

ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Jo Ellins

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author’s relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/25/2022

Your Name: Lucy Hocking

Manuscript Title: Early evaluation of the Children and Young People’s Mental Health Trailblazer programme

Manuscript Number (if known): Click or tap here to enter text.

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/29/2022

Your Name: Mustafa Al-Haboubi

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

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Date: 5/26/2022

Your Name: Jennifer Newbould

Manuscript Title: Early evaluation of the Children and Young People's Mental Health Trailblazer programme

Manuscript Number (if known): Click or tap here to enter text.

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Dr Sarah-Jane Fenton

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 7/1/2022

Your Name: Kelly Daniel

Manuscript Title: Early evaluation of the Children and Young People's Mental Health Trailblazer programme

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Dr Stephanie Stockwell

Manuscript Title: Early evaluation of the Children and Young People's Mental Health Trailblazer programme

Manuscript Number (if known): [Click or tap here to enter text.](#)

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ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Brandi Leach

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): Click or tap here to enter text.

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Manbinder S Sidhu

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Jennifer Bousfield

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 7/18/2022

Your Name: Dr Gemma McKenna

Manuscript Title: Early evaluation of the Children and Young People’s Mental Health Trailblazer programme

Manuscript Number (if known): [Click or tap here to enter text.](#)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 7/9/2022

Your Name: Catherine L Saunders

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): [Click or tap here to enter text.](#)

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		Understanding Society survey methods fellowship. ESRC/University of Essex University of Cambridge engagement fund	
3	Royalties or licenses	<input type="checkbox"/> None 	
4	Consulting fees	<input type="checkbox"/> None Methodology review. Private Healthcare Information Network (PHIN) Statistics advice Urgent and Emergency Care Place Based Evaluation via RAND Europe Quantifying use of secondary care in England by international migrants. Health Foundation Health Foundation. Ethnicity and healthcare utilisation / routine healthcare data Health Foundation. Clinical codelist update Statistics support for the evaluation of NHS England's Liaison and Diversion programme via RAND Europe	please note these are all funds received in the last 3 years and are not related to the current evaluation
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None 	
6	Payment for expert testimony	<input type="checkbox"/> None 	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None 	

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/26/2022

Your Name: Stephen O'Neill

Manuscript Title: Early evaluation of the children and young people's Trailblazer programme

Manuscript Number (if known): N/A

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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11	Stock or stock options	<input type="checkbox"/> None	
		Novartis	<£1000
		GlaxoSmithKline plc	<£1000
		Astrazenica, and various other health/pharma stocks	<£1000 each
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 5/25/2022

Your Name: Nicholas Mays

Manuscript Title: Early evaluation of the children and young people’s Trailblazer programme

Manuscript Number (if known): N/A

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