DOCTOR OF CLINICAL PSYCHOLOGY

Programme of study for the degree of Doctor of Clinical Psychology

1. The following may be accepted as a candidate for the degree of Doctor of Clinical Psychology:

   Graduates of an approved university or holders of a recognised degree awarded as a result of study at an approved institution other than a university, or holders of any other qualification approved for this purpose by the Senate, provided that the programme of study in the subject for which the qualification has been awarded has extended over not less than three years full-time study or equivalent part-time study and is acceptable to the Senate as being an adequate preparation for the research proposed, and which is recognised by the British Psychological Society as meeting the necessary qualifications for the Graduate Basis for Chartered Membership of the British Psychological Society.

2. The programme commences in October and is designed for approved graduates with a good honours degree in Psychology, either as a single subject or as a principal subject in a combined studies programme. Candidates are also required to hold for the duration of the programme a contract with the Leeds Teaching Hospitals NHS Trust. The scheme is offered by the School of Medicine, Institute of Health Sciences, Academic Unit of Psychiatry and Behavioural Sciences. Initial enquiries concerning applications for admission should be made to the National Clearing House for Clinical Psychology Courses, University of Leeds.

3. Candidates will in the first instance be accepted as a Provisional candidate for the degree of DClinPsychol.

4. Candidates pursuing the programme of study are required to observe relevant procedures in relation to ethical issues.

5. Candidates accepted will proceed by attending a programme of advanced study which will include:

   (a) Formal instruction in the following subjects: approximately 700 hours teaching
       - Foundations of Practice I
       - Foundations of Practice II
       - Foundations of Practice III
       - Introduction to Personal Development
       - Continuing Personal Development
       - Consolidating Personal Development
       - Professional Issues I
       - Professional Issues II
       - Professional Issues III
       - Introduction to research methods
       - Advanced research methods: design and analysis
       - Thesis: writing up and viva preparation

   (b) Five clinical placements; supervised and assessed experience of the application of psychological techniques of investigation and treatment.

   (c) Three pieces of research: a systematic case study; a service evaluation project; and a psychological investigation of clinical relevance presented in the form of a thesis.

Examinations and Assessments

6. Year 1

   During the first year of the programme progress will be assessed by:
   Two essays of no more than 5,000 words each. The subjects of the essays will be:
The evidence base for clinical practice 1 (to be submitted by the end of semester 1)
The evidence base for clinical practice 2 (to be submitted by the end of semester 2)

A presentation and a written report of a problem based learning exercise (To be submitted by the end of July in the first year of the programme).

Two periods of supervised clinical practice.
A systematic case study (5,000 words maximum) (to be submitted by the end of October in the second year of the Programme, the work having been completed by end of the second clinical placement).

During the first year of the programme candidates are required to submit a research proposal for their research thesis in September which is reviewed by a research panel by the end of September, and formative feedback given.

7. **Year 2**

In the second year progress will be assessed by:

One assessed essay to be submitted by the end of the second semester (5000 words maximum), the subject of the assessed essay will be:

Professional Issues

Two periods of supervised clinical practice.
A report of a Service Evaluation Project (5,000 words maximum) (to be submitted by the end of November in the third year of the programme with the work having been completed by the end of the second period of supervised clinical practice in Year 2).

During the second year of the programme candidates are required to submit a report on their progress in their research thesis (thesis transfer document). The thesis transfer documentation is to be submitted by early March and will comprise:

(a) A literature review (5000 words maximum) pertinent to the chosen topic of study that critically defines the topic area and the rationale for the study
(b) A critical review of the methodology to be used in the research (3000 words maximum) to include a justification for selecting the method and specification of the proposed data analysis
(c) A progress report (2000 words maximum) to include a commentary on progress with respect to the application to ethics committees, recruitment to the study, a timetable for the project, and an audit of the PGR’s skills and needs.

This will normally be assessed by the end of April by means of an oral examination (transfer viva).

8. **Year 3**

In the third year of the programme PGRs will submit:

One assessed essay (5,000 words maximum) by the end of the second semester on the subject:

A critical review of an area of advanced clinical practice in clinical psychology, highlighting theory-practice links

One period of supervised clinical practice.

A thesis on an empirical investigation of a substantive problem in the field of clinical psychology (40,000 words maximum).

**Progression and Programme Failure**

9. PGRs whose assessed essays, evaluation of the problem based learning exercise, systematic case study and service evaluation project fail to satisfy the examiners at the first attempt may normally be permitted to resubmit the assessment for further examination on one occasion only within 3 months of the date on which they were informed of the failure.

10. PGRs are required to satisfy the examiners in five periods of supervised clinical placements. The periods of supervised clinical placements will be assessed by ratings and reports from the clinical supervisor submitted at
the end of each period of supervised practice. Reports of clinical competence will be considered by the Board of Examiners.

11. PGRs whose performance on a supervised clinical placement fails to satisfy the examiners at the first attempt are not permitted to repeat the period of supervised clinical placement. PGRs will be required to demonstrate their ability on the competencies required on the subsequent supervised clinical placement.

12. Candidates must present a thesis (40,000 words maximum) on the subject of his/her research and satisfy the examiners as specified in Ordinance X and its associated Regulations. In exceptional circumstances candidates may, with the approval of their supervisor, include Appendices (up to 20,000 words maximum) which will not be counted towards the overall word length of the thesis.

13. Except with the special permission of the relevant committee, every candidate is required to submit his/her thesis for examination for the degree of Doctor of Clinical Psychology by no later than the end of the fourth year after his/her entry upon the approved course of full-time study and research.

14. Following examination of the thesis, the examiners will be asked to make one of the following recommendations:
   (a) Pass.
   (b) Pass (subject to the correction of ‘editorial and presentational corrections’ or ‘minor deficiencies’): these corrections must be made within four or twelve weeks respectively from the date of the oral examination. The internal examiner is responsible for ensuring that ‘editorial and presentational corrections’ or minor deficiencies are corrected by the candidate. The degree will not be awarded until confirmation that the corrections have been completed is received.
   (c) Referral (see 15 below)
   (d) Fail: the candidate has no further opportunity for submission.

15. If the thesis is not considered to be of sufficiently high standard, then on the recommendation of the examiners if there is evidence of the potential of a successful D.Clin.Psychol. submission the candidate will be granted permission to resubmit the work in a revised form for the degree of D.Clin.Psychol. within a period of eighteen months, on one occasion only and on payment of an additional fee.

16. Candidates will normally be deemed to have failed the Course and be asked to withdraw from the programme if they:
   (1) fail any two pieces of work from the following:
       Assessed essays (4)
       Evaluation of problem based learning exercise
       Systematic Case Study
       Service Evaluation Project
       Supervised clinical placements;
   or
   (2) fail the thesis transfer viva;
   or
   (3) fail to satisfy the examiners in the Research Thesis viva. There is no opportunity for re-examination where the examiners recommend a research degree thesis is failed;
   or
   (4) commit gross professional misconduct or cease to have an appropriate clinical contract with the NHS.

17. The recommendation of the examiners is subject to confirmation by the Graduate Board’s Examinations Group which will consider the examiners’ report normally at the next meeting.
18. The award of the Doctor of Clinical Psychology confers (i) eligibility for entry as a clinical psychologist into the register of the Health and Care Professions Council, and (ii) eligibility for Chartered Membership of the British Psychological Society.

Learning Outcomes / Transferable Key Skills / Learning Context / Assessment for the degree of DClinPsychol

1. Learning Objectives and Outcomes

The thematic learning objectives and elemental learning outcomes

Clinical Practice

The thematic learning objectives are to enable the PGR to:

1. Demonstrate professional attitudes and behaviour (including an awareness of power and the socio-political context) as well as a range of personal development strategies.
2. Prepare and engage with the supervisory process as both supervisee and supervisor.
3. Facilitate and maintain therapeutic engagement and working alliances with service users, carers, teams and services; including managing challenging situations.
4. Conduct assessment interviews and select, administer and interpret psychometric and idiosyncratic assessments, including risk assessment.
5. Develop, implement and communicate formulations with service users, carers, teams and services; including appropriate re-formulations.
6. Use theory-practice links to develop and implement interventions within different theoretical models adapted to individual needs.
7. Demonstrate the capacity to evaluate processes and outcomes at the organisational and systemic levels, as well as the individual level.
8. Communicate effectively with audiences who have a wide range of cognitive ability, sensory acuity and modes of communication; including giving clear and accurate written and verbal reports of work undertaken.
9. Plan formal and informal teaching sessions appropriately, facilitate the co-operative engagement of the training group and monitor effectiveness.
10. Demonstrate knowledge of the organisational setting and the need to work collaboratively with other professionals and colleagues, including demonstrating qualities of leadership.

The learning outcomes disaggregated from the above are as follows:

Ref. objective 1: PERSONAL AND PROFESSIONAL DEVELOPMENT

The PGR should be able to:

a) Demonstrate professional attitudes and behaviour (reliable, responsible and open to learn; exhibiting an ethical framework for all aspects of the work; ensuring informed consent underpins all contacts)
b) Manage an appropriate case and workload (demonstrates increasing autonomy in taking responsibility for this; is able to prioritise; recognises limits of own competence and requests assistance when in difficulty)
c) Recognise and understand inherent power imbalances and how these may be minimised; understand the impact of one’s own value base upon clinical practice
d) Work effectively with difference, diversity and social inequalities in individuals’ lives
e) Develop resilience; including a continuous commitment to develop self-knowledge and self-awareness; the capacity to recognize and act accordingly when own fitness to practice is compromised.

Ref. objective 2: SUPERVISION

The PGR should be able to:
DOCTOR OF CLINICAL PSYCHOLOGY

a) Prepare and engage in the supervisory process (develop a shared understanding of the roles of both supervisor and supervisee; asking for/provision of relevant literature; giving and receiving of feedback and constructive criticism; ability to engage in collaborative discussion)
b) Demonstrate an increasing ability to discuss both content and process within clinical work
c) Utilise supervision to discuss support issues and needs with a clear awareness of the boundaries between supervision and personal therapy (i.e. that the supervisor cannot and should not act in the role of personal therapist)
d) Develop the skills to provide supervision at an appropriate level within own sphere of competence (including contracting, discussion of boundaries, confidentiality and power, supervision models and feedback methods, power)

Ref. objective 3: THERAPEUTIC ENGAGEMENT AND WORKING ALLIANCES
The PGR should be able to:
a) Facilitate therapeutic engagement and a secure base, demonstrating empathy, curiosity and a respectful attitude with service users, carers, colleagues and services
b) Facilitate mutual understanding using accessible language; demonstrate knowledge and application of anti-oppressive practice
c) Show an awareness of structure, boundary and termination issues and application in practice
d) Exhibit skills in managing challenging situations with service users, carers, teams and services
e) Demonstrate an increasing understanding and ability to increase sphere of influence through engagement with different levels of organisational systems (service users, teams, external agencies)

Ref. objective 4: PSYCHOLOGICAL ASSESSMENT
The PGR should be able to:
a) Conduct assessment interviews (including taking a detailed history); select appropriate further assessment procedures where necessary (including observation, or gathering information from others)
b) Administer and interpret psychometric assessments; understand key elements of psychometric theory and appropriate utilisation of this knowledge (i.e. awareness of limitations / ethical implications) in conjunction with a good working relationship
c) Administer and interpret idiosyncratic assessments (with awareness of social context and organisational structure)
d) Conduct appropriate risk assessment and use this to guide practice

Ref. objective 5: PSYCHOLOGICAL FORMULATION
The PGR should be able to:
a) Develop collaborative psychological formulations informed by theory and evidence about relevant individual, systemic, social, political, cultural and biological factors, in a way that helps service users better understand their experiences
b) Construct formulations adapted to circumstance and context a) within an explicit theoretical model and b) utilising theoretical frameworks with an integrative, multi-model perspective as appropriate; reformulate as required
c) Ensure that formulations are communicated in accessible language, culturally sensitive and non-discriminatory in terms of, for example, age, gender, disability and sexuality
d) Lead on the implementation of formulation in services and utilizing formulation to enhance teamwork, multi-professional communication and psychological-mindedness in services.

Ref. objective 6: PSYCHOLOGICAL INTERVENTIONS
The PGR should be able to:
a) Demonstrate knowledge of the empirical basis of treatments/interventions and practice guidance frameworks such as NICE and SIGN; critically appraise relevant literature, including an understanding of social approaches to intervention (e.g. community, critical, social constructionist perspectives)
b) Make theory-practice links; demonstrate the ability to utilise multi-model interventions, adapting interventions to individual needs

c) Conduct interventions a) related to secondary prevention and the promotion of health and well-being; b) in a way which promotes recovery of personal and social functioning as informed by service user values and goals.

d) Have an awareness of the biopsychosocial model and the impact and relevance of psychopharmacological and other multidisciplinary interventions

e) Intervene systemically with carers and professionals e.g. implementation of care plans

f) Demonstrate an awareness of the limitations of psychological interventions, assess when further intervention may not be appropriate and communicate this sensitively

Ref. objective 7: EVALUATION AND RESEARCH
The PGR should be able to:

a) Utilise and interpret appropriate individual measures to evaluate outcome (e.g. sessional and outcome measures)

b) Utilise, comply and contribute to departmental evaluation and auditing procedures

c) Demonstrate the capacity to evaluate processes and outcomes at the organisational and systemic levels, as well as the individual level

d) Demonstrate an awareness of outcomes frameworks in wider use within national healthcare systems and an understanding of clinical governance principles

e) Conduct research (SCS or SEP) in respectful collaboration with stakeholders and within ethical and governance frameworks (e.g. BPS, HCPC, universities)

Ref. objective 8: COMMUNICATION
The PGR should be able to:

a) Give clear and concise verbal and written reports of work undertaken in a timely manner

b) Develop their own individual style of communication and confidence in this

c) Adapt their style of communication to people with a wide range of levels of cognitive ability, sensory acuity and modes of communication

d) Understand the process of communicating effectively through interpreters and having an awareness of the limitations

e) Understand the process of providing expert psychological opinion and advice, including the preparation and presentation of evidence in formal settings.

Ref. objective 9: TEACHING AND TRAINING
The PGR should be able to:

a) Prepare and deliver teaching and training flexibly, in a way which takes into account the needs and goals of the audience (e.g. appropriate use of language, use of interactive methods, provision of handouts and facilitative training materials)

b) Monitor and evaluate effectiveness though self-appraisal and structured feedback mechanisms

Ref. objective 10: ORGANISATIONAL AND SYSTEMIC INFLUENCE AND LEADERSHIP
The PGR should be able to:

a) Demonstrate an awareness of the legislative and national planning contexts for service delivery and clinical practice and an understanding of the organisation in which the placement is based

b) Work with service users and carers to facilitate their involvement in service planning and delivery

c) Indirectly influence service delivery through working effectively and collaboratively in multidisciplinary and cross-professional teams and consultancy

d) Demonstrate leadership qualities e.g. being aware of and working with interpersonal processes, proactivity, influencing the psychological mindedness of teams and organisations, contributing to and fostering collaborative working practices within teams
e) Recognise malpractice or unethical practice in systems and organisations and know how to respond to this; be familiar with 'whistleblowing' policies and issues.

**Personal and Professional Development**

The thematic **learning objectives** for this theme are grouped. They are to enable the PGR to:

**Power and socio-political context issues**
1. Understand the importance and relevance of issues to do with power and social inequalities, on both a personal and professional level
2. Work effectively with difference and diversity

**Personal development**
3. Show an active continuous commitment to develop self-knowledge and self-awareness

**Professional attitudes and behaviour**
4. Show a consistently open attitude towards all aspects of learning and development
5. fulfil the employer’s expectations regarding professional behaviour, including active engagement in all supervisory arrangements
6. demonstrate an ethical framework for all aspects of work, including a working knowledge of relevant practice guidelines, policies and legislation
7. work collaboratively and constructively with other professionals, colleagues and users of services
8. behave respectfully to others at all times
9. prepare for professional employment, having clear aims and objectives for continued professional development
10. manage a workload, including multi-tasking, and show a clear recognition of the limits of individual competence.

The **learning outcomes** disaggregated from the above are as follows:

**Ref. objective group 1: Power and socio-political context issues**
The PGR should be able to:

a) recognise and understand the effects of power imbalances, and how they can minimised
b) critique a range of theoretical models and related practices for the ways in which power imbalances and social inequalities are maintained and reproduced
c) understand the roots of oppression and its role in the aetiology of psychological disturbance, and the consequential need to develop anti-oppressive
d) recognise and work with difference and diversity, and commit to developing cultural (in the broadest sense, including e.g. issues to do with class, gender, dis/ability, ethnicity, sexuality) competency in all aspects of professional life
e) apply knowledge and understanding in all these areas in an increasingly sophisticated manner, and in increasingly complex situations

**Ref. objective group 2: Personal development**
The PGR should be able to:

a) experiment with a variety of personal development strategies, and explore new ways of interacting with others
b) engage with the personal and professional development curriculum and goals, maintaining an open attitude
c) build and develop strategies to manage the emotional and physical impact of the work, and seek out help and support when required
d) invite critical comment and respond in a constructive manner

e) monitor their own fitness to practice, recognise when this is compromised and take steps to manage this risk as appropriate

**Ref. objective group 3: Professional attitudes and behaviour**
The PGR should be able to:
a) demonstrate a continuing openness and keenness to learn, to seek knowledge and develop new skills
b) demonstrate active participation in all supervisory relationships and arrangements, including negotiation, preparation, utilisation and recording of sessions
c) manage own learning needs and develop strategies for meeting them
d) demonstrate reliability, conscientiousness, and an ability to meet deadlines
e) apply expertise in judging the consequences, for self and others, of maintaining / relaxing boundaries in all professional relationships
f) approach conflict situations with thoughtfulness, and from a constructive stance
g) consistently consider ethical issues and apply these considerations in complex clinical contexts (e.g. the process of informed consent)
h) understand and put into practice the boundaries and limitations of confidentiality
i) demonstrate knowledge of professional practice guidelines
j) understand the importance and have knowledge of relevant local and national policies, procedures, guidelines and legislation, and their relevance to professional practice
k) work collaboratively and constructively with other psychologists, other professionals, and users of services, respecting diverse viewpoints
l) show a respectful and valuing attitude to all others
m) demonstrate knowledge and understanding of employment practices and related issues in host organisation (e.g. time keeping, record keeping, meeting deadlines, managing leave, health and safety and good working relationships)

**Ref. objective group 4: Professional autonomy and professional limits**
The PGR should be able to:
a) negotiate for and manage an appropriate case and workload at different stages of training, and prioritise the caseload effectively
b) recognise the extent and limitations of personal and professional competence and seek out timely and appropriate consultation and assistance when required
c) develop the ability to multi-task
d) understand the transferable skills developed during training and how these can be of values to employers, colleagues and service users.

**Research**

The thematic **learning objectives** are to enable the PGR to:

1. identify and devise an original research question set in the context of existing research and theoretical models, and current priorities and opportunities
2. identify, access, collect, record, manage, analyse and synthesise information, using an appropriate research method and solving problems that arise during the process
3. be aware of the strengths and limitations of different research designs, and be able to critically appraise their own findings and those of others
4. present and defend ideas and outcomes, using appropriate media
5. demonstrate an understanding of the ways in which research may be communicated to enhance the impact on practice and support the learning and teaching of others
6. understand and comply with relevant legal, ethical, health and safety issues
7. comprehend the distinctions between methods appropriate to theoretical and service research, and the political, social and cultural context within which these fall
8. demonstrate the skills needed to interact / collaborate with participants, colleagues and organisations during the research process
9. appreciate the utility of research in developing clinical practice, and the factors that influence change in individuals and organisations
10. manage a research project using the necessary equipment and techniques, to meet specified outcomes within the time allocated.

The learning outcomes disaggregated from the above are as follows:

Ref. objective 1 the PGR should be able to:
   a) identify an original topic for research and /or original problem to be tackled
   b) formulate the topic or problem into a research question(s) that may be answered
   c) devise a research method appropriate for answering the research question
   d) carry out a research project to completion
   e) set research in the context of previous research and knowledge, and current priorities and opportunities
   f) relate one’s own findings to existing research and model development
   g) develop theoretical concepts.

Ref. objective 2 the PGR should be able to:
   a) identify and access appropriate library and/or archive-based information
   b) collect, record and manage information and/or findings
   c) analyse and synthesise information and/or findings
   d) recognise and demonstrate originality and independent thinking
   e) demonstrate practical and analytical skills
   f) demonstrate problem-solving skills.

Ref. objective 3 the PGR should be able to:
   a) be aware of the strengths and limitations of different research designs including quantitative and qualitative approaches
   b) critically evaluate one’s own findings and those of others.

Ref. objective 4 the PGR should be able to:
   a) present and defend ideas and outcomes of research using appropriate media such as oral presentations, posters, published documents, conference contributions, progress reports etc.
   b) present research outcomes in the form of a thesis and defend them at viva.

Ref. objective 5 the PGR should be able to:
   a) understand the ways in which research may be communicated to enhance the impact on practice
   b) support the learning and research of others.

Ref. objective 6 the PGR should be able to:
   a) understand relevant ethical and legal issues and the importance of maintaining the well-being of research participants
   b) appreciate and comply with the systems for ensuring ethical research practice e.g. local research ethics committees and research governance
   c) understand and act upon relevant health and safety issues e.g. personal safety when data collecting
   d) demonstrate responsible working practice.
DOCTOR OF CLINICAL PSYCHOLOGY

Ref. objective 7 the PGR should be able to:
   a) appreciate the distinctions between theoretical and service research, audit and case studies, and the methods appropriate for each
   b) demonstrate an understanding of the political, social and cultural context of research.

Ref. objective 8 the PGR should be able to:
   a) interact appropriately with participants, colleagues and organisations during the research process
   b) collaborate successfully with other researchers from the same or different organisations.

Ref. objective 9 the PGR should be able to:
   a) appreciate the clinical implications of one’s own and other’s research
   b) understand the role of research in changing practice and the other factors influencing change in individuals and organisations
   c) appreciate the utility and limitations of research evidence for clinical practice.

Ref. objective 10 the PGR should be able to:
   a) plan and organise a programme of research so as to submit his/her thesis within the standard period of study
   b) show flexibility and adaptability in managing a research project
   c) appreciate and manage relationships with supervisors, team members and others
   d) use IT packages and techniques to carry out relevant tasks
   e) manage own learning by e.g. identifying personal strengths and training needs, setting objectives, drawing upon/using sources of support, attending relevant training events and recording and reflecting on progress.

2. Assessment
Achievement will be assessed by the examination of the candidate’s thesis by an internal and external examiner appointed for that purpose, and performance under oral examination. It will also include the assessment of achievement by a variety of methods in accordance with the learning outcomes of the taught and clinical components specified for the programme. Assessment of the thesis will involve the achievement of the candidate in:

- evidencing an ability to conduct original and independent broad and in-depth enquiry within the discipline or within different aspects of the area of professional/clinical practice normally leading to published work;
- drawing on and/or developing a range of research techniques and methodologies appropriate to enquiries into the discipline/area of professional practice;
- demonstrating independent critical ability in the application of breadth and depth of knowledge to complex issues within the discipline or specialist area of professional/clinical practice;
- drawing on a range of perspectives on the area of study;
- evaluating and criticising received opinion;
- making reasoned and well-informed judgements on complex issues within the specialism whilst understanding the limitations on judgements made in the absence of complete data
- the written style and overall presentation of the thesis.