PROGRAMME SPECIFICATION



1	Awarding Institution	Newcastle University		
2	Teaching Institution	Newcastle University		
3	Final Award	Postgraduate Certificate		
		Postgraduate Diploma		
4	Programme Title	Postgraduate Certificate in Cognitive		
	-	Behavioural Therapy for Anxiety Disorders		
		Postgraduate Diploma in Cognitive Behavioural Therapy		
5	Programme Code	3462P, 3463P, 3464P		
6	Programme Accreditation	CBT Cert – BABCP programme accreditation (level 1)		
		CBT Dip – BABCP programme accreditation (level 2)		
7	QAA Subject Benchmark(s)			
8	FHEQ Level	7		
9	Last updated	May 2022		

10 Programme Aims

Summary

Cognitive Behavioural Therapy (CBT) is a time-limited, structured psychological therapy with a strong evidence base, and it features prominently in NHS guidance for the treatment of mental health problems.

The aim of the 1-year Postgraduate Certificate is to produce psychological therapists who are competent in the CBT treatment of anxiety disorders. The 2-year Postgraduate Diploma extends this into the treatment of depression and other applications guided by students' interests.

The 2-year Diploma has an IAPT Pathway for students specialising in primary care CBT (usually employed by IAPT services) and a Standard Pathway for students working across a range of healthcare, forensic, education, social work, voluntary and private sectors.

Prior to entry students need to have a core professional qualification in mental health or equivalent (e.g. nursing, psychology, psychiatry, education, counselling, social work). Prior supervised experience providing CBT is highly desirable.

Students attend lectures, skill workshops, tutorials and are supervised intensively while providing CBT to a minimum of eight patients across the 2-year Diploma.

On leaving the Diploma graduates have acquired:

Clinically competent psychotherapeutic skills working within a CBT model

- Particular skills in the treatment of severe affective disorders
- In-depth knowledge of the theory and models used to guide CBT treatment and its associated evidence base
- Particular knowledge of a specialist application of CBT based around their individual interests
- An open-minded, informed and reflective approach to their future development as a CBT practitioner
- Accreditation status (provisional) with the British Association of Behavioural and Cognitive Psychotherapies (BABCP)

Specific Aims

- 1. The primary aim of the CBT Cert and CBT Dip programmes is to produce psychological therapists who are competent in the practice of Cognitive Behavioural Therapy (CBT) for patients affected by emotional disorders
- 2. The programmes provide practical, intensive and detailed training to facilitate the development of competent CBT skills, to defined standards
- 3. The programmes integrate CBT skill development with the necessary knowledge and attitudes to be open-minded, informed and reflective CBT practitioners
- 4. The programmes promote a critical approach to the subject through engagement with relevant theory, models and evidence
- The CBT Cert programme equips students to become competent in the psychological treatment of anxiety disorders, in full accordance with BABCP guidance for good practice
- 6. The CBT Dip programme extends the CBT Cert into the psychological treatment of major depression and specialist CBT applications
- 7. CBT Dip graduates are eligible for practitioner accreditation with BABCP through Standard or IAPT curriculum routes

11 Learning Outcomes

The programmes provide opportunities for students to develop and demonstrate CBT knowledge, understanding, skills, attitudes and other qualities in the following areas. Individual learning outcomes addressed by each teaching, learning and assessment method are indicated in parentheses.

Knowledge and Understanding

On completing the CBT Cert and CBT Dip programmes students should be able to:

- A1 Explain and discuss systematic knowledge of the theoretical principles and practical applications of CBT
- A2 Access and utilise knowledge and understanding of CBT models of anxiety disorders. This is extended into depression and specialist applications in the CBT Dip
- A3 Critically evaluate the research evidence for cognitive-behaviour models and interventions for anxiety disorders. This is extended into depression and specialist applications in the CBT Dip
- A4 Reflect on up-to-date understanding of the process of developing case formulations and sequencing individual therapy. This is extended into more complex cases in the CBT Dip

Teaching and Learning Methods

In both the CBT Cert and CBT Dip subject knowledge and understanding are developed through:

- Lectures. These are delivered to establish a learning framework for the development of understanding, to explain complex CBT concepts, and to provide insight into the relationship between theory and practice. (A1, A2, A3)
- Skills workshops. Experiential and skills based workshops providing students with a strong foundation in the clinical procedures of CBT, and addressing the most up-to-date research developments (A1, A2, A4)
- *Delivering therapy*. Individual Cognitive Behavioural Therapy offered by the student to patients in their normal workplace (A1, A2, A4)
- *CBT supervision*. This provides detailed coaching, encouragement and feedback on the development of CBT clinical skills (A1, A2, A4)
- *Tutorials*. These provide opportunities for feedback, discussion and clarification of the theoretical frameworks informing CBT and how they inform clinical practice. Tutorials also have a key role in supporting the preparation of academic assessments and pastoral quidance, when appropriate (A1, A2, A3)
- Seminars. Group reflection and discussion of selected aspects of the CBT literature. (A1, A2, A3)
- Guided self-study. This will be supported by the provision of targets and direction through tutorials and in Module Guides, to expand knowledge and understanding through active and task-based learning (A1, A2, A3)

Assessment Strategy

In the CBT Cert programme, assessment of the underpinning knowledge base is achieved through a combination of:

- One Essay describing, discussing and evaluating the evidence base for a fundamental aspect of CBT practice (A1, A2, A3)
- One Written Case Study of CBT with an anxious patient combining case descriptions with a critique of the model(s) used to guide the treatment. This will include a reflection on the knowledge, skills and attitudes gained by the student working with that case (A1, A2, A3, A4)
- One Clinical Video Recording of a CBT session with an anxious patient used to evaluate CBT clinical competence. (A1, A2, A4)
- [There is additionally a baseline clinical video recording submitted at the start of the CBT Cert programme to provide students with formative feedback on their CBT skills (A1, A2, A4)]
- One Reflective Log to encourage reflective practice on the learning process during the programme formative feedback (A4)

The CBT Dip programme extends these assessments with:

- One Written Case Study of a depressed patient(A1, A2, A3, A4)
- One Clinical Video Recording of a CBT session with a depressed patient (A1, A2, A4)
- One Combined Case Study of a specialist application of CBT. This will include a video recording and an extended reflection on how CBT was adapted to meet that particular patient's needs (A1, A2, A3, A4)
- One Oral Case Study that explores the professional and personal impacts of working with a particular case
- One Practice Portfolio that documents supervised CBT treatment delivered to eight patients (minimum) during the CBT Dip programme

Intellectual Skills

On completing the CBT Cert and CBT Dip programmes students should be able to:

- B1 Demonstrate skills in independent planning and problem solving
- B2 Gather, synthesise and evaluate clinical information
- B3 Form and test clinical hypotheses working in a scientist-practitioner framework

B4 Gather, synthesise and evaluate research evidence

Teaching and Learning Methods

Across both CBT Cert and CBT Dip programmes, intellectual and cognitive skills are developed through:

Lectures (B1, B4), Skills workshops (B1, B2, B3). Delivering therapy (B1, B2, B3). CBT supervision (B1, B2, B3), Tutorials (B1, B4), Seminars (B1, B4), Guided self-study (B1, B4)

Since CBT is focused on cognitive processes, trainees are exposed to a broad range of inputs that develop their own cognitive abilities to enable them to support changes in their patients' cognition.

Assessment Strategy

Across the two years of the CBT Dip programme (Year 1 also being the certificate stage) assessment of intellectual and cognitive skills is achieved through a combination of:

- One essay exploring the evidence base for a fundamental aspect of CBT (B1, B4)
- Four case studies of CBT using a combination of written and oral methods at least one with an anxious patient and one with a depressed patient (B1, B2, B3)
- Evaluation of CBT clinical competence in four clinical sessions via video recordings, including the formative assessments at different stages of the programme (B1, B2, B3)
- A practice portfolio that prepares the students for professional practice as a CBT therapist (B1, B2)

Practical Skills

On completing the CBT Cert and CBT Dip programmes students should be able to:

- C1 Independently develop CBT treatment plans
- C2 Make clinical decisions in straightforward cases (CBTCert) and more complex cases (CBTDip)
- C3 Sensitively adapt the delivery of CBT and ensure equitable access to patients of diverse cultures and values
- C4 Evaluate the effectiveness of CBT interventions

Teaching and Learning Methods

Across both CBT Cert and CBT Dip programmes, practical skills are developed through:

Lectures (C1, C4), Skills workshops (C1, C2, C3, C4), Delivering therapy (C1, C2, C3, C4), CBT supervision (C1, C2, C3, C4), Tutorials (C4), Seminars (C4), Guided self-study (C4)

Assessment Strategy

Across the two years of the CBT Dip programme (Year 1 also being the certificate stage) assessment of practical skills is achieved through a combination of:

- One essay exploring the evidence base for a fundamental aspect of CBT (C4)
- Four case studies of CBT using a combination of written and oral methods at least one with an anxious patient and one with a depressed patient (C1, C2, C3, C4)
- Evaluation of CBT clinical competence in four clinical sessions via video recordings, including three formative assessments at different stages of the programme (C1, C2, C3, C4)
- A practice portfolio that prepares the students for professional practice as a CBT therapist (C1, C4)

Transferable/Key Skills

On completing the CBT Cert and CBT Dip programmes students should be able to:

- D1 Self-reflect and use that self-knowledge as a CBT therapist
- D2 Use self-organisation skills to plan and deliver courses of CB therapy
- D3 Communicate effectively in oral and written forms
- D4 Study new theories, evidence and other literature

Teaching and Learning Methods

In both CBT Cert and CBT Dip programmes, key (transferable) skills are developed through:

Lectures (D1, D2), Skills workshops (D3), Delivering therapy (D1, D2, D3). CBT supervision (D1, D2, D3, D4). Tutorials (D1, D2, D3, D4), Seminars (D1, D2, D3, D4), Guided self-study (D1, D2, D3, D4)

Assessment Strategy

Across the two years of the CBT Dip programme (Year 1 also being the certificate stage) assessment of transferable/key skills is achieved through a combination of:

- Essay exploring the evidence base for a fundamental aspect of CBT (D1, D2, D3, D4)
- Four case studies of CBT, at least one with an anxious patient and one with a depressed patient (D1, D2, D3, D4)
- Evaluation of CBT competence in four clinical sessions via video recordings (D1, D2, D3)
- A practice portfolio that prepares the students for professional practice as a CBT therapist (D1, D2, D3)

12 Programme Curriculum, Structure and Features

Basic structure of the programme

The Postgraduate Certificate in Cognitive Behavioural Therapy for Anxiety Disorders (60 credits) will enable students to develop competency in CBT for anxiety disorders and become skilled practitioners in this therapeutic approach. The focus is on treating patients with diagnosable anxiety disorders such as Social Phobia, Post Traumatic Stress Disorder (PTSD), Obsessive Compulsive Disorder (OCD), Generalized Anxiety Disorder (GAD), etc. The emphasis is on high-intensity, individual CBT rather than guided self-help, psychoeducation or lower intensity anxiety management. The CBT Cert is a CBT practitioner level training designed for healthcare and related professionals who have already completed introductory and/or intermediate CBT training (or equivalent) and have some supervised experience of providing CBT.

Underpinning the CBT Cert programme is a student centred, adult learning approach to developing as a CBT therapist with clearly articulated learning outcomes and regular learning needs assessments. Students are required to conduct CBT therapy with anxiety-disordered patients in their host services. These cases will have moderately-severe anxiety symptoms appropriate for high-intensity psychological therapy. Concurrently, students will receive lectures, clinical supervision, tutoring and skills training at Newcastle University. Modules contain a blend of practical, reflective, theoretical and evidence-based aspects of CBT. Modules vary in their practical or theoretical emphasis but the integration of theory and practice is emphasised across all modules.

The CBT PgCert programme is delivered over one academic year. Following a 3-day induction, attendance is twice weekly in the first month (October) then fortnightly from November until July. The Pg Certificate programme is accredited with the British Association of Behavioural and Cognitive Psychotherapies (BABCP) as a Level 1 Accredited Programme. Students complete two modules: Fundamentals of CBT (20 credits) and CBT for Anxiety Disorders (40 credits).

1. Fundamentals of CBT (20 credits)

This module consolidates prior CBT knowledge, skills and attitudes and has a reflective practice orientation. It trains students in the fundamentals of CBT practice with an emphasis on assessment and early-phase treatment processes. It is assessed through an Essay (5000 words), a Reflective Log and formative feedback on a Clinical Video Recording (CBT assessment session) submitted near the start of the programme. The Reflective Log is monitored regularly by the student's Tutor to encourage a reflective practice orientation towards learning the fundamentals of CBT.

2. CBT for Anxiety Disorders (40 credits)

This module seeks to develop critical knowledge of the theoretical and research literature informing behavioural and cognitive models of anxiety disorders. This knowledge is used to observe, practice and develop the clinical skills needed to deliver CBT for these disorders. CBT therapy with anxious patients is delivered in the students' usual workplace and is scrutinized and supported through supervision from a BABCP-accredited supervisor. The aim is to individualize and extend learning from the theoretical and research literature to help students achieve clinical competence. Competence is assessed using standardised ratings of a Clinical Video Recording of the students' therapy with an anxiety-disordered patient. Students' knowledge, reflective capacity and theory-practice integration is assessed through a Written Case Study (5000 words) which will include a critical evaluation of the CBT model used to guide the therapy in question.

The Postgraduate Diploma in Cognitive Behavioural Therapy (120 credits) is delivered over two academic years and is structured into four modules. The first two modules are delivered in year 1 and these are identical to the CBT Cert modules. These have to be passed before progressing into year 2. Year 2 consolidates and extends the therapeutic skills developed in year 1. Academic standards in years 1 and 2 are comparable, but in year 2 students work mainly with depressed patients and with other patients with more complex and recurrent difficulties. Consequently, therapeutic competence in year 2 is:

- (a) consolidated through working with more supervised cases (a minimum of 8 across the 2 years)
- (b) generalized through working with a broader range of disorders, including the students' specialist interests towards the end of the programme
- (c) extended through learning how to provide CBT under relatively more complex conditions

The year 2 modules are CBT for Depression (40 credits) and either Specialist Applications (20 credits) or Primary Care Applications (20 credits). Students who pass all four modules are awarded a Postgraduate Diploma in Cognitive Behavioural Therapy. The course is accredited as a BABCP Level 2 Accredited Programme and graduates are eligible to become BABCP Accredited Practitioners.

In year 2, the Specialist Applications route meets Level 2 BABCP Programme Accreditation in its Standard form and the Primary Care Applications route meets Level 2 BABCP Programme Accreditation in its High Intensity IAPT form. In other words, students completing the Primary Care Applications module to demonstrate that they have completed the High Intensity IAPT curriculum and are fully eligible for High Intensity IAPT posts within the NHS. Students working other settings are not confined to the IAPT curriculum and can develop specialist CBT interests towards the end of the programme. Attendance in Year 2 is a three-day induction in September, then fortnightly from October to April, then weekly from May until early July. A Clinical Case Conference brings the programme to a close at the beginning of September.

3. CBT for Depression (40 credits)

This module is similar in format to the CBT for Anxiety Disorders module in year 1 and it seeks to develop knowledge of the theoretical and research literature informing behavioural and cognitive models of depression. This knowledge is used to observe, practice and develop the clinical skills needed to deliver CBT for these disorders. CBT therapy with depressed patients is delivered in the students' usual workplace and is scrutinized and supported through supervision from a BABCP-accredited supervisor. Clinical cases must meet criteria for Major Depressive Disorder and are likely to have at least moderately-severe

symptoms. The aim is to individualize and extend learning from the theoretical and research literature to help students achieve clinical competence. Competence is assessed using standardised ratings of a Clinical Video Recording of the students' therapy with a depressed patient. Students' knowledge, reflective capacity and theory-practice integration is assessed through a Written Case Study (5000 words) which will include a critical evaluation of the CBT model used to guide the therapy in question.

4. Specialist Applications (20 credits)

This module extends core CBT knowledge, skills and attitudes in three key respects: (1) to a range of different clinical disorders in addition to anxiety and depression: (2) to a range of clinical populations in addition to working age adults; (3) to emergent, new CBT models in addition to established and traditional approaches. It is assessed through a Combined Case Study which is a clinical video recording illustrating a specialist application of CBT and a 5000-word case reflection discussing the specialist approach used with that case application of CBT to a person with more complex difficulties. Students are encouraged to select a focused area of study of direct relevance to their clinical work and service needs. At the end of the CBT Dip programme all students attend a Clinical Case Conference, scheduled for early/mid-September, and present an Oral Case Study that explores the professional and/or personal impacts of working with a particular case. This has to be a different case from the other Case Studies. Students also submit a Practice Portfolio that documents the supervised CBT treatment they have delivered to eight patients (minimum) during the CBT Dip programme. At least three of those patients must have been closely supervised and the eight patients must have presented with three different disorders. Time spent providing supervised CBT assessment and treatment across the programme must total at least 200 hours.

5. Primary Care Applications (20 credits)

This module has two main aims: (1) to consolidate core knowledge, skills and attitudes gained in the first three modules to meet the needs of patients in a Primary Care setting; (2) to use emergent, new CBT models to augment and complement the treatment of depression and anxiety in Primary Care. It is similarly assessed through a Combined Case Study which is a 5000-word case reflection and a clinical video recording illustrating an application of CBT to the specific needs of a primary care patient. The case study and recording should demonstrate how an emergent or new CBT model has augmented the delivery and/or understanding of CBT treatment, tailored to the specific needs of Primary Care patients.

6. Professional Practice

At the end of the CBT Dip programme all students attend a Clinical Case Conference, scheduled for early/mid-September, and present an Oral Case Study that explores the professional and/or personal impacts of working with a particular case. This has to be a different case from the Written & Combined Case Studies. Students also submit a Practice Portfolio that documents the supervised CBT treatment they have delivered to eight patients (minimum) during the CBT Dip programme. At least three of those patients must have been closely supervised and the eight patients must have presented with three different disorders. Time spent providing supervised CBT assessment and treatment across the programme must total at least 200 hours. The Oral Case Study and Practice Portfolio are both assessed pieces of work that must be passed to complete the CBT Dip programme.

Across the two years of the CBT Dip modules 1, 2, and 3 are compulsory. Students choose between modules 4 and 5 in Year 2. Students in IAPT services funded by HENE are required to complete module 5. There is no cross-compensation across modules. The CBT PgDip programme will consider applications from candidates who have previously completed a Certificate level BABCP-accredited programme who wish to complete year 2 only to be awarded the CBT PgDip. The Accreditation of Prior Learning (APL) process is based on a detailed analysis of previous training and its direct relationship to the current curriculum. No APL applications will be considered for the CBT PgCert.

Key features of the programme (including what makes the programme distinctive)

In the NHS, the National Institute of Clinical Excellence (NICE) guidelines for depression and anxiety disorders strongly recommend Cognitive Behaviour Therapy (CBT). Many clinicians have had some exposure to CBT, but few have had the opportunity to develop competency. The CBT PgCert and CBT PgDip provide a post-graduate training in CBT that equips students to deliver evidence-based treatment within their host NHS service spanning primary care (IAPT), secondary care and specialist tertiary care services. The same principles apply to students based in Education, Forensic, voluntary and private sectors.

The British Association of Behavioural and Cognitive Psychotherapies (BABCP) is the lead organisation for CBT in the UK and the CBT PgCert and CBT PgDip programmes conform to its guidance for training quality and standards. The CBT PgCert (Level 1 Programme Accreditation) provides the following inputs:

Face-to-face teaching (lectures, workshops, seminars & tutorials): 126 hours

Clinical supervision (in groups of 3) *: 36 hours

Reflective Log: estimated 10 hours

Reading, preparation & writing for assessments: estimated 70 hours

Total: 242 hours plus treatment of up to 4 clinical cases

BABCP Minimum Training Standards require 450 hours total training time for practitioner accreditation, with 200 hours received directly by recognised trainers. The CBT PgDip (Level 2 Programme Accreditation) provides the following inputs (totals are for Year 1 and Year 2 combined):

Face-to-face teaching (lectures, workshops, seminars & tutorials): 233 hours

Clinical supervision (in groups of 3)*: 72 hours

Reflective Log: estimated 25 hours

Reading, preparation & writing for assessments: estimated 152 hours

Total: 482 hours plus treatment of at least 8 clinical cases (200 hours minimum)

*Additional workplace supervision from a CBT accredited practitioner is strongly recommended for all students, particularly during teaching breaks. It is mandatory for students working in IAPT services whose training is funded by HENE.

Programme regulations (link to on-line version)

-R3462P, 3463P, 3464P vFinal.pdf

13 Support for Student Learning

https://www.ncl.ac.uk/ltds/assets/documents/qsh progspec generic info.pdf

14 Methods for evaluating and improving the quality and standards of teaching and learning

https://www.ncl.ac.uk/ltds/assets/documents/qsh_progspec_generic_info.pdf

15 Regulation of assessment

https://www.ncl.ac.uk/ltds/assets/documents/qsh progspec generic info.pdf

In addition, information relating to the programme is provided in:

The University Prospectus: http://www.ncl.ac.uk/postgraduate/courses/

Degree Programme and University Regulations http://www.ncl.ac.uk/regulations/docs/

Please note. 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.

Mapping of Intended Learning Outcomes onto Curriculum/Modules

Postgraduate Certificate in Cognitive Behavioural Therapy for Anxiety Disorders (CBTCert)

Postgraduate Diploma in Cognitive Behavioural Therapy (CBTDip)

			Intended Learning Outcomes			
Programme	Module	Туре	Α	В	С	D
PgCert PgDip	Fundamentals of CBT (20 credits)	Core	1, 3	1, 4	1	1, 2, 3, 4
PgCert PgDip	CBT for Anxiety Disorders (40 credits)	Core	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4
PgDip	CBT for Depression (40 credits)	Core	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4
PgDip	Primary Care Applications (20 credits)	Optional Core	1, 2, 4	1, 2, 3	1, 2, 3, 4	1, 2, 3, 4
PgDip	Specialist Care Applications (20 credits)	Optional Core	1, 2, 4	1, 2, 3	1, 2, 3, 4	1, 2, 3, 4