# PROGRAMME SPECIFICATION



1	Awarding Institution	Newcastle University
2	Teaching Institution	Newcastle University
3	Final Award	Doctor of Clinical Psychology
4	Programme Title	Doctorate in Clinical Psychology,
5	Programme Code	8861F, 8824F*
		(currently suspended for 25/26)
6	Programme Approval &	Health and Care Professions Council
Accreditation		(Approval)
		British Psychological Society (Accreditation)
7	QAA Subject Benchmark(s)	
8	FHEQ Level	8
9	Last updated	February 2025

## 10 Programme Aims

On completion of the programme of study, graduates will:

- Be able to work as safe, effective, competent and capable Clinical Psychologists with a range of clients in a range of NHS settings;
- 2 Understand and embrace the core purpose and philosophy of the profession;
- 3 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;
- Demonstrate the fundamental acknowledgement that all people have the same human value and the right to be treated as unique individuals;
- Demonstrate the ability to work as a reflective, scientist practitioner contributing to and developing the knowledge base through the production and utilisation of research findings; and
- 6 Demonstrate that they can manage their personal professional development.

#### 11 Learning Outcomes

The programme provides opportunities for students to develop and demonstrate knowledge and understanding, qualities, skills and values in the areas required to enable them to register as practicing clinical psychologists on completion of their studies. These are in line with the standards required for Doctoral programmes in Clinical Psychology <a href="https://cms.bps.org.uk/sites/default/files/2022-">https://cms.bps.org.uk/sites/default/files/2022-</a>

07/Clinical%20Accreditation%20Handbook%202019.pdf

## **Knowledge and Understanding**

On completing the programme students should:

A1 know how to make links between theory and practice.

A2 have expanded their knowledge and understanding of psychological theories and therapies and how they can be applied in clinical settings.

A3 know about the inter-relatedness of the various theories and what makes them distinct.

A4 know how to engage in the evaluation and research cycles including protocol development, peer review, registration procedures and presentation of the work.

## **Teaching and Learning Methods**

- Didactic sessions used to establish a learning framework for the development of understanding, to explain complex concepts, and to provide 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 Course 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 protocol development, peer review, registration procedures and the project conference.

#### **Assessment Strategy**

Assessment of the underpinning knowledge base is achieved through a combination of an essay; a critical review paper and research assignments (a further literature review, a small scale research project called the service based project and a larger empirical project). In relation to clinical experience, there are case studies which require students to integrate theory and practice in relation to their case work, in vivo assessment of clinical skills via structured observation forms/OSCE's and reflective writing exercises to consolidate the integration of declarative knowledge and procedural skills.

#### Intellectual Skills

On completing the programme students should be able to:

- B1 critically evaluate the evidence base.
- B2 comprehend and interpret the literature.
- B3 use abstraction to develop a coherent argument from their readings.
- B4 Analyse, synthesise and evaluate information presented to them, and creatively integrate it with their clinical experience.

## **Teaching and Learning Methods**

Critical engagement with the evidence base is taught through the mixture of lectures, small group discussion and workshops. Participation in activities in which trainees are required to present their clinical or research work to others also helps in the development of their evaluation and comprehension skills, and formative feedback is given to help guide this.

#### **Assessment Strategy**

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. Intellectual skills are assessed through summative and formative assessments throughout the programme, and focus on comprehension, interpretation and the application of theory to practice. These assessments include essays, case studies, in vivo assessments of clinical work and presentations undertaken by the students. There is further substantial assessment of intellectual performance through a submitted thesis and viva voce.

## **Practical Skills**

On completing the programme students should be able to:

- C1 Demonstrate clinical competencies in the key therapy models through the process of assessment, formulation, intervention and evaluation.
- C2 make decisions based on clinical evidence.
- C3 work reflectively.
- C4 communicate effectively with a variety of other professions, clients, families and other parts of an individual's system as appropriate e.g. schools.

#### Teaching and Learning Methods

- Problem-oriented learning opportunities, to develop problem-solving, critical reasoning and clinical decision-making skills through evidence-based activities.
- Use of clinical material through videos of sessions, demonstrations and role play, to teach, demonstrate and evaluate clinical competencies.
- Clinical competencies training through clinical placements and via clinical supervisors.
- Small group activities, to encourage teamwork and involvement.
- Written assignments to promote investigative and exploratory study
- 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.

## **Assessment Strategy**

A range of assessments are also used to evaluate the acquisition of clinical competencies. This includes case studies, supervisors rating of competence and demonstration of clinical competencies through direct assessment of clinical skills.

## Transferable/Key Skills

On completing the programme students should be able to:

- D1 develop their own learning style.
- D2 communicate effectively with a number of agencies.
- D3 use the computer programs effectively.
- D4 conduct research at a high level including statistical data analysis.

## **Teaching and Learning Methods**

Skills such as communication, team working, planning, computer literacy and learning how to learn are addressed through an equally wide range of strategies. Courses 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.

#### Assessment Strategy

These skills are formatively assessed through written assignments, thesis and regularly through teaching 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 from supervisors. D4 is evaluated through the thesis and viva voce.

#### 12 Programme Curriculum, Structure and Features

#### Basic structure of the programme

The programme is full-time three year duration subject to annual review concluded with viva examinations and a final Board of Examiners meeting. There are no credit arrangements, and there is no compensation either within or between competency domain. Similarly, all courses must be attended and completed. In addition, trainees attend clinical placements for 50% of their time during the three year training and are allocated research and study time for the remaining portion of their time.

There are 11 courses within the programme as follows:

- 1. Research
- 2. Personal and Professional Development
- 3. Cognitive Behaviour Therapy
- Systematic Learning
  Emerging Evidence Based approaches
- 6. Learning disability
- 7. Child and Adolescent
- 8. Older Adult
- 9. Health
- 10. Special Applications including Clinical Health, Forensic Psychology and Severe and Enduring Mental Illness
- 11. Neuropsychology

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

This programme provides training in Cognitive-Behavioural and Systemic models of therapy, with introductory sessions to other evidence-based or emerging evidence-based models such as Mindfulness-based Cognitive Therapy and Dialectical Behaviour Therapy.

The programme also meets the Association in Family Therapy Foundation level training (first level of the three family therapy/systemic training levels), with all trainees undertaking this training as part of the systemic teaching stream delivered in Year 2 of the programme.

An accredited therapy model pathway, accredited by the British Association of Behavioural and Cognitive Psychotherapies (BABCP) is also offered and will allow a small number of trainees to undertake the pathway as an elective option in their third year to gain additional therapeutic accreditation and training.

## Programme regulations (link to on-line version)

-R8861F 8824F 2526 vFinal.pdf

#### 13 Support for Student Learning

Generic information regarding University provision is available at the following link.

General Information

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

Generic information regarding University provision is available at the following link.

General Information

All specific information included in the Programme Handbook.

#### Regulation of assessment

Generic information regarding University provision is available at the following link.

**General Information** 

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

The University Prospectus <a href="http://www.ncl.ac.uk/postgraduate/courses/">http://www.ncl.ac.uk/postgraduate/courses/</a>

Degree Programme and University Regulations https://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.