**VIPP-SD training commitment form**

Indication of hours involved in full training:

* Introductory session: 45 mins
* Online training: 5 days
* Prep for training, training family, supervision - approx. 60 hours

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| **Task** | **Breakdown** | **Total time** |
| **Before and during training course (5 days over 4 weeks)** | **Pre-training videos** | 1 hour | 1 hour |
| **Reading of manual and literature** | Reading manual:Visits 1-3 - 1.5 hoursVisits 4-5 - 1 hourVisits 6-7 - 1 hourReading literature: 1 hour | 4.5 hours |
| **After training course (3-4 months)** | **Supervised clinical case to gain VIPP certification** | Home visit 1 & 7: 1 hour eachHome visits 2-6: 1.5-2 hours each(+ travel time if face to face) | Approx. 9.5-12 hours (+ travel time if face to face) |
| **Preparation for visits** | Video analysis and preparation of feedback to family: 6 hours per visit for initial visits, reducing to 3 hours once experienced | Approx. 30 hours |
| **Supervision** | Group supervision: 6 x 2 hours | 12 hours |
| **After completion of clinical case** | **Assessment for accreditation** | Preparation for assessment: 2 hoursAssessment meeting: 1 hour | 3 hours |
|  | **Total** |  | Approx. 60 hours |

**Additional requirements:**

* **Provision of a secure recording device** (e.g. video camera, work tablet, work phone) to record video clips on. If using a video camera or a work phone, another device with an appropriate-sized screen will be needed, for you to show the parent/carer the clips back on (e.g. laptop, tablet). The video files will need to be safely transferred from the recording device to this device, following the information governance policies of your employer.

* **Provision of an appropriate training case** for VIPP, ready to start with after training course. There should be good engagement, an appropriate referral concern and the case should not have too many complexity factors as it will be a training case.

**VIPP training agreement**

All trainees are required to read the below statements and sign if you are happy to take part. Please ask your line manager to read and sign the second statement, before emailing the form to the course administrators at ecs49@cam.ac.uk. The training team must receive your application and this agreement form by the application deadline **(18th October at 5pm)**.

**Trainee:**

I have read and understood the training requirements for VIPP and agree to attend all training sessions, prepare the required equipment, work with an appropriate training case and prepare for and attend the required supervision sessions.

Name:.................................. Signed: ……………………………… Date: ……………………

**Your line manager:**

I have read and understood the training requirements for VIPP and agree to support ………………………………………………………… [insert trainee name] to attend all training sessions, access the required equipment, support them to find an appropriate training case and to prepare for and attend the required supervision sessions. I have met with the trainee to discuss how VIPP will be delivered and embedded within our service going forward, following accreditation.

Name:.................................. Signed: ……………………………… Date: ……………….……