

MODULE TITLE		Evidence-based Interventions with Children, Young People and Families					CREDIT VALUE	30
MODULE CODE		PYCM009	MODULE CONVENER		Dr Catherine Gallop			
DURATION	TERM	1	2	2	3	Number Taking		23
	WEEKS	S 4	1	0	0	(antici	/	

DESCRIPTION – summary of the module content

This module includes the fundamental elements of providing evidence-based interventions for mild presentations of anxiety and depression, when working with children, young people and their families. The curriculum builds on your existing clinical skills and knowledge of working within comprehensive CAMHS and the successful completion of the core skills and engagement and assessment modules of the Enhanced Evidence-based Practice course.

This module will be delivered over 14 days: 9 days of classroom based teaching at the HEI and 5 days in learning sets in the student's service. A notional structure and order for the HEI based days of teaching is shown below with (MindEd e-learning sessions may also be used to support learning). Appropriate e-learning sessions will be selected as an adjunct to learning.

No formal pre-requisites are required but you must be able to demonstrate familiarity with diagnostic systems (ICD and/or DSM) as a helpful shorthand to describe symptom patterns and syndromes and familiarity with standard models and approaches for anxiety disorders, depression, and other disorders with an evidence-base for both the models and the treatment.

MODULE AIMS – intentions of the module

The aim of this module is to provide you with a good understanding of the process of therapeutic support for a range of evidence-based, low intensity cognitive behavioural interventions and to facilitate the management of individuals and groups of patients including families, friends and carers. The aims of the module are to equip you with essential skills necessary to provide an evidenced based intervention based on the young person's presentation.

INTENDED LEARNING OUTCOMES (ILOs) (see assessment section below for how ILOs will be assessed) On successful completion of this module *you should be able to*:

Module Specific Skills and Knowledge:

- 1 Engage successfully parents in developing shared understandings of difficulties and enable parents to support interventions with young people that are informed by social learning perspectives
- 2 Evaluate critically the phenomenology, diagnostic classifications and epidemiological characteristics of depression and anxiety disorders in children and young people
- 3 Illustrate the behavioural activation model, behavioural theory and explain the role of behaviour in the development and maintenance of depression
- Summarise the main components of an evidence-based intervention for working with worry which may include progressive muscle relaxation, cognitive restructuring, imagery exposure and in-vivo exposure
- 5 Explain how healthy lifestyle packages and interventions (e.g., sleep hygiene) are delivered
- Describe the rationale for and process of delivery of guided self-help, the use of appropriate self-help materials and supporting the client in the use of relevant and effective materials
- 7 Understand how to best use supervision and outcome measurement and feedback to support the implementation of collaborative, evidence-based interventions with young people and their families
- 8 Discuss in detail the importance of adequate preparation for ending therapy, allowing accurate evaluation and consolidation of gains, and preparation for independent practice
- Assess the potential for recurrence of depression and anxiety symptoms after ending and competence in collaborating to produce a relapse prevention plan, including medication where necessary, that actively involves the available interpersonal and professional networks
- Synthesise critically clinical research literature on exposure for anxiety disorders in children and young people (clinical trials and outcome studies)
- Describe how to sensitively adapt behaviour therapy for anxiety disorders to ensure equitable access, taking into account the age of the child or young person, and cultural and social differences and values among the children, young people and their parents/guardians

Discipline Specific Skills and Knowledge:

- Summarise basic and essential factual and conceptual knowledge of the subject, and demonstrate a critical understanding of this knowledge
- Evaluate and analyse empirical evidence, and to assess the reliability of empirical evidence using a range of defined techniques

Personal and Key Transferable/ Employment Skills and Knowledge:

- Describe a range of key professional and ethical issues related to professional practice within mental health settings and personal development
- Evaluate your strengths and weaknesses, challenge received opinion and develop your own criteria and judgement, and to seek and make use of feedback

SYLLABUS PLAN - summary of the structure and academic content of the module

The module content, module specific learning objectives, style of delivery and assessment for this module are as dictated by the enhanced evidence-based practice CYP IAPT curriculum.

The aims of this module will be achieved through a series of workshops, which will incorporate lectures, role-plays, and small group discussions. In addition, they will be supplemented by e-learning material and experience of putting into practice what has been learned within the workplace. Teaching will be provided by course tutors, supplemented by national experts where appropriate.

Competences will be predominantly acquired through skills-based learning. The module therefore uses a combination of classroom-based learning at the HEI, incorporating video and role play, group work with problem-based learning sets, supervised clinical practice and e-learning from the MindEd portal to augment learning.

E-learning from the MindEd e-portal will be used to deliver key elements of the core curriculum. This has been developed specifically to support the CYP IAPT curriculum and can be accessed freely anywhere (including internationally).

E-learning content will be supported by learning sets provided by the HEI and completed with other trainees, at the

workplace. The learning sets will be based on clinical material. They will use the principles of problem-based learning to engage trainees and to facilitate and promote theory practice links.

Each workplace organisation, in collaboration with the HEI, will identify a co-ordinator for a group of trainees. Ideally, the co-ordinator will have completed a CYP IAPT Postgraduate Diploma or Certificate and be using the core skills of CYP IAPT in their work and be able to support trainees in developing the core skills and competences. Workplace co-ordinators will organise and facilitate group work and problem-based learning, including the necessary resources (e.g. study space, access to e-learning) and support trainees' use of the e-learning materials. Workplace co-ordinators will liaise with academic staff at the HEI and monitor your progress in your workplace learning.

You will be required to provide therapeutic interventions to children and young people with mild presentations of anxiety and depression. This work will be video-recorded and supervised by a service supervisor who has completed the PGCert Clinical Supervision of Evidence-Based Psychological Therapies or the five day outreach CYP IAPT supervision course. You will keep a professional and reflective portfolio demonstrating assessments, interventions, supervision and reflective practice. Clinical work will be verified by supervisor sign off in the professional portfolio and clinical competence will be assessed by the service supervisor and a video recording of an intervention session submitted to the HEI. Service supervisors will also be required to write a supervisor report for the portfolio.

Contact hours: (Each day is 5.75 hours for accreditation purposes)

- 14 days in total
- 9 days in class in theoretical teaching and clinical simulation
- 5 days in the workplace undertaking supervised practice
- Total contact hours: 80.5 hours

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LEARNING ACTIVITIES AND TEACHING METHODS (given in hours of study time)								
Scheduled Learning and	Scheduled Learning and 80.5		Guided independent		Placement/study	0		
Teaching activities		study			abroad			
DETAILS OF LEARNING	ACTIVITIES	AND TEACHIN	IG METHODS					
Category		Hours of	Description					
		study time	study time					
Scheduled Learning and Teaching		51.75	Practical classes – these will be used to develop clinical					
			competences in assessment and engagement through tutor					
			supervised small group role-play					
Scheduled Learning and Teaching		28.75	Service-based learning sets – undertaking PBL as part of a					
			•		oom supported by the tut	or		
Guided independent study		69.5	Reading and preparation for seminars					
Guided independent study		50	Reading and preparation for Problem-based learning					
Guided independent study		50	Reading and preparation for assignments					
Guided independent study		50	Self-practice and self-reflection on role plays with fellow					
					outside of teaching se	essions and		
			'blogging' of p	personal r	eflections upon practice			

ASSESSMENT

FORMATIVE ASSESSMENT - for feedback and development purposes; does not count towards module grade Form of Assessment Size of the assessment e.g. ILOs assessed Feedback method duration/length Clinical skills competency assessment Up to one hour 1, 3-5 Written or oral of an intervention session 1000 words 7, 12-15 Written or oral Reflective commentary

SUMMATIVE ASSESSMENT (% of credit)

Coursework 25 Written exams 25 Practical exams 50

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DETAILS OF SUMMATIVE ASSESSMENT							
Form of Assessment	% of		ILOs assessed	Feedback method			
	credit	duration/length					
Written examination (this assessment must be passed; failure in this assessment will lead to failure in the module and the programme)	25	90 minutes	2-5, 7, 10, 11	Written			
Reflective commentary (this assessment must be passed; failure in this assessment will lead to failure in the module and the programme)	25	1,000 words	7, 12-15	Written and oral			
Clinical skills competency assessment of an intervention session (this is an assessment of competency and must be passed; failure in this assessment will lead to failure in the module and the programme)	50	Up to one hour	1, 3-5	Written and oral			
Clinical portfolio (this is pass/fail only and must be passed; failure in this	0	3,000 words	1-4, 7-9	Written			

assessment will lead to failure in the module and the programme)				
Supervisor assessment of clinical competences to include direct observation of each of the treatment strategies taught, whether through video recording or live supervision – all must reach 50% minimum to be deemed competent on a standardised measure (this is pass/fail only and must be passed; failure in this assessment will lead to failure in the module and the programme)	0	3,000 words	1, 3-5, 7-9	Written

DETAILS OF RE-ASSESSMENT (where required by referral or deferral)

DETAILS OF INE-ASSESSMENT (Where required by referral of deferral)								
Original form of assessment	Form of re-assessment	ILOs re-assessed	Time scale for re-assessment					
Written examination	Written examination	2-5, 7, 10, 11	Four weeks from the date that feedback was provided					
Reflective commentary	Reflective commentary	7, 12-15	Four weeks from the date that feedback was provided					
Clinical skills competency assessment	Clinical skills competency assessment	1, 3-5	Four weeks from the date that feedback was provided					
Clinical portfolio	Clinical portfolio	1-4, 7-9	Four weeks from the date that feedback was provided					
Supervisor assessment	Supervisor assessment	1, 3-5, 7-9	Four weeks from the date that feedback was provided					

RE-ASSESSMENT NOTES

Five assessments are required for this module. In all cases re-assessment will be the same as the original assessment. Where you have been referred/deferred for any form of assessment detailed above you will have the opportunity to retake within four weeks from the date that feedback was provided.

If you pass re-assessments taken as a result of deferral, your re-assessment will be treated as it would be if it were your first attempt at the assessment and the overall module mark will not be capped.

If you pass re-assessments taken as a result of referral (i.e. following initial failure in the assessment), the overall module mark will be capped at 50%.

If you fail re-assessments taken as a result of referral (i.e. following initial failure in the assessment), you will be failed in the module and as a consequence you will be failed in the programme and your registration as a student of the University will be terminated.

RESOURCES

INDICATIVE LEARNING RESOURCES - The following list is offered as an indication of the type and level of information that you are expected to consult. Further guidance will be provided by the Module Convener. Core reading:

- Child IAPT National curriculum (2012). London: Department of Health
- Roth, A.D. and Pilling, S. (2007). Core competencies required to deliver effective psychological therapies. London: HMSO, Department of Health.
- Fonagy, P. and Target, M. (2005). What works for whom: a critical review for children and adolescents. London: Routledge
 - Bennett-Levy, J., Richards, D., Farrand, P. et al (2010). Oxford Guide to Low Intensity CBT Interventions. Oxford: Oxford University Press.
 - Lovell, K. and Richards, D. (2008). A Recovery Programme for Depression. London: Rethink.

- Silverman, J., Kurtz, S. and Draper, J. (2005). Skills for Communicating with Patients. Oxford: Radcliffe.
- Child IAPT National curriculum (2012). London: Department of Health
- Roth, A.D. and Pilling, S. (2007). Specific competencies required to deliver effective CBT. London: HMSO, Department of Health.
- Fonagy, P. and Target, M. (2005). What works for whom: a critical review for children and adolescents.
 London: Routledge
- Stallard, P. (2005). Think Good, Feel Good. London: Wiley-Blackwell

Wider reading:

- Bazire, S. (2003). Psychotropic Drug Directory 2003/2004: The Professionals Pocket Handbook and Aide Memoire. Salisbury: Fivepin Publishing.
- Goldberg, D. and Huxley, P. (1992). Common Mental Health Disorders: A Biosocial Model. London: Routledge.
- Myles, P. and Rushforth, D. (2007). A Complete Guide to Primary Care Mental Health. London: Robinson.

ELE: College to provide hyperlink to appropriate pages **CREDIT VALUE ECTS VALUE** 15 30 **PRE-REQUISITE MODULES** None **CO-REQUISITE MODULES** None AVAILABLE AS DISTANCE LEARNING NQF LEVEL (FHEQ) **ORIGIN DATE** 26/11/2014 LAST REVISION DATE 15/01/2015 **KEY WORDS SEARCH** CYP Improving Access to Psychological Therapies, IAPT, low intensity, cognitive behavioural therapy, common mental health problems, primary care, evidence based psychological therapies, clinical competency

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