**In Vivo Observation of Trainee Clinical Psychologists**

The purpose of this document is to provide a framework for supervisors to directly observe and give feedback on trainees’ clinical work with clients (interventions and formal assessment). This document should be used on all placements as a tool for supervisors to inform their judgments about trainees’ competence as documented on the Clinical Competence Goals and Evaluation Form.

Observations should be done on several occasions (so this does not become a “one-off” assessment).  On each occasion the trainee and the observing supervisor should decide in advance which aspect(s) of the session will be the subject of detailed observation and feedback. During the observation the supervisor notes examples of good practice and areas for improvement / development.

Afterwards, time is set aside for mutual discussion. The trainee is then responsible for recording supervisor feedback and his or her own reflections.

**The final document should be signed off by the trainee and supervisor and submitted as part of the Portfolio of Clinical Experience for each placement period in years one and two (i.e. four submissions over the first two years).**

There are two versions of the document; either of these can be used according to which best fits the work being undertaken.

**1.** To be used for direct work e.g. an assessment or therapy session, or where undertaking testing; in the latter case the ‘Observation of Test Competence’ section is also to be completed. (See too, the appended document BPS Checklist of Competence in Psychological Testing);

**2.** To be used for indirect work for example, participation in a professionals meeting, or for training.

Both versions are divided into four sections:

**1.** Preparing for the session (meeting etc.) and setting the scene

**2.** Conducting the session

**3.** Ending the session

**4.** After the session.

It is possible to use other formalized tools at the discretion of the trainee and the supervisor. This may be particularly appropriate if the supervisor is an accredited practitioner in recognized psychotherapy training, as the completed tool may be used at a later stage to provide evidence for competence if the trainee choose to pursue accreditation in that model themselves (see for example, Hutchins, 2012). Examples of appropriate tools are the Cognitive Therapy Scale – Revised (CTS-R) for cognitive behaviour therapy and the Measure of Cognitive Analytic Therapy Competence (C-CAT) for cognitive analytic therapy. The Clinical Skills Assessment – Rating Form (CSA-RF) is a tool which was specifically developed for use by trainee psychologists and their supervisors and may also be useful for rating the observation of individual therapy work. If you are in any doubt about the appropriateness of an observational tool, please consult with your clinical tutor.

Direct observation may be live or though review of audio or video tape of the session. Consent for the observation must be negotiated with the client(s), with the educational purpose carefully explained.

**References**

Bennett, D. & Parry, G. (2004) A measure of psychotherapeutic competence derived from Cognitive Analytic Therapy, *Psychotherapy Research, 14,* 176-192.

Blackburn, I-M., James, I.A., Milne, D.L., Baker, C., Standart, S., Garland, A., & Reichelt, F.K. (2001) The revised cognitive therapy scale (CTS-R): psychometric properties. *Behavioural and Cognitive Psychotherapy, 29.* 431-446.

Hutchins, J. (2012) Getting CBT accreditation with the BABCP as a newly qualified clinical psychologist….and how we can retain our identity as clinical psychologists. *Clinical Psychology Forum, 235,* 11-15.

Tweed, A., Graber, R., Wang, M. (2010) Assessing Trainee Clinical Psychologists Clinical Competence, *Psychology Learning and Teaching, 9* (2), 50-60

**1. Preparing for the session and setting the scene**

**A) Was the trainee sensitive to issues of capacity and consent?**

Supervisor feedback (strengths and suggestions for improvement)

Trainee reflection (strengths and intentions for improvement)

**B) Was the trainee sensitive to issues of culture, gender, power and diversity?**

Supervisor feedback (strengths and suggestions for improvement)

Trainee reflection (strengths and intentions for improvement)

**C) Was the trainee thoughtful about the location of the session (privacy, convenience, safety, familiarity, suitability for the therapeutic content)?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**D) Was the trainee thoughtful about the potential impact on the session of those participating/observing (supervisors presence/position, advocate? Family member? Carer?)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**E) Did the trainee liaise appropriately with other professionals before the session, and share this with client(s) as necessary?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**F) Was a time period for the session established?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**G) Did the trainee explain the purpose of the meeting to those present?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**H) Additional aspects(s) as negotiated by trainee and supervisor (please specify)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**2. Conducting the session**

**A) Was the level of communication appropriate for the abilities of those present (simplified language/pictures/symbols if needed etc)?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**B) Did the trainee engage with those present at the outset in order to “settle” them (small talk, introductions)?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**C) Were the perspectives of all those present actively sought during the meeting (or were there legitimate reasons for not doing this)?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**D) Did the trainee take sufficient account of the likely emotional experience of those present (in terms of reflecting, further enquiring etc?)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**E) Did the trainee convey genuineness and positive regard in both verbal and non-verbal ways during the session?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**F) Did the trainee demonstrate an understanding of the information being conveyed via appropriate summarising/paraphrasing etc?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**G) Did the trainee use psychological ideas/formulation sensitively and appropriately**?

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**H) Additional aspects(s) as negotiated by trainee and supervisor (please specify)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**3 Ending the session**

**A) Was a “warning” prior to the end of the session given?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**B)** **Overall, did the trainee mange the balance of time available in the session effectively?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**C) Was a closing summary of the outcome of the session provided?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**D) Was this checked with those present for their perspectives?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**E) Were “next steps” discussed prior to finishing the meeting?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**F) Additional aspects(s) as negotiated by trainee and supervisor (please specify)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**4. After the session**

**A) Were notes appropriately written up and filed?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**B) Was consideration given to whether and how to inform relevant parties of the outcome of the meeting (including carers as well as other professionals)?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**C) Was any feedback/comments from clients/carers reflected upon for future action?**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**D) Additional aspects(s) as negotiated by trainee and supervisor (please specify)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**5. Observation of Test Competence (see attached Code of Good Practice for Psychological Testing)**

**A) Questionnaire based assessment: administration of test**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**B) Questionnaire based assessment: scoring**

Supervisor feedback (strengths and suggestions for improvement/development)

Trainee reflection (strengths and intentions for improvement)

**C) Performance based assessment: administration of test**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**D) Performance based assessment: scoring**

Supervisor feedback (strengths and suggestions for improvement/development)

Trainee reflection (strengths and intentions for improvement)

**E) Additional aspect(s) of testing as negotiated by trainee and supervisor (please specify)**

Supervisor feedback (strengths and suggestions for improvement / development)

Trainee reflection (strengths and intentions for improvement)

**Overall suggestions for future development of trainee?**

Supervisor comments

Trainee reflection

**Name of trainee:**

**Name of supervisor:**

**Date of final completion:**

**Code of Good Practice for Psychological Testing**

People who use psychological tests in clinical settings are expected by the British Psychological Society to:

**Responsibility for competence**

**1.**  Take steps to ensure that they are able to meet all the standards of competence

defined by the Society and to endeavour, where possible, to develop and enhance their competence as test users.

**2.** Monitor the limits of their competence in psychometric testing and not to offer

 services which lie outside their competence nor encourage or cause others to do so.

**Procedures and techniques**

**3.** Use tests only in conjunction with other assessment methods and only when their use

 can be supported by the available technical information.

**4.** Administer, score and interpret tests in accordance with the instructions provided by

 the test distributor and to the standards defined by the Society.

**5.** Store test materials securely and to ensure that no unqualified person has access to

them.

**6.** Keep test results securely, in a form suitable for developing norms, validation, and

monitoring for bias.

**Client welfare**

**7.** Obtain the informed consent of potential test takers and/or relevant others, making

sure that they understand why the tests will be used, what will be done with their results and who will be provided with access to them.

**8.** Ensure that all test takers are well informed and well prepared for the test session.

**9.** Give due consideration to factors such as gender, ethnicity, age, disability and special

 needs, educational background and level of ability in using and interpreting the results

 of tests.

**10.** Provide the test taker and other authorised persons with feedback about the results in

 a form which makes clear the implications of the results, is clear and in a style appropriate to their level of understanding.

**11.** Ensure test results are stored securely, are not accessible to unauthorised or

 unqualified persons and are not used for any purposes other than those agreed with

 the test taker.

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**A2.11** Using norm tables, find percentile equivalents of raw scores and then obtain both Z-

scores and T-scores from normal distribution tables.

**Unit 3- The Importance of Reliability and Validity**
Can the Assessee:

**A3.1** Explain the notion of correlation as a measure of the degree of relationship between

two measures. A3.2 Define the conditions under which correlation is maximised

(both positively and negatively) and minimised.
**A3.3** Provide reasonable rough estimates of correlation coefficients represented by various

bivariate scatter grams.
**A3.4** Describe the basic premises of classical test theory - that actual measures are

‘fallible’ scores which contain a ‘true’ score and a random error.
**A3.5** Explain in outline the methods of estimating reliability (internal consistency, test

retest— same on alternate form) and describe their relative pros and cons.
**A3.6** Describe why test scores are unreliable (e.g. measurement error, scoring error,

situational factors, item sampling. etc.).
**A3.7** Describe how reliability is affected by changes in the length of a test.
**A3.8** Describe how reliability is affected by range restriction and how to adjust for such

effects.
**A3.9** Compute limits for different levels of confidence from raw and standard scores using

the standard error of measurement.
**A3.10** Compute the standard error for the difference between two scale scores and for the

sum of two scale scores.
**A3.11** Describe how the degree of correlation between two scale scores affects the reliability

of:

(a) their sum; (b) the difference between them.
**A3.12** Express the basic notion of Generalisability Theory - that reliability concerns the

degree to which one can generalise from results obtained under one set of conditions

to those which would be obtained under another.
**A3.13** Describe and illustrate the distinctions between face, content, construct and criterion-

related validity.
**A3.14** Describe the procedures used to assess concurrent and predictive criterion-related

validities and explain the pros and cons of each procedure.
**A3.15** Describe the relationship between reliability and validity.
**A3.16** Describe the degree to which it may be reasonable to generalise from validity

information obtained in one situation to the use of a test in some other situation.

**Level Aq**
(Questionnaire-based assessments)

**Unit 4 - Administration**
Does the Assessee:

**Q4.1** Arrange for a quiet, private, well-lit environment with furniture and equipment

 appropriate for the questionnaires to be used which maximize comfort and

 concentration.
**Q4.2** Brief candidates on the purpose of each questionnaire and put them at ease while

 maintaining an appropriately businesslike atmosphere.
**Q4.3** Obtain informed consent for the assessment procedures, including how results are to

 be used, who will be given access to them and for how long they will be retained.
**Q4.4** Plan the session taking account of the duration of individual questionnaires, their

 cognitive demands and the likely capacity of the client to tolerate these.

**Q4.5** Check that the client is not unnecessarily hindered by remediable perceptual

difficulties such as poor eyesight by ensuring the client has appropriate perceptual

 aids (e.g. reading glasses).
**Q4.6** Ensure that the client can read and comprehend individual items and the instructions

 given at the beginning of the questionnaire.
**Q4.7** Check to ensure that the client has the necessary materials to complete the

questionnaire (e.g. pencil and eraser).

**Q4.8** Deal appropriately with any questions that arise without compromising the purpose of

the questionnaire.
**Q4.9** When the client has indicated she/he has finished the questionnaire(s), check that all

 items have been completed.

**Q4.10** Lock all materials away in a secure place which is not accessible to people other than

authorised questionnaire-users.
**Q4.11** Thank the client for her/his participation when the final questionnaire has been

 completed, and explain the next stage *(if* any) in the assessment to them.
**Q4.12** Make final entries in the assessment session log — including notes on any particular

 problems which arose during the session which might have affected the client’s

 responses.
**Q4.13** All questionnaire data are kept in a secure place and that access is not given to

 unauthorised personnel.
**Q4.14** All mandatory requirements relating to the client’s rights and obligations under data

 protection legislation are clearly explained to the client and adhered to.

**Unit 5 - Scoring**Can the Assessee:

**Q5.1** Accurately score the client’s performance adhering to the questionnaire manual

 instructions and calculate raw scores.
**Q5.2** Select appropriate norm tables from the questionnaire manual or supplementary

 material.
**Q5.3** Use norm tables to obtain and record relevant percentile and/or standard scores. **Q5.4** Make appropriate use of information provided in the questionnaire manual about cut-

 off scores.

**Unit 6 - Interpretation and Report**
Does the Assessee:

**Q6.1** Either attach suitable cautions to interpretation of the results, or not to use the

 questionnaire, where no relevant norms or cut-off tables are available.
**Q6.2** Give due consideration, where necessary, to the comparability between the client and

 any reference groups, the standard error of the group mean and the standard error of

 measurement of the client’s scores.
**Q6.3** Present norm-based scores within a context which clearly describes the range of

 abilities or other relevant characteristics of the norm group they relate to.

**Q6.4** Describe the meanings of scale scores in terms which are accurate and reflect the

 confidence limits associated with those scores.
**Q6.5** Provide interpretations of scale scores paying due regard to the correlations which

 exist between each pair of scales and for the standard error of their difference.
**Q6.6** Provide feedback of information about results to the client which is matched to the

 client’s ability and understanding.
**Q6.7** Provide the client with opportunities to ask questions, clarify points and comment

 upon the questionnaire and the administration procedure.
**Q6.8** Clearly inform the client about how the information will be presented and to whom.

**Q6.9** Provide written reports for the referring agent which describe the purposes of the

various questionnaires and scales in an accurate and meaningful way.
**Q6.10** Provide written reports for the referring agent which carefully explain any use of

 normed scores in relation to the ability range of the norm group; carefully justify any

 predictions made about future behaviour in relation to the validity information about

 the questionnaire.
**Q6.11** Provide written reports for the referring agent which give clear guidance as to the

 appropriate weight to be placed on the findings.

**Level Ap**
(Performance-based tests)

**Unit 4 - Administration**
Does the Assessee:

**P4.1** Arrange for a quiet, private, well-lit testing environment with furniture and equipment

 appropriate for the tests to be used which maximise comfort and minimise

 opportunities for faking good or bad.
**P4.2** Brief candidates on the purpose of each test and put them at ease while maintaining

 an appropriately businesslike atmosphere.

**P4.3** Obtain informed consent for the testing procedures, including how results are to be

used, who will be given access to them and for how long they will be retained.
**P4.4** Plan the testing session taking account of the duration of individual tests and

 subtests, their cognitive demands, and the likely capacity of the client to tolerate

 testing.
**P4.5** Check all test materials prior to testing, ensuring that all materials are complete and in

 the correct order for presentation to the client.
**P4.6** Check that the client is not unnecessarily hindered by remediable perceptual

 difficulties such as poor eyesight or hearing by ensuring the client has appropriate

 perceptual aids (e.g. reading glasses).
**P4.7** Use standard test instructions to the client as specified by the test manual for each

 subtest and test item.
**P4.8** Where appropriate and as required by the test, time the client’s performance in an

 unobtrusive and efficient manner; adhere strictly to test-specific instructions

 concerning pacing and timing.
**P4.9** Carefully record all aspects of test performance as required by the individual tests,

 including the client’s demeanour, behaviour, concentration and motivation, making

 particular note of test errors.
**P4.10** Monitor the client’s concentration and performance during testing and arrange breaks

 or deferment of testing as necessary.
**P4.11** Deal appropriately with any questions that arise without compromising the purpose of

 the test.

**P4.12** Collect all test materials when each test is completed.
**P4.13** Carry out acareful check against the inventory of materials to ensure that everything

has been returned.

**P4.14** Lock all materials away in a secure place which is not accessible to. people other than

 authorised test-users.
**P4.15** Thank the client for her/his participation when the final test has been completed, and explain the next stage (if any) in the assessment to them.
**P4.16** Make final entries in the test session log - including noteson any particular problems

 which arose during the session which might have affected the client’s performance.

**P4.17** All test data are kept in a secure place and that access is not given to unauthorised

personnel.

**P4.18** All mandatory requirements relating to the client’s rights and obligations under data protection legislation are clearly explained to the client and adhered to.

**Unit 5 - Scoring**
Can the Assessee:

**P5.1** Accurately score the client’s performance adhering to the test manual instructions and

 calculate raw scores.
**P5.2** Select appropriate norm tables from the test manual or supplementary material.
**P5.3** Use norm tables to obtain and record relevant percentile and/or standard scores.
**P5.4** Make appropriate use of information provided in the test manual about cut-off scores.

 **Unit 6- Interpretation and Report**Does the Assessee:

**P6.1** Either attach suitable cautions to interpretation of the results, or not use the test,

 where no relevant norms or cut-off tables are available.

**P6.2** Give due consideration, where necessary, to the comparability between the client and

any reference groups, the standard error of the group mean and the standard error of

 measurement of the client’s scores.
**P6.3** Present norm-based scores within a context which clearly describes the range of

 abilities or other relevant characteristics of the norm group they relate to.
**P6.4** Describe the meanings of scale scores in terms which are accurate and reflect the

 confidence limits associated with those scores.

**P6.5** Provide interpretations of scale scores paying due regard to the correlations which

exist between each pair of scales and for the standard error of their difference.
**P6.6** Provide feedback of information about results to the client which is matched to the

 client’s ability and understanding.

**P6.7** Provide the client with opportunities to ask questions, clarify points and comment

upon the test and the administration procedure.
**P6.8** Clearly inform the client about how the information will be presented and to whom.
**P6.9** Provide written reports for the referring agent which describe the purposes of the

 various tests/subtests in an accurate and meaningful way.
**P6.10** Provide written reports for the referring agent which carefully explain any use of

 normed scores in relation to the ability range of the norm group; carefully justify any

 predictions made about future behaviour in relation to the validity information about

 the test.
**P6.11** Provide written reports for the referring agent which give clear guidance as to the

 appropriate weight to be placed on the findings.