DClinPsy assessment domains for use with coursework assignments

The below is a codification of the Current BPS & HCPC standards (2014 & 2015)

And the Baron & O'Reilly (2011; 2012) job analysis.

1. **'Gathering' - Collating information and knowledge for specific purpose**

    Locating appropriate and relevant information and drawing on own existing knowledge to address a specific issue or situation.

    This domain has two sub-components, both of which should be assessed:

    A. The trainee must demonstrate that they can construct and execute an effective information gathering strategy
    AND

    B. We would expect the trainee to demonstrate that they have drawn upon all of the following types of information as appropriate:

    1. Research studies.
    2. Clinical assessments.
    3. Ethical principles.
    4. Professional practice guidance.
    5. NHS policies etc.
    6. Contextual and diversity information.

2. 'Analysing' -Critical analysis & synthesis

In terms of the relevant issue, weighing up & critically analysing & synthesising everything from collated information and knowledge

> E.g. Conducting an audit; metasynthesis; qualitative research; quantitative research; interpreting assessment information.

A. Skills in critiquing – including understanding arguments and concepts of logic, ability to identify assumptions.

B. Skills in synthesising & organising.

C. The generation of new knowledge as a result of the above.

D. Skills in transferring knowledge between contexts, adapting and applying it appropriately.

E. Skills in drawing conclusions.

F. Being selective, specific and succinct.

3.   'Deciding' - Strategy for application

Developing a strategy to practically apply the outcome of the synthesis to a specific situation and showing how this strategy follows from the synthesis. This may include a plan for conducting a programme of research, or using an integrative or eclectic approach that would be used in the planned intervention. This domain relates specifically to making the plan, not its implementation.

This domain should be evidenced across a range of specific situations during training, including:

A. Recommendations for future practice or research
B. Deciding on a course of clinical intervention or research design
C. Deciding on a method & plan to enable learning in others
D. Influencing the development of organisational policies and procedures.

4. 'Doing' - Performance skills

Implementing a strategy in a real environment. This domain concerns the concrete application / performance of specific techniques and (micro) skills.

Across training these will include (but are not limited to) the following:

A. Conducting psychometric tests.
B. Specific therapeutic techniques.
C. Structured assessments.
D. Assessment of context.
E. Conducting risk assessment.
F. Teaching skills & presenting skills.
G. Supervision skills (giving and receiving).
H. Leading team discussions.

5.   **'Responding' - Responsive to impact & learning from experiences**

Trainee seeks out and is responsive and sensitive to the effect of his / her own actions & to new information. S/he shows learning from this through adapting her / his own future behaviour.

This domain has six sub-components, all of which should be assessed:

A. An awareness of self and its impact on the work
B. Ability to pro-actively and formally evaluate work and interactions on an ongoing basis and be responsive to these evaluations.
C. Ability to critically reflect in the moment and take action as a result of the reflection.
D. Ability to critically reflect after an event and take action as a result of these reflections.
E. Ability to generalise learning from specific situations and apply this in other situations or more broadly.
F. Seeking out & taking responsibility for personal development and learning opportunities.

6. 'Communicating' - Communicating information effectively

Communicating information effectively to the intended audience, adapting style, delivery and content as appropriate (but NOT the choice of strategy).

Evidence for this domain across training should cover as a minimum all of the sub-domains below:

A1. Verbal mode one-to-one	A2. Verbal mode small group	A3. Verbal mode large group
B1. Visual mode one-to-one	B2. Visual mode small group	B3. Visual mode large group

C. Written mode to
   1. Professionals
   2. Academics
   3. Lay adults (including people with disabilities)
   4. Children (including people with disabilities)

7.   **'Interacting' - Interpersonal skills & collaboration**

These are the transferable skills that underpin interactions with others.

This domain has five sequential sub-components, all of which should be assessed:

A. Ability to be warm and engaging
B. To always listen, be respectful and take account of views and goals of others. Show an awareness and use of power when doing this.
C. Is able to understand (and if necessary tolerate and contain) the position of the other person (empathy) whilst maintaining an appropriate professional demeanour and boundary.
D. Ability to assert self and use skills of negotiation to influence others, manage conflict and work with dynamics.
E. Organising / leadership in terms of finding the most efficient ways of working together

8.   **'Organising' - Organisational skills**

Using organisational skills in a proactive way to process and prioritising disparate demands and tasks to achieve objectives in a timely fashion.

NB: Positive evidence does not need to be collected for this domain when marking assignments, but substantial negative evidence (i.e. that the trainee lacks competence in this domain) is a criterion for failure in all assignments.

9.   **'Knowing' - Demonstrating Essential Knowledge**

The trainee is able to show the required essential knowledge of clinical psychology theory, evidence and best practice that can be applied to their own learning and practice.

NB: Positive evidence does not need to be collected for this domain when marking assignments, but substantial negative evidence (i.e. that the trainee lacks competence in this domain) is a criterion for failure in all assignments.

The domain includes the following:

1. An awareness of how to access policy and practice guidance when needed.
2. A good knowledge of the evidence base for the efficacy of pan-theoretical factors in interventions with people experiencing psychological distress.
3. Consistent familiarity and critical appreciation of NHS guidance in specific areas (such as NICE) where working clinically.
4. A clear understanding of the professional role of a clinical psychologist, including understanding the need and value of undertaking translational (applied and applicable) clinical research post-qualification.
5. Understanding the process of providing expert psychological opinion and advice, including the preparation and presentation of evidence in formal settings.
6. Awareness of the legislative and national planning contexts for service delivery and clinical practice.
7. Understanding quality assurance principles and processes including informatics systems.
8. Being familiar with 'whistleblowing' policies and issues.
9. Familiarity with the DCP code of conduct and the HCPC Standard of conduct, performance and ethics for students.
10. Understanding the 'recovery of personal and social functioning' agenda and the debates surrounding it.
11. Understanding of key elements of psychometric theory which have relevance to psychological assessment and evaluation, including but not limited to:
    i.   effect sizes
    ii. indices of change
    iii. reliable change scores

    iv. sources of error and bias
    v. base rates
    vi. limitations

12. An awareness of
    i. the outcomes frameworks in use within national healthcare systems,
    ii. the theory underlying these, and
    iii. the evidence base underlying such outcomes monitoring (relating to accessibility, acceptability, clinical effectiveness and efficacy)

13. Knowing the values of both evidence based practice and practice based evidence.

14. Understanding the process of communicating effectively through interpreters and having an awareness of the limitations thereof.

15. Understanding the emotional impact of change on individuals and groups.

16. Understanding of change processes in service delivery systems.

17. Required knowledge of mandatory training issues, including:
    i. De-escalation
    ii. Information governance
    iii. Basic life support
    iv. Safeguarding of children
    v. Safeguarding of vulnerable adults
    vi. Moving and handling

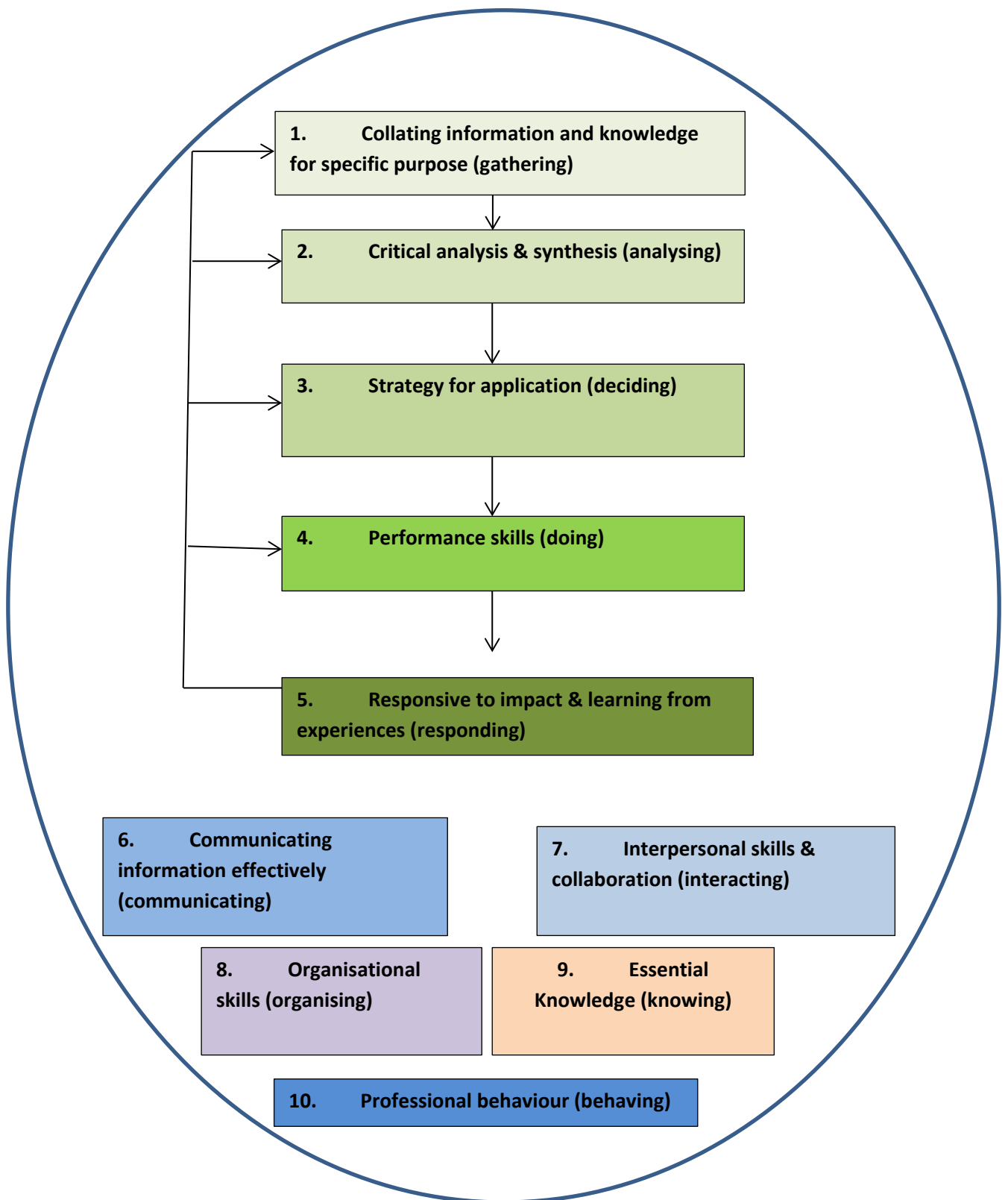## 10. 'Behaving' - Professional behaviour

Behaving professionally and appropriately in all contexts

NB: Positive evidence does not need to be collected for this domain when marking assignments, but substantial negative evidence (i.e. that the trainee lacks competence in this domain) is a criterion for failure in all assignments.

It comprises a number of sub-domains:

A. Awareness of and adherence to principle of informed consent.

B. Awareness of and working within limits of own competence and employing self-care appropriately; being aware of when may not be fit to practice and acting on this to effectively manage any risks this might pose.

C. Accepting accountability & take appropriate responsibility.

D. Responding to feedback in relation to performance and conduct within professional role.

E. Keeping appropriate boundaries.

F. Complying with polices and professional practice requirements.

G. Understanding ethical issues, behaving ethically, and recognising and raising any malpractice or unethical practice.

H. Awareness of what would constitute abuse of power and refraining from such abuse.

I. Showing motivation and using initiative where necessary to complete tasks to a 'good enough' standard.

Appendix A. Diagrammatic map of domains

1. **Collating information and knowledge for specific purpose (gathering)**

2. **Critical analysis & synthesis (analysing)**

3. **Strategy for application (deciding)**

4. **Performance skills (doing)**

5. **Responsive to impact & learning from experiences (responding)**

6. **Communicating information effectively (communicating)**

7. **Interpersonal skills & collaboration (interacting)**

8. **Organisational skills (organising)**

9. **Essential Knowledge (knowing)**

10. **Professional behaviour (behaving)**

The L1-5 = Loop domains – these domains form a staged looped process which is at the core of professional practice and which can be assessed.

6-10 = the building blocks which support/are integral to being a clinical psychologist and are required in order to engage effectively and professionally with the loop domains and which can be assessed

Appendix B. Broader knowledge of clinical psychology practices, literature and relevant services from BPS standards (not assessed through assignment process)

1. Psychological knowledge of developmental, social and neuropsychological processes across the lifespan in all of the following:

	Developmental processes	*Social processes*	*Neuropsychological processes*
Children & Adolescents	1a.	1b.	1c.
Adults	1d.	1e.	1f.
Older people	1g.	1h.	1i.

2. Theory and evidence of how the following factors relate to psychological distress:
    i. Individual factors
    ii. Systemic factors
    iii. Cultural factors
    iv. Biological factors

3. Know the process of constructing formulations in depth within at least two theoretical frameworks, one of which must be cognitive therapy.

4. Showing an understanding of specific therapeutic techniques that can be applied when working with a range of different individuals in distress, including at least [NUMBER] of the following:
    i. Anxiety
    ii. Mood
    iii. Adjustment to adverse circumstances or life events
    iv. Eating difficulties
    v. Psychosis
    vi. Misuse of substances
    vii. Physical health presentations
    viii. Somatoform presentations
    ix. Psychosexual issues
    x. Developmental issues
    xi. Personality issues
    xii. Cognitive deficits
    xiii. Neurological presentations.

5. Knowledge of how to practice in at least two evidence-based models of formal psychological interventions, which must include
    i. Cognitive-behaviour therapy, and
    ii. At least one other therapeutic model.

6. Knowledge of interventions relating to both
    i. secondary prevention, and
    ii. the promotion of health and well-being.

7. Having an awareness of the impact and relevance of the following to distress and the work of a clinical psychologist:
    i. Psychopharmacology and
    ii. Other multidisciplinary interventions

8. Understanding social approaches to intervention, including those informed

by:

    i. Community psychology
    ii. Social approaches
    iii. Social constructionist perspectives.

9. Knowing how to conduct research to include:
    i. service evaluation
    ii. small N research
    iii. pilot studies
    iv. feasibility studies
    v. other research

10. Understanding the impact of differences, diversity and social inequalities on people's lives, and their implications for working practices.

11. Knowing how to adapt practice to a range of different organisational contexts, in settings such as:
    i. community
    ii. inpatient
    iii. primary care
    iv. secondary care
    v. tertiary care
    vi. providers within the NHS
    vii. providers outside the NHS.

12. Understanding leadership theories and models, and how they can be applied to service development and delivery.