

Supplementary table S6: Meta-aggregation process for 'synthesised finding' 3 (28 findings which formed 3 categories).

Findings U = Unequivocal C= Credible	Categories	Synthesised finding' (SF)
<p>Further information and support needed in one place with someone to help you. Appropriate education/information and guidance on exercise, keeping activity, support, complementary therapies; peer support in variety of formats (video and audio MS [116] C</p> <p>Uncertainty at end of rehab: need for further information TBI [114] C</p> <p>Difficulty contacting neurologists by email/phone PD [75] U</p> <p>Restricted referral and access to specialist care PD [65] U</p> <p>Knowledge of residential care staff not adequate B [65] U</p> <p>Information about medication for fatigue useful - helped legitimize fatigue by recognising 'It was actually real...not dreaming it' MS [134] U</p> <p>Limited emotional support for coping during early stages. PD [75] U</p> <p>Compensatory strategies, skills and ideas for external memory aids were valued TB and MS. [100] U</p> <p>Ideas for using assistive device to compensate for limitations useful e.g, mobile phone, applications, note books, calendar. TBI [117] C</p> <p>Information about memory and neurological condition benefitted some but not all. MS and TBI [100] U</p> <p>Information/education increases 'awareness and control of it' (the condition. MS [134] U</p> <p>Variable information and awareness about driver assessment and rehabilitation requirements and resources MS [95] C</p> <p>Mis-diagnosis and unclear communication from doctor. ABI [111] C</p>	<p>Accessible information/education about condition, medication, interventions, strategies support and exercise not sufficient and recognized as useful.</p>	<p>SF3: People with MS, PD and ABI perceive that a combination of effective communication skills, specialist knowledge and an individualized approach to information provision is necessary to reduce uncertainty, increase awareness and improve control for people using (or leaving) the service. Experiences of receiving adequate accessible, accurate information and education about the long term neurological condition and appropriate exercise/activity/support varied.</p>
<p>Discomfort when communicating prognosis detected "she seemed afraid to tell me" TBI [114] U</p> <p>Human dimension between individual with TBI and professionals (therapist and physicians) promotes satisfying relationship but when absent can have a negative effect on the persons self-esteem. TBI [114] U</p> <p>Delays in diagnosis from GP MS [65] U</p> <p>Individualised support and feeling 'listened to'. MS [134] U</p> <p>Open communication between the individual with BI, employer, family, health professionals facilitates better adaptation to work BI [82] U</p> <p>Importance of the OT having interpersonal skills to establish trust and rapport with clients at first meeting, enables sharing of concerns MS [80] U</p>	<p>Communication skills of professionals varied and were recognized as important for a) giving individualized personal information including diagnosis and prognosis, b) listening to each individuals' situation and for c) developing a good relationship.</p>	
<p>Clear explanation about cognitive symptoms e.g. 'cognitive fatigue' so 'you knew what was happening and what you could do'. ABI [133] U</p> <p>Knowledge from leaders of programme about MS symptoms, exercise and equipment valued MS [101] U</p> <p>Physiotherapist provided reassurance, motivation and feedback during rehabilitation programme. PD [122] C</p> <p>Support and guidance about return to work possibilities and the process. BI [83] U</p> <p>Reassurance provided from expert/professionals. TBI and MS [100] U</p> <p>Speech Therapy valued and had positive effect on confidence. PD [65] U</p> <p>Professional presence, provided authority, support and advocacy about return to work MS [80] U</p> <p>Specialised knowledgeable professionals value PD [75] U</p> <p>Reduced awareness of bradykinesia, urgency of micturition and communication needs by staff. PD [96] U</p>	<p>People using services value professionals/leaders who have specialist, accurate knowledge about their long term neurological conditions (pathophysiology, symptoms, medication, equipment, intervention strategies).</p>	