| | Quality assessment | | | | | | | Number of patients | | Effect | | |
|--|---|-----------------|---------------|--------------|-------------|-------------------------|--|--|----------------------|----------------------|---------|------------|
| Number of studies | Study design | Risk of bias | Inconsistency | Indirectness | Imprecision | Other considerations | Active treatment case management model | standard model of service delivery | Relative (95% Cl) | Absolute (95% Cl) | Quality | Importance |
| Mental health | Mental health (service user) - not reported | | | | | | | | | | | |
| - | - | - | - | - | | - | | | | | - | CRITICAL |
| Healthcare practitioner health and well-being – not reported | | | | | | | | | | | | |

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| Number of designStudy designRisk of biasInconsistency indirectnessIndirectnessIndirectnessOther considerationsActive treatment caseIstandard model oblignessRelative (8%, Cl)Absolute (8%, Cl) | | |
|--|---------|------------|
| \cdot \cdot \cdot \cdot \cdot \cdot \cdot Quality of life (service user) - not reported \cdot \cdot \cdot \cdot \cdot \cdot \cdot Community participation and meaningful occupation - not reportedCommunity participation and meaningful occupation - not reported \cdot Maladaptive behaviour (follow up: 3 years; assessed with: AAMD Maladaptive Behaviour Scale) \cdot \cdot \cdot 1randomisedvery serious 1not serious 2serious 2serious 3none 23 23 \cdot \cdot 1randomisedvery serious 1not serious 2serious 2serious 2none 23 23 \cdot \cdot MD 10.56 more (6.77 fewer to 2.7.89 more (6.77 fewer to 2.7.89 more | Quality | Importance |
| - | - | CRITICAL |
| - | | |
| - | - | CRITICAL |
| Maladaptive behaviour (follow up: 3 years; assessed with: AAMD Maladaptive Behaviour Scale) 1 randomised trials very serious 1 not serious serious 2 serious 3 none 23 23 - MD 12.91 fewer (27.37 fewer to 1.55 m (27.37 fewer to 2.58 m (27.38 m (| | |
| 1 randomised trials very serious 1 not serious serious 2 serious 3 none 23 23 - MD 12.91 fewer (27.37 fewer to 1.55 n (27.37 fewer t | - | CRITICAL |
| trials serious ¹ (27.37 fewer to 1.55 n) Adaptive behaviour (follow up: 3 years; assessed with: AAMD Adaptive Behaviour Scale) (27.37 fewer to 1.55 n) 1 randomised trials very serious ¹ not serious ² serious ³ none 23 23 - MD 10.56 more (6.77 fewer to 27.89 n) | | |
| 1 randomised very serious 1 not serious 2 serious 3 none 23 23 - MD 10.56 more (6.77 fewer to 27.89 n | ore) | CRITICAL |
| trials serious 1 (6.77 fewer to 27.89 m | | |
| Move to more staff intensive residential programming (follow up: 3 years) | | IMPORTANT |
| | | _1 |
| 1 randomised trials very serious 1 not serious serious 2 very serious none 1/23 (4.3%) 4/23 (17.4%) RR 0.25 (0.03 to 2.07) (from 169 fewer to 186 fe | | IMPORTANT |
| Move to more staff intensive day programming (follow up: 3 weeks) | | |

| Quality assessment | | | | | | | Number of patients | | Effect | | | |
|--------------------|----------------------|------------------------------|---------------|----------------------|--------------|-------------------------|--|--|------------------------------|---|---------|------------|
| Number of studies | Study design | Risk of bias | Inconsistency | Indirectness | Imprecision | Other considerations | Active treatment case management model | standard model of service delivery | Relative (95% Cl) | Absolute (95% Cl) | Quality | Importance |
| 1 | randomised trials | very serious ¹ | not serious | serious ² | very serious | none | 0/23 (0.0%) | 2/23 (8.7%) | RR 0.20 (0.01 to 3.95) | 70 fewer per 1000 (from 86 fewer to 257 more) | | IMPORTANT |

1.

2. 3.

Risk of selection, performance and detection bias American study so service structures less applicable to UK population Confidence intervals cross one minimally important difference. Sample size less than optimal information size (<400 for continuous outcomes or <300 for dichotomous outcomes). Confidence intervals cross two minimally important differences. Sample size less than optimal information size (<400 for continuous outcomes or <300 for dichotomous outcomes).

4.

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