Low Intensity Psychological Therapies
Postgraduate Certificate
(and undergraduate route)
Low Intensity Psychological Therapies

This course is:

- **Psychological Wellbeing Practitioner (PWP) Training**
- **Full-time postgraduate certificate over 12 months (part university-, part service/placement-based)**
- **Attendance based**

Entry to this programme is either:

**NHS funded**

For NHS funded places, applicants must have obtained a local Trainee PWP post in the NHS (application usually via: [www.jobs.nhs.uk](http://www.jobs.nhs.uk)). These training positions link automatically into an application for this course. The university is required to be involved in the selection process for these posts.

Or:

**Self-funded**

For the self-funded route, see page 8 in this booklet.
This course is part of the ‘Increasing Access to Psychological Therapies’ programme (IAPT) run by the NHS to train Psychological Wellbeing Practitioners (PWPs) to be employed within the NHS. It aims to provide trainees with the skills and knowledge to assess and treat patients with brief, evidence-based psychological approaches for the treatment of mental health problems such as depression and anxiety.

The National Department of Health IAPT Programme is an innovative approach to address common mental health problems. Therapists are trained to help those who experience depression and anxiety through use of evidence-based psychological therapies.

- Trainee PWPs are provided with training on this course to implement packages of cognitive-behaviour therapy (e.g. via supported self-help).
- The goal of their role is to aid clinical improvement and social inclusion – including return to work or other meaningful activity.
- Applicants for this course must do concurrently, relevant work which includes minimum supervision resource dictated by the IAPT programme.
- For NHS-funded places, individuals will be employed or placed in services.
- For self-funded trainees, it is usual for the programme to arrange a placement for you drawing on our partnerships with local services.

For further information about the course and the national IAPT scheme see [www.ncl.ac.uk/psychology/postgraduate/](http://www.ncl.ac.uk/psychology/postgraduate/)
The Mental Health Career Ladder

The PWP role is a rewarding and valuable career in its own right. However, some individuals use it as a means to enter other ways of working with those who experience mental health difficulties.

In the School of Psychology at Newcastle University we have a number of other courses that graduates of this course sometimes later undertake. It is usually not possible to enter these courses directly without obtaining relevant experience. Our PWP training is one source of such experience.

Our Postgraduate Diplomas in Cognitive Behavioural Therapy and in High Intensity Psychological Therapies (IAPT programme) train individuals to become cognitive-behavioural therapists who can offer longer periods of therapy for those experiencing more severe mental health difficulties.

Our Doctorate in Clinical Psychology trains individuals to work with clients from a number of backgrounds using a variety of therapeutic approaches.
You can find more information about these other courses on our website: www.ncl.ac.uk/psychology/postgraduate/

For any further queries, you can contact:

For the Diploma in CBT: cbt-dip.director@ncl.ac.uk
For the Diploma in High Intensity IAPT: iapt.director@ncl.ac.uk
For the Doctorate: doctorate.director@ncl.ac.uk
Low Intensity Postgraduate Certificate (IAPT)

Course structure

The programme follows closely the national syllabus and the national training materials, which can be found here:
https://www.ucl.ac.uk/pwp-review/the-pwp-review

These documents outline course structure, content, as well as teaching and assessment strategies.

This is an established course and within the national accreditation process was recognised as being one of the strongest courses of its kind. Newcastle University received full national accreditation for the IAPT Low Intensity course in 2010 and again in 2014.

The programme is taught through 3 modules:

- Engagement and Assessment of Patients with Common Mental Health Problems
- Evidence-Based Low-Intensity Treatment for Common Mental Health Disorders
- Values, Diversity and Context
The course is scheduled to begin on Monday 18 September 2017 and the last hand-in date is usually mid-June 2017. For self-funded trainees, managing the ending of the placement will extend beyond this last hand-in.

You must also be available for a placement/service induction and criminal records check before course commencement (to be clarified at interview).

Semester one runs from week starting 18 September to 5 February. This starts with a 6 day induction (18-20 September, 25, 26 September and 2 October). Semester two runs from week starting 12 March to 21 May.

- Most teaching takes place on Mondays.
- There are some workshops, tutorials and other commitments scheduled on a Tuesday. Tuesdays are also used for placement-based activity set by the course.
- In term time you are Wednesday to Friday full-time in services — you must complete a minimum 80 clinical contact hours over training. Outside of term time Monday to Friday is spent in services.
- All sessions are mandatory and so individuals must be available to attend the entire course.

The programme is based in a pleasant University campus which is adjacent to Newcastle’s city centre. Newcastle is one of the most vibrant cities in Europe which enjoys a relatively inexpensive cost of living, also being positioned near to countryside which is renowned for its beauty (e.g. Lake District, Scottish Borders).
The Self-Funded Route

Newcastle University is delighted to offer self-funded places on our PWP training (Postgraduate Certificate in Low Intensity Psychological Therapies).

For self-funded places, we endeavour to allocate you a placement. Entry to the course is conditional upon individuals being accepted onto a placement by the placement providers. Passing the course is conditional on the placement continuing until course completion and students meeting the demands/outcomes of the placement.

After completing PWP training, individuals will be eligible to apply for Band 5 PWP posts in NHS organisations (currently £21,909-£28,462). These posts also exist in the private and voluntary sectors.

Competition for funded posts is very high and it may be financially advantageous (in terms of helping individuals progress up the career ladder more quickly) to obtain a self-funded place – competition for these being much lower.

Whilst many individuals are content to develop their skills within a highly rewarding PWP role, others eventually use this experience to help them move on to other forms of training (e.g. High Intensity CBT Therapist or Clinical Psychologist).

The PWP experience provides an ideal grounding for this.
Fees & Costs

The fees for the 2016 course will be £4955.

Students are also responsible for all other costs associated with the training which is likely to include travel to and from the placement, a Disclosure and Barring Service (previously Criminal Records Bureau) check, and the purchase of books.

Any disabled students living in England are eligible to apply for Disabled Students’ Allowance to assist with costs for equipment, assistance, and travel: www.gov.uk/disabled-students-allowances-dsas/overview

As placements involve contact with a vulnerable client group, it is likely that the host service will request an enhanced disclosure from the DBS and entry will be dependent on the outcome of this. It is also likely that services will ask you to attend their own induction training which will precede the course start date. You must be available for this.

It is unlikely that you will be entitled to a student loan for this course as it is a postgraduate programme. However, you may be able to obtain a career development loan, see:

www.gov.uk/career-development-loans/overview

www.barclays.co.uk/Loans/Graduateandprofessional/ProfessionalandCareerLoan/P1242557963934

www.co-operativebank.co.uk/servlet/Satellite/1193206376155,CFSweb/Page/Bank-Loans
**Entry requirements**

For entry onto the programme you must have:

- Relevant experience of working with individuals who experience mental health difficulties. This could be voluntary or paid employment.

- An Honours degree or equivalent (which might include relevant experience) to enter the postgraduate route. Some successful experience of university level study to enter the undergraduate route.

- A high standard of written abilities, be computer literate and be able to develop good therapeutic relationships.

- It is also a requirement that you meet the trainee PWP person specification, and that you are judged to be able to achieve relevant standards of proficiency (see Appendix one) as well as the outcomes of the course/national syllabus.

After receipt of an application there is a shortlisting process. Successful applicants from this stage will then be offered an interview, may be asked to complete an occupational health questionnaire and, if indicated, have an occupational health assessment. Part of the interview process is a clinical role play. Applicants must pass the role play task to enter the course. Entry onto the course is also subject to references and may also be subject to a occupational health assessment.

For short-listing, only the submitted application form and completed additional information template will be reviewed. Both of these need to be submitted. To maximise the chances of you being shortlisted, please give details of degree awards (if finished), complete the personal statement section in a way that allows us to understand any personal values that are important to you and how these have steered decisions that you have
made in your life, and specify as much as possible the hours per week and duration of any voluntary or paid posts.

A full job description and person specification is in the Reach Out educator materials (p122-127), listed here: [www.iapt.nhs.uk/workforce/low-intensity/](http://www.iapt.nhs.uk/workforce/low-intensity/)

**Overseas candidates**

The programme is not in a position to offer NHS-funded places to overseas, non-EU applicants. Non-EU students may apply for self-funded places.

Due to the nature of the programme, an excellent command of English language is essential. International students are required to provide evidence of their ability in English, both spoken and written. A list of exempt countries is available upon request.

A minimum score of International English Language Testing System (IELTS) band 7 is required for speaking and listening, band 8 for academic reading, and band 6 for academic writing. Evidence of this should be
included with your application. For information on IELTS please visit: www.ncl.ac.uk/postgraduate/international/requirements/

Unfortunately, due to regulations around the teaching/placement ratio, International students cannot be accepted onto the self-funded route.

**How to apply**

To receive details of the application process contact IAPT.director@ncl.ac.uk or phone School of Psychology on 0191 222 7925

Applications should reach the office by **4 May 2018**. Late applications will be considered providing placements remain available. The interviews are provisionally planned to take place on 4-6 June.

**Frequently asked questions about PWP training at Newcastle University**

**How can I increase my chances of getting on the course?**

The person specification for a trainee PWP post will give you the essential and desirable elements we look for in a prospective candidate: see www.jobs.nhs.uk

It is essential that applicants have relevant experience working with individuals who experience mental health difficulties (see the ‘common disorders’ section of: http://psychcentral.com/disorders/ as a guide). This might include voluntary work, care assistant work, etc. but the more
relevant and the greater quantity of the experience, the stronger the influence it will have in the selection process.

Applicants commonly have a Bachelors level honours degree. However, direct access to the programme is possible through “advanced standing” for candidates who have partially achieved this level of educational attainment. Applicants with “advanced standing” are required to provide a portfolio of evidence to prove that their previous education and experience is at, or exceeds, graduate level.

**How do I apply for a funded PWP training post?**

There is not a set schedule for recruitment to NHS Trainee PWP posts. As such, you will need to monitor NHSjobs and any other outlets that services may tell you that they use.

The University cannot answer any queries regarding the timetable for recruitment into these funded trainee posts. However, interviews are quite often scheduled 2-4 months prior to course commencement. Please monitor: [www.jobs.nhs.uk](http://www.jobs.nhs.uk)
How much of the course do I need to attend?

Candidates must be in a position to attend the course upon its commencement and for its entire duration – attending all scheduled sessions and also any service induction which might precede course commencement.

Degrees and post-graduate courses should be completed before commencement of the Low Intensity Psychological Therapies course (i.e., no concurrent taught degrees or post-graduate courses undertaken).

How do students find the course?

This is an excerpt of feedback from our first self-funded student who started work in a qualified PWP post immediately afterwards:
'This is not an easy course and that is exactly how it should be. The role of Psychological Wellbeing Practitioner it prepares students for is one which carries serious responsibility in supporting people who are experiencing psychological distress. I found the course challenging and I loved every minute of it.

At its core is the assessment and Low Intensity treatment of mild to moderate depression and anxiety. This core is built on a foundation of theoretical underpinning and it is well contextualised culturally and socio-politically. The structure of the course, the lectures and seminars running concurrently with the work placement, meant that putting the theory into practice and establishing a positive loop of learning, practice, reflection and more learning worked well.

The support structure was good with my personal tutor and supervisor both effectively being mentors to me alongside peer support from others in the student cohort. The teaching materials were current and often derived from real experience, lecturers on the course were all also working clinically outside of the university. The vocational relevance of the course was further reinforced by additional guest lecturers from a number of IAPT services.'

This is a testimonial from another self-funded student:

‘As a self-funding student considering starting a relatively new course, I was naturally concerned about whether I would find work upon qualifying. However, I felt that the course would offer me opportunities to learn skills and practical experience that would be difficult to gain elsewhere and would enable me to climb the career ladder at a faster pace. The university allocated me a placement at an IAPT service, whilst taking my preferences into consideration and I quickly settled into the team.

I found being a self-funded student worked to my advantage within the team as it was understood that I was eager for learning opportunities and I felt very well supported. Although the course can seem somewhat challenging at times in terms of managing a growing case load of clients alongside university assignments and examinations, it is interesting and provides much scope for personal development. Highly qualified guest speakers are a particular asset to the course. Six months into the course I was delighted to be offered a permanent paid position within the IAPT service I was placed with, which will extend beyond my training once qualified.’
How can I prepare for interview?

Candidates can only access this course after a successful interview. For individuals who live abroad but who eligible to apply, an interview may be possible via Skype. Please contact mark.papworth@ncl.ac.uk to discuss this option if it is needed.

Interviews are a form of oral examination and should be prepared for as you would any other form of assessment. Your university careers service may be able to arrange a practice interview for you and give you advice about how to prepare for and behave within an interview environment.

As with all job interviews, as a minimum you should be thoroughly prepared to talk about your experience, what the job/course is that you are applying for and why you are applying for it. Think of other areas that you might be questioned about and prepare for those as well.

Resources which might be helpful in preparing for interview

Book about the PWP role:


Book about CBT in more detail:

Previous PWP national course materials:

Current PWP national course materials:
https://www.ucl.ac.uk/pwp-review/the-pwp-review

IAPT websites:
Example of a IAPT service website for clients - http://www.sheffieldiapts.shsc.nhs.uk/

Examples of resources which can help you prepare for your interview (there are many on the internet and don’t forget your university careers service!):
https://nationalcareersservice.direct.gov.uk/advice/getajob/interviews/Pages/default.aspx
http://careers.theguardian.com/careers-blog/job-interview-checklist-how-to-prepare
http://www.prospects.ac.uk/interview_tips/how_to_prepare_for_an_interview.htm
http://www.wikihow.com/Prepare-for-a-Job-Interview

NHS training courses and employers are shifting to include a focus on values within recruitment process:
http://www.nhsemployers.org/recruitingforvalues
A Week in the Life of a Psychological Wellbeing Practitioner

Toni-Marie Robinson & Deborah Hannant

The Improving Access to Psychological Therapies (IAPT) programme was launched in 2007 with the vision of improving the availability of psychological therapy to individuals experiencing depression and/or anxiety disorders. One of the new roles developed within the IAPT initiative is that of a Psychological Wellbeing Practitioner (PWP). PWP’s work at Step 2 of the Mental Health Stepped Care Model and provide guided self help based on the principles of Cognitive Behavioural Therapy (CBT) to individuals presenting with mild to moderate common mental health problems (depression and/or anxiety disorders). This article is written from the experience of two PWP’s from the North Tyneside Psychological Therapies (IAPT) service and provides excerpts from the diary of a PWP. The article aims to provide an overview of some of the main activities involved in the role and finishes off with some brief reflections.

Excerpts from the diary of a PWP

<table>
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<th>10am</th>
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<tr>
<td><strong>Monday 9th January</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What:</strong></td>
<td>Assessment</td>
</tr>
<tr>
<td><strong>Where:</strong></td>
<td>Client’s GP surgery</td>
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<tr>
<td><strong>Format:</strong></td>
<td>Individual, face-to-face session</td>
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<tr>
<td><strong>Duration:</strong></td>
<td>40 minutes</td>
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The purpose of an assessment appointment is to gather information in a structured yet client-centred manner, allowing the client and therapist to make a collaborative decision about the client’s primary difficulty, the type of treatment required and the preferred delivery format.

**Case Example:**
Client presented with symptoms of low mood, including tearfulness, poor motivation and early morning waking. Experiencing negative thoughts such as “It’s useless, what’s the point”. The client was unable to identify any particular trigger to the onset of her difficulties; however, reported she had experienced symptoms of low mood for approximately 6 months.

**Client’s chosen treatment format:** Telephone treatment.

**Treatment plan:** Psycho education around depression leading onto behavioural activation.

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<td><strong>Tuesday 10th January</strong></td>
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<tr>
<td><strong>What:</strong></td>
<td>Treatment Session</td>
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<tr>
<td><strong>Where:</strong></td>
<td>GP surgery</td>
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<tr>
<td><strong>Format:</strong></td>
<td>Individual, face-to-face session</td>
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<tr>
<td><strong>Duration:</strong></td>
<td>25 minutes</td>
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The purpose of a treatment / follow up appointment is to provide ‘low intensity’ interventions based on the principles of Cognitive Behavioural Therapy. These will include psycho-education around a clients difficulties and lead onto techniques such as behavioural activation, behavioural exposure and cognitive restructuring.

**Case Example:**
Client attending treatment for panic attacks.

Work already complete:
- Session 1: Assessment appointment, identifying main problems, goals and treatment plan.
- Session 2: Socialising the client to the CBT model, including discussion around the emotional, physical, behavioural and cognitive components of panic.
- Session 3: Psycho-education around anxiety and the fight or flight response

Today’s session (session 4): Exploring the role of thoughts, including unhelpful thinking styles and catastrophic misinterpretation.

**3pm**
**Tuesday 10th January**

**What:** Treatment Session (Computerised CBT)
**Where:** Clients may take the call wherever is convenient
**Format:** Telephone appointment for Computerised CBT
**Duration:** 15 minutes

Computerised CBT (cCBT) is the delivery of Cognitive Behavioural Therapy through computer based packages. We utilise two packages; Fear Fighter for anxiety and Beating the Blues for depression. cCBT requires clients to complete modules, preferably weekly, which are followed up with regular 15 minute telephone call from a PWP. This follow up call is conducted with the aim of supporting clients whilst they work through the modules within the computerised packages and to give each client the opportunity to discuss any difficulties they may be experiencing.

**3.30pm**
**Tuesday 10th January**

**What:** Treatment Session
**Where:** Clients may take the call wherever is convenient
**Format:** Telephone appointment
**Duration:** 25 minutes

Telephone treatment involves delivering the same interventions as face to face appointments; however, these are over the phone. There are several advantages of this treatment method, such as many clients prefer telephone treatment as a therapeutic modality and also the treatment is not dependent on location, meaning that the client saves time and money on travelling to and from appointments. Where possible clinicians need to ensure clients have the materials needed for the appointment prior to the appointment taking place. Any possible barriers/difficulties to telephone working need to be discussed and acted upon prior to treatment taking place.

**9am**
**Wednesday 11th January**

**What:** Supervision
**Where:** Psychological Therapies Centre
**Format:** Individual
**Duration:** 1 hour 30 minutes

As PWP’s we engage in two different types of supervision. The first is Case Management Supervision; the purpose of which is to review our caseloads at regular (usually weekly) intervals, in order to ensure that all clients’ needs are discussed in a structured way. Clients are discussed at pre-determined stages within their course of treatment and/or when particular clinical characteristics arise (e.g. risk issues).

The second type of supervision is known as Clinical Skills Development Supervision. This form of supervision is focused on the development and maintenance of
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<tr>
<td>1pm</td>
<td>Treatment Session</td>
<td>Local Health Centre</td>
<td>Group</td>
<td>2 hours</td>
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Self-help groups and courses are a large part of our step 2 work and aim to support clients with their difficulties through use of psycho-education and a wide range of self-help techniques. Our groups can involve anywhere up to 50 clients and are delivered using a variety of facilitation styles, including both interactive and lecture style formats. Currently we offer seven ‘low intensity’ groups, which include: stress management, anxiety management, assertiveness training, confidence building, relaxation and two perinatal groups.

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<tr>
<td>9.30am</td>
<td>Screening x 4 appointments / supervision re: screening appointments</td>
<td>Treatment room at Psychological Therapies Centre</td>
<td>Face-to-face or Telephone</td>
<td>20 minutes each</td>
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Screening is a relatively new initiative in our service and involves a 20 minute face-to-face or telephone appointment with all new referrals into the service. The aim of these screening appointments is to gather more information about a client’s current difficulties in order to make more accurate decisions regarding from which part of the service, if any, clients will receive the most appropriate treatment. If it is felt the service can assist in meeting the needs of the client then she/he is then allocated to one of four different practitioner groups (PWP’s, CBT Therapists, Primary Care Mental Health Practitioners or Psychologists). All screening appointments are conducted by PWP’s, although following screening brief supervisory meetings take place with a senior member of the psychological therapies team in order to assist with decision-making.

Reflections on the role of a PWP

The role of a PWP provides extensive benefits to both clients and mental health services. Not only does the role allow for a range of brief evidence based interventions to be offered to clients in a timely manner, the role also presents increased choice to clients through offering treatments in a range of different formats, including: face-face, telephone treatment, cCBT and group treatment. When thinking about what we enjoy the most about the PWP role, a number of topics came to mind. It is a joy to facilitate self help groups and see the benefit that peer support can add to the treatment process. Being involved in supporting someone to work towards an understanding of their difficulties and make changes is a really rewarding experience. Additionally, the role of a PWP presents the opportunity to work with a variety of different presentations, including: Obsessive Compulsive Disorder, Panic Disorder, Agoraphobia, Generalised Anxiety Disorder, Phobias and Depression to name a few.

As well as gaining a great deal of fulfilment from the role of a PWP, we feel we have also gained a range of invaluable experiences. The role has provided us with the opportunity to develop our skills and knowledge of working within a CBT model and to further develop our knowledge of depression and anxiety disorders. Additionally, we have also gained experience...
of other more complex mental difficulties and how these may present within a primary care mental health setting. These experiences have allowed us to and continue to provide the opportunity for us to develop our knowledge of the different roles within mental health and identify other services/treatments that may be appropriate to client needs.

As with any job the PWP role presents its challenges. There are benefits to offering clients with moderate to severe difficulties an initial step 2 ‘low intensity’ intervention. This is not routinely offered to each client, but may be drawn into a treatment plan if it is believed that the client may benefit from this. Whilst this has a number of clinical and economical advantages and can produce very positive results, occasionally this can also present a range of challenges to the step 2 clinician (i.e. the PWP). Remaining focused on the piece of work in hand, working with people who experience more severe difficulties and examining and developing our own skills and knowledge are just some of the challenges faced. An additional challenge is working with a high-volume caseload. This is a key characteristic of the PWP role and whilst this has the advantage of allowing a large number of clients to be offered support, it also presents a challenge in that it requires huge resilience to remain focused and client centred. However, despite the challenges outlined we believe that it is thanks to our services strong emphasis on clinical supervision, training and flexibility that we are able to effectively manage the challenges discussed in this article. The knowledge, skill and understanding we have gained and continue to gain have been fantastic and we hope that the role goes on to feed our interest in mental health further. We would highly recommend this role to others and we believe the experiences we have gained have set us in good stead to continue our careers in an area we feel passionate about.

Contact Details:

toni-marie.robinson@northtyneside-pct.nhs.uk
deborah.hannant@northtyneside-pct.nhs.uk

Extra information:

IAPT Website: http://www.iapt.nhs.uk/
Stepped Care Model:
http://www.nice.org.uk/usingguidance/commissioningguides/cognitivebehaviouraltherapyservice/steppedcaremodels.jsp)
Appendix 1—Standards of proficiency

These standards are for the safe and effective practice of the mental health professions. They are the minimum standards necessary to protect members of the public. They are adapted from the Health and Care Professions Council document for Practitioner Psychologists.

1a Professional autonomy and accountability

Trained Practitioners must:

1a.1 be able to practise within the legal and ethical boundaries of their profession

– understand the need to act in the best interests of service users at all times

– understand what is required of them by their accrediting body

– understand the need to respect, and so far as possible uphold, the rights, dignity, values and autonomy of every service user including their role in the diagnostic and therapeutic process and in maintaining health and wellbeing

– be aware of current UK legislation applicable to their work

– understand the complex ethical and legal issues of any form of dual relationship and the impact these may have on clients

– be able to recognise appropriate boundaries and understand the dynamics of power

– understand the power imbalance between practitioners and clients and how this can be managed appropriately

1b.2 be able to contribute effectively to work undertaken as part of an IAPT team

1b.3 be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, service users, their relatives and carers

– be able to communicate in English to the standard equivalent to that outlined for international applicants

– understand how communication skills affect the assessment of service users and how the means of communication should be modified to address and take account of factors such as age, physical ability and learning ability

– be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others

– be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status

– understand the need to provide service users (or people acting on their behalf) with the information necessary to enable them to make informed decisions
– understand the need to use an appropriate interpreter to assist service users whose first language is not English, wherever possible

– recognise that relationships with service users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility

– be able to select the appropriate means for communicating feedback to clients

– be able to provide psychological opinion and advice in formal settings, as appropriate

– be able to communicate ideas and conclusions clearly and effectively to specialist and non-specialist audiences

– be able to explain the nature and purpose of specific psychological techniques to clients

– be able to summarise and present complex ideas in an appropriate form

1b.4 Understand the need for effective communication throughout the care of the service user

– recognise the need to use interpersonal skills to encourage the active participation of service users

1b.4 Understand the need for effective communication throughout the care of the service user

– recognise the need to use interpersonal skills to encourage the active participation of service users

– be able to initiate, develop and end a client – practitioner relationship

2a Identification and assessment of health and social care needs

Trained Practitioners must:

2a.1 be able to gather appropriate information

2a.2 be able to select and use appropriate assessment techniques

2b.1 be able to draw on appropriate knowledge and skills in order to make professional judgements

– be able to change their practice as needed to take account of new developments

– be able to demonstrate a level of skill in the use of information technology appropriate to their practice

2b.2 be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully

– understand the need to maintain the safety of both service users and those involved in their care
2b.3 be able to maintain records appropriately
– be able to keep accurate, legible records and recognise the need to handle these records and all other information in accordance with applicable legislation, protocols and guidelines
– understand the need to use only accepted terminology in making records

2c Critical evaluation of the impact of, or response to, the registrant’s actions
Trained Practitioners must::
2c.1 be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly
– be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care
– be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user
– recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
– be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately

3a Knowledge, understanding and skills
Trained Practitioners must::
3a.1 know and understand the key concepts of the bodies of knowledge which are relevant to their practice
– understand the structure and function of the human body, relevant to their practice, together with knowledge of health, disease, disorder and dysfunction
– be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process
– recognise the role of other professions in health and social care
3a.2 understand the need to establish and maintain a safe practice environment
– be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force in the workplace, such as incident reporting, and be able to act in accordance with these
– be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation
– be able to select appropriate protective equipment and use it correctly
– be able to establish safe environments for practice, which minimise risks to service users, those treating them, and others, including the use of hazard control and particularly infection control
To receive an application form contact IAPT.director@ncl.ac.uk or phone School of Psychology on 0191 222 7925