



CAMHS Payment by Results

Trainer Handbook

Version 2

Prepared by:
The CAMHS Payment by Results Pilot Site Team

Melanie Jones
Katy Hopkins
Rebecca Kyrke-Smith
Roger Davies
Miranda Wolpert
Panos Vostanis
On behalf of the wider project group

The CAMHS PbR Project Group

Steering Group

Chair: Simon Young - Deputy Chief Executive & Director of Finance, Tavistock & Portman NHS Foundation Trust

Dr Bruce Clark - Clinical Director, South London and Maudsley NHS Foundation Trust

Dr Rob Senior - Medical Director, Tavistock & Portman NHS Foundation Trust

Pat Howley - Children's Commissioning Manager, Commissioning Support Service, City & Hackney PCT

Project Directors

Dr Miranda Wolpert - Director, CAMHS Evidence Based Practice Unit (EBPU), Anna Freud Centre & University College London

Professor Panos Vostanis - Professor of Child Psychiatry, University of Leicester

Core Project Team

Dr Melanie Jones – PbR Project Manager, CAMHS EBPU

Dr Andy Fugard – Senior Data Analyst, CAMHS EBPU

Katy Hopkins – PbR Pilot Site Coordinator, CAMHS EBPU

Rebecca Kyrke-Smith – PbR Research Offices, CAMHS EBPU

Wider Project Team

Deirdre Moroney – Business and Service Improvement Manager, Central & North West London Foundation Trust

Dr Roger Davies – Principal Clinical Psychologist, City & Hackney Child & Family Consultation Service, East London Foundation Trust

Tony Martin - Finance Lead, CAMHS PbR project & SLR Development Accountant

Val Lake - Tees, Esk & Wear Valleys Foundation Trust and **Care Pathways and Packages Project**

Barbara Fittall (Department of Health)

Ann York (Chair of the Expert Advisory Group)

South London and Maudsley NHS Foundation Trust

Introduction

The role of a trainer

As a designated trainer, it is likely to be your responsibility to plan for the on-going training within your service or team. You may have already started to think about this; in some services one person may take responsibility for planning the service-wide training approach while in others, it will be left to the individual trainers to plan for their team(s). Your service lead will let you know whether this is your responsibility.

Who do I need to train?

Anyone who will be involved in completing the Current View tool **must** receive training before they can begin filling in the tool. It is up to your service to decide who will be completing the tool.

Once the team has been trained, we are asking that they start using the PbR approach immediately (the week following their training at the latest), so it is best if you aim to train whole teams at once.

What if our IT systems are not ready to accept the data?

It may be the case for some services that their IT systems will not yet be ready for data entry in our required format. Your service will have designated PbR IT and service leads, who will have made a plan for how data will be collected until this point.

If your IT system is not ready **and you do not have an alternative database** to store the PbR data in, then as a minimum, we ask that you refresh your (and your team's) knowledge of the Current View tool by working through the tool for one case at each of your regular team meetings. For this, you may use either an on-going case or a new referral. You could also use the same case from week to week, to practice updating the tool as your understanding of the case changes.

Who is responsible for entering the data?

We are allowing services to make their own decision about whose responsibility this is. In some services, clinicians may enter the data directly into the computerised record system. In others, they might complete the forms on paper to be entered electronically by administrative staff. As a trainer it is not your responsibility to make this decision: your service and IT lead will be able to let you know. **You are not responsible for training surrounding data entry and upload.**

When should I train my team(s)?

The PbR approach is likely to be mandated by 2015 and in order for this pilot to gather sufficient data to inform this, we need pilot sites to be ready to upload data to us by April 2013 at the latest. To achieve this, we would ask that you plan for training to take place throughout your team/service in a timely manner. You should start rolling out training as soon as you have received your own training and aim to have most (if not all) of your teams trained by the end of February 2013.

Planning your training

As soon as you have planned your training, we ask that you inform us of your plan and we will then send you the necessary training materials. Below is a form which you may wish to use to help you plan your training.

Name of service:
Name of trainer:
Number of teams being trained:
Outline of training schedule including team names, locations and provisional training dates:
All training will be completed by (date):
We plan to: <ul style="list-style-type: none">a. Start using the PbR approach the week following team trainingb. Practice the PbR approach in our team meetings until our IT system is ready

Running your training session(s)

The PowerPoint presentation and related notes should provide you with all the information you need to run your training session. We have found that an interactive approach works best, with questions being raised and discussed as the session progresses.

We ask that as a minimum you plan for each training session to last 2 ½ hours, although you may choose for it to last longer. Below is an outline of the session, we ask that you follow the procedure outlined here. Please use the timings outlined below to guide you as to the **minimum** amount of time that should be spent on each of these. You may spend longer if you wish.

Training materials

We will provide you with the following training materials:

- PowerPoint presentation with accompanying notes
- Current View tool completion guide
- Current View form

We aren't able to provide paper copies of the handouts, so you will need to arrange for printing of handouts. **It will be your responsibility to inform us once you have made your training plans so that we can email these out to you in time for your training dates.** Alternatively you might wish to download the materials from our website: www.pbrcamhs.org

Questions and Answers

It is likely that there will be many questions raised throughout the session. You may be able to answer these yourself, or you may wish to take this time to compile a list of questions to pass on to the PbR team (which we will be happy to answer).

Please also check the Frequently Asked Questions section of our website (www.pbrcamhs.org).

Please do not give out our direct contact details to individual clinicians; unfortunately we don't have the resources to respond to their individual queries.

Progress updates

Keep us informed

As you go through the process of planning and carrying out your training, please keep us updated!

When you have made your plans for rolling out the training to your team(s), please let us know. It might be helpful for you to send us a copy of your completed training planning form (page 3 of this handbook). This information will help us to provide you with the right support at the right times.

When you finish training each team, please let us know so that we can prepare to support them as they start collecting and uploading data.

Ask for help if you need to

If you encounter any difficulties or setbacks that mean your training does not go to plan, please tell us about these; we may be able to help!

You can contact us in the following ways:

- The best way to contact us is through our central email: pbrcamhs@annafreud.org
- You will also find a lot of useful information on our website (www.pbrcamhs.org)
- You can also phone us on: 0207 443 2218, just ask for a member of the PbR team