58 studies included across the five REAs and a sixth cross-cutting themes report.

**Figure 3. PRISMA flowchart for working with others search**



# Data extraction and appraisal

## Data extraction

Data extraction was completed by trained members of the team. 10% of the included evidence was extracted independently by two members of the review team to ensure data extraction was consistent.

## Identification and assessment data extraction

For identification and assessment, we extracted descriptive information regarding the characteristics of each study retrieved from our search as well as characteristics of the identification tools from the included paper(s) where these were available.

Data extraction framework for studies on identification and assessment tools:

- Study ID: Unique identifier for the review
- Citation: Author(s), year, title, and full reference
- Countries represented: Countries or regions where the studies were conducted
- Review type: Specify "Systematic Review," "Meta-Analysis," or "Both"
- Aim of study or research questions: Specify the aim of the study or any reported research questions
- Number of included studies: Total number of studies reviewed
- References of studies included: Full citations of all the studies that were included in the final review
- Specified age range (month/years) or educational phase: Age range for which the tool is designed or validated
- Number of participants: Total number of participants across studies
- SEND type(s) or profile of need addressed: Types of special educational needs identified or measured (e.g., reading difficulty, attention, behaviour)
- Types of studies included: Methodologies of the studies included in the review RCTs, Quasi-experimental, interviews, etc.
- Tool name: Names of the tools and types (e.g., diagnostic test, observation checklist)
- Domains covered: Specific domains and subdomains assessed (e.g., phonology, attention, memory)

- Specific skills assessed: Detailed description of the skills measured (e.g., vocabulary, grammar, speech sounds)
- Type of assessment: Format of the assessment (e.g., parental report, direct assessment, observation)
- Purpose: The stated purpose of the tools (e.g., identification of needs, progress tracking)
- Informant: Who is the tool designed to be used by (e.g., parents, students, teachers, SENCOs)
- Performance parameters: Metrics such as reliability, validity, sensitivity, specificity, and predictive value
- Guidance for provision: Insights into how tools inform universal, targeted, or specialist support
- Costs: Purchase/licensing costs and any additional fees (e.g., per-use fees)
- User training/qualifications: Required training or qualifications to administer the tool (e.g., certification, formal workshops)
- Tool structure: Detailed description of the tool's format, items, time to administer, and scoring system where available
- Strengths and limitations: Reported strengths or weaknesses of the tools based on empirical studies
- Comparative insights: If more than one tool is compared, comparison of multiple tools addressing similar needs
- Key findings: Major conclusions of the systematic review regarding tool/s utility and effectiveness.

## **Support and intervention data extraction**

For support and intervention, to accommodate systematic reviews that vary in scope, with some focusing on a single intervention and others covering multiple interventions, we used a two-tier data extraction framework. This framework allowed us to capture overarching review-level details as well as detailed data about individual interventions within each review where provided.

### **Review-level data extraction**

The review level data captured overarching information about the systematic review or meta-analysis retrieved from the search.

Data extraction framework for studies on support and intervention at the review level:

- Study ID: Unique identifier for the review
- Citation: Author(s), year, title, and full reference
- Countries represented: Countries or regions where the studies were conducted
- Review type: Specify "Systematic Review," "Meta-Analysis," "Both" or Other
- Aim of study or research questions: Specify the aim of the study or any reported research questions
- Number of included studies: Total number of studies reviewed
- References of studies included: Full citations of all the studies that were included in the final review
- Population age: Age groups (e.g., Early Years, Primary, Secondary)
- Number of participants: Total number of participants across studies
- SEND Type(s) addressed: Types of special educational needs covered in the review
- Specific type of SEND addressed: Specific special educational need if stated
- Types of studies included: Methodologies of the studies included in the review RCTs, Quasi-experimental, interviews, etc.
- Intervention type(s): Broad categories (e.g., phonics, assistive technology, peer mentoring)
- Outcome measures: High-level outcomes assessed (e.g., Reading, Math, Writing, Attainment)
- Analysis or synthesis used: Meta-analysis, narrative synthesis, etc.
- Summary of findings: Summary of the review's key conclusions about interventions
- Reported effect size(s): Effect sizes of the meta-analysis if this is reported

### **Intervention-level data extraction**

Intervention level data captured detailed information about each intervention reported in the systematic review. Where a review covers multiple interventions, we extracted data for each separately where it was provided by the study. We used the Template for Intervention Description and Replication (TIDieR) framework to describe components of the interventions (Hoffmann et al., 2014). This framework enables interventions to be described clearly and comprehensively, in order to support replication and use in practice. The components of interventions as reported in included studies were extracted against the following categories.

Data extraction framework for studies on support and intervention at the intervention level:

- Review ID: Links the intervention back to the overarching review
- Intervention ID: Unique identifier for each intervention
- Intervention Name/Description: Name or detailed description of the intervention
- Skills Targeted: Specify skills targeted by the intervention (e.g., behavioral, reading, phonics)
- Setting: The settings or contexts in which the intervention occurs. (e.g., small room, classroom)
- Level of Delivery: Universal, Targeted, or Specialist
- Rationale: The rationale, theory, or goal of the intervention
- What does it involve: Processes or activities involved in the intervention
- Materials: Detailed description of any materials used
- Who delivers it: Details about who delivered the intervention (e.g., teaching assistant, specialist)
- How is it delivered: The modes of delivery (e.g., in-person, online, group)
- Frequency/Dosage: The duration, frequency, and intensity of the intervention
- Tailoring: If the intervention was designed to be personalised or adapted for individual children or users
- Fidelity: Adherence to intervention procedures/delivered as intended
- Outcome Measure(s): Specific outcomes targeted by the intervention (e.g., Reading fluency, Math)
- Effectiveness: Effect sizes (if available) or qualitative summary of effectiveness
- Cross-cutting potential: Applicability to multiple SEND types (Yes/No, explanation)

## **Working with others data extraction**

Finally, for the working with others strand, we extracted descriptive information regarding the characteristics of each study retrieved from our search as well as characteristics of different training or collaborative approaches from the included paper(s) where these were available.

Data extraction framework for studies on working with others:

- Review details: Author(s), Year, Title, Journal, Country/Region
- Objective of the review: Summary of the review's focus on collaboration, role boundaries, and training methods
- Collaboration components: Key components fostering collaboration (e.g., communication protocols, shared planning, goal alignment)
- Role boundaries: Characteristics or practices that define clear roles and responsibilities for teachers, specialists, and parents/caregivers
- Knowledge-sharing Frameworks: Frameworks or systems that facilitate effective sharing of knowledge (e.g., online platforms, regular meetings)
- Models of collaboration: Examples of multidisciplinary collaboration models (e.g., co-teaching, consultation, integrated service delivery)
- Effectiveness of collaboration: Evidence of improved outcomes linked to specific collaboration models or practices
- Training methods for teachers/TAs: Types of training methods or programs used to prepare teachers and teaching assistants for collaboration (e.g., workshops, coaching, professional learning communities)
- Skills developed through training: Specific skills targeted by training programs (e.g., communication, teamwork, intervention delivery)
- Impact of training: Evidence of how training improves collaboration and targeted intervention delivery
- Challenges in collaboration: Reported barriers or challenges to effective collaboration (e.g., time constraints, conflicting priorities)
- Strategies to overcome challenges: Suggested strategies to address collaboration challenges (e.g., flexible scheduling, leadership support)
- Parent/Caregiver involvement: Approaches to engaging parents/caregivers in collaboration processes
- Relevance to research questions: How the review addresses your specific questions regarding collaboration, roles, and training

## Quality appraisal

To evaluate the quality of each systematic review, we used the Assessing the Methodology Quality of Systematic Reviews tool 2 (AMSTAR2) (Shea et al., 2017). This tool includes sixteen domains relating to the research question, review design, search strategy, study selection, data extraction, and justification for excluded studies,

description of included studies, risk of bias, sources of funding, meta-analysis, heterogeneity, publication bias, and conflicts of interest.

Review authors selected 'yes', 'partial yes', 'no', or 'no meta-analysis conducted' (as applicable) for each of the sixteen domains:

1. Did the research questions and inclusion criteria for the review include the components of PICO (Population, Intervention, Comparator, Outcome)?
2. Did the report of the review contain an explicit statement that the review methods were established prior to the conduct of the review and did the report justify any significant deviations from the protocol?
3. Did the review authors explain their selection of the study designs for inclusion in the review?
4. Did the review authors use a comprehensive literature search strategy?
5. Did the review authors perform study selection in duplicate?
6. Did the review authors perform data extraction in duplicate?
7. Did the review authors provide a list of excluded studies and justify the exclusions?
8. Did the review authors describe the included studies in adequate detail?
9. Did the review authors use a satisfactory technique for assessing the risk of bias (RoB) in individual studies that were included in the review?
  - a. Randomised controlled trials (RCTs)
  - b. non-randomized studies of interventions (NRSI)
10. Did the review report on the sources of funding for the studies included in the review?
11. If meta-analysis was performed did the review authors use appropriate methods for statistical combination of results?
  - a. RCTs
  - b. NRSI
12. If meta-analysis was performed, did the review authors assess the potential impact of RoB in individual studies on the results of the meta-analysis or other evidence synthesis?
13. Did the review authors account for RoB in individual studies when interpreting/discussing the results of the review?
14. Did the review authors provide a satisfactory explanation for, and discussion of, any heterogeneity observed in the results of the review?

15. If they performed quantitative synthesis did the review authors carry out an adequate investigation of publication bias (small study bias) and discuss its likely impact on the results of the review?

16. Did the review authors report any potential sources of conflict of interest, including any funding they received for conducting the review?

The overall confidence in the results of the systematic reviews proposed by the AMSTAR2 tool is defined as:

- High - No, or one non-critical weakness: the systematic review provides an accurate and comprehensive summary of the results.
- Moderate - more than one non-critical weakness but no critical flaws: the systematic review provides an accurate summary of the results.
- Low - one critical flaw, with or without non-critical weaknesses: the systematic review may not provide an accurate and comprehensive summary of the results.
- Critically low - more than one critical flaw, with or without non-critical weaknesses: the review should not be relied on to provide an accurate and comprehensive summary of the results.

As per AMSTAR2 guidance, critical domains should be identified for each umbrella review (i.e., based on domains that are most important for the included reviews under consideration) and weighted more heavily when rating the overall confidence in the results of the review, due to their greater effect on the validity of the review findings (Shea et al., 2017). Based on guidance, we identified six critical domains: protocol registration; adequacy of literature search; performing risk of bias assessment; appropriateness of meta-analytical method; consideration of risk of bias when interpreting the results; and assessment of publication bias (Shea et al., 2017).

# Appendices

## Appendix A: Search terms (PICOS criteria)

We conducted 15 separate searches across five rapid review categories, each focused on a distinct population: SEMH, SLCN, autism, sensory and/or physical needs, and cognition and learning. For each population, three searches were performed, focusing on: identification terms, support terms, and working with others. The intervention, comparison, and study type remained consistent across all searches, while the population and outcome terms varied to capture the unique characteristics of each group. This approach ensured a comprehensive examination of the research literature across the different populations. PICOS stands for: (1) Population; (2) Intervention; (3) Comparison; (4) Outcomes; and (5) Study type.

### Population:

- Population terms: "adolescent" OR child\* OR "children and young people" OR kid\* OR "post 16" OR pupil\* OR "school aged" OR student\* OR teen\* OR "young learner\*" OR "young people" OR "young person" OR youth
- Educational setting terms: "alternat\* educat\*" OR class\* OR "class\* setting" OR "comprehensive school\*" OR "early year\*" OR educat\* OR elementary OR "elementary school\*" OR "extra-curricular setting\*" OR "further educat\*" OR "further educat\* setting\*" OR "grammar school\*" OR "high school" OR "higher educat\*" OR inclus\* OR kindergarten OR "learning environment\*" OR mainstream\* OR "middle school\*" OR nursery OR preschool OR "primary educat\*" OR "primary school\*" OR reception OR "remedi\* class\*" OR "school setting" OR school\* OR "secondary education\*" OR "secondary school\*" OR "special educat\*" OR "university" OR "whole school" OR "independent school"
- General SEND terms: SEND OR SEN OR "special educat\* need\*" OR "special need\*" OR "learning difficult\*" OR "learning disab\*" OR "learning difference" OR "additional need\*" OR impair\* OR disorder\* OR neurodivergent OR "additional learning need"
- SLCN terms: DLD OR "primary language disorder\*" OR SLCN OR SLI OR SSD OR apraxia OR "articulat\* disorder\*" OR "childhood apraxia of speech" OR "cleft palate" OR "communicat\* disorder\*" OR "communicat\* impair\*" OR "communicati\* dysfunction\*" OR "comprehen\* difficult\*" OR "comprehen\* disorder\*" OR "comprehen\* impair\*" OR "developmental language disorder\*" OR disfluen\* OR dysarthr\* OR "expressive language" OR "fluency difficult\*" OR "fluency disorder\*" OR "grammar difficult\*" OR "grammar disorder\*" OR "grammar impair\*" OR "language delay\*" OR "language development\* disorder\*" OR "language difficult\*"

- OR "language disabilit\*" OR "language disorder\*" OR "language impair\*" OR "language need\*" OR morpholog\* OR morphosynta\* OR "phonological disorder\*" OR pragmat\* OR "produc\* difficult\*" OR "produc\* disorder\*" OR "produc\* impair\*" OR "receptive language" OR semantic\* OR "specific language disorder\*" OR "speech difficult\*" OR "speech disorder\*" OR "speech dysfluen\*" OR "speech language communication need\*" OR "speech production" OR "speech sound disorder\*" OR stammer\* OR stutter\* OR synta\* OR "vocabulary difficult\*" OR "vocabulary disorder\*" OR "vocabulary impair\*" OR voice OR "voice disorder\*" OR "voice problem\*" OR "word find\*" OR "word learn\*"
- Cognition and learning terms: DCD OR SpLD OR attention OR "cogniti\* difficult\*" OR "development\* disab\*" OR "developmental co-ordination disorder" OR dyscalcul\* OR dyslexi\* OR dyspraxia OR "general learning difficult\*" OR "handwriting difficult\*" OR "handwriting impair\*" OR "learning difficult\*" OR "literacy difficult\*" OR "math\* anxiety" OR "math\* difficult\*" OR "mild learning difficult\*" OR "moderate learning difficult\*" OR "numeracy difficult\*" OR "profound and multiple learning difficult\*" OR "reading difficult\*" OR "reading impair\*" OR "severe learning difficult\*" OR "specific learning difficult\*" OR "specific learning disab\*" OR "writing difficult\*"
  - Autism terms: autistic OR autism OR "autistic disorder" OR "autisti\* spectrum disorder\*" OR "autism spectrum condition" OR "autism spectrum condition\*" OR ASC OR ASD OR "asperger syndrome" OR "child development disorder\* pervasive" OR asperger\* OR "pervasive development\*" OR "social communication" OR "pragmatic communication"
  - SEMH terms: ADD OR ADHD OR EBD OR OCD OR SEMH OR "affect\* disorder\*" OR anxiet\* OR "anxiety disorder\*" OR "attention deficit disorder" OR "attention deficit hyperactivity disorder" OR "attention deficit\*" OR "attention difficult\*" OR "behavior disorder\*" OR "behavior problem\*" OR "conduct disorder\*" OR "conduct problem\*" OR depress\* OR "emotion\* regulat\*" OR "emotional and behavioral difficulties" OR "emotional disorder" OR "emotional problem\*" OR "emotional symptom\*" OR "emotional wellbeing" OR hyperactivity OR inattention OR "mental disorder\*" OR "mental health" OR "mental illness\*" OR "mood disorder\*" OR "obsessive compulsive disorder\*" OR "oppositional defiant disorder\*" OR "peer relation\* problem\*" OR "psychiatric disorder\*" OR "psychological health" OR "psychosocial difficult\*" OR "self-esteem" OR "self-regulat\*" OR "social emotional and mental health" OR "social emotional\*"
  - Sensory and/or physical needs terms: CVI OR MDVI OR MSI OR PCHL OR PMLD OR SLD OR "sensory impair\*" OR "vis\* impair\*" OR blind\* OR "cerebral vision impair\*" OR "cochlear implant\*" OR "cortical vision impair\*" OR deaf OR deafblindness OR "dual sensory impair\*" OR "hard of hearing" OR "hearing impair\*" OR "hearing loss" OR "low vision" OR "multi\* need\*" OR "multi\* sensory

impair\*" OR "multiple disabil\*" OR "multiple impair\*" OR "permanent childhood hearing loss" OR "profound deaf\*" OR "residual vision" OR "sensory deprivation" OR "severe deaf\*" OR "severe sight impair\*" OR "sight impair\*" OR "vision loss" OR "visual disab\*"

Intervention:

- Identification terms: assess\* OR "assessment app\*" OR "assessment tools" OR "behavio\* checklist\*" OR checklist OR "class\* assess\*" OR "classroom observation" OR "cognitive assess\*" OR "computer\* app" OR "curriculum-based measure" OR diagnos\* OR "dynamic assessment" OR "early screening tools" OR "educational assessment tool\*" OR evaluate OR "formal assess\*" OR "formative assess\*" OR "graduated approach" OR identif\* OR "informal assess\*" OR measure OR "multi-disciplinary assessment" OR MTSS OR "multi-tiered system of supports" OR "neuro\* assess\*" OR observ\* OR "parent\* report" OR "pupil observation" OR "response to intervention" OR RTI OR screen\* OR "self-assessment" OR "self-report" OR "smartphone app\*" OR "standard\* test\*" OR "student observation" OR "tablet app\*" OR "teacher judgment\*" OR "teacher observation" OR tool\* OR "performance-based"
- Support terms: "classroom environment" OR "SEN support" OR "SEND support" OR SWPBS OR accommodat\* OR adaptat\* OR approach OR "assistive tech\*" OR "classroom interve\*" OR "collaborative teach\*" OR curriculum OR "curriculum adapt\*" OR "differentiat\* instruction" OR "digital learning" OR "early interven\*" OR "education\* program\*" OR "education\* support" OR "evidence-based interven\*" OR "evidence-informed interven\*" OR "exam access arrangement\*" OR "exam accommodat\*" OR "graduated approach" OR "group intervention" OR "high-quality instruct\*" OR "high-quality teach\*" OR inclus\* OR "inclusive education" OR "inclusive practice" OR "individual support" OR "individual\* education plan\*" OR "instruct\*" OR interven\* OR integrat\* OR "mainstream class\* support" OR "mainstream education" OR "mainstream environment" OR "multimedia learning environment" OR "multi-tiered system\* of support" OR "one-to-one" OR "parental support" OR pedagog\* OR "peer support" OR personali\*ed OR provision OR remediat OR "school support service\*" OR "school-based" OR "special\* interven\*" OR "special\* support" OR "specialist teach\* support" OR support\* OR strateg\* OR "targeted interven\*" OR "target\* teach\* strateg\*" OR targeted OR "targeted support" OR teach\* OR "teach\* adaptation\*" OR "teach\* principle\*" OR "teach\* strateg\*" OR "teach\* approach" OR therapy OR "tier 1 interven\*" OR "tier 1 support" OR "tier 2 interve\*" OR "tier 2 support" OR "tier 3 interven\*" OR "tier 3 support" OR treat\* OR "universal design" OR "universal interven\*" OR "universal provision" OR "universal support" OR "whole-class support" OR "whole-class teaching"

- Working with others terms: collaborator\* OR parent\* OR carer OR caregiver OR family\* OR specialist\* OR "specialist teacher" OR teacher OR educator OR TA OR "teaching assistant\*" OR "support staff" OR "educational psychologist\*" OR EP OR SLT or SLP or "speech and language therapist\*" OR "speech and language pathologist\*" OR "speech therapist" OR "speech pathologist" OR "health visitor" OR HV\* OR "Ed Psych" OR counselor\* OR "mental health support workers" OR "child and adolescent mental health service" OR CAHMS OR psychologist\* or therapist\* OR "learning support assistant" OR LSA OR "communication support worker" OR QTOD OR QTMSI OR QTVI OR "co-production" OR "joint working" OR "healthcare professional" OR "personal carer" OR "occupational therapist" "Inter-professional collaboration" OR IPC OR expert OR clinician OR nurse

Comparison:

- Left blank to include studies without comparison groups

Outcome:

- Identification terms: N/A - Not needed for identification terms as there is not always a specific outcome
- Behavioural, Inclusion, Motivation, and Engagement terms: attendance OR "behavior\* outcomes" OR "behavior\* regulation" OR "behavior\* improvement" OR "cognitive development" OR "communication skills" OR criminal OR economic OR employment OR engage\* OR financial OR "functional independence" OR "functional skills development" OR "access to learning" OR "improvement in learning" OR "inclusive classroom" OR "increase\* inclusion" OR "independent living" OR independent\* OR "mental health outcomes" OR motivate\* OR offend OR "prosocial behavior\*" OR "reduce\* learning barriers" OR "reduce\* symptom\*" OR "self-regulat\*" OR "school performance" OR "school retention" OR "social inclusion" OR "social-emotional development" OR "teacher perceptions of student progress" OR "well-being" OR workplace
- Educational outcomes (General): "academic achievement" OR "academic progress\*" OR "academic attainment" OR "academic measure" OR "academic performance" OR "additional learning support\*" OR "educat\* achievement" OR "educat\* assess\*" OR "educat\* attainment" OR "educat\* measure" OR "educat\* outcome\*" OR "educat\* performance" OR "educat\* progress" "executive function\*" OR "functional skill\* develop\*" OR "improve\* learning" OR learn\* OR "learning progress" OR "problem solving" OR "reduced learning barriers" OR "school outcome\*" OR "school performance" OR "school retention"
- Literacy outcomes: read\* OR literacy OR "letter recognition" OR "letter-sound knowledge" OR "word reading" OR phonic\* OR phonolog\* OR "reading

comprehension” OR “reading accuracy” OR “reading fluency” OR “reading delay\*”  
OR “print knowledge” OR decod\* OR “alphabet knowledge” OR “listening  
comprehension” OR “word recognition” OR “sentence completion”

- Writing outcomes: writ\* OR literacy OR punctuation OR spelling OR “sentence writing” OR “free writing” OR “early writing” OR “emergent writing” OR “guided writing” OR “writing fluency” OR handwriting OR “interactive writing” OR “letter typing” OR “sentence completion”
- Mathematics outcomes: math\* OR numer\* OR numb\* “number sense” OR arithmetic\* OR geomet\* OR shape OR calcul\* OR algebra OR counting OR addition OR subtraction OR multiplication OR division OR fractions OR statistics\* OR “place value” OR “math\* competenc\*” OR “math\* concept\*” OR “math\* knowledge”
- Working with others terms: collaboration\* or partnership\* or co-practice\* or multidisciplinary\* or transdisciplinary or interdisciplinary

Study type:

- Review type: review OR “systematic review” OR “meta-analysis” OR “narrative review”

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