

DATA EVENTS

On the 26th February and the 5th March we held two data events in London and Leeds, to review the progress of the pilot so far, discuss plans going forward and provide an opportunity for networking and shared learning.

Representatives from all 23 sites attended one of the events, and feedback indicated that 84% of attendees found the event either useful or very useful.

We value your feedback and ideas for future events so if you'd like to share ideas for how to make the most out of future events, please contact us.

Materials from the events are now available on our website: <http://pbrcamhs.org/resources/event-resources/>

TEST VIGNETTE: HELP US TO ASSESS THE RELIABILITY OF THE CURRENT VIEW TOOL!

Service Leads: If you would like to receive feedback from us on how your clinicians are filling in the Current View tool in comparison to the PbR team, and to other services nationally, then please ask your clinicians to go onto our website and complete a test vignette.

The answers will be available from Monday 22nd April, so please encourage clinicians to complete the vignette by Friday 19th April. Following this we will be producing a reliability report.

QUARTER 1 DATA SUBMISSION WINDOW: 1ST-15TH APRIL 2013

All pilot site services will be submitting data collected between January and March 2013 during the 1st-15th April to MegaNexus, via the online CORCNexus Drop Box. Services can submit data at any point in this period, although we are asking pilot sites to indicate which day they plan to do this (please email corc@meganexus.com). We strongly advise services not to all wait until the last day to submit as this is likely to slow down the validation process considerably.

CURRENT VIEW TRAINING IS NOW ONLINE!

Online Current View training will be available from Monday 18th March. Clinicians will be able to work through the Current View rating guidance, practice a worked example (with answers) and complete a test vignette. These can be used in place of face-to-face training or as a refresher for clinicians.



Three teams are taking part, an MDT team taken from one specific area within our Citywide service; a Learning Disability Team and a Substance Misuse team.

Q: Tell us about your progress so far.

Within our area, training seems to have gone well. Those who delivered the training have reported a keen interest from the recipients and this is borne out by the increase in data entries.

Q: What's gone particularly well?

Buy in from our teams.

The training has been delivered on time.

To help us monitor progress, we are asking each site to complete a quick checklist detailing the areas of data they are collecting and submitting each quarter. Please go to <http://pbrcamhs.org/resources/data/steps-of-data-submission/> to download the form. If for any reason you envisage difficulty with submission of data then please contact either MegaNexus or the PbR team.

Prior to the first submission, all pilot sites using bespoke IT systems to collect the required dataset need to ensure that they have submitted some dummy (fictional) data to MegaNexus. This will help iron out any issues that might arise during the submission of real data and ensure this process runs efficiently. Please contact Lee Murray or Nadia Kuffinoff at MegaNexus to arrange this as soon as possible: Email corc@meganexus.com.

YOUR PROGRESS

Q: What's your name and what is your role in the project?

Rob Biggs; Performance & Information Manager acting as Data Lead for the PbR Pilot, Birmingham Children's Hospital NHS Foundation Trust

Q: Which teams from Birmingham Children's Hospital are taking part?

Deployment of the CODE database was simple and building links between it, and our PAS, has assisted in cutting down the data entry time.

Q: What have been the key challenges and how are these being managed?

The key challenge will always be entrenching PbR thinking within all of our teams. With busy schedules for both clinical and admin teams, collection of this data will be seen as an additional overhead. The real challenge will be to build in an easy-to-use process which needs to have IT at its forefront.

Q: Is there anything else you'd like to add?

I like a challenge ☺

A Big Thank You to Rob Biggs for updating us on his progress. If anyone else who is involved in the pilot would like to tell us about your progress so far and appear in a future newsletter, please get in contact with us.

NEW SITE!

We would like to welcome **The Priory Group** as an additional pilot site in the project. The Priory Group are planning to involve teams from 4 hospitals in the project.