

Review protocol for interventions to support learning needs for looked-after children and young people

ID	Field	Content
0.	PROSPERO registration number	
1.	Review title	Interventions to support learning needs of school-aged looked-after children and young people
2.	Review question	<p>4.2a What is the effectiveness of interventions to support learning needs by either a learning provider or carer of school-aged looked-after children and young people?</p> <p>4.2b are interventions to support learning needs acceptable and accessible to looked-after children and young people and their care providers? What are the barriers to, and facilitators for the effectiveness of these interventions to support learning needs in school-aged looked-after children and young people?</p>
3.	Objective	<p><u>Quantitative</u> To determine the effectiveness and harms of interventions to support learning needs by either a learning provider or carer of school-aged looked-after children and young people.</p> <p><u>Qualitative</u> To determine if interventions to support learning needs are acceptable and accessible to looked after children, their carers, and providers who</p>

		would deliver them. To determine other barriers and facilitators to the effectiveness of these interventions.
4.	Searches	<p>Sources to be searched</p> <ul style="list-style-type: none"> • PsycINFO (Ovid) • Embase (Ovid) • MEDLINE (Ovid) • MEDLINE In-Process (Ovid) • MEDLINE Epubs Ahead of Print • PsycINFO (Ovid) • Social policy and practice (Ovid) • Cochrane Central Register of Controlled Trials (CENTRAL) • Cochrane Database of Systematic Reviews (CDSR) • Database of Abstracts of Reviews of Effect (DARE) • EconLit (Ovid) – economic searches only • NHSEED (CRD) - economic searches only <p>Supplementary search techniques</p> <ul style="list-style-type: none"> • Studies published from 1st January 1990 to present day. • A supplementary search of ERIC database was performed using terms relating to looked after children and education. <p>Limits</p> <ul style="list-style-type: none"> • Studies reported in English • No study design filters will be applied • Animal studies will be excluded • Conference abstracts/proceedings will be excluded. • For economic searches, the Cost Utility, Economic Evaluations and Quality of Life filters will be applied.

		The full search strategies for MEDLINE database will be published in the final review. For each search the Information Services team at NICE will quality assure the principal database search strategy and peer review the strategies for the other databases using an adaptation of the PRESS 2015 Guideline Evidence-Based Checklist
5.	Condition or domain being studied	This review concerns the support of learning in school-aged looked-after children and young people in their current educational placement.
6.	Population	<p>School-aged looked after children and young people (wherever they are looked after) from primary-school age until secondary-school age and further education until age 18.</p> <p>Including:</p> <ul style="list-style-type: none"> • Children and young people who are looked after on a planned, temporary basis for short breaks or respite care purposes, only if the Children Act 1989 (section 20) applies and the child or young person is temporarily classed as looked after. • Children and young people living at home with birth parents but under a full or interim local authority care order and are subject to looked-after children and young people processes and statutory duties. • Children and young people in a prospective adoptive placement. • Children and young people preparing to leave care. • Looked-after children and young people on remand, detained in secure youth custody and those serving community orders.
7.	Intervention	<p>Interventions and approaches to support learning needs by either a learning provider or carer of looked-after children and young people</p> <p>Example interventions and approaches of interest include:</p> <ul style="list-style-type: none"> • Interventions to support learning needs for primary school • Interventions to support learning needs for secondary school

		<ul style="list-style-type: none"> • Interventions to promote positive relationships (as relates to their impact on educational outcomes) • Interventions to promote health and wellbeing (as relates to their impact on educational outcomes) • Teacher-delivered and carer-delivered interventions • School-based and home-based interventions • Tutoring programmes • Reading, and paired-reading programmes • Coaching and mentoring • Other pedagogical interventions • Training for teachers and carers to support the education of looked-after children and young people
8.	Comparator	<p><u>Quantitative evidence</u> Comparator could include standard care, waiting list, or another active intervention to support learning needs by either a learning provider or carer of school-aged looked-after children and young people.</p> <p><u>Qualitative evidence</u> Not applicable</p>
9.	Types of study to be included	<p><u>Quantitative evidence</u></p> <ul style="list-style-type: none"> • Systematic reviews of included study designs • Randomised controlled trials <p>If insufficient evidence, progress to non-randomised prospective controlled study designs</p> <p>If insufficient evidence, progress to non-randomised, non-prospective, controlled study designs (for example, retrospective cohort studies, case control studies, uncontrolled before and after studies, and interrupted time series)</p>

		<p><u>Qualitative evidence</u> Including focus groups and interview-based studies (mixed-methods studies will also be included provided they contain relevant qualitative data). Evidence must be related to acceptability, accessibility of interventions or other barriers to and facilitators for their effectiveness to support learning needs in school.</p>
10.	Other exclusion criteria	<ul style="list-style-type: none"> • Studies including mixed populations (i.e. looked after and non-looked after children) without reporting results separately for LACYP • Strategies, policies, system structure and the delivery of care that is covered in statutory guidance about looked after children and young people <p><u>Quantitative evidence exclusion</u></p> <ul style="list-style-type: none"> • Countries outside of the UK (unless not enough evidence, then progress to OECD countries) • Studies older than the year 2000 (unless not enough evidence, then progress to include studies between 1990 to current) <p><u>Qualitative evidence exclusion</u></p> <ul style="list-style-type: none"> • Mixed-methods studies reporting qualitative data that cannot be distinguished from quantitative data. • Countries outside of the UK (unless evidence concerns an intervention which has been shown to be effective in reviewed quantitative evidence) • Studies older than the year 2010 (unless not enough evidence, then progress to include studies between 1990 to current)
11.	Context	<p>This review is for part of an updated NICE guideline for looked-after children and young people. In 2017, 56.3% of looked-after children had</p>

		<p>a special educational need, compared with 45.9% of children in need and 14.4% of all children. At key stage 2, 32% of looked-after children and young people reached the expected standard in reading, writing and maths (compared with 61% of those who were not looked after). In 2016, 0.10% of looked-after children were permanently excluded from school, compared to 0.08% of all children. Looked-after children are 5 times more likely to offend than the general population. Local authorities have a duty to support looked-after children and young people. This includes providing individual care plans covering for educational needs.</p>
12.	Primary outcomes (critical outcomes)	<p><u>Quantitative outcomes</u></p> <ul style="list-style-type: none"> • Educational outcomes (academic skills; academic achievement; grade completion; homework completion; school attendance) • Adverse events (school absence, school exclusion or suspension) • Behavioural, cognitive, and social functioning at school • Knowledge and beliefs about school and education (including confidence and interest in academia and education) <p><u>Qualitative outcomes</u></p> <p>Qualitative evidence related to interventions to support learning needs will be examined. Evidence should relate to the views of looked after children, their carers, and providers, who would deliver eligible interventions, on:</p> <ul style="list-style-type: none"> • The accessibility and acceptability of the intervention, including information about the source and type of intervention used. • Barriers to and facilitators for intervention effectiveness in supporting school learning.
13.	Secondary outcomes (important outcomes)	None

14.	Data extraction (selection and coding)	<p>All references identified by the searches and from other sources will be uploaded into EPPI reviewer and de-duplicated. 10% of the abstracts will be reviewed by two reviewers, with any disagreements resolved by discussion or, if necessary, a third independent reviewer.</p> <p>The full text of potentially eligible studies will be retrieved and will be assessed in line with the criteria outlined above. A standardised form will be used to extract data from studies (see Developing NICE guidelines: the manual section 6.4).</p> <p>Study investigators may be contacted for missing data where time and resources allow.</p>
15.	Risk of bias (quality) assessment	<p>Risk of bias and/or methodological quality will be assessed using the preferred checklist for each study type as described in Developing NICE guidelines: the manual.</p> <p>The risk of bias across all available evidence will be evaluated for each outcome using an adaptation of the 'Grading of Recommendations Assessment, Development and Evaluation (GRADE) toolbox' developed by the international GRADE working group http://www.gradeworkinggroup.org/</p> <p>GRADE and GRADE CERQual will be used to assess confidence in the findings from quantitative and qualitative evidence synthesis respectively.</p>
16.	Strategy for data synthesis	<p><u>Quantitative data</u></p> <p>Meta-analyses of interventional data will be conducted with reference to the Cochrane Handbook for Systematic Reviews of Interventions (Higgins et al. 2011).</p>

		<p>Fixed- and random-effects models (der Simonian and Laird) will be fitted for all syntheses, with the presented analysis dependent on the degree of heterogeneity in the assembled evidence. Fixed-effects models will be the preferred choice to report, but in situations where the assumption of a shared mean for fixed-effects model is clearly not met, even after appropriate pre-specified subgroup analyses is conducted, random-effects results are presented. Fixed-effects models are deemed to be inappropriate if one or both of the following conditions was met:</p> <ul style="list-style-type: none"> • Significant between study heterogeneity in methodology, population, intervention or comparator was identified by the reviewer in advance of data analysis. • The presence of significant statistical heterogeneity in the meta-analysis, defined as $I^2 \geq 50\%$. • Meta-analyses will be performed in Cochrane Review Manager V5.3 <p>If the studies are found to be too heterogeneous to be pooled statistically, a simple recounting and description of findings (a narrative synthesis) will be conducted.</p> <p><u>Qualitative data</u></p> <p>Information from qualitative studies will be combined using a thematic synthesis. By examining the findings of each included study, descriptive themes will be independently identified and coded in NVivo v.11. The qualitative synthesis will interrogate these 'descriptive themes' to develop 'analytical themes', using the theoretical framework derived from overarching qualitative</p>
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		<p>review questions. Themes will also be organised at the level of recipients of care and providers of care.</p> <p><u>Evidence integration</u></p> <p>A segregated and contingent approach will be undertaken, with sequential synthesis. Quantitative and qualitative data will be analysed and presented separately. For non-UK evidence, the data collection and analysis of qualitative data will occur after and be informed by the collection and analysis of quantitative effectiveness data. Following this, all qualitative and quantitative data will be integrated using tables and matrices. By intervention, qualitative analytical themes will be presented next to quantitative effectiveness data. Data will be compared for similarities and incongruence with supporting explanatory quotes where possible.</p>
17.	Analysis of sub-groups	<p>Results will be stratified by the following subgroups where possible. In addition, for quantitative synthesis where there is heterogeneity, subgroup analysis will be undertaken using the following subgroups.</p> <p>Age of LACYP:</p> <ul style="list-style-type: none"> • LACYP in primary school education • LACYP in secondary school education and further education until age 18 <p>Subgroups, of specific consideration, will include:</p> <ul style="list-style-type: none"> • Looked-after children on remand • Looked-after children in secure settings

		<ul style="list-style-type: none"> • LACYP who are outside of mainstream education (e.g. off-roll or in pupil referral units) • Looked-after children and young people with mental health and emotional wellbeing needs • Looked-after children and young people who are unaccompanied children seeking asylum • Looked-after children and young people who are refugees • Looked-after children and young people who are at risk or victims of exploitation (including female genital mutilation) and trafficking • Looked-after children and young people who are teenage and young parents in care • Looked-after children and young people with disabilities; speech, language and communication needs; special education needs or behaviour that challenges. • Looked-after children and young people who are placed out of area • Looked-after children and young people who are LGBTQ
18.	Type and method of review	<input checked="" type="checkbox"/> Intervention <input type="checkbox"/> Diagnostic <input type="checkbox"/> Prognostic <input type="checkbox"/> Qualitative <input type="checkbox"/> Epidemiologic <input type="checkbox"/> Service Delivery <input type="checkbox"/> Other (please specify)
19.	Language	English
20.	Country	England

21.	Anticipated or actual start date	June 2019		
22.	Anticipated completion date	September 2021		
23.	Stage of review at time of this submission	Review stage	Started	Completed
		Preliminary searches	<input type="checkbox"/>	<input type="checkbox"/>
		Piloting of the study selection process	<input type="checkbox"/>	<input type="checkbox"/>
		Formal screening of search results against eligibility criteria	<input type="checkbox"/>	<input type="checkbox"/>
		Data extraction	<input type="checkbox"/>	<input type="checkbox"/>
		Risk of bias (quality) assessment	<input type="checkbox"/>	<input type="checkbox"/>
		Data analysis	<input type="checkbox"/>	<input type="checkbox"/>
24.	Named contact	<p>5a. Named contact Guideline Updates Team</p> <p>5b Named contact e-mail LACYPupdate@nice.org.uk</p> <p>5c Organisational affiliation of the review National Institute for Health and Care Excellence (NICE)</p>		
25.	Review team members	<p>From the Guideline Updates Team:</p> <ul style="list-style-type: none"> • Caroline Mulvihill • Stephen Duffield • Bernadette Li • Rui Martins 		
26.	Funding sources/sponsor	This systematic review is being completed by the Guideline Updates Team, which is part of 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-ng10121
29.	Other registration details	N/ A
30.	Reference/URL for published protocol	
31.	Dissemination plans	NICE may use a range of different methods to raise awareness of the guideline. These include standard approaches such as: <ul style="list-style-type: none"> • 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	Looked after children, looked after young people, education, learning outcomes, interventions, systematic review
33.	Details of existing review of same topic by same authors	N/ A
34.	Current review status	<input type="checkbox"/> Ongoing

		<input type="checkbox"/> Completed but not published <input type="checkbox"/> Completed and published <input type="checkbox"/> Completed, published and being updated <input type="checkbox"/> Discontinued
35..	Additional information	
36.	Details of final publication	www.nice.org.uk