

DRAFT 1
UNIVERSITY OF NEWCASTLE

DOCTORATE IN CLINICAL PSYCHOLOGY

PROGRAMME SPECIFICATION

<p>1. Teaching Institution: University of Newcastle-upon-Tyne</p>
<p>2. Programme Title: Doctorate in Clinical Psychology</p>
<p>3. Programme Aims: On completion of the programme of study, graduates will:</p> <ul style="list-style-type: none">a) be able to work as competent and capable Clinical Psychologists with a range of clients in a range of NHS settings;b) understand and embrace the core purpose and philosophy of the profession;c) be committed to reducing psychological distress and enhancing and promoting psychological well being, through the systematic application of knowledge derived from psychological theory and evidence;d) demonstrate the fundamental acknowledgement that all people have the same human value and the right to be treated as unique individuals;e) demonstrate the ability to work as a reflective, scientist practitioner contributing to and developing the knowledge base through the production and utilization of research findings; andf) demonstrate that they can manage their personal professional development.
<p>4. Accrediting Bodies: The Programme is accredited by the British Psychological Society.</p>
<p>5. Learning Outcomes:</p> <ul style="list-style-type: none">a) Develop the necessary generic skills, knowledge and values to have working alliances with a range of clients, (including individuals, carers or

services) in order to carry out psychological assessment, develop a formulation based on psychological theories and knowledge, carry out psychological interventions, evaluate their work and communicate effectively (with clients, referrers and others, orally, electronically and in writing). (A,B,C).

- b) Develop the skills, knowledge and values to work effectively with systems relevant to clients, including services and user-led systems and other elements of the wider community (A,B).
- c) Develop the skills, knowledge and values that are necessary to work effectively with clients from a diverse range of backgrounds, understanding and respecting the impact of difference and diversity upon their lives (B,D).
- d) Develop the skills, knowledge and values that are necessary to work effectively in a range of indirect ways to improve psychological aspects of health and healthcare (A, C).
- e) Develop the skills, knowledge and values that are necessary to conduct research that enables the graduate and the profession to develop the knowledge base and to monitor and improve the effectiveness of the work done (E).
- f) Develop in trainees the necessary skills in managing their own personal development – including self-care, critical reflection and self awareness – that enable the above to take place and that assist in the transfer of knowledge and skills to new settings and problems (F).

6. Teaching and Learning Strategies and Methods:

- a) Subject knowledge and understanding(including cognitive skills)
 - Didactic sessions used to establish a learning framework for the development of understanding, to explain complex concepts, and to provide early insight into the relationship between theory and practice.
 - Small group work, to provide opportunities for interaction, discussion and clarification in support of learning in selected areas.
 - Guided self-study, supported by the provision of targets and direction in Module Guides, to expand knowledge and understanding through active and task-based learning.
 - Individual and group tutorials, to develop individual and collective understanding and to plan for practical tasks.
 - Direct participation in, and reflection on, the formal activities that make up the research cycle such as the project conferences, protocol development, peer review, registration procedures.
- b) Practical skills:
 - Problem-oriented learning opportunities, to develop problem-solving, critical reasoning and clinical decision-making skills through evidence-based activities.
 - Video simulations and demonstrations and role play, to teach

communication skills.

- Clinical skills training in the supportive environment of the clinical placements.
- Small group activities, to encourage team work and involvement.
- Written assignments to promote investigative and exploratory study, and to provide the opportunities for self-expression and choice.
- PPD groups, academic tutorials, clinical supervision, and access to buddies and mentors, to help to develop attitudes and promote reflective practice.
- Workshop based preparation for participation in formal activities that are an integral part of the research cycle.

c) Key (transferable) skills:

Skills such as communication, team working, planning, computer literacy and learning how to learn are addressed through an equally wide range of strategies. Modules exist within the syllabus and competencies are defined within placement experience to focus attention on these key skills. Additional to the above methods, shared learning is employed to develop communication and team working skills and needs led experiences on clinical placements fill out the acquisition of key skills. In the conduct of the research assignments, students will also develop competence in computer literacy, numeracy, statistical analysis of data, etc. Workshops, formal didactic teaching sessions, experiential exercises, simulations, and other methods are used to facilitate the acquisition of these key skills. Cutting across all of these strategies are the related methods of assessment which encourage students to demonstrate competence in an area, leading to detailed feedback designed to enhance the key skills in question.

d) An Adult Learning Approach:

Underpinning the above methods, the programme is committed to a student centred, adult learning approach. This features the provision of:

- A motivational context for learning based upon early clinical experience and theory/knowledge application.
- A well-structured, evidence-based, widely transferable core knowledge base, focused upon integrated units of study and delivered by local practitioners and tutors with expertise.
- Clearly articulated learning outcomes and regular learning needs assessments.
- A student-centred approach, which encourages the adoption of a problem-oriented, self-motivating learning style, and promotes active learning through guided reflection, simulations and self study.
- The opportunity for interaction and the exploration of knowledge and its clinical application in small groups (featuring experiential learning, as in drawing out implications for practice).
- The opportunity for choice over some academic and placement learning opportunities.
- Shared decision making (in steering groups, Special Interest

groups and Committees) over all curriculum matters.

- The gradual development of both generic and professional skills is an integral part of the learning framework. Skills appropriate to the stage of trainee development are introduced sequentially in relation to other ongoing activity and a broad strategy (i.e. the competence – capability progression).

7. Mapping the teaching and learning strategies to the programme's objectives and modules:

To Follow

8. Assessment strategy:

a) Subject knowledge and understanding.

Assessment of the underpinning knowledge base is achieved through a combination of oral examination (in relation to seen questions), essays, a critical review paper and research assignments (a further literature review a small scale research project and a larger empirical project). In relation to clinical experience, there are also case studies which require students to integrate theory and practice in relation to their case work.

b) Cognitive skills:

The above methods also assess intellectual performance, explicitly the students' ability to engage critically with the literature and to reflect effectively on their clinical experience. Assessments focus on comprehension, interpretation, exploration, abstraction and the application of theory to practice, analysis (recognising assumptions connecting elements etc) synthesis (generating unique combinations of theoretical points, planning, etc) and evaluation (the capacity to cognitively judge the value of material).

c) Practical skills

A range of assessments are also used to evaluate the acquisition of competence in relation to clinical experience in particular. This includes the aforementioned case studies, supervisors rating of competence and the Trainees competence checklist.

d) Key skills

Core competencies are assessed within these various assessment techniques. It should also be noted that informal assessment, evaluation and feedback occurs regularly within the training workshops. These frequently involve trainees demonstrating their competencies in relation to different topic areas (effective communication) in a way that facilitates the teacher in providing corrective feedback. Similarly, on placement, trainees will receive regular feedback on their performance. This accumulates to an overall rating by the supervisor of the trainees' performance (supervisors feedback form).

9. Framework:

The programme is a full time three year duration made up of two parts. Part

one is completed at approximately the half way stage in the course, marked by a Board of Examiners meeting. The remainder of the course represents part two, concluded with viva examinations and a final Board of Examiners meeting. There are no credit arrangements, and every assessed part of the course has to be passed for the student to gain the award. Similarly, all modules must be attended and completed. In addition, trainees attend clinical placements for approximately half of the three year period and are also allocated research and study time.

There are 10 modules within the programme as follows:

1. Foundations of Clinical Psychology
2. Psychological Assessment
3. Psychological Formulation
4. Psychological Interventions
5. Evaluation
6. Research
7. Personal Professional Development
8. Communication and Teaching
9. Service Delivery
10. Year 3 / Specialist Topics

Curriculum and structure:

The relationship between this structure and the intended learning outcomes are mapped above (see section 7). Essentially, module 1, which occupies the first three months or so of the course, provides the essential foundations that enable students to prepare for placement and subsequent curriculum experience.

Upon completion of this module the students will be able to progress the course's over all learning outcomes (for example developing the skills knowledge and values that are necessary to work effectively with clients from a diverse range of backgrounds, etc). Part one of the programme continues this general introductory emphasis, while part two deepens and broadens this understanding adding elements of elective or more specialised learning (for example choice of research topic or of final elective placement).

Innovative features of the Course:

The course team attempts to apply where ever possible the 'reflective educator' approach, which has included a major Delphi study in relation to a revised curriculum and a number of audits and literature reviews designed to guide and strengthen the course.

10. Criteria for admission:

Entry is open to a graduate of any approved University holding an honours degree in psychology or equivalent qualification, as acceptable to the British Psychological Society as a graduate basis for registration. Successful candidates will have obtained a first or upper second class degree in most instances in in the case of a 2:2 qualification will have strengthened their academic profile by obtaining a relevant post-graduate degree. They will have additionally undertaken some relevant paid full time employment after finishing their undergraduate degree. Diversity within the intake is

encouraged although because of NHS funding non-EU citizens are currently not admitted to the programme. We also require that all applicants are fluent in spoken and written English. In terms of equal opportunities, we aim to select for attributes related to effective practice and successful performance on the doctorate, that is potential as both an NHS clinical psychologist and as a post graduate student of the University. Within these parameters, selection otherwise confirms to the equal opportunities policy of the university.

11. Support for students and their learning:

All students are members of the University and therefore have access to excellent infrastructure to support their learning. In addition, they are members of the NHS and can access learning resources on placement.

a) Induction programmes for new or returning students:

The course commences with an induction workshop which includes introductions to the main staff members and elements of the programme together with introductions to the peer group. Returning students are provided with a personalised programme, often allowing part-time completion of the programme. In addition, there is a degree programme handbook and other supporting handbooks for each of the main areas of the course (i.e. placements, syllabus and research).

b) Study skill support:

As outlined earlier, there is a systematic programme of training in the key study skills. A strong example of this is the personal professional development module, which enables students to gain competence in reflecting on their own practice, embracing several core professional skills.

c) Academic support:

Each student is allocated to an academic (personal) tutor who provides them with academic support throughout the three years of the programme. In addition, students will have significant support from other members of the staff group as necessary (for example a supervisor for their small and larger scale research projects; a clinical tutor who will support them in relation to their placements). These individuals will provide students with opportunities to discuss and review progress, review options and in other ways reflect upon their development.

d) Pastoral support:

As touched in c. above, the academic tutor provides students with pastoral support. This is seen as one of several support options within our personal professional development system. This includes the University's student counselling service, the graduate school office, and, as employees of the NHS, access to occupational health services. The NHS manager of the students is available on a regular basis to provide additional support and to help students clarify needs and support options.

e) Support for special needs:

The University has a disability unit and students may access it's support. Arrangements have been made in the past to accommodate disabled students fully to the programme and this emphasis will continue. We are also able to arrange part-time registration for those students who have childcare responsibilities.

f) Learning resources:

The primary resource available to students are the members of staff, informed by their research, training and scholarship. They are supported by administrative secretarial and technical staff. NHS staff provide an additional major learning resource for the students on placement and during the academic syllabus. A variety of material resources exist to support learning, including books, journals, videos, and CD Roms. In addition to the resources held within the programme, the University has two main libraries which provide an excellent, centrally funded service for supporting student learning. It was the first University Library to receive a charter mark for excellence (1995, reviewed 1998).

The University computing service provides comprehensive computing facilities for all students that several open access sites of campus. The Course has its own small cluster which is within the course suite.

12. Methods for evaluating and improving quality and standards:

a) Workshop and module reviews:

These occur routinely and formally through the curriculum co-ordinating committee.

b) Placement reviews:

These are monitored continually by clinical tutors and students. As per module reviews, formal reviews of provision take place through the curriculum co-ordinating committee. In addition, there are annual review meetings with each year group. Module leaders and clinical tutors review provision in the light of feedback from colleagues and students. In addition to these mechanisms, there is a monthly meeting of all the staff and an annual meeting with all colleagues who manage and review provision.

c) Programme reviews:

These are reviewed regularly by the Board of Studies.

d) Board of Examiners:

There are two meeting per year involving up to four external examiners and this facilitates quality control and enhancement. External examiners reports contribute to this process and are tabled formally at the curriculum co-ordinating committee and reported to the graduate school committee and the faculty teaching and learning committee.

e) Accreditation reports:

The programme is normally reviewed every five years by the professional accrediting body (British Psychological Society).

f) Other reviews:

In addition, the programme has been reviewed by the funding NHS body (Workforce Development Confederation), by the quality assurance agency, by the national audit office and through other occasional review mechanisms (for example the transparency review within the University). There are additional ad hoc reviews such as the recent Delphi study which took account of the perspectives of another of stake-holders regarding the quality and standards of the programme.

g) Graduate surveys:

In addition to the Delphi study, from time to time the programme surveys those who are one or two years post-qualification in order to enhance standards and maintain their currency. All these forms of assessment and review are fed back routinely through relevant committees and ultimately to the curriculum co-ordinating committee. (For example staff student committee and liaison committee). There is also the subject review system of internal quality control and enhancement within the University.

13. Regulation of assessment:

a) Marking:

Assessed material is graded as either pass, distinction or fail, benchmarked against the normal percentage mark ranges used within the University (e.g. a pass mark represents a percentage of between 50 and 69%).

b) Course requirements:

All students must pass all assessed work in both parts of the programme. Part 1 must be passed before proceeding to Part 2. There is no compensation across items of assessed work.

c) Marking schemes:

All assessed work is graded in relation to topic specific marking grids (e.g. essay and research grids). Each grid sets out qualitatively the criteria for each grade against a number of relevant dimensions for that assessed work (e.g. literature searching in relation to essays). These schemes are published within the relevant handbooks.

d) Role of External Examiner:

Because of the demands of conducting 20 vivas, there are currently 4 external examiners. These are distinguished members of the clinical psychology academic community, appointed by FTLC. The role of the externals is to act as a moderator, attending the Board of Examiners and reporting to the University on the comparability of standards.

14. Health Warning and Sources:

This specification provides a concise summary of the main features of the programme and of the learning outcomes that a typical student might reasonably be expected to achieve if she/he takes full advantage of the learning opportunities provided. The accuracy of the information contained is reviewed by the University and may be checked by the quality assurance agency for higher education.

15. Sources of information include:

The University prospectus
The University and Degree Programme Regulations
The Course Handbook
The Placement Handbook
The Course Syllabus
The Research Models and Methods Handbook

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