

Child and Adolescent Practice Scale (CAPS)

1. Children and Young Person's Improving Access to Psychological Therapies

The Children and Young Person's IAPT was launched in October 2011 with the core aims of transforming CAMHS by:

- Developing child/young person focused services
- Routinely using outcome measures to monitor progress and assess change
- Encouraging reflective practice through the development of supervision
- Training in evidenced based approaches (CBT and Parenting)

The first wave of funding has been agreed to provide training for therapists, supervisors and managers in order to secure these objectives. HEIs and CAMHS providers have joined together to form training collaboratives so that academic learning and development can be firmly embedded within clinical services.

A working group commissioned by the DH produced a curriculum detailing the content of the IAPT training. Evidence based treatment programmes were examined, core elements identified and the competencies required to deliver these specified.

2. CAMHS Competencies

An evidence based competency framework for CAMHS was commissioned by NES Scotland and developed in collaboration with UCL (Roth, Calder & Pilling, 2011). This details the knowledge and skills underpinning the clinical activities carried out by a CAMHS service and provides a framework which details

- core competencies for working with children and young people,
- generic therapeutic competencies
- assessment and formulation skills
- specific therapeutic competencies
- meta competencies

Process (PRECISE)

The middle segment defines the

process of CBT

P - Partnership working

R - Right developmental level

E - Empathic

C - Creative

I - Investigative

S - Self efficacy

E - Enjoyable

Specific Skills (A, B, Cs)

The outer segment defines the specific techniques

A - Assessment and goals

B - Behavioural techniques

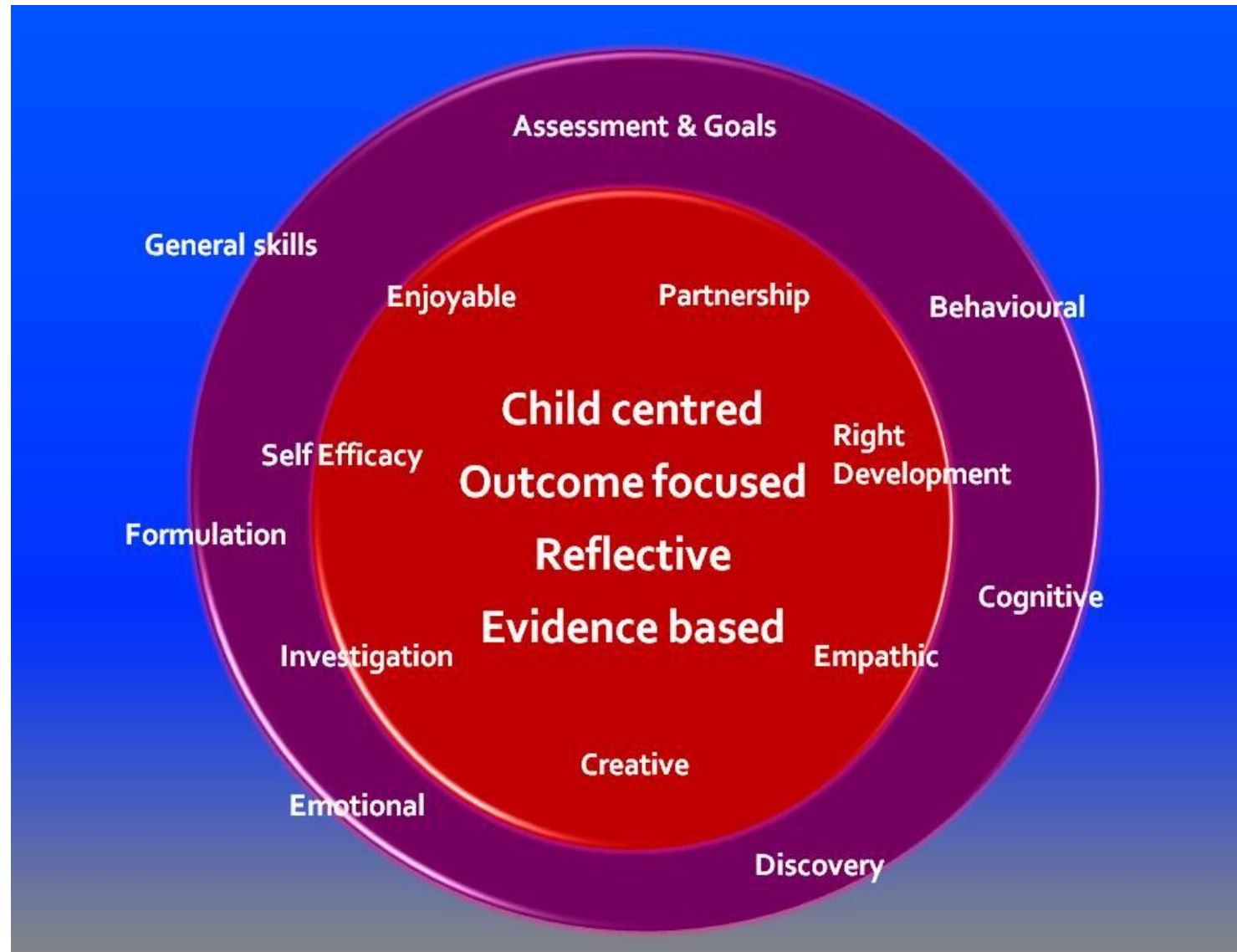
C - Cognitive techniques

D - Discovery experiments

E - Emotional techniques

F - Formulation

G - General skill



Rating the scale

The seven point scale (i.e. a 0-6 Likert scale) extends from (0) where the trainee does not believe they currently meet competence to (6) where they believe they are currently expert in that particular competence. A score of 6 (Expert) should only be used if the competence has been demonstrated in the face of significant difficulties. For example, partnership working may be rated as expert if the family/child are very hostile or critical and yet the clinician was able to maintain a collaborative relationship). It is expected that in most sessions significant difficulties will not be present and so maximum ratings of competence will be 5 (Proficient).

Mark each competence using whole and half numbers to indicate the level to which each competence has been demonstrated.

The process of rating involves two stages:

1. Decide whether or not the person is competent in each area. If judged competent ratings will be in the range 3-6; not competent in the range 0-2.
2. Look through each sample description in the range and decide which point best describes the trainees performance.

Pass/Fail

The overall percentage score is determined by totalling the scores on each of the 14 competencies and multiplying by 1.19.

A score of less than 2 on any item is a fail.

Competence Levels

Competence level		Examples
Incompetent	0	Absence of feature, or highly inappropriate performance
	1	Inappropriate performance, with major problems evident
Novice	2	evidence of competence, but numerous problems and lack of consistency
	3	competent, but some problems and/or inconsistencies
Advanced Beginner	4	good features, but minor problems and/or inconsistencies
Competent	5	very good features, minimal problems and/or inconsistencies
Proficient	6	excellent performance, even in the face of patient difficulties
Expert		

* The present scale has incorporated the Dreyfus system (Dreyfus, 1989) for denoting competence. Please note that the top marks (i.e. near the 'expert' end of the continuum) are reserved for those practitioners demonstrating highly effective skills, particularly in the face of difficulties. When rating each item, you must consider whether you should be regarded as competent in that particular area.

Reference

Dreyfus, H. L. (1989). The Dreyfus model of skill acquisition. In J. Burke (ed.) Competency based education and training. London: Falmer Press.

PROCESS

1. Partnership working - collaboration & learning together

The therapist establishes a collaborative and respectful partnership with the child/young person (and as appropriate their parents/carers) in which they are actively engaged in working towards a set of joint goals and targets.

This may be evidenced by the therapist

- Encouraging & inviting the child/young person's participation in discussions, option appraisal, solution generation & decision making
- Eliciting the child/young person's and parents/carers understanding and views
- Involving the child/young person and parent/carer in goal and target setting, intervention planning and agreeing home activities and experiments
- Encouraging the child/young person to provide open and honest feedback about therapy sessions

Competence Level		Examples (score according to features not examples)
Incompetent	0	Didactic therapist style, collaboration not encouraged, child views not sought or ignored
Incompetent	1	Therapist is too controlling, domineering or passive and a partnership is not established
Novice	2	Occasional attempts at collaboration but domineering or passive style of therapist limits the establishment of a collaborative partnership
Advanced beginner	3	Collaborative partnership evident but major problems e.g. not enough opportunities for child or carer participation
Competent	4	Collaborative partnership established but not consistent or some minor problems fully involving child or carers.
Proficient	5	Good collaborative partnership established with all involved throughout most of the

2. Right developmental level - pitch, methods, family involvement

The therapist engages with the child/young person and family in a way, level and manner that is consistent with their developmental level and understanding

This may be evidenced by the therapist

- Using simple, clear, jargon free language that is respectful and not patronising
- Ensuring an optimal balance between cognitive and behavioural techniques
- Conducting sessions at an appropriate pace
- Appropriately using a variety of verbal (direct and indirect approaches) and non-verbal techniques
- Appropriately involving parents/ carers in treatment sessions.

Competence Level		Examples (score according to features not examples)
Incompetent	0	Therapist appears preoccupied with techniques and does not show any empathy
Incompetent	1	Therapist appears cold and detached and has difficulty showing warmth and empathy
Novice	2	Occasional attempts at empathy but overly focused upon techniques/intellectualisation
Advanced beginner	3	Limited attempts at empathy but major problems e.g. overlooking non-verbal emotional responses or often appearing disinterested/unconcerned.
Competent	4	The therapist is warm, respectful and shows empathy but not consistent or some minor problems.
Proficient	5	The therapist demonstrated appropriate empathy with all involved throughout most of the session. Minimal problems

3. Empathy - acknowledge, genuine, warm, understanding

The therapist is able to empathise with the child/young people and their carers/family through the development of a genuine, warm and respectful relationship.

This may be evidenced by the therapist

- Conveying interest and concern through the appropriate use of specific skills such as active listening, reflection and summaries
- Acknowledging and appropriately responding to the child/young person’s and carers/parents verbal and non-verbal expressions and emotional responses such as distress, excitement or anxiety
- Demonstrating an open, respectful, non-judgemental caring approach
- Appropriately empathising with carers about their own difficulties and the impact of these on their ability to help their child

Competence Level	Examples (score according to features not examples)
Incompetent 0	Therapist shows no recognition/awareness of the developmental stage of the child/family
Incompetent 1	Therapist adopts a “standardised approach” that is not pitched at the right level
Novice 2	Occasional recognition of developmental issues but the majority of the intervention is not modified or consistent with the child/family level of understanding
Advanced beginner 3	Demonstrates some awareness of developmental issues but major problems e.g. in ensuring that communication is pitched at the child/family’s level of understanding
Competent 4	Developmental issues recognised and intervention suitably tailored but not consistent or some minor problems evident

4. Creative - verbal and non-verbal techniques

The therapist is able to creatively adapt the ideas and concepts of CBT to facilitate the child/young person and their parents/carers understanding and engagement in therapy.

This may be evidenced by the therapist:

- Using an appropriate range and type of verbal and non-verbal methods to facilitate understanding and engagement
- Creatively using a range of methods e.g. talking, drawing, questionnaires, metaphor, role play, puppets, etc. to convey ideas and concepts.
- Tailoring and adapting concepts and methods of CBT around the interests of the child.
- Responding to the preferred media of the child/young person e.g. verbal, visual, computer

Competence Level		Examples (score according to features not examples)
Incompetent	0	Therapist makes no attempts to adapt or explain CBT in a way that facilitates engagement or understanding
Incompetent	1	Therapist inappropriately communicates and conveys concepts in a formulaic way that does not facilitate understanding or engagement
Novice	2	Occasional attempts to tailor the intervention to the child's interests and preferences but overall delivery is formulaic and is not adapted to the child or their family
Advanced beginner	3	Limited attempts at creativity with major problems e.g. inappropriately relying on verbal techniques or not using different media or creative methods
Competent	4	The therapist appropriately uses materials and media but not consistent or some minor problems.
Proficient	5	The therapist appropriately uses materials and media as required to facilitate

5. Investigation - discovery, reflection

The therapist adopts an open and curious stance that facilitates guided discovery and reflection.

This may be evidenced by the therapist:

- Creating a process of collaborative inquiry in which the child/young person's and/or parent's/carers cognitions, beliefs and assumptions are subject to objective evaluation
- Involve children/young/people in the design of experiments
- Helping the child/young person and/or parent's /carers to consider alternative explanations about events
- Encouraging the child/young person and/or parent/carer to reflect on the outcomes of experiments

Competence Level	Examples (score according to features not examples)
Incompetent	0 Therapist adopts an "expert stance" that does not facilitate self discovery or reflection
Incompetent	1 Therapist is directive and provides no opportunities for self discovery and reflection
Novice	2 Occasional attempts to be curious but a predominantly directive style with the therapist leading the session and providing their interpretations and ideas
Advanced beginner	3 Some opportunities for discovery and the use of a reflective questioning style but major problems e.g. child not involved in design of experiments or reflecting on outcomes
Competent	4 Curious approach is evident with questioning and experimentation aiding the discovery of new information but not consistent or some minor problems.
Proficient	5 Therapist demonstrates skilful use of questioning and

6. Self efficacy - build on strengths and ideas

The therapist adopts an empowering and enabling approach in which self-efficacy and positive attempts at change are promoted.

This may be evidenced by the therapist:

- Identifying and highlighting the child/young person's and/or parents/carers strengths and personal resources
- Helping the child/young person and/or parents/carers to identify their skills and strategies which have shown some past success
- Developing and shaping the child/young person's and /or parents/carers ideas and coping strategies.
- Praising and reinforcing the child/young person's and/or parents/carers use of new skills

Competence Level	Examples (score according to features not examples)
Incompetent 0	Therapist is disempowering, rejects, ignores or criticises suggestions from children/carers
Incompetent 1	Overly deficit focused and therapist does not invite or reinforce positive contributions
Novice 2	Occasional acknowledgement and praise of contributions but overall approach is not empowering
Advanced beginner 3	Some attempts to promote self-efficacy but major problems e.g. child's ideas are not systematically explored and developed
Competent 4	Overall approach is positive and empowering with contributions being appropriately developed but not consistent or some minor problems.
Proficient 5	Therapist demonstrates a positive and empowering approach in which contributions are acknowledged, explored and developed. Minimal problems

7. Enjoyable - interesting and engaging

The therapist is able to make therapy session appropriately interesting and engaging

This may be evidenced by the therapist

- Using an appropriate mix of materials, activities, humour.
- Ensuring that sessions are not too long
- Maintaining an appropriate balance between task and non-task (relationship strengthening) activities.
- Attending to the child's interests and appropriately incorporating these into the intervention.

Competence Level		Examples (score according to features not examples)
Incompetent	0	Therapist appears bored, distracted or overly serious
Incompetent	1	Therapist is too formal and session is neither interesting, enjoyable nor engaging
Novice	2	Occasional attempts to make the session interesting but overall approach does not facilitate interest
Advanced beginner	3	Some attempts to make the session enjoyable and interesting but major problems e.g. not sufficiently focusing upon child's interests or engaging in non-task activities
Competent	4	Overall the session is fun and engaging but not consistent or some minor problems.
Proficient	5	Therapist appropriately attends to the child's interest, uses their preferred medium and maintains their interest and engagement. Minimal problems