Supplementary File 2: Codebook for data extraction from included records

INFORMATION EXTRACTED FROM RECORDS	NOTES/INTRUCTIONS FOR REVIEWERS
Section 1 – DOCUMENT IDENTIFICATION	
Study Number	Enter the identification number of the record.
Authorship	Enter the last name of the first author.
Year	Enter the year the document was published. If the date cannot be determined from the document, write "Not reported."
Document Type	Select the item from the dropdown menu that best describes the document: - journal article - report - dissertation - abstract - book - web page - presentation notes/slideshow - media piece - other
Section 2 – OBJECTIVES	
Does this document include a research or evaluation component?	Select "Yes" from the dropdown menu if the document presents findings from a research or evaluation project. Select "No" from the dropdown menu if the document describes some feature of their implementation of CAPA (eg. their reason for transition or their implementation process) without including a data collection or analysis component.
Purpose of the document	Make a note of what the primary goal or aim of the document was as described by the author. Include the hypotheses, if any. If no aims are explicitly given, reviewers may state this and then make an inference regarding the purpose of the project.

Section 3 – METHODS	
Methodology and study or evaluation design	State whether the project uses a quantitative, qualitative, mixed methods, or review methodology. Then outline the study or evaluation design, as described by the authors. If the design is not described, enter "Not reported." Input a description of the study design based on reviewer inference if possible. Some common designs include: Quantitative: A) Experimental with controls (controlled trial) – allocation can be randomised by individual (RCT) or service/clinic (cluster RCT), quasi-randomized, or not randomized B) Experimental without controls (uncontrolled trial) – allocation can be randomised, quasi-randomised, or non-randomised in group/service without controls C) Observational, including cohort, case-control, cross-sectional, interrupted time series, controlled before and after, controlled post-test, pre- and post-test, or post test. Qualitative: D) Method specified: E.g., ethnography, phenomenology, grounded theory, participatory action research, or case study E) Other – approach not defined, but used focus groups or interviews to collect data, conducted thematic analysis of transcripts, etc. Reviews/Syntheses: F) Systematic review (with or without or meta-analysis), narrative review, scoping review.
Baseline	Did the researchers measure usual care or outcomes BEFORE transitioning to CAPA? Select "Yes" or "No" from the dropdown menu.
Study period	State the period of time over which the observation(s) was (or were) conducted, if applicable.

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Stakeholder/participant groups included	List the participant groups engaged/measured in this project. Common groups include: - clients/patients, or health records from clients/patients - families, caregivers - clinicians, healthcare providers - managers - administrative staff If no details about the engagement/participants are given, write "Not reported."
Numbers of participants	Provide the reported numbers of participants in each of the stakeholder groups outlined above, where applicable. Be sure to include both pre-and post-test sample sizes, or both control and experimental group sizes, where applicable. If no sample sizes or numbers of participants are given, write "Not reported."
Sampling/population characteristics	If applicable, provide details regarding the sampling strategy (e.g. convenience sample, purposive sample, randomized sample, etc.), as well as any additional participant details (e.g. limitations, participant ages, sex, gender, culture, ethnicity, socioeconomic status, etc.).
Theory	Does the document reference any theories, theoretical frameworks, principles, or models that explain the ways in which CAPA "works"? If so, list and provide a description of these, where applicable. List the references to these theories/frameworks provided by the author(s).
Data analysis	Provide a description of the procedures used to analyze the data collected in the study. If no data were analyzed, write "Not applicable."
Section 4 - CONTEXT	
Country	Enter the country in which the CAPA service or team is located.
Location	Enter any additional information regarding the location of the service(s) or team(s).

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Characteristics of Individuals	Outline in point form any key factors described by the author(s) about the characteristics of individuals which comprise the team or service in which CAPA is implemented. Relevant kinds of details may include: - the characteristics of the individual staff and teams that impacted implementations (e.g., staff attitudes, buy-in, skills, knowledge of the intervention, etc.)
Inner Setting	Outline in point form any key factors described by the author(s) about the internal setting or environment in which CAPA is implemented (i.e. within the team or service). Relevant kinds of details may include: - the service/team/organization's internal culture, communications, and climate that impacted implementation
Outer Setting	Outline in point form any key factors described by the authors about the outer setting (external to the service or team). Relevant characteristics may include: - community characteristics (such as urban or rural, socioeconomic characteristics) - client/patient needs - the networking the service/team/organization has with other organizations - the external pressures from other organizations, policies, or incentives that impacted the implementation of CAPA - other social, cultural, or resource considerations
Rationale for choosing CAPA	Provide any description given by the author(s) regarding why CAPA was implemented. This can include a description of the problem(s) or issue(s) CAPA was chosen to address, as well as the process by which CAPA was chosen. If provided, include descriptions of the intervention characteristics that led to selection of CAPA as an appropriate model of care, such as its relative advantage over other models, its level of complexity as an intervention, and/or its cost.
Evidence Strength and Quality	If provided, state any explicit reference made by the authors to the evidence used to select the model. Sources of evidence may include published literature, guidelines,

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	anecdotal stories from colleagues, information from a competitor, client experiences, results from a local pilot, and other sources.
Section 5 - IMPLEMENTATION	
Date of Implementation	State the year CAPA was implemented. If not stated in the document, write "Not reported."
Adaptation, planning, and process of implementation	If provided, state the ways in which CAPA was adapted to fit the local context and the rationale provided for these adaptations. This could include additional consultations to determine ways to adapt the model, or other adaptation procedures. If provided, state the process by which implementation of CAPA was planned by the service(s)/team(s) in the document. This may include convening planning committees or teams or conducting large-scale strategic planning procedures. If provided, give a description of the steps and procedures executed in order to implement/transition to CAPA.
Engaging leadership	If provided, give descriptions of any ways in which leaders or "champions" that spearheaded CAPA were attracted to or engaged in the planning and/or implementation of CAPA.
Fidelity to CAPA Model	Provide any description of compliance to the CAPA model that was given by the authors. This may include qualitative descriptions or quantitative measures such as ratings on the Pragmatic Rating Scale (PRS) or other instruments. Include the scoring from any quantitative measures provided by the author(s).
Quality Monitoring and Evaluation	If provided, give a description of how feedback on CAPA is collected and considered. Note that the document under review may itself be part of a quality monitoring or evaluation process.

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Key Components Described	Describe the activities mentioned in the document undertaken to adhere to the 11 Key Components, 7 HELPFUL habits, and/or 4/5 Big Ideas of CAPA. The components include: - Leadership and management - Language - Handle demand - Choice framework - Full booking to partnership - Selecting partnership clinician by skill - Core and specific partnership work - Job plans - Goal setting and care planning - Peer group discussion - Team away days The 7 HELPFUL Habits include: - Handle Demand - Extend Capacity - Let go of Families - Process Map - Flow Management - Use Care Bundles - Look After Staff The 4 [5] Big Ideas include: - Choice - Core and Specific Partnership Work - Selecting Core Partnership Clinician - Job Planning - [Peer Group Discussion] If all components are described, write "All Components." If all habits are described, write "All Habits." If no elements are mentioned by name, write "None reported."

Relative Importance	If provided, give a description of which components of CAPA were considered more/less important to the overall implementation of CAPA.
Other implementation efforts	Describe any activities undertaken to adhere to CAPA that may not fit into the 11 Key Components, 7 HELPFUL Habits, or 4/5 Big Ideas described above.
Section 6 - OUTCOMES	
Health System Outcomes	E.g., number of patients/visits, wait times, prescription drug use, cost of service, emergency department visits
Acceptability Outcomes	E.g., client/family satisfaction, therapeutic alliance
Clinical Outcomes	E.g., symptoms, diagnostic categories
Emotional Outcomes	E.g., attitudes, feelings, well-being, burnout, values, beliefs; towards self, others
Functioning and Coping Outcomes	E.g., quality of life, self-care, resilience, coping
Relationship Outcomes	E.g., relationship with peers/teachers, family interaction, interpersonal conflict, communication
Compliance/ adherence Outcomes	E.g., appointment attendance
Workforce Outcomes	E.g., staff/clinician rates of turnover, efficiency, engagement, morale, satisfaction
Other Outcomes	Describe any other outcomes used that do not fit into the above categories, e.g., educational, justice outcomes.
Main findings	Write a brief 1-2 sentence describing the main findings, e.g. "The authors found that CAPA reduced waiting times by 25%."
Accounting for demographics	For quantitative analysis: Describes any variables the authors found to predict or explain differences in the outcomes or reveal how CAPA may have impacted different groups in different ways. Typical covariates include gender, age, race, education level, and symptom severity. We are interested in knowing if some groups benefited more than others. Report only those covariates that the authors tested. For qualitative analyses: If applicable, describe the ways in which analyses accounted for the population characteristics of the participants in the research.
Section 7 - Takeaways	

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Barriers and Facilitators	What challenges or barriers to successful implementation of CAPA were described? What facilitators or supports to implementation were identified? State any factors the author(s) believed hindered/facilitated the implementation of CAPA. Note that these may be related to the environmental/context details reported in Section 3.
Study Limitations Identified by Authors	Summarize any limitations the authors identified in their methods or project approach, where applicable.
Study Limitations Identified by Reviewers	Summarize any limitations that you as a reviewer identify in the document that may not be discussed by the authors.
Research Recommendations	Summarize any recommendations provided by the author(s) regarding what methods, designs, topics, etc. should be included in future research.
Recommendations for Implementation or Policy	Summarize any recommendations provided by the author(s) regarding how they could have better adhered to CAPA in implementation or policies to support the model.
Congruence with Data	Do the recommendations the authors provide above follow directly from their data and findings, or their review of other evidence? Alternatively, are they based on anecdotes or speculation? Briefly state the source of these recommendations, where applicable.
Notes	Input any additional notes, comments or points of interest that may not be easily captured in the above sections.