Doctorate in Clinical Psychology (DClinPsy)

Programme Handbook

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Introduction to the Programme

Welcome to the Doctorate in Clinical Psychology (DClinPsy) at the University of Exeter. We have been training Clinical Psychologist for more than 40 years and we pride ourselves in remaining on the cutting edge of training so that the programme is current and contemporary. The Programme is well respected in the wider Psychology Department, and some of these staff provide teaching and research supervision to our trainees.

At the centre of our programme is our commitment to inclusive education, social and racial justice, and sustainability. We offer training on anti-racism and decolonisation to our supervisors and lecturers form the region, and work closely with our three Host NHS Trusts to ensure that teaching matches what is required in the current NHS. As a programme, we are constantly reviewing and improving our practice, and we enjoy doing this in collaboration with our trainees, experts by experience, placement supervisors, lecturers and external stakeholders.

You are joining a vibrant and experienced training community, and we look forward to hearing your voice and working with you to become the future of Clinical Psychology.

The Team

There are three distinct strands on the programme: research, academic and clinical, with the DClinPsy Programme Director overseeing the work of each.

Associate Professor Catherine Butler is the Programme Director c.a.butler@exeter.ac.uk

For details of members of staff in each team, please refer to the staff page on the website: https://psychology.exeter.ac.uk/study/clinical/dclinpsy/team/

Aims and Objectives

In its (http://www.exeter.ac.uk/about/vision/educationstrategy/) the University describes its purpose as follows: "To use the power of our education and research to create a sustainable, healthy and socially just future"

The specific aims of the Clinical Psychology programme are to offer a high-quality training programme that will produce clinical psychologists who will go on to work in the NHS and other public services and make a meaningful and strong contribution to users of the NHS, the services themselves and the clinical psychology profession in clinical, academic and research areas. In doing so we hope our graduates will significantly contribute to that vision of a sustainable, healthy and socially just future. This aligns with the three pillars of transformative education upon which our programme sits: Inclusive education, social and racial justice, and sustainability (see: https://www.exeter.ac.uk/about/vision/successforall/transformativeeducation/)

The DClinPsy is a three-year full-time programme that confers eligibility for registration as Practitioner Clinical Psychologists with the Health and Care Professions Council, joining the British Psychological Society's Register of Chartered Psychologists and to be full members of the Division of Clinical Psychology. The Programme Specification for the DClinPsy can be found on the Programme page of ELE2.

The programme will equip trainees to understand the way public services are developing in the UK and internationally, and the implications for how clinical psychologists will need to operate to have the greatest impact on the wellbeing of the people they serve.

While change has always been a feature of our welfare system, the coming years and decades are likely to be increasingly challenging. One of our key objectives is to develop a strong leadership identity in the trainees so that they can influence practice and strategic decisions where they work when qualified. Trainees will also need to be clear about how to operate justly under these conditions and we will work together with trainees to so that they can develop an identity as a clinical psychologist as a social and racially just leader, practitioner and researcher.

The programme is intensive, combining as it does academic, clinical and research components, which place inevitable demands on trainees' time and key relationships. We recognise this is a major task, and endeavour to provide effective support.

Our intention is to train clinical psychologists who, at graduation:

- Are fit for practice
- Are critical thinkers who act to implement social and racial justice in their work
- Are self aware of their individual strength and areas of development, and the contribution they make to teams and group dynamics
- Will make a contribution to research and clinical practice in the evolving NHS
- Are eligible to apply for registration with the Health Professions Council at the end of training.

Programme Values

We are committed to:

- Ethical, just and professional conduct as a reflexive scientist-practitioner
- The promotion of equal-opportunities principles and anti-oppressive and inclusive practice. We value diversity and enabling trainees to identify and challenge inequalities that affect health and psychological well-being or limit access to services (e.g., arising from differences in cultural background, disability, ethnicity, sexuality, sex or social class).
- Interdisciplinary learning and interdisciplinary practice
- The critical application of evidence-based practice
- Seeking, respecting and responding to the views of people who use services, those with direct experience of psychological distress and carers in the organisation of teaching, training and research
- Continuously reviewing the curriculum to incorporate the changing needs of the settings in which clinical psychologists work, current scholarship, anti-oppression (both historic and current), the current evidence base, and research.
- Enabling learning rather than didactic teaching since teaching does not equal learning, and promoting life-long learning
- Providing an inspiring, enjoyable, challenging and supportive learning environment recognising that clinical psychology trainees are adult learners, being aware of both the competences they have, and also their limits
- Working with colleagues in the NHS and wider welfare system both as service providers and stakeholders.
- Promoting the NHS Constitution and values (https://www.hee.nhs.uk/about-us/our-values) of working together for patients, compassion, respect and dignity, improving lives, commitment to quality of care and everyone counts.
- Developing trainees as future leaders in clinical psychology.

Programme Organisation

The programme is organized to provide you with opportunities to learn about and work across the lifespan and with different populations and presentations. We take a core competencies approach and so teaching across all years covers different client groups, e.g. child, adult, older adult, people with learning disabilities, neuropsychology, etc. This enables trainees to have teaching that is relevant for placement in whatever service they are placed.

Professional Standards

The programme draws on a number of key standards: We recognise that a broad basis of theory contributes to our understanding of psychological well-being, that theory is constantly developing and some has theory and psychological practice has historically been oppressive: the training provided provides opportunities to reflect on what clinical psychology has been and is today. Within the programme we have three psychological therapy models with specific strands: Cognitive-behavioural, cognitive-analytic and systemic, although training in other approaches is also delivered. We also recognise that clinical psychologists' psychological theories and psychological intervention can be at many levels (e.g., individual, family, group, organisation, agency, wider community).

We are committed to a reflective scientist-practitioner model; a model that enables clinical psychologists to critically use the existing evidence-base of psychological knowledge and research to understand and solve a broad range of complex and unpredictable problems across a variety of specialised contexts. We acknowledge that trainees join our programme with differing backgrounds, strengths, abilities, level of expertise and career goals. We will make every effort to acknowledge and support this diversity throughout training and beyond. We acknowledge the critical importance of applied research, research rooted in practice, user involvement in research, service and programme evaluation, clinical audit and outcome evaluation.

Ethical and professional issues

Trainees are required to abide by appropriate Health and Care Professions Council (HCPC) Code of Conduct and British Psychological Society (BPS) guidelines, especially the BPS Code of Ethics and Conduct (https://www.bps.org.uk/guideline/code-ethics-and-conduct) as well as the BPS Professional Practice Guidelines (https://www.bps.org.uk/guideline/bps-practice-guidelines-2017). In addition, the employing trust and host trusts have guidelines on professional and ethical behaviour with which trainees must abide.

In their work, trainees will need to discuss, present and write about their clinical work. They should endeavour to do this in line with the professional practice guidelines. Explicit guidelines are set out in the clinical and academic handbooks.

The HCPC will be a source of guidance on standards of conduct - see HCPC 'Guidance on conduct and ethics for students' (https://www.hcpc-uk.org/globalassets/resources/guidance/guidance-on-conduct-and-ethics-for-students.pdf).

The programme entry agreement which is based on the HCPC code will be signed by all trainees. It provides a clear framework for professional practice and will be reviewed as part of the appraisal process.

Information about membership to the British Psychological Society

Trainees are eligible for Graduate Membership of the Society and details of how to apply can be found on the BPS website here: https://www.bps.org.uk/join-us/membership/graduate-membership. To join a Division or other group see the Professional and Membership group pages here: https://www.bps.org.uk/member-networks.

The Division of Clinical Psychology has a Southwest Branch and you can follow them on X (formerly Twitter): @DCPSouthWest

Generic good practice guidelines

When communicating about patients and clients it is important to consider how best to keep the person themselves informed. Some useful guidelines for copying letters to patients produced by the Department of Health can be found on ELE2.

Professional Practice and Capability procedure

All trainees are employed by Taunton and Somerset NHS Trust and their employment is dependent on their being on the training programme. Programme failure results in a termination of employment.

The University procedures

1. University of Exeter Fitness to practice https://www.exeter.ac.uk/staff/policies/calendar/part1/otherregs/fitness/

2. TQA Academic conduct and practice https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/aph/managingacademicmisconduct/

3. TQA Code of good practice https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/lts/unsatisfactoryprogress/

Somerset NHS Foundation Trust Procedures

Somerset NHS Foundation Trust has two relevant policies, Somerset NHS Foundation Trust Taunton and Somerset Capability Policy and Taunton Somerset Disciplinary Policy, both can be found on ELE2.

Other host trusts will have their own procedures which may differ but are likely to be very similar.

Professional Indemnity Insurance

While it is not essential, taking out personal professional indemnity insurance is encouraged. This decision is the responsibility of the trainee as is payment: https://www.bps.org.uk/resources-and-benefits

The University of Exeter also provides indemnity for postgraduate students carrying out university related studies although this will not necessarily provide full coverage.

Use of Social Media

The use of social media is a potential challenge for several reasons. The fact that it is continuously evolving, but also so universally adopted, means that it is easy to sidestep the wide-ranging ethical and professional dilemmas that potentially arise from its use. This is not an abstract issue - it is an increasingly regular theme in referrals brought to the University's student cases team, and most students who are referred state that they had simply not considered the consequences of their actions. Whilst use of social media can have a number of benefits (both individually and professionally), there are a number of potential unintended pitfalls and risks, which include:

- A risk to your own professionalism being called into disrepute either now or at some point in the future
- A risk of being personally accused of defamation
- Breaches of a range of other policies including those governing confidentiality, patient safety and boundaries, or even copyright.

These risks will vary somewhat depending on how you use social media. For instance, using social media as a closed forum between friends and family members is inherently much less risky than creating and maintaining a public profile and identity on social media, particularly if that identity is linked to your status as a trainee, NHS employee, aspiring HCPC registrant or member of the BPS. Nonetheless, even 'closed' or very 'restricted' use of social media can bring challenges, and it is important to familiarise yourself with these issues.

Because of this, the BPS, HCPC, and various NHS organisations all have specific social media policies which are fully endorsed and adopted although not repeated here. The BPS in particular have generic supplementary guidance and specific guidance for Clinical Psychologists.

In order to give some specific (but not complete) guidance, the following text below is adapted from the BPS supplementary guidance, written with the potential challenges for a trainee in mind:

You should:

- **Remember that, regardless of your privacy settings, you should assume everything you write online has the potential to be both permanent and public. You should assume that once you have posted something online, it remains traceable even if you later delete it. Even material posted in an apparently 'closed' space could be posted by others who have access to that space, or potentially hacked and re- posted, potentially years**

after making the posting. This includes emails and WhatsApp messages. This means that *anything* you post online *anywhere* could have the potential to 're-appear' in a setting in which you didn't intend it to appear. If content does 're-appear', it is likely that it would be detached from the context in which it was written, which creates a risk that your intended meaning may be misunderstood or even deliberately misconstrued. You might not have an opportunity to correct the record and explain what you 'meant'. Asking yourself if you be happy with that post being brought up in a job interview in ten years' time, or shown to a client, is a good litmus test of whether to post it.

- Keep your professional and personal life as separate as possible. This may be best achieved by having separate accounts across/within different sites.
- If contact requests are received from clients and service users, decline the request via a more formal means of communication.
- Be minded that regardless of whether you identify yourself as a psychologist or Exeter trainee on your profile, you should avoid any statements that could be considered to bring the profession or the organisation into disrepute. Particularly risky posts here could include any public 'airing' of gripes or complaints about a colleague, supervisor, service, or the programme, even if these appear relatively minor. Even private emails or WhatsApp messages could be potentially problematic, as they could have the potential to re-appear in a setting other than the original one they were written for.
- Be minded that 'liking' a post could be construed as endorsing the content of the original post.
- Protect your privacy. Consider the kinds of information that you want to be available about yourself and to whom. Ensure that you regularly check your privacy settings. For any personal accounts where you do not intend to create a public 'profile', we suggest highest levels of privacy should be used in your settings, so that you are not identifiable directly by searching.
- Remember that images posted online by family or friends may be more widely accessible as they may not set privacy settings as tightly as you do.
- Be minded that social networking sites can make it easier to engage (intentionally or unintentionally) in professional misconduct.
- Report the misconduct of other members on such social networking sites to any relevant parties (which may include the university or the HCPC).
- Bear in mind that social media tends to work to produce overly simplified narratives around complex issues, often splitting them into 'good' and 'bad' positions. Furthermore, the 'echo chamber' means that divergent opinions may be minimised or dismissed. Professionally, we have a responsibility to provide the public with accurate and evidence-based information, and most channels of social media are not well attuned to conveying such

complexities. Providing or endorsing inaccurate or over-simplified narratives has the potential to cause harm and damage professional credibility.

- Finally, remember also that whilst you are training you are not a qualified practitioner and therefore psychological *opinion* which you offer should be subject to clinical supervisory approval (e.g. in a written report). Therefore, offering psychological opinion online, particularly anything that is at all divergent from established psychological positions and evidence, is potentially risky.

You should not:

- Establish inappropriate relationships with clients and service users online ('inappropriate' includes any relationship outside of the parameters of your established/intended professional engagement).
- Discuss work or university-related issues online in any public or 'open' forum.
- Publish pictures of clients or service users online (this may occur from a corporate account where formal signed consent is obtained).
- Publish pictures of NHS premises (without the explicit permission of the relevant organisation)
- Discuss or otherwise identify client or related information in any type of online posting, even anonymously. Any post reflecting on a specific clinical interaction is highly likely to be inappropriate unless explicit formal consent has been obtained.
- Use social networking sites for whistleblowing or raising concerns. Established channels exist for this.
- Post defamatory or potentially defamatory comments about individuals or institutions, which can include anything that 'injures the reputation of another person'. Defamation law can apply to any comments posted on the internet, irrespective of whether they are made in a personal or professional capacity. Please note that if a defamation claim was made against you would likely be held *personally* liable for such comments.

Doctorate in Clinical Psychology Entry Agreement

All psychology trainees who study for a university degree that prepares them to work as a clinical psychologist are directly exposed within their clinical training to many aspects of the clinical environment. It is therefore essential that clinical psychology trainees fulfil the requirements of the HCPC outlined in their Standards of Conduct, Performance and Ethics and their Guidance on Conduct and Ethics for Students, and the BPS Code of Ethics and Conduct. In addition, we expect trainees' behaviour to reflect the values of the NHS constitution, namely; 'working together for patients', 'respect and dignity', 'commitment to quality of care', 'compassion', 'improving working lives' and 'everyone counts'. We believe that these should apply to Clinical Psychologists at all levels including patients, supervisors, other trainees and programme staff. Therefore before accepting the offer of a place to train as a clinical psychologist at the University of Exeter, we wish you to be aware of our expectations of trainees as regards professional behaviour.

We ask you to agree to the following, as derived from the HCPC/BPS requirements to guide you, as you become a competent practitioner. If you have difficulty with any aspect of the following statements, any member of the course team will discuss with you how best to resolve the matter.

Please read the following statements and sign to confirm that you understand them and will conform to them, and return it to the PGR Support Team (DClinPsy@exeter.ac.uk)**.**

1. When I meet patients and listen to them, I will respect their views, treat them in a polite and compassionate manner, respect their privacy and dignity and respect their right to refuse to take part in my learning.
2. I will not allow my views about a person's lifestyle, culture, racialised identity, age, disability, religion and belief, gender reassignment, race, sex or sexual orientation, social status or perceived economic worth to prejudice my interaction with patients, peers, lecturers, programme staff or colleagues.
3. I will not abuse the trust of a patient or a vulnerable person and I will not enter into an unprofessional relationship with another person in the clinical context for example, a patient with whom I've come into contact.
4. If I should witness, or become aware of, instances of poor practice, particularly in relation to the care of service-users, I will act with integrity and take responsibility for raising my concerns with the appropriate person(s).
5. I will make clear to others that I am a trainee clinical psychologist and not a qualified practitioner. I understand, accept and agree to be bound by the

principle of confidentiality of patient records and patient data. I will not discuss patients with other students and others outside of the clinical setting except anonymously. I will respect all clinical and other records of patients.

6. I will maintain, appropriate standards of dress, appearance and personal hygiene so as not to disquiet patients, lecturers or colleagues.

7. I will engage in psychological work with patients irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, racialised identity, religion and belief, sex and sexual orientation.

8. Before undertaking any psychological assessment or intervention, I will obtain permission to do so from the patient (or appropriate other where this is not possible because of age or competence).

9. I will participate in practicing clinical skills with other students, for the purpose of learning skills, which may involve role plays and personal disclosure.

10. I will attend all placements, classes and other teaching sessions as requested by the regulations of the Doctorate in Clinical Psychology programme. I will travel as required to the placements designated.

11. I recognise that successful completion of the course may require study outside of contracted hours.

12. I will submit all assignments to deadlines as described in the assessment timeline.

13. I will not plagiarise material from other sources and submit it as my own work.

14. I will inform the Programme Director if I am arrested, charged, convicted, cautioned, or reprimanded in relation to any offence during my time as a student.

15. I will communicate effectively and appropriately with patients, supervisors, course staff and peers in a timely way.

16. I will carefully evaluate and take action to minimise risk to others and myself.

17. I will take responsibility for my own learning and be proactive in finding learning opportunities.

18. I will take responsibility for my interactions with my cohort and course staff, and conduct these in a respectful and professional manner.

19. I will complete all occupational health appointments as requested by the Doctorate in Clinical Psychology programme and provide any authenticated reports of laboratory tests as may be required.

20. I will inform the Programme Director if there is any significant change to my health that might affect my fitness to practice as a trainee and/or subsequently as a clinical psychologist.

21. I confirm the details in my application to the Clearing House for clinical psychology courses, and that I did not omit any important or relevant information on my application. I understand that if the Doctorate in Clinical

Psychology programme discovers that I have been untruthful in my application it reserves the right to withdraw an offer or terminate the course of study.

22. I confirm that I have read and understood the above statements and will conform to them whilst a trainee clinical psychologist. I also confirm that I have read the HCPC Standards of Conduct Performance and Ethics, the HCPC Guidance on Conduct and Ethics for Students and the BPS Code of Ethics and Conduct.

Name:………………………………………………………………………………

Signature: …………………………………………………………………………

Date: ……………………………………………………………………………

The BPS Code can be downloaded from: https://www.bps.org.uk/guideline/code-ethics-and-conduct

HCPC Code can be downloaded from: https://www.bps.org.uk/guideline/bps-practice-guidelines-2017

The HCPC Code for Students can be downloaded from: https://www.hcpc-uk.org/globalassets/resources/guidance/guidance-on-conduct-and-ethics-for-students.pdf

The values outlined in the NHS constitution can be downloaded from: www.nhs.uk/nhsengland/thenhs/about/pages/nhscoreprinciples.aspx

Professional and personal development

We are committed to facilitating trainees in their development as reflective scientist practitioners. We see training in clinical psychology as a complex process that presents significant personal, academic, clinical and research challenges and demands. This includes exposure to distress as a routine part of training.

Everyone is different, and trainees will want to take their own routes towards understanding how their own personal attributes and backgrounds impact upon their professional interactions. Within the programme, trainees will have opportunities to reflect in a variety of settings: in reflective journals, in supervision, in lecturers and placement, and through appraisal. Trainees are expected to take part in all teaching and placement activities as part of their role, and in line with new HCPC procedures.

Being in the client position

It can be helpful for trainees to experience, even if only briefly, being in the position of client, who brings their own personal experiences for confidential consideration. Taking part in such a process can help trainees to develop empathy and respect for clients' perspectives.

In keeping with the adult learner model, we encourage trainees to select an approach that meets their needs, so we do not require that the approach chosen be formally approved by programme team members. However, trainees should discuss possible options with their line manager or supervisor We do not have a formal list of "approved practitioners". Trainees must, however, take into account whether the practitioner has a recognised qualification or accreditation (e.g., BABCP or UKCP registered). Trainees take responsibility for their own choices and therefore cannot hold the university or their employer responsible for any consequences.

When deciding whether an approach, therapist or counsellor is appropriate, and whether the time is right, trainees need to consider carefully their preferences and hopes for the work. We would advise that trainees discuss with the practitioner what can realistically be achieved in a fairly limited time. We know from research and experience that good personal relationships are important in promoting change and development during training.

Mandatory Training Courses

There is some mandatory training that you must complete as a PGR student at the University of Exeter, visit ELE2 for more details: https://vle.exeter.ac.uk/course/view.php?id=6718

Employment and student status

Trainees have a dual status as postgraduate students and NHS employees. Their formal title is "trainee clinical psychologist". Trainees have a contract of employment with Somerset Foundation NHS Trust as well as being registered as full-time University of Exeter postgraduate students. Trainees receive a salary at the end of each month, and travelling expenses are paid for travel from the placement base in host Trusts. On successful completion of the programme, trainees are awarded a Doctorate in Clinical Psychology (DClinPsy) which confers eligibility to apply for registration with the HCPC as a clinical psychologist in the UK. All trainees are required to complete the full programme of training in order to qualify.

The Programme Director is the overall line manager for trainees, although this function is normally devolved to the trainee's line manager for routine matters. The Somerset Foundation NHS Trust Human Resources Department will provide advice about NHS employment issues.

Trainees have a full-time contract. Trainees are normally expected to be in attendance at the university on those days set aside for academic work, and on those days will play a full part in the life of the college, as well as attending those sessions specially scheduled for the programme. This also means not scheduling placement-related activities on those days.

In a similar way, trainees are normally expected to be in full attendance at their current placement base (or elsewhere as negotiated and required by the current placement supervisor) on the days set aside for supervised placement work.

Other Employment

For many trainees, the idea of taking on a second job outside of training would be hard to contemplate. However, we do have occasional requests about this and so it is helpful to outline a clear position. The programme's stance is that the Exeter DClinPsy is a full-time programme. Trainees can reasonably expect that the inherent nature of the programme of study as an adult learner will mean that, at times, the demands of the programme will extend outside of a '9-5' pattern (though please be clear this does not mean that we expect trainees to work every weekend or every evening or during annual leave). Unlike hobbies and other interests beyond training, which we strongly encourage trainees to incorporate into their lives, obligations to another employer would place you under additional stress and limit your learning opportunities on the DClinPsy.

Termination of Employment

Where a trainee terminates their employment or has their employment terminated, they will be required to withdraw from the training programme and will not be in a position to complete their training.

Professional Practice and Capability Procedures

The DClinPsy has partnership arrangements with NHS organisations, which raises some particular issues concerning procedures for capability or fitness to study or practice. All trainees are employed by Somerset Foundation NHS Trust and their employment is dependent on their being on the training programme. Programme failure results in termination of employment.

The University procedures:

1. University of Exeter Policy and Procedures for Fitness to Practice (FtP): http://www.exeter.ac.uk/staff/policies/calendar/part1/otherregs/fitness/

2. All students must abide by the Academic Conduct and Practice Policy as stated in the TQA Manual: https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/aph/managingacademicmisconduct/

Annual, Sick Leave and Other Leave Policy

Annual Leave

Trainees are entitled to annual leave in accordance with Agenda for Change provision (27 days annual leave for people with less than 5 years NHS service). In addition to annual leave, trainees are entitled to 8 statutory and public holidays, some of which are fixed. As NHS employees, the annual leave year runs from 1st April to 31st March, rather than coinciding with academic years.

During the first year of training, a pro rata amount of annual leave (usually 13.5 days) is available up to 31st March. In cases where there is a long service in the NHS (five years plus) trainees will be entitled to additional annual leave the details of which should be agreed with their nominated line manager and relevant Personnel / Human Resources (HR) department.

 Trainees are expected to negotiate leave times with their university line manager and placement supervisors, and gain permission to take leave. It is important as part of our self-care that we take all our annual leave within the year. Annual leave cannot be carried over into the following year but in exceptional circumstances, up to 5 days of untaken annual leave can be carried forward at the discretion of a trainee's line manager. Once annual leave is approved, or carrying over 5 days is approved, please inform the PGR Support Team at DClinPsy@exeter.ac.uk

Booking Annual Leave
To book annual leave, you require authorisation from your placement supervisor, clinical tutor and to inform your line manager.

Sick Leave Policy

Trainees should notify the PGR Support Team immediately if they are unable to attend teaching, placements or other programme related activities for reasons of sickness or other exceptional reasons (e.g., attending funerals). For HCPC purposes you are required to sign to register your presence in teaching on a daily basis.

As per Chapter 12 of the Learning and Teaching Support Handbook from the TQA manual: http://as.exeter.ac.uk/academic-policy-standards/tqa-manual/lts/studentillness/ if you are absent from your programme due to ill health then a Personal Sickness Certificate (which can be found on ELE2) will need to be

sent to DClinPsy@exeter.ac.uk for periods of up to 7 consecutive days. Any absence beyond this will require a doctor's certificate.

Reporting of Sick Leave

Trainees have a responsibility to be familiar with the NHS Trust's procedures for managing sickness and to co-operate with its implementation.

All trainees are expected to attend work and carry out their duties.

When unable to do so you are required to:

- Inform your place of work of your non-attendance as soon as possible and provide a reason for the absence together with a likely date of return. In this respect the nominated person will be the PGR Support Team (dclinpsy@exeter.ac.uk) and in addition, if on clinical placement, your clinical placement supervisor and your clinical tutor.

- Report the absence no later than one hour after the start of your working day.

- Notify the nominated person of your intended date of return to work as soon as possible.

- Provide a GP certificate if the absence lasts 7 calendar days or more.

- Complete a Return to Work Interview Record on completion of the absence and return it to the PGR Support Team via email (dclinpsy@exeter.ac.uk).

Within the Trust's Managing Sickness Policy, a Return to Work interview should be completed upon an individual's return from their absence. In the case of trainees on placement this can be difficult, therefore trainees will be required to complete the Return to Work form.

Failure to report sickness absence will mean that non-attendance will be marked as unauthorised leave and as such will be unpaid.

As with all absences in the workplace, only those members of staff who need to be informed of your absence will be. This is likely to be the teaching staff who delivers a session on the day and your line manager on a need to know basis.

For extended absences (in excess of 28 days), interruptions or withdrawals, the programme staff, as detailed above, will be informed of the occurrence and likely duration of the absence.

If a trainee is signed off on sick leave for 4 weeks or more they should also apply for an interruption via MyPGR and upload the sick note as medical evidence. A guide on how to apply for an interruption via MyPGR can be found here: https://as.exeter.ac.uk/sits/howdoi/mypgr/

If a trainee has an individual learning plan (ILP) that includes recommended reasonable adjustments related to attendance (for example, 'the trainee will attend where possible, but this may fluctuate depending on their health'), such absences will be reported in the normal way (see above) and be recorded by the NHS as sickness absence. The University will also keep a record categorising these absences as 'disability-related sickness absence.' This applies to both teaching and placement absences.

Other Leave Arrangements

All other leave requests such as Unpaid Leave, Compassionate leave, Emergency leave, must be approved by the trainee's line manager and the PGR Support Team informed.

For information about Somerset NHS Foundation Trust Special Leave Policy, please see the document on the section: Employer Policies within this programme handbook.

For more information about PGR student absence policy please see the following link: **https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/pgr/student-absence/**

Study Days

The DClinPsy programme is research-led in terms of teaching, clinical practice, and independent research. Trainees can use their study time for relevant reading, completing course assignments and research.

Study time is provided each year according to the academic demands of the programme. More study time is provided in Year 3 to reflect the increased demands of Thesis research (e.g., data collection, analysis, write-up etc.). Trainees can use the allocated study time in each year according to their own study demands. In negotiation with the clinical supervisor, clinical tutor, line manager and research supervisor, some placement time can also be used for the QIP (in Years 1 and 2) and relevant clinical reading.

Study days are normally timetabled but there are also a number of study days trainees can choose to take on placement days. Trainees can spread these study days throughout the year and can take them any time providing they have authorisation from their placement supervisor, clinical tutor and line manager.

Year 1: In Year 1 trainees have 19 study days which they can take during placement.

Year 2: In Year 2 trainees have 36 study days which they can take during placement.

Year 3: In Year 3 trainee have 64.5 study days which they can take during placement.

Guidance for use of Study Days

General rules about study days:

- If you wish to swap a study day with annual leave (outside of the teaching block) please again negotiate with your placement supervisor(s) and let the DClinPGR Support Team know about annual leave. Please remember that you cannot take annual leave during a teaching block.

Specific rules for use of study days and annual leave:

1. Annual leave: Annual leave can be taken outside of the teaching blocks if it is negotiated with your supervisor. Please inform the DClinPGR Support Team in advance of taking leave.
2. Flexible use: All study days can be used flexibly depending on your own work plan (see Research Handbook for guidance on the proportion of study days that should be used for research).
3. Mini-viva/Appraisals/Selection periods: Study days cannot be taken during you Mini-viva day, appraisal meetings and the day(s) you will be helping with the selection process on the DClinPsy programme.

Interruptions

The University's Statement of Procedures on interruption is accessible here: http://admin.exeter.ac.uk/academic/tls/tqa/Part 7/7Gpgrregproc.pdf

If you feel you would benefit from a period of interruption, you should discuss the matter with your line manager and/or your PGR Support Officer.

In order to make an interruption request, you will need to complete the Interruption Form which is found in MyPGR.

Employer Policies

Please find the following employer policies on ELE2.

- Special Leave Policy (including amongst others: Compassionate and Bereavement, Emergency Leave, Parental Leave, Jury Service, Fertility IVF)
- Special Leave Application
- Maternity/Paternity Leave Policy

Please contact your NHS HR representative: human.resources@somersetft.nhs.uk for guidance on the Employer's Policies

Health and Safety Guidance

Please contact your Trust for guidance on Health and Safety practices and regulations: human.resources@somersetft.nhs.uk

You can find the following policies on ELE2:

General

Health and Safety Policy

How to Report an Incident

Contamination Prevention

Action to be taken in the event of a contamination injury

Contamination Injuries Management

Moving and Handling Safety

Guidelines for the lifting of inert loads

Guidelines on the moving and handling of loads

Moving and Handling Risk Assessment

Personal Safety

DSE Policy

DSE User Self Assessment form

Hand Hygiene Policy

How do I look after my skin

Infection Control

Lone Working

Violence and Aggression

Library access

Information about library access is on the library pages of the University website:
http://as.exeter.ac.uk/library/

Please also find library information on ELE2.

Access to library when on placement.

The NHS library services can provide an excellent resource for trainees. It is worthwhile going to meet the librarian in your Host Trust to ask what specific tasks they can help with and register for a SWIMS NHS library card which can then be used in all trusts. Librarians are very good at sourcing books and they have access to many more clinically relevant books than the University library, moreover they are often very happy to post them to your placement office. They can also keep you updated on new publications in your interest area and they can conduct literature searches if requested.

Library Charter for Student on Placement

Your main library for the duration of your course is the University of Exeter library. You will be able to access electronic resources remotely.

Whilst you are on placement, you may also use your local NHS library. To find your nearest NHS library and its opening hours, go to: www.hlisd.org

Student Support / Wellbeing / Individual Learning Plans / Disabled Student's Allowance

We understand that clear advice on accessing support while on the programme is very important to our trainees. The information below is very detailed so please see the **Support Map on ELE2** for a more concise overview of the many support avenues available to you.

Line management

Trainees will be allocated to a line manager (always a member of the programme staff team) at the beginning of the programme. Where possible, the same programme team member will remain the line manager throughout the duration of training. When you start the programme, your line manager will meet you in the first two weeks and after this once a month until the December break. Going forward, your line manager has scheduled meetings twice a year, one in about May and the second at the end of the academic year to conduct your annual appraisal (these appraisal points are indicated in the timetable. An appraisal checklist/form is completed by the trainee in advance of the meeting and emailed to the line manager. This forms the basis for the discussion. At the annual appraisal meeting, the line manager will ask for feedback from your clinical tutor and research supervisor. Outside of these scheduled meetings, if you are experiencing problems that impact on your training, please let your line manager know and they can help you find the most appropriate support. For the line management relationship to work well, it is important for the line manager and trainee to develop a collaborative, open-minded relationship. If problems arise, the line manager and/or trainee should speak to the Programme Director in the first instance. If the line manager is the Programme Director, the trainee should approach another member of the senior management team.

Please note, in the unfortunate event that you are arrested whilst you are registered on the Doctor of Clinical Psychology Programme at the University of Exeter, it is your responsibility to inform your line manager in a timely manner. It is likely that this information will then be shared with your employer, Somerset FT.

Line Manager/ appraisal system has several specific functions:

- **Delegated Line Management.** The trainee's first point of contact for all management issues should be their line manager. Trainees would normally be expected to approach their line manager for a reference on completion of the programme when applying for posts.
- **Developmental / formative**. The core function of the appraisal system is to support and develop trainees' personal and professional development. It aims to provide a formal, structured opportunity for trainees to reflect on their experience of the teaching, supervised clinical practice, assessment and learning across the programme as a whole and consider their personal and professional development needs. It aims to encourage trainees to engage in self-appraisal – especially recognising and building on strengths and identifying, accepting and working on areas of weakness. Trainees are encouraged to identify and clarify learning goals for academic, clinical and research work. Trainees are then encouraged to consider how they might achieve these goals. This process would normally include being able to recognise the limits of their competence, work within these limits and make use of others to support their learning and professional development. In later stages of training, the appraisal system aims to help trainees develop their career plans and to think about how to integrate their basic training with continuing professional development.
- **Pastoral.** The appraisal system aims to provide individualised practical and emotional support with programme related issues. Often these issues can be appropriately discussed in the context of appraisal. If not, the line manager and trainee should discuss a suitable alternative individual with whom to work on these issues.
- **Advocacy.** The line manager would advocate on behalf of the trainee when needed within the programme.

University Wellbeing services

Trainees in our clinical psychology programme have a dual status: they are both full time postgraduate research (PGR) students at the University of Exeter as well as employees at Somerset NHS Foundation Trust. The role of the university systems is primarily to support the academic and research components of the programme, whereas Somerset NHS Foundation Trust will provide support with working on placement. The University arrangements are provided by the student Wellbeing service: https://www.exeter.ac.uk/students/wellbeing/

Extra support for PGR students

- PGR students have access to a range of support services: https://www.exeter.ac.uk/research/doctoralcollege/support/pgrsupportandservices/wellbeing/
- PGR students have access to Spectrum Life: Spectrum Life is an Employee Assistance Programme (EAP) which is a confidential, neutral service provided by an external company to support colleagues and PGR students at the University. https://www.exeter.ac.uk/staff/wellbeing/spectrum/

Individual Learning Plans

An Individual Learning Plan (ILP) is a document that informs the programme, via the Academic College within the University, of the recommended "reasonable adjustments" (http://as.exeter.ac.uk/academic-policy-standards/tqa-manual/lts/ilp/#defreason) that may be put in place to support a student with the academic and research elements of the programme. The reasonable adjustments within an ILP will be individualised to suit each trainee's requirements. For more information regarding the process of getting an ILP can be found here: https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/lts/ilp/#summaryprocess

For more information on ILP's in general please visit https://www.exeter.ac.uk/students/wellbeing/support/

Once an ILP is in place it will be shared with key people in the programme, such as the trainee's line manager, their supervisory team as well as the Academic, Clinical and Research Directors, to ensure that reasonable adjustments are implemented. The line manager should be the first point of contact for the trainee to discuss their ILP. The line manager will agree with the trainee on how to implement the reasonable adjustments and how to share it with other internal academic staff and external speakers. However, it is the trainee's responsibility to agree and decide to share their ILP with an external speaker and to send them a copy of their ILP in advance of their session if required.

Disabled Student's Allowance (DSA)

Disabled Students' Allowance (DSA) (https://www.gov.uk/disabled-students-allowance-dsa) is a Government scheme and provides support to cover the study-related costs you have because of a mental health problem, long term illness or any other disability.

Students can apply for DSA as soon as they receive an offer on the Doctor of Clinical Psychology programme at the University of Exeter. Please send your completed application form to us at the following email address: dclinpsy@exeter.ac.uk . We will then complete the relevant section on the form that proves that you have a place on the programme and we will send the form back to you to sign and submit.

Support on Placement

- If a trainee requires support at work/placement, then they should contact their HR advisor who will refer them to Occupational Health.
- Trainees who need support at work/placement can also apply for Access to work support: https://www.gov.uk/access-to-work

Additional support

Trainees who are experiencing mental health issues whilst on the programme are encouraged to make use of the various support systems available to them through their GP, NHS services, University Wellbeing services, Occupational Health at either the University or Somerset Trust and the Somerset Employee Assistance Programme. If these issues have arisen from engagement in the training and the appropriate support is not available through the above support systems, trainees should discuss their support needs with their line manager or the Clinical Practice Director and agree what support might be helpful and how they might access it.

Trainees who may need extra support which is not covered by the DSA and not offered by student Wellbeing service should discuss their support needs with their line manager. Please see this link for more information: https://www.exeter.ac.uk/students/wellbeing/support/specificlearningdifficulties/screening/

Other support systems

Buddy System

One of the greatest forms of support reported by trainees is that provided by other trainees. Prior to starting the course each trainee will be put in touch with one of our second year trainees, who will act as a 'buddy' throughout the three years of

training. Your buddy will welcome trainees before they arrive and help new trainees settle in. This will be particularly important for trainees who move to the region from elsewhere and who may want advice about travelling and places to live.

On starting the programme there is a teaching block, where trainees from all cohorts spend time face-to-face at the university for teaching. This offers an opportunity for you to meet up with and get to know your buddy. This enables an opportunity for peer support during periods of transition. In addition, it is often the case that your buddy will be able to offer advice and information regarding questions you may have about paperwork, academic assignments and research. These also provide a good opportunity to share information about aspects of placement experience.

EDI Support and Mentoring Schemes

EDI tutors can offer 1:1 or group support to trainees on issues/ideas/opportunities related to EDI. All trainees can contact the EDI tutors for support. Emails can be found below.

The role of the EDI lead and EDI tutors is to oversee the EDI initiatives established by the course. Some examples of the initiatives taking place – Racial Trauma informed Anti-racism Clinical Supervisor training, Decolonising the curriculum workshops, mentoring schemes, outlining resources and areas of support for trainees with disabilities, Impact Equity Survey and an EDI committee. The EDI tutors support the EDI Lead (Dr Catherine Butler) with the development and delivery of the DClinPsy EDI objectives. They contribute to the evaluation of EDI actions. They also provide teaching and workshops on EDI to the course team, supervisors, and trainees. EDI Tutors aim to help the course to think about EDI related issues and how they can be threaded throughout the course. EDI tutors also aim to identify areas where current provision needs revision or improvement and contribute to the planning, design and development of objectives and material, considering the clinical and sensitive nature of the subject and ensuring the appropriate learning activities are used.

- EDI Lead: Dr Catherine Butler (c.a.butler@exeter.ac.uk)
- EDI Tutor: Dr Suzanne Azer (s.a.azer@exeter.ac.uk)
- EDI Tutor: Dr Sabinah Janally (s.janally@exeter.ac.uk)
- EDI Tutor: Dr Alexis Clarke (a.clarke8@exeter.ac.uk)

Mentoring Schemes for DClinPsy trainees

- Amplify Trainee Group Mentoring Scheme – for global majority trainees on the following courses – Exeter, Bath, South Wales, Southampton and Plymouth. To find out more information please contact Dr Sabinah Janally s.janally@exeter.ac.uk
- European Trainee Group Mentoring Scheme – for European trainees on UK-based Clinical Psychology Doctorate Programmes. To find out more please contact Kimon Butzbach kb718@exeter.ac.uk and Vasiliki Anagnostopoulou vasiliki.anagnostopoulou@plymouth.ac.uk

Exeter Speaks Out

The University of Exeter is an inclusive community, where everyone has the right to be treated with respect. Harassment, bullying, intimidation and discrimination (for example racism, homophobia, sexual discrimination) go against all we stand for and will not be tolerated. If you've experienced or witnessed any of the above we encourage you to report it and to get the support you might need.

For more information on how to report an incident please visit the following link: https://www.exeter.ac.uk/about/speakout/report/

Programme governance

Organisational Structure

A number of constituted committees and non-constituted advisory groups and meetings are instrumental in the organisation and management of the programme. These are organised to enable key programme stakeholders to contribute to the organisation of the programme. The next sections detail the relationships between the main committees and boards that are involved in the efficient organisation of the programme.

University of Exeter DClinPsy Committees
APAC

Chair: Programme director
Secretary: Programme administrator

Remit: Assessment of trainees, student progression through the programme, recommendation of award of degrees. Reports to the Postgraduate Faculty

Membership: Staff responsible for assessment, External examiner(s)

(ex officio, except when Board awards degrees)

Meets: Annually, to coincide with completion of assessment cycles and Faculty Board. Can be called at other times if required.

Senior Management Group

Chair: Programme Director

Secretary: PGR Support Officer

Remit: Communication concerning relevant issues concerning the programme, trainee updates, KPIs and major decision-making forum.

Membership: Programme director, academic, clinical, research directors, programme administrator

Meets: Every two weeks throughout the year.

Post Graduate Research Liaison Forum

http://as.exeter.ac.uk/academic-policy-standards/tqa-manual/pgr/pgrliaison/

Chair: Trainee Representative

Secretary: A member of the PGR Support Team

Remit: Review and audit academic, clinical and research modules. To monitor academic, clinical and research standards.

Membership: Senior management team, locality trainee representatives (3 from each cohort), NHS representatives, convenor representatives

Meets: Twice a year- normally terms 1 and 3

Joint Training Committee (JTC)

Chair: Programme director

Secretary: PGR Support Officer

Remit: This is the primary decision-making body for clinical psychology training.

Membership: Members of the DClinPsy staff team, trainee representatives (1 from each cohort), Heads of service, supervisors, Lived Experience Group, HESW member.

Meets: Three times per year.

Supervisors Committee

Chair & Vice-chair: Nominated supervisors

Secretary: A member of the PGR Support Team

Remit: To provide effective two-way communication between clinical supervisors and training programme. Report to the SMG/DCPTC.

Membership: Liaison tutors, clinical directors, supervisors in the relevant counties from across specialties, trainee representative (one from each cohort), DClinPsy programme staff team.

Meets: Not less than twice a year

Curriculum Committee

Chair: Academic Director
Secretary: A member of the PGR Support Team

Remit: Review of timetable and assessments, review of curriculum developments (e.g. decolonisation), review of key issues arising from teaching feedback and link trainees. Report to the SMG/DCPTC

Membership: Programme Director, Strand convenors, 2 trainee representatives from each cohort, Experts by experience, NHS regional supervisors.

Meets: Termly to review previous terms teaching and assessments. Can be called at other times if required.

Admissions Committee

Chair: Selection Lead
Secretary: A member of the PGR Support Team

Remit: Review of selection processes including shortlisting and interviews, review of selection developments (e.g. Contextual Admissions), review of diversity and outreach initiatives. Reports to the SMG/DCPTC

Membership: Programme Director, selection lead, 2 trainee representatives from each cohort, Experts by experience and NHS regional supervisors involved in shortlisting/interviewing, all staff invited as optional additions where relevant.

Meets: Termly to review processes after selection, to plan developments and to plan selection. Can be called at other times if required.

EDI Committee

Chair: EDI tutor

Secretary: A member of the PGR Support Team

Remit: The Exeter DClinPsy Equity, Diversity and Inclusion (EDI) Committee will aim to promote and facilitate equity, diversity, and inclusion within the University of Exeter DClinPsy Course. It will maintain and support the EDI agenda across the academic, research, and clinical strands, as well as on placements. The committee will oversee the implementation and monitor the process of the EDI agenda. It will ensure that equity, inclusion, and diversity principles are fully embedded in the course going forward. The hope is to create an inclusive culture where all trainees, staff members and stakeholders feel valued.

Membership: Programme Director, Clinical Director, Academic Director, Research Director, 2 trainee representatives from each cohort, Experts by experience and NHS regional supervisors, all staff invited as optional additions where relevant.

Meets: Termly to review EDI processes and developments on the programme and to plan future developments. Can be called at other times if required.

Staff Team Meeting

Chair: Programme director

Remit: Communication and day-to-day management of programme, whenever this requires wider staff input

Membership: DClinPsy staff team

Meets: Once a month.

Other meetings

Details of other meetings can be found in the TQA manual.

Trainee Representation on Committees

Trainees meet to decide on representation for the different committees. Thereafter trainee representatives are required to attend committees and meetings so that their ideas and concerns can play a central role in the programme organisation. It is acceptable to ask another trainee to stand in at a particular meeting if the normal representative is unable to attend. Missing teaching, study time or placement

(depending on the timing of the committee) is expected so that trainees are in attendance.

Assessment procedures and conventions, and Mitigation

Assignments and assessments are set out throughout the three years of training in each of the modules that lead to the award of DClinPsy: academic, clinical and research work. Assessment are pieces of work that the trainee must Pass (these are called summative), whereas assignments are not formally assessed but are still required pieces of work as they are essential in developing trainees' expertise and skills in particular areas (these are called formative).

Mitigation **for pre-thesis assignments**

We understand that sometimes people are unable to submit work by the set deadline due to health, wellbeing, personal or other extenuating circumstances. Students can request an extension to the pre-thesis assignments via the mitigation procedure. More information about the mitigation procedure can be found on the following link:
http://www.exeter.ac.uk/students/infopoints/yourinfopointservices/mitigation/

Please note that the Mitigation form for the DClinPsy programme can be found on the ELE2 page for the programme. The mitigation form and supportive evidence for this programme should be submitted to the following email address: DClin-Exeter-PGRSupport@exeter.ac.uk

Extensions for thesis (MRP)

Please visit the relevant section on the DClinPsy Research Handbook.

Assessment of Pre-Thesis/Dissertation Modules

Details of the Professional Doctorate regulations are part of the TQA manual:
https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/pgr/professionaldoctoratepgr/#assess

Submission of Work

Work must be submitted by 13:00 on the relevant deadline date to ELE2. Here is a link to instructions on how to submit work to ELE2: https://www.exeter.ac.uk/students/infopoints/yourinfopointservices/assessments/

For pre-thesis academic and research assignments, submissions should be via ELE2.

All submissions should be accompanied by two coversheets - one signed and the other anonymised. It is essential that you do not submit the signed cover sheet with the work to be marked – there is a separate place to submit this.

- The anonymised cover sheet should be the first page of the assignment being submitted, before the work begins and after the letter detailing revisions made, when resubmitting work.
- The signed form should be uploaded into the separate ELE2 submission point specifically for this purpose. Assessments describing work conducted on placement must be signed off by the supervisor prior to submission.

This ensures that the submission remains anonymous to markers, failure to do so will result in the work being marked as Major(i) because of the breach in confidentiality. Trainees are given the opportunity on the cover sheet (which can be found on ELE2) to ask the marker to provide feedback on a particular aspect of the work. The marker will read the work and provide feedback specific to the trainee's question(s) as part of the formative feedback. Trainees are also asked whether they give permission for their work to be shared as an example for future trainees.

All academic and research pre-thesis assignments must be submitted within the stated word length and trainees are encouraged to use full word allocation. Markers will stop marking at the word limit and so **any work found to be over the word limit may not reach a pass standard.** Resubmissions should aim to be within the word limit, however, **if resubmissions require additional information to be included the word limit can be extended by 10%.**

For information about thesis submission, please refer to the Research Handbook.

Maintaining confidentiality is a vital aspect of maintaining professional standards. Any breaches in confidentiality in any assessments will result in the assessment automatically being graded as a Major Amendment (i).

Please see the guidance on Confidentiality and Consent in the Academic Handbook for further information.

All work should be submitted on ELE2 as PDF and should be labelled as follows:

- Title of the Assessment, Student Number (e.g. Professional Issues Essay, student 5700356).
- **The documents should not be locked or in 'read only' mode**. This allows the markers to check the word count. All work should be typed with double line spacing, paginated and follow the Publication Manual of the American Psychological Association, 7th Edition.
- The course operates a blind marking system for assessed work where possible and trainees are encouraged to submit their work in a way that means they are not identifiable, so as to ensure that we can operate this system. However, there may be times where it is appropriate for trainees to divulge personal information if it is relevant to the piece of work, e.g. reflecting on their racialised identity or gender in relation to the work.
- For individual or group presentations, work must be presented at the time and date that it has been timetabled. The same conventions will apply for presented as for written work, with respect to marking and feedback. If a trainee is absent from a group presentation, normally the group will proceed without the trainee and indicate what the trainee would have contributed (they will not be marked down for this missing contribution). The trainee will then make a presentation to appropriate markers. If trainees miss this vital group work, a comparable piece of work will be set.

Resubmission of Work

All resubmitted work MUST be accompanied by a letter to the marker detailing what changes have been made in the revised work, detailed against every point that the marker has raised (you might want to create a table to do this).

Please note that ELE2 only allows you to submit one file. Therefore, it is essential that you cut and paste your cover letter and put it at the start of your word document that contains the revised work.

Finally, please also highlight in yellow in the revised work where the text has changed so that the marker can quickly see this.

Marking and Moderation

The Programme operates a blind marking scheme that is consistent with the TQA Manual 5 - Marking - Teaching Quality Assurance Manual - University of Exeter. The moderator checks a minimum of 10 pieces of work across the markers and marking range and aims to ensure that the feedback is constructive and consistent across trainees. Resubmissions of Minor Amendments that receive a pass are returned without moderation. Resubmissions of Major Amendments are moderated. The markers and moderator would normally be a member of the programme team. In general, the moderator is one individual, but on occasions this role may be shared with another person to manage the marking workload. If clarity is required on what a marker has asked a trainee to do for their resubmission, the trainee can email the PGR Support Team (DClinPsy@exeter.ac.uk) with questions and these will be passed onto the marker to maintain the trainee's confidentiality. The marker will then respond via the PGR support team. If a trainee wishes to object to the mark given, they could follow the university academic appeals procedure (see below) and not contact the marker.

A selection of moderated feedback and associated submissions is sent to the External Examiner. All Major Amendments will be sent to the External Examiner and Major Amendment iii will be discussed with the External Examiner before feedback is sent to the trainee.

Specific guidelines for assessment of research work and its evaluation are detailed in the Research Handbook with additional information available in the research appendices.

Specific guidelines for assessment of clinical work are detailed in the Clinical Handbook.

Work Submitted Late

Work that is submitted late without mitigation is regarded as a serious professional practice issue. Work that is submitted late without agreed mitigation/extenuating circumstances or not submitted, will normally result in a Fail.

Quality Assurance

The Academic Director quality assures assessment of academic work, the Clinical Director quality assures assessment of clinical work, and the Research Director quality assures assessment of the research work. In addition, the external examiners provide external moderation of the assessment process.

Student Academic Appeals

Full details of the University's Academic Appeals Procedure can be found here: https://www.exeter.ac.uk/cgr/student-cases-and-conduct/academicappeals/

Student Complaints Procedure

If you wish to make a formal complaint, full details of the Student Complaints procedure can be found by clicking on the following link: http://www.exeter.ac.uk/staff/policies/calendar/part1/otherregs/complaints/

Academic/Research Misconduct

Academic honesty means always giving full credit for any other people's contributions to our own achievements (i.e. by full and correct referencing) and never falsifying the results of any research.

The University uses plagiarism detection tools and will submit students' assessments for originality checking against an archive of previously submitted work, web pages and journal articles. All students' work submitted in this way is then anonymously stored in their archive for use in future checks. By submitting coursework you confirm that all material in the assignment which is not your own work has been properly identified and referenced and that it has not, in whole or part, been presented elsewhere for assessment. If instances of another's work is found within the student's work that is not appropriately referenced, the student will be referred on to the Academic Misconduct team for an investigation about possible plagiarism.

If students want any further clarification, they should discuss with their academic tutor.

The University offers an online training course about Research Integrity online on ELE2 here: http://vle.exeter.ac.uk/course/view.php?id=6594

- For more information about research misconduct please refer to the following link: https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/pgr/researchmisconduct/

The Academic Misconduct Procedure can be found here:
https://www.exeter.ac.uk/students/administration/complaintsandappeals/academicmisconduct/

Use of generative Artificial Intelligence (AI) tools such as ChatGPT in academic work

It is important that students are aware of how to use generative AI tools such as ChatGPT during their studies in an appropriate and transparent way. Cite them right has some background information on AI tools and academic work. https://www-citethemrightonline-com.uoelibrary.idm.oclc.org/article?docid=b-9781350928060&tocid=b-9781350928060-use-of-artificial-intelligence-sources-in-academic-work&st=ai

AI tools can help you:

- Help improve your grammar and the structure of your writing

- Generate ideas and images

- Answer questions using freely available information on the internet

If you are using an AI tool as part of your academic work, please check that you have used this guidance on how to acknowledge and reference use of these tools.

A. If you are not sure whether you can use generative AI in your academic work, please check with your module convenor for the latest University of Exeter guidance.

B. Please be aware - practice and guidance in this area will change over time, so you should regularly check back to the university guidance for the most up to date advice from the University to ensure your referencing is up to date.

C. While AI tools can be helpful, they should not be used to generate all or part of an assessment which you go on to submit as your own work. **This would be an offence under the University's Academic Conduct and Practice policy (https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/aph/managingacademicmisconduct/)**

D. It is important to note that AI tools do not always output accurate information, so you should verify any content that you plan to use in your academic work. In addition, any content you generate using an AI tool such as ChatGPT will need to be adapted and critically analysed. See advice from Study Zone to help with this

process (this link opens a SharePoint page, please ensure you are logged into Microsoft with your Exeter account. You can navigate to this page via: https://universityofexeteruk.sharepoint.com/sites/StudyZone/).

Progression through the programme

Formal monitoring of progression of students through the programme is via

- AMR (Annual Monitoring Review) https://as.exeter.ac.uk/academic-policy-standards/tqa-manual/pgr/annualmonitoringreview/
- APAC Assessment, Progression and Awarding Committees | Current students | University of Exeter

If, at any time, trainees have concerns about their progress through the programme, they should discuss this with their line manager and/or the appropriate member of staff.

What happens if the Programme Board of Examiners Recommends a Programme Fail?

Programme failure due to Clinical, Academic, and/or Research Assessments:

Please find here a flowchart explaining the marking process for the pre-thesis summative assignments: https://as.exeter.ac.uk/media/level1/academicserviceswebsite/tqa/postgraduateresearch/7M_annex_Prof_Docs_Marking_Scheme_flowchart.pdf

For Academic work: You are required to pass all categories of work subject to summative assessment (non-condonable), so a Fail on any summative assignment will normally result in a recommendation of Programme Failure by DClinPsy APAC which is chaired by the Director of Postgraduate Research Studies for the Professional Doctorates in Psychology and attended by the DClinPsy SMG and Programme External Examiners.

For Clinical work: a failure of two placements will result in programme failure.

For Research: failure of the thesis (Category E on the marking criteria) will result in programme failure.

Also, if a trainee has received ANY TWO of the following, then a recommendation for Programme Failure will normally be made:

- A Clinical Placement Failure
- An Academic or Research assessment receiving a Major Amendment category iii mark.
- A Thesis receiving a Resubmission for DClinPsy (Category D on the marking criteria)

The DClinPsy Doctoral Thesis is examined by an Internal and External Examiner, who together form the Board of Examiners for the Research Thesis component of the DClinPsy.

Programme failure due to serious professional misconduct:

The DClin Programme Director/DPGR will normally recommend to the DClinPsy APAC (exam board) that a trainee fail the programme if, following investigation, the trainee has been found to have engaged in serious professional misconduct – that is, conduct that seriously infringes the current HCPC Codes, the *BPS Code of Ethics and Conduct,* or the *Division of Clinical Psychology Professional Practice Guidelines.* Any actions taken would be carried out in consultation with the employing NHS trust.