



Doctorate in Clinical Psychology: Clinical Placements



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Role of clinical placements in training

- Substantial component of training.
- Promoting effective clinical practice & skills development.
- Competency based learning outcomes.
- Partnership working with local HSC Trusts.
- Engaging, challenging, rewarding, positive learning experience.
- Putting into practice HSC values e.g. compassion, excellence, working together.
- Contributing to service provision and client wellbeing from outset of training.



Where are the QUB DCLinPsy clinical placements?

- Regional training course: placements within different HSC Trusts across NI.
- Clinical areas
 - Varied clinical populations (e.g. adult mental health, child and adolescent services, intellectual disability)
 - Varied service types e.g. inpatient/outpatient, MDTs
 - Varied approaches for intervention: direct/indirect (carers, other health care professionals), individual/group, therapeutic modalities (e.g. CBT, systemic)
- Opportunity to develop own areas of interest and style of working over the course of training.





What do clinical placements involve?

- Close supervision from a qualified Clinical Psychologist. In some settings, supervision may be provided by another Practitioner Psychologist or Psychological Therapist.
- Working clinically with clients across the lifespan.
- Aiming to reduce distress, improve quality of life.
- Assessment, formulation, intervention.
- Broader skill sets and professional issues e.g. understanding professional role, organisational influence, leadership, Equality Diversity and Inclusion, Patient and Public Involvement.

Linking theory and practice

- Apply the teaching at Queen's in clinical work on placement. Theory and research findings should inform clinical practice.
- Clinical science in practice – empirically supported psychological interventions. Evaluate treatment.
- Trainees bring their clinical experience and observations back into the classroom which can complement teaching / enhance learning.
- Reflective scientist-practitioners.



Clinical Placements at QUB

- Across the three years of training:
 - 5 Placements.
 - First year has an extended clinical placement.
 - The 4 clinical placements in years 2 and 3 are approx. 6 months in duration.
 - In placement typically for three days a week during term time and rising to four days during the summer months.

Clinical Placements at QUB

Year 1	Year 2	Year 3
1 Placement	2 Placements	2 Placements
Adult (presentations commonly seen in adulthood)	A child psychology placement and an intellectual disability placement.	Specialist / elective placements (e.g., Neuropsychology, Forensics, Neonatology, Specialist CAMHS, Specialist Paediatric Psychology, Older Adults, Addictions, psychosis, eating disorders, perinatal, specialist ID, LAC)

What do QUB trainees value about their placement experiences?

- Placement audit findings.
- Qualitative feedback highlights positive placement experiences: *“Valued/ confidence/ deeper understanding/ constructive / attuned / inspired/ rigorous / brilliant / exceptional”*
- Developing a **sense of competence and capability** (e.g. through trying out new skills and receiving constructive feedback).
- **Safe space** in supervision for reflection.
- **Supportive and encouraging working environment.**
- Supervisor **approachability and accessibility.**



Placement planning

- Clinical population, Modes of working, Psychometric assessment, Primary and secondary therapeutic models
- EDI considerations, Engagement with service users
- Supervision schedule, Plans for mutual observation, Supervision model
- Trainee goals
- Knowledge base/ reading.



Placement monitoring

- Mid and end of placement meetings.
- Clinical log book. Ensuring accruing required range of clinical experience to meet BPS accreditation criteria.
- Progress, strengths, areas for further development.
- Trainee feedback and experiences of placement.



Trainee support around placements

- Safe and supportive learning environment.
- Placement supervisor.
- Clinical tutor:
 - Consistent point of contact & support
 - Placement meetings
 - Informal contact when needed
 - Getting to know trainees on an individual basis
- Clinical director.
- Placement panel – trainee representatives.
- Importance placed on trainee experience, feedback, wellbeing.



Thank You