



University  
of Exeter | Cedar

Post-Graduate Certificate in Supervising  
Evidence-Based Low Intensity  
Psychological Interventions for Children  
and Young People in Education Settings

Programme Handbook

2024-2025



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The handbook and timetable are subject to change so please check ELE regularly for updates:  
[Exeter Learning Environment](#)

## Welcome to the University of Exeter

### College of Life and Environmental Sciences, Psychology, and Improving Access to Psychological Therapies

We are very excited to bring you the University of Exeter's Postgraduate Certificate programme in Supervising Evidence-Based Low Intensity Psychological Interventions for Children and Young People in Education Settings. The training complements CEDAR's highly successful and expanding portfolio of children, young people and families clinical training programmes and contributes to our wider clinical training portfolio. We have a firm commitment to evidence based clinical practice and as such we endeavour to ensure all of our training programmes are firmly embedded within current research.

These are exciting but challenging times for us all. The team of highly experienced clinical trainers will endeavour to deliver the highest quality training to enable you to become and competently and effective supervisors.

It is likely that you will find the training intensive and challenging, but hopefully enjoyable and especially practice enhancing.

#### **Prof. Catherine Gallop**



Director of Post Graduate Taught Programmes

CEDAR | University of Exeter

## Welcome to the PG Certificate in Supervising Evidenced-Based Low Intensity Psychological Interventions for Children and Young People in Education Settings

A very warm welcome to the Postgraduate Certificate programme in Supervising Evidence-Based Low Intensity Psychological Interventions for Children and Young People in Education Settings. This programme forms a key part of the national Mental Health Support Team initiative as outlined with the Transforming Children and Young People's Mental Health Provision: A Green Paper (DoH & DfE, 2018). The supervisory role acts as a cornerstone of support for the development for the new trainee Education Mental Health Practitioner (EMHP) role.

The overall aims of the MHST programme are to promote psychological wellbeing within education settings through the application of whole school approaches to mental health and early intervention and prevention for children, young people, and families. Effective and sustainable supervision is at the centre of the project's ambitions and hence there is the need for high quality and evidenced-based supervision training.

This training programme is heavily rooted within the development of the knowledge and clinical skills associated with whole school approaches and on the skills required to support Low Intensity, evidenced-based therapies. This course will equip supervisors with the skills associated with the EMHP role including the significance of low intensity case management and clinical skills supervision.

Successful completion of the clinical and written assignments and appropriate participation in tutorials, workshops and supervision will lead to the award of a Post Graduate Certificate. We hope that this training will enable you to act as advocates of the training and the wider programmes principles and priorities.

A major contributing resource to the programme is the knowledge and experiences that you as programme members bring. We intend to draw upon and honour this knowledge and experience in order to develop your supervision skills and increase awareness and theoretical understanding. It is important however, that understanding, and use of theory is integrated with clinical application in a rigorous and constructively critical manner.

We hope you enjoy the training and look forward to working with you over the coming months.

**Jonathan Parker**  
Director of Portfolio  
Project Lead  
EMHP and CWP Programmes  
CEDAR | University of Exeter



### Supervisors Course Team




Meet the CWP, EMHP, and SWP team

<p>Dr Catherine Gallop</p>		<p>Director of Clinical Training in Clinical Psychology</p>	<p>C.A.Gallop@exeter.ac.uk</p>
<p>Jonathan Parker</p>		<p>Director of Portfolio &amp; Project Lead</p>	<p>J.Parker5@exeter.ac.uk</p>
<p>Kirsty Roberts</p>		<p>CWP and EMHP Supervisors Programme Lead (SWP Programme Lead maternity cover)</p>	<p>K.Saville@exeter.ac.uk</p>
<p>Dr Claire Howarth</p>		<p>SWP Programme Lead (maternity leave)</p>	<p>C.Howarth@exeter.ac.uk</p>



<p>Krissie Ivanova</p>		<p>Academic Lead (EMHP and CWP Supervisors, and SWP – maternity cover)</p>	<p>K.Ivanova2@exeter.ac.uk</p>
<p>Laura Hutton</p>		<p>Academic Lead CWP and EMHP Supervisors Programme (maternity leave)</p>	<p>L.Hutton3@exeter.ac.uk</p>
<p>Rebecca Willoughby</p>		<p>Lecturer/Tutor</p>	<p>R.Willoughby@exeter.ac.uk</p>
<p>Caoimhe Green</p>		<p>Lecturer/Tutor</p>	<p>C.M.Green@exeter.ac.uk</p>
<p>Georgie Blackley</p>		<p>Lector/Tutor (maternity cover)</p>	<p>G.Blackley@exeter.ac.uk</p>



			
Danni Kirkland		Lecturer/Tutor (maternity leave)	D.Kirkland@exeter.ac.uk
Morgan Craig		Programme Administrator	CWP-EMHP@exeter.ac.uk

## **PG Certificate in Supervising Evidenced-Based Low Intensity Psychological Interventions for Children and Young People in Education Settings**

### **Programme Aims**

The aim of this programme is to develop an advanced knowledge, understanding and competency in the skills required to supervise Low Intensity Wellbeing Practitioners, working in Education settings. Drawn from the Roth and Pilling CAMHs supervision competency framework, this involves both broad supervision skills as well as specific skills related to Low Intensity Wellbeing practice, as well as the specifics of supervising practitioners working in Education Settings. These supervision skills will extend beyond the individual work of the practitioner, into supervising and supporting the implementation of wider school initiatives to provide mental health support.

These aims are achieved via attendance at the University or online, supervisory practice of practitioners, engagement in supervision of supervision with the University, and the completion of programme assessments.

Trainee supervisors attend teaching, alongside monthly supervision of supervision, and tutorials. Trainee supervisors are required to complete a series of assessments and it is expected that study time will be provided by the host service to support them in this. For a PGCert level the University standard is 10 days, this is to be agreed with your service.

It is our intention that students from all diverse backgrounds and perspectives be well served by this course, that students' learning needs be addressed both in and out of teaching sessions, and that the diversity that students bring to this cohort be viewed as a resource, strength, and benefit. It is our intention to present materials and activities that are respectful of diversity: gender and gender identify, sexuality, disability, age, socioeconomic status, ethnicity, race, and culture. Your suggestions are invited, encouraged, and appreciated. Please let us know ways to improve the effectiveness of the course for you personally or for other students or student groups. In addition, if any of our training sessions conflict with your religious events, or if you have a disability or other condition necessitating accommodation, please let us know so that we can make the necessary arrangements for you.

*(Adapted from a diversity statement from the University of Iowa, College of Education)*





Our goal as a learning community is to create a safe environment that fosters open and honest dialogue. We are all expected to contribute to creating a respectful, welcoming, and inclusive environment. To this end, classroom discussions should always be conducted in a way that shows respect and dignity to all members of the class. Moreover, disagreements should be pursued without personal attack and aggression, and instead, should be handled with grace and care. This will allow for rigorous intellectual engagement and a deeper learning experience for all.

*(Adapted from a diversity statement from Yale University - Dr. Carolyn Roberts, Assistant Professor, History of Science & History of Medicine, and African American Studies)*

### Learning Outcomes

On successful completion of the EMHP Supervisor course, you should be able to:

- Synthesise theory and competencies in planning, delivering, and reflecting on clinical supervision of clinical supervision of psychological interventions in education settings
- Demonstrate generic and modality specific competencies in clinical supervision of evidence-based psychological therapies / interventions for children and young people in education settings
- Evidence through the reflective supervision report how reflection on your clinical supervision skills influences your practice
- Identify how you meet the relevant national competency standards for clinical supervision of psychological interventions in education settings
- Address systematically complex supervision problems which may be framed within unpredictable contexts, think critically, creatively, and independently, and fully appreciate the complexities of the issues, supporting practitioners to audit, appraise and implement psychological interventions in Educational Settings
- Support practitioners to maintain high caseloads through competencies in structured case management supervision
- Support practitioners to maintain fidelity to the Low intensity model, whilst being able to adapt materials to suit a wide range of developmental ages and abilities
- Describe the wider ethical and professional issues encountered within clinical supervision
- Appraise your personal strengths and weaknesses in training and experience, and reflect upon the implications for your further training needs
- Give accurate and constructive feedback



## Acronyms

Throughout the course you will encounter several abbreviations. Please find a list of the most frequently used.

ABCEs – Autonomics, Behaviours, Cognitions, & Emotions

BPS – British Psychological Society

BABCP – British Association for Behavioural and Cognitive Psychotherapies

CAMHS – Children and Adolescent Mental Health Services

CEDAR – Clinical Education Research and Development

CBT – Cognitive Behavioural Therapy

CM – Case Management

CMSA – Case Management Supervisor Assessment

CS – Clinical Skills

CWP – Children’s Well-being Practitioner

CYP – Children and Young People

EBP – Evidence Based Practice

EMHP – Education Mental Health Practitioner

ESQ – Experience of Service Questionnaire

GSH – Guided Self Help

HEE – Health Education England

IAPT – Improving Access to Psychological Therapies

LI – Low intensity

PEG – Psychoeducational Group

POD – Practice Outcomes Document

RC – Reflective Commentary

ROMs – Routine Outcome Measurement

RCADS – Revised Children’s Anxiety and Depression Scale

RCT – Randomised Control Trial

SFQ – Session Feedback Questionnaire

SPSR – Self Practice / Self Reflection

WSA – Whole School Approach

## Programme Structure

### Programme Dates

**Induction:** Monday 5<sup>th</sup> and Tuesday 6<sup>th</sup> February 2024

**Half-term:** Monday 12<sup>th</sup> February – Friday 16<sup>th</sup> February 2024

**First teaching day:** Monday 19<sup>th</sup> February 2024

**Spring break:** Monday 29<sup>th</sup> March – Friday 12<sup>th</sup> April 2024

**Half-term:** Monday 27<sup>th</sup> May – Friday 31<sup>st</sup> May 2024

**Summer break:** 5<sup>th</sup> August – 30<sup>th</sup> August 2024

**Half Term:** 28<sup>th</sup> October- 1<sup>st</sup> November 2024

**Winter break:** 25 December – 31 December 2024

### Teaching timings

The timing of the teaching sessions are as follows unless you are informed otherwise.

**Session 1:** 9:45 to 11:00

**Morning break:** 11:00 to 11:30

**Session 2:** 11:30 to 12:30

**Break:** 12:30 to 1:30

**Session 3:** 1:30 to 2:45

**Afternoon break:** 2:45 to 3:00

**Session 4:** 3:00 to 4:00

### Study days

You have 10 study days in addition to your teaching sessions from the University which have been scheduled within the timetable. Please discuss the study days with your service to ensure they are mutually convenient.

## Supervision of supervision

Once you have completed the teaching element of the course, you will move on to attending monthly supervision of supervision (SoS) in small groups and whole cohort clinical skills workshops. These sessions mirror the supervision sessions that you will provide to practitioners in your service and support your POD development as you move towards the end of the course. As with any supervision, you will first create a supervision contract with your supervisor which will be used to guide the supervision moving forward. You are required to bring a taped example of you offering supervision with a specific supervision question to explore in the group at each supervision session, in addition to completing the supervision paperwork. If tapes are not brought to supervision, this will be discussed with the programme lead and your workplace. There are six sessions of supervision of supervision with attendance required at all supervision sessions (one additional session timetabled). If there are any issues which prevent you from attending supervision, these must be discussed with your supervisor immediately to put a plan in place to facilitate you meeting the requirements to pass the course.

Padlet information on supervision of supervision:

<https://exeter.padlet.org/ch880/supervision-of-supervision-padlet-6q1ym89zc299rxpq>

Padlet information on whole cohort skills workshops:

<https://exeter.padlet.org/ch880/emhp10-workshops-space-f6nqtnizmf6v6jav>

## Tutorials

### Individual 1-1 Tutorials

You will be allocated an academic tutor at the university, who will be a member of the course team. Your tutor will offer you two 20-minute tutorials over the duration of the course. These are already scheduled on your timetable.

### Mid-term review

You will also have a mid-term review tutorial which will be between yourself, your University Supervisor, and your Service Manager or supervisor.

### The tutorials aim to give you the opportunity to link with your tutor to:

- Review and reflect on your development and the course
- Give and receive feedback on assessed work
- Give and receive feedback on the course
- Review your clinical portfolio and practice
- Have a safe environment for addressing personal development

***NB:** If trainees have any concerns or issues that may be impacting on their ability to participate fully in the training or causing them any distress or concern, trainees are strongly encouraged to notify either their tutor or any member of the course team as soon as possible, rather than wait for their 1:1 tutorial.*

The tutorial form is provided on ELE and will be completed with you during the tutorial with your supervisor. They will send you a copy to retain for your records.

## Timetable

As the timetable is subject to change, this document is provided separately at the start of the course. An up-to-date copy will always be available on ELE.

- Please note that you have been allocated 10 university study days. We have timetabled these in to support with assignment submissions. Please discuss these with your service if you need to negotiate different days.
- Please make your service manager is aware that the mid-course review days are scheduled on **for the week commencing 29<sup>th</sup> July 2024** – if there is a foreseeable issue with availability on these days (such as manager's non-working day) please notify your university tutor ASAP.

EMHP11, CWP09, SWP02 – Supervisors Assignment deadlines 2024-25								
Assessment	Requirements	% of marks	Deadline	Return date	Deferred deadline 1	Deferred return date 1	Deferred deadline 2	Deferred return date 2
<b>Formative</b> presentation outline	500 words	0	25.03.24  + 2 week mitigation deadline 10.04.24	17.04.24  + 2 weeks if mitigated 01.05.24	24.04.24	16.04.24	09.05.24	31.05.24
<b>Formative</b> Supervision recording (case management) and self-rated CMSA	Up to 60 minutes	0	20.05.24  + 2 week mitigation deadline 04.06.24	18.06.24  +2 weeks if mitigated 01.07.24	18.06.24	16.07.24	02.07.24	30.07.24
<b>Formative</b> Reflective Commentary	Up to 2000 words	0	20.05.24  + 2 week mitigation deadline 04.06.24	18.06.24  +2 weeks if mitigated 01.07.24	18.06.24	16.07.24	02.07.24	30.07.24
Supervisor report 1 ( <b>Formative</b> – to be completed by university supervisors to track progress on competency)	n/a	0	22.07.24  Written by supervisor					



<b>Summative</b> Implementation presentation	20-minute presentation	30	16.09.24  + 2 week mitigation deadline 07.10.24	14.10.24  +2 weeks if mitigated 28.10.24	21.10.24	11.11.24	04.11.24	25.11.24
<b>Summative</b> supervision recording (case management) and self- rated CMSA	Up to 60 minutes. Minimum of 4 cases to be discussed	40	14.10.24  + 2 week mitigation deadline 28.10.24	11.11.24  +2 weeks if mitigated 25.11.24	11.11.24	09.12.24	25.11.24	23.12.24
<b>Summative</b> reflective commentary	Up to 2000 words	30	14.10.24  + 2 week mitigation deadline 28.10.24	11.11.24  +2 weeks if mitigated 25.11.24	11.11.24	09.12.24	25.11.24	23.12.24
Supervisor report 2 ( <b>Summative</b> – to be completed by university supervisors to track progress on competency)	Pass/Fail	0	04.11.24  Written by supervisor					
Clinical essay	Up to 3000 words	100	11.11.24  + 2 week mitigation deadline 25.11.24	02.12.24  +2 weeks if mitigated 16.12.24	09.12.24	06.01.25	23.12.24	20.01.25



Supervision portfolio	Pass/Fail	0	13.01.25 + 2 week mitigation deadline 27.01.25	10.02.25 + 2 weeks if mitigated 24.02.25	10.02.25	10.03.25	24.02.25	24.03.24
Practice outcomes document (POD)	Pass/Fail	0	13.01.25 + 2 week mitigation deadline 27.01.25	10.02.25 + 2 weeks if mitigated 24.02.25	10.02.25	10.03.25	24.02.25	24.03.24

Module 1 – PYCM123	Supervising Evidence-Based Psychological Interventions in Child and Adolescent Mental Health or Education Settings
Module 2 - PYCM090	Clinical Supervision Practice Placement (Wellbeing Practitioner for Children and Young People)

## Assignment overview

Please note that previous exemplars are available on ELE. Furthermore, there is a padlet for each assignment along with exemplars and a short video introducing the assignment.

Links to individual assignment padlets can be found on this link:

<https://exeter.padlet.org/ch880/cwp-emhp-and-swp-supervisor-assignments-n10dt8nk7w05vfr2>

Module 1 – PYCM123	Supervising Evidence-Based Psychological Interventions in Child and Adolescent Mental Health or Education Settings
Module 2 - PYCM090	Clinical Supervision Practice Placement (Wellbeing Practitioner for Children and Young People)

### Formative presentation outline

Formative presentation outline
<p><b>Assignment task</b></p> <p>The aim of this 500-word written report is to demonstrate your knowledge and understanding of modules 4-6. You will demonstrate your considerations of supervising these modules with an action plan of your identified learning needs to inform your development and shape your supervisory skills which will be demonstrated within the summative presentation.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed by the extent to which it demonstrates your achievement of the stated learning outcomes for this assignment as defined in the mark scheme. This will be marked as pass or fail and formative fails will not require resubmission.</p>

### Formative supervision recording (CMSA)

Formative supervision recording (CMSA)
<p><b>Assignment task</b></p> <p>Video recording of a 1:1 case management supervision session. The recording should be one tape that has not been tampered with (the recording must include the whole supervision interaction). Marking stops at 60 minutes. You must gain verbal consent to record within the first 15 minutes of the recording, if verbal consent is not gained the marking will stop at 15 minutes and this will result in an automatic failure.</p> <p>The recording should demonstrate your ability to work with high caseloads and therefore at least four cases should be discussed. Recordings that discuss 3 or fewer cases will automatically fail. Failure to manage risk properly will also result in an automatic failure of the submission.</p>



<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent at which you demonstrate your ability to meet the criteria on the CMSA marksheet. This includes detailed discussions around risk, which must be included for each of the clients brought. If there is no risk discussion or if the risk discussion is vague this will automatically fail.</p> <p>There is also a requirement for the practitioner to bring four cases to the session that all fall in line with a case management supervision category.</p>
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### Formative reflective commentary

Formative reflective commentary
<p><b>Assignment task</b></p> <p>The aim of this 2000-word, written reflective commentary is to support trainees in reflecting upon the strengths and weaknesses of their clinical work. Reflective practice is an essential skill that supports continued professional and clinical development. NB – Marking will stop at 2000 words.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent to which it demonstrates your achievement of the stated learning outcomes for this assignment and against other key criteria, as defined in the reflective commentary guidance document and mark scheme. Formative failed submissions do not require resubmission. Resubmissions of summative will be capped at 50%. This module will also be capped at that percentage.</p>

### Formative supervisor report

Formative supervisor report (completed by supervisor)
<p><b>Assignment task</b></p> <p>Written report to be completed by your supervisor. The formative report will be marked as either <i>'meeting expectations'</i> or <i>'requires improvement'</i>. This is to outline areas that have not been demonstrated fully to the University Supervisor and to suggest ways to engage with supervision more effectively. You will be required to add comments and countersign your supervision report.</p>
<p><b>How your work will be assessed</b></p> <p>Tapes, questions, and discussions brought to supervision of supervision.</p>

## Summative supervision recording (CMSA)

Summative supervision recording (CMSA)
<p><b>Assignment task</b></p> <p>Video recording of a 1:1 case management supervision session. The recording should be one tape that has not been tampered with (the recording must include the whole supervision interaction). Marking stops at 60 minutes. You must gain verbal consent to record within the first 15 minutes of the recording, if verbal consent is not gained the marking will stop at 15 minutes and this will result in an automatic failure.</p> <p>The recording should demonstrate your ability to work with high caseloads and therefore at least four cases should be discussed. Recordings that discuss 3 or fewer cases will automatically fail. Failure to manage risk properly will also result in an automatic failure of the submission.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent at which you demonstrate your ability to meet the criteria on the CMSA marksheet. This includes detailed discussions around risk, which must be included for each of the clients brought. If there is no risk discussion or if the risk discussion is vague this will automatically fail.</p> <p>There is also a requirement for the practitioner to bring four cases to the session that all fall in line with a case management supervision category.</p>

## Summative reflective commentary

Summative reflective commentary
<p><b>Assignment task</b></p> <p>The aim of this 2000-word, written reflective commentary is to support trainees in reflecting upon the strengths and weaknesses of their clinical work. Reflective practice is an essential skill that supports continued professional and clinical development. NB – Marking will stop at 2000 words.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent to which it demonstrates your achievement of the stated learning outcomes for this assignment and against other key criteria, as defined in the reflective commentary guidance document and mark scheme. Resubmissions of summative will be capped at 50%. This module will also be capped at that percentage.</p>

## Summative presentation

Summative presentation
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### Assignment task

The aim of this 20-minute presentation is for students to demonstrate their knowledge and understanding of modules 4-6, how they supervise these elements within a clinical skills supervision space, and what they have learnt from the supervisory process.

### How your work will be assessed

Your work will be assessed on the extent to which it demonstrates your achievement of the stated learning outcomes for this assignment and against other key criteria, as defined in the presentation guidance document and mark scheme. Resubmissions of the summative submission will be capped at 50%. This module will also be capped at that percentage.

## Clinical essay

### Clinical essay

#### Assignment task

3000-word essay to demonstrate your ability to critically evaluate how supervisor competencies are developed within clinical skills supervision. Demonstrating how this has been achieved in your own practice by discussing a clinical skills case study.

#### How your work will be assessed

Your work will be assessed by the extent to which it demonstrates your achievement of key criteria, as defined in the clinical essay guidance document and mark scheme. This is a summative assessment only. Resubmissions of the assignment will be capped at 50%. This module will also be capped at that percentage.

## Summative supervisor report

### Summative supervisor report (completed by supervisor)

#### Assignment task

Written report to be completed by your supervisor. The summative supervisor report will be marked either 'pass' or 'fail'. If the award of fail has been given, the trainee supervisor must bring clips to an arranged supervision session to demonstrate the competencies that require improvement. If a fail has been awarded based on the trainee supervisor's ability to use supervision, a meeting will be arranged between the staff team to discuss how this can be achieved. These will be emailed to you directly, with the summative report to be included with your portfolio.

#### How your work will be assessed

Tapes, questions and discussions brought to supervision of supervision.

## Supervision portfolio

Supervision portfolio
<p><b>Assignment task</b></p> <p>The portfolio collates key documents from your supervision delivered and received which details evidence of your experience, development, and best practice. The portfolio checklist, which can be found on the padlet link, contains a breakdown of the documents to be included.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent to which it demonstrates your supervisory practice through the inclusion of your supervision documents. Ideally, you will have gained consent from your supervisees to share your supervision documents. However, where this has not been possible all identifiable information should be redacted.</p>

## Practice Outcomes Document

Practice outcomes document (POD)
<p><b>Assignment task</b></p> <p>The POD consists of 14 outcomes which relate to the Roth and Pilling (2008) supervisory competencies. You are required to describe and evidence how you have met each of these competencies during your supervision training. The POD outcomes can be found on the padlet link.</p> <p>There is no word count for this piece, however, it is recommended that you write around 500 words per outcome.</p>
<p><b>How your work will be assessed</b></p> <p>Your work will be assessed on the extent to which you demonstrate that you have met the 14 competencies. A consideration will be made to the quality of evidence included for each outcome. Ideally you will have gained consent from your supervisees to share your supervision documents. However, where this has not been possible all identifiable information should be redacted. One draft outcome may be sent to your university supervisor for formative feedback ahead of the deadline.</p>



## Formative and Summative Supervision recording information (CMSA)

Along with your tape recording you must include the following;

- Cover sheet
- Consent to record form

You will have to submit **two** different supervision video recordings over the year (one formative and one summative).

### Guidance on Recording Sessions

You will be expected to submit two videos as part of the clinical assessment, a formative and summative submission. It is essential that you obtain the written and verbal consent of your supervisee for the recording to be used for supervision and/or assessment and submit this paperwork with your competency tapes. Verbal consent to record must be gained from your supervisee within the first fifteen minutes of the recording. Failure to do so, will result in the assignment being auto failed and a further tape must be submitted. The consent form also asks whether your supervisee will be willing for the recording to be used in future training. You should consult your placement supervisor / manager about your Trust's policies on storing and transporting / transferring the recordings.

### Recording Equipment

All services should provide supervisors with recording equipment. Where possible these should enable trainees to make video recordings.

### Marking Criteria

The CMSA (Case Management Supervisors Assessment) instrument is used to assess supervision competencies. These are available on ELE and on the padlet for this assignment.

### Formative Guidance

Your formative recording must be submitted by the deadline unless mitigation has been granted. The videos must be clearly audible and be of a complete session where at least four cases are completed (including summary and action plan) in **no more than one hour**. Marking stops at 60 minutes so marks will not be awarded for any discussions that happen after the 60-minute mark.

### Summative Guidance

Your final summative video must be submitted by the deadline unless mitigation has been granted. The video must be clearly audible and be of a complete session of **no more than one hour**. Minutes over 60 will not be marked. Trainees **MUST** achieve an overall mark of 50%. **A pass mark of 50% on this measure will need to be achieved on the final summative tape.**



### Important information regarding automatic fails of CMSA

**Marking stops at 60 minutes. Failure to complete four cases within the 60 minutes will result in an auto fail. A completed case is a case discussion which clearly summarises the presenting difficulty, changes in risk, and concludes with a summary, and an action plan.**

**Your tape must be one continuous recording of up to 60 minutes, tapes must not be split into two or more clips. The whole supervision interaction must be included in the tape.**

**Please ensure you watch your recording before submitting to check for any technical errors or issues. If tapes are suspected of being edited or if the recording is inaudible to the marker or the supervisor and/or supervisee cannot be seen, this will result in an auto fail and a further tape must be submitted.**

**You must gain written and verbal consent to record from your supervisee. If verbal consent to record is not gained within the first 15 minutes of the recording the piece will be an auto fail and will not be marked. A further tape will be required to be submitted.**

**If any identifiable information is included in the tape (especially when sharing screens during remote supervision) is a serious confidentiality breach and will result in automatic failure.**



All online written submissions must be done via ELE2 where a plagiarism check will automatically take place (via the Turnitin software).

Cover sheets are only required when submitting a tape.

Prior to your first submission you will be sent submission guidance to your student email address, alternatively this information is all available on ELE2.

**Competency Recordings and Reflective Commentary**

- Recording submissions and consent forms are currently submitted via MS Forms. A link to the upload form will be shared with you by your programme administrator.
- You must submit all supporting documents (i.e. reflective commentary, cover sheet) electronically via ELE2 as instructed by your administrator by 1pm on the date given for submission.

**All other submissions:**

- All other submissions must be submitted to ELE2 by 1pm on the date given for submission.

**Management of work submitted late and mitigation issues**

<b>First Attempts:</b>	
Submitted on time	No penalty applied.
Submitted within 1 hour of the deadline	Penalty of 5% of the total marks available (down to a pass mark) applied.  If student has not achieved a pass mark the penalty of 5% of the total marks will not be applied.
Submitted between 1 hour and 24 hours of the deadline	Penalty is mark will be capped at a pass mark.
Submitted later than 24 hours after the deadline	Penalty is a mark of 0 will be applied.
<b>Resubmissions/Referred Attempts:</b>	
Submitted on time	No penalty applied.
Submitted any time after the deadline	Penalty is a mark of 0 will be applied.  For CEDAR students failure of a referred assignment will result in failure of the module and the programme.

<b>First Attempts where 3 week mitigation has been granted (excludes Deferred deadlines):</b>	
Submitted on time	No penalty applied.
Submitted any time after the deadline	Penalty is a mark of 0 will be applied.

These penalties will not, however, be imposed if you have legitimate grounds for claiming an extension.

All mitigation requests must be submitted by sending a completed mitigation form within ONE working day to [CEDAR-mitigations@exeter.ac.uk](mailto:CEDAR-mitigations@exeter.ac.uk). For details about the documentation needed to support such a claim, what constitutes 'good cause' for late submission and the procedure to be followed, please read [http://vle.exeter.ac.uk/pluginfile.php/266164/mod\\_resource/content/2/20101110-PSY\\_good\\_causes-GG.pdf](http://vle.exeter.ac.uk/pluginfile.php/266164/mod_resource/content/2/20101110-PSY_good_causes-GG.pdf)

Guidance on CEDAR Mitigation Process can be found here: [Course: CEDAR PGT Handbook, Forms, Policies and Procedures \(exeter.ac.uk\)](#)

Acceptable grounds for mitigation are also available here: [FAQ | Student hubs | University of Exeter](#)

## Resubmissions

### Re-assessment Procedures

Referral: A referral is a further attempt permitted by the examiners, following initial failure of an individual module, at the assessment(s) or examination(s) for that module. There is no requirement to repeat attendance. For any assessment, candidates have a right to be referred on one occasion only. Where the Board of Examiners decides there are adequate grounds, such as medical reasons or exceptional personal circumstances, it may allow a deferral (i.e., re-assessment without the mark being capped), or permit a further referral.

In the event of any piece of work being referred it will be returned to the programme member with the following information:

### Resubmission Instructions

The internal markers have assessed your work. Unfortunately, it has not passed and has been sent to the external marker. You will have X weeks to resubmit.

Where assessments for part or all of a module are referred the whole module must be capped

at 40% for undergraduate modules and 50% for postgraduate modules.

Resubmitted work should be submitted alongside:

- A cover sheet that shows how you have addressed the issues identified (see overleaf)

Candidates referred in a module must submit new work to be assessed, or re-sit examinations, at a time agreed by the programme team. Exceptionally, the Examiners may direct that referral be limited to particular components of a module.

Candidates referred in any of the taught modules will normally be required to complete revised assessments for those modules by the dates specified by the IAPT Programme Director which will be up to one month following receipt of the failed assessment.



## Attendance Policy

### Taught Student Attendance and Engagement Policy

#### 1. Principles and expectations

##### 1.1 Students Registered on University of Exeter programmes are required to:

- be in attendance during academic terms and present at all scheduled learning and teaching activities required by the module and/or programme
- engage with and participate in all guided independent and group study, assessment and feedback, and any other activities required by the module and/or programme
- attend examinations, submit work when required, and otherwise fulfil the academic requirements of their modules and programme

##### 1.2 The requirements above are recognised by the University of Exeter as important due to the positive impact they can have upon the following:

- ensuring support for students' welfare, health and wellbeing, for example through implementation of Individual Learning Plans (ILPs) and the Health, Wellbeing and Support for Study Procedures
- enhancing a sense of community and enriching the student experience as a result of participation in collaborative learning, social interaction with staff and fellow students, and support from peers
- promoting success for all students, regardless of background and/or characteristic
- improving academic performance/attainment
- improving graduate employment outcomes
- heightening student satisfaction in relation to the quality and standard of teaching and learning experiences, academic support, etc

##### 1.3 'Attendance' encompasses the activity of being present at scheduled learning, teaching and other activities required by the module and/or programme. This **may** include:

- physical attendance at face-to-face scheduled teaching and/or other learning events as required by the programmes (e.g. lectures, seminars, laboratory sessions, tutorials, fieldtrips and examinations)
- virtual attendance at synchronous teaching and/or other learning events as required by the programmes (e.g. video conferencing of live sessions and synchronous participation in an online forum)

1.4 'Engagement' encompasses the activity of engaging with, and participating in, guided independent or group study activities, assessment and feedback, and any other activities required by the module and/or programme. Such activities **may** include:

- submitting formative and/or summative assessment
- accessing and/or interacting asynchronously with online learning materials, including viewing recap recordings and completing tasks in virtual learning environments
- undertaking placements or study abroad
- attending Academic Personal Tutorial meetings

Engagement has been defined differently from attendance because not all forms of engagement require students to be present, either physically or virtually, at a particular time and place.

In the context of this policy only activities stipulated as module/programme requirements will be defined as either 'attendance' or 'engagement'.

1.5 Regular and appropriate attendance and engagement is stipulated in the General Regulations for Students and Ordinance 6 of the University of Exeter's Regulations.

1.6 Attendance and engagement requirements should be stipulated in programme specifications, module descriptors, student handbooks and/or other accessible means, clarifying what is expected of students while registered on particular modules/programmes and what the University can be expected to provide in support.

1.7 Attendance and engagement expectations will be adjusted as required on health and wellbeing grounds where supported by Wellbeing and Welfare Services. This may arise as a result of emerging health issues known to the service or be supported by recommendations contained within Individual Learning Plans (ILPs) or as part of the Health, Wellbeing and Support for Study (HWSS) Procedure.

1.8 The University's monitoring of student attendance and engagement, and intervention where necessary, will be based on digital records (where available). These will be aligned to the requirements stipulated by modules/programmes and as communicated to students. Where a digital record of required attendance and/or engagement does not exist, alternative manual monitoring processes may be undertaken.

1.9 As a Tier 4 Sponsor License holder, the University of Exeter is required to adhere to the Tier 4 Sponsor Guidance issued by UK Visas and Immigration (UKVI). The monitoring process outlined in this policy ensure that the University meets the requirements of the Tier 4 Sponsor Guidance with regards to reporting non-attendance and engagement.

1.10 Programmes accredited by professional, statutory or regulatory statutory bodies (PSRBs) may have their own attendance and engagement requirements, which must be met in order to fulfil the standards of their degree. The University of Exeter expects students to meet these requirements where applicable.

## 2. Monitoring

2.1 Students should seek approval for absence/non-engagement through the Taught Student Illness Procedure. Normally, absences will be approved for the following reasons:

- disability (in accordance with ILP and HWSS recommendations)
- illness
- medical appointments
- bereavement or other compassionate grounds
- police incident
- jury service
- unforeseen emergencies
- interview/career related appointments
- attendance at Bunacamp (or equivalent) (in line with the conditions)
- approved University visits, courses and exchanges

2.2 The attendance of students at scheduled learning and teaching activities and engagement with activities required of the programmes/module will be monitored during the academic year. Where data confirms that a student has failed to meet the University of Exeter's expectations on attendance and engagement at the appropriate threshold, automated communications will be sent to students to encourage their attendance and engagement, and to provide guidance on the sources of support that are available to all students at the University of Exeter. The email will also reiterate University of Exeter policy on attendance and engagement.

2.3 Where the defined thresholds are not met, the University may offer appropriate support options. Students may additionally be referred to the Health Wellbeing and Support for Study Procedures or the Unsatisfactory Student Progress and Engagement: Code of Good Practice.

2.4 To ensure that the University of Exeter meets the requirements of the Tier 4 Sponsor Guidance, contact points for Tier 4 students will be monitored. Where a Tier 4 student is absent from eight consecutive contact points a final warning will be issued as per the Unsatisfactory Student Progress and Engagement Code of Good Practice.

2.5 During periods of study off campus (e.g. study abroad and industrial/professional placements), the University of Exeter will continue to expect all students to attend and engage satisfactorily with this element of their programme. Attendance during these periods will be monitored for Tier 4 students and a minimum of ten contact points per year will be required.

### 3 Responsibilities

This section sets out the responsibilities of students and staff in relation to attendance and engagement, as well as those of the University:

#### 3.1 Responsibilities of Students

Students will:

- attend all scheduled learning and teaching activities, and any other activities required by their modules and/or programme
- engage with all guided independent study, assessment and feedback, and any other activities required of their module and/or programme
- participate in the University of Exeter's attendance monitoring processes
- exhibit the characteristics of professionalism
- notify their discipline if they are unable to fulfil the requirements of their programme (inclusive of attendance at scheduled learning and teaching activities) for sickness or other reasons. Further guidance on this can be found in the Taught Student Illness procedure and International Student Support Attendance policy
- engage with the Health Wellbeing and Support for Study Procedures or Unsatisfactory Student Progress and Engagement Code of Good Practice when a referral has been made in light of unsatisfactory levels of attendance and/or engagement
- meet any PSRB attendance and engagement requirements where these are applicable to the programme

#### 3.2 Responsibilities of Academic Staff

Academic Personal Tutors will:

- investigate and support their tutees attendance and engagement where data confirms that they have failed to meet the University of Exeter's expectations at the appropriate threshold
- discuss the attendance and engagement of their tutees on a regular basis in 1:1 tutorial meetings throughout the academic year and, where there is felt to be cause for concern, hold informal discussions with the student in the first instance in order to direct them to additional support or guidance
- where appropriate, in the light of module/programme requirements, actively take steps to contact students directly where sessions are missed
- follow and engage with the Academic Personal Tutoring Guidance in order to best support students to attend and engage appropriately
- communicate as appropriate with staff where there are structural problems militating against students being able to attend and/or engagement with programmes/modules

Module Convenors and Module Tutors will:

- support and encourage student participation in attendance monitoring processes during scheduled learning and teaching activities
- refer students who experience difficulties participating in attendance monitoring processes to support services
- review attendance and engagement data as necessary, taking steps to notify staff and students where expectations are not being met

Directors of Education, Programme Leaders and/or equivalent will:

- maintain oversight of attendance and engagement requirements within their programmes/disciplines
- support and encourage academic staff participation in attendance and engagement monitoring processes
- review attendance and engagement data as necessary

### 3.3 Responsibilities of Professional Services Staff

Education and Student Experience Staff will:

- manage and maintain all relevant processes and systems and support Directors of Education, Programme Leaders, Academic Personal Tutors and Module Convenors (and equivalents of such) to ensure full compliance with the Taught Student Attendance and Engagement Policy.

Education Support Advisors (Welfare) will:

- receive referrals from Academic/Personal Tutors/Education Support Teams where there may be welfare concerns and arrange to provide or signpost to any necessary support
- signpost to ILP process where reasonable adjustments related to attendance may be helpful
- initiate the Health, Wellbeing and Support for Study process if appropriate

### 3.4 Responsibilities of the University of Exeter

The University of Exeter will:

- be transparent about the attendance and engagement data that we collect and wherever possible, share this data with our students
- provide guidance for our staff and students on how to use, interpret and act on this data
- use data to improve student support and the services we provide
- ensure compliance with the monitoring and reporting requirements of external organisations such as the UKVI and PSRBs

**CEDAR PGT Handbook**





Please see link for up to date version.

<https://vle.exeter.ac.uk/course/view.php?id=8259>

### **Self-reflection form**

To evidence attendance, learning and action points. A copy of the form below is available on ELE and must be sent to your academic tutor.

**Programme Member:**

**Date:**

**Module / session:**

**Title:**

- 1. From the learning in the session I reviewed, what made me stop and think? What are my personal learning points from the session?**
- 2. What specifically can I take forward from the session into my role today?**
- 3. What specifically do I want to take away and learn more about? Are there any tasks which arise from the session?**
- 4. What action plan do I have regarding this?**
- 5. Following completion of these tasks/action points, what am I taking away? (e.g. new**
- 6. learning, personal insights, impact on personal goals, practice etc).**



## Module descriptors

### Module 1

<b>MODULE TITLE</b>		Supervising Evidence-Based Psychological Interventions in Child and Adolescent Community or Education Settings			<b>CREDIT VALUE</b>	30
<b>MODULE CODE</b>		PYCM123	<b>MODULE CONVENER</b>		Dr Catherine Gallop	
<b>DURATION</b>	<b>TERM</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>Number Students Taking Module (anticipated)</b>	25
	<b>WEEKS</b>	10	9	2		
<b>DESCRIPTION – summary of the module content</b>						
<p>Across all psychological interventions in child community mental health or education settings, it is recognised that clinical supervision plays a fundamental role in improving clinical outcomes, supporting practitioners, and ensuring safe and effective practice. In this module you will develop advanced skills, understanding, and mastery of the supervision competencies associated with clinical supervision of evidence-based low-intensity psychological interventions for children and young people's mental health / emotional difficulties within community and education settings. Considerable opportunity for reflection on your supervisory practice will be afforded to enhance learning and ongoing action planning.</p>						
<b>MODULE AIMS – intentions of the module</b>						
<p>This module will work in line with the national curriculum to equip you with a sound understanding of the process of effective low-intensity supervision practice. The modules primary aims are to develop your advanced knowledge and practice skills of the clinical supervision of children and young people's early intervention mental health practitioners and to support the development and maintenance of reflective practice. We aim to provide you with the didactic, procedural, and reflective skills that will enhance your professional practice and support your autonomous lifelong learning. We also aim to provide a supportive learning environment that fosters your clinical, academic, professional, and personal development.</p>						
<b>INTENDED LEARNING OUTCOMES (ILOs) (see assessment section below for how ILOs will be assessed)</b>						
On successful completion of this module <i>you should be able to:</i>						
<b>Module Specific Skills and Knowledge:</b>						
1	Synthesise foundational theory and core competencies in planning, delivering, and reflecting on clinical supervision across children and young peoples' settings					
2	Demonstrate generic and modality specific competencies in clinical supervision of evidence-based psychological therapies / interventions for children and young people					
3	Evidence through the practice outcomes document how reflection on your clinical supervision skills influences your practice					
4	Identify how you meet the relevant national competency standards for clinical supervision in child mental health					
5	Evidence through the portfolio the demonstration of your clinical supervision skills					
<b>Discipline Specific Skills and Knowledge:</b>						



6	Address systematically complex supervision problems which may be framed within unpredictable contexts, think critically, creatively, and independently, and fully appreciate the complexities of the issues
7	Describe the wider ethical and professional issues encountered within clinical supervision
<b>Personal and Key Transferable/ Employment Skills and Knowledge:</b>	
8	Appraise your personal strengths and weaknesses in training and experience, and reflect upon the implications for your further training needs
9	Give accurate and constructive feedback

**SYLLABUS PLAN – summary of the structure and academic content of the module**

Whilst the module’s precise content may vary from year to year, an example of an overall structure is as follows:

The taught content of this module will be delivered over ten days. These will enhance your clinical skills, personal reflection, and ongoing action planning. The development of your practical understanding in the application of clinical supervision competences will be demonstrated through the various assessment methods.

- Principles of supervision
- Promoting psychological knowledge in supervision
- The use of outcomes data in supervision
- Facilitating therapeutic processes in supervision
- Delivering modality-specific supervision

**LEARNING AND TEACHING**

**LEARNING ACTIVITIES AND TEACHING METHODS (given in hours of study time)**

Scheduled Learning and Teaching activities	73	Guided independent study	110	Placement study	117
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**DETAILS OF LEARNING ACTIVITIES AND TEACHING METHODS**

Category	Hours of study time	Description
Scheduled Learning and Teaching	73	Lectures (10x7 hours)
		Tutorials (3x1 hours)
Guided Independent Study	110	Further reading, assignments, reading and preparation for learning groups / classes
Placement/study abroad	117	Work-based learning

**ASSESSMENT**

**FORMATIVE ASSESSMENT - for feedback and development purposes; does not count towards module grade**

Form of Assessment	Size of the assessment e.g. duration/length	ILOs assessed	Feedback method
n/a			

**SUMMATIVE ASSESSMENT (% of credit)**

Coursework	100	Written exams	0	Practical exams	0
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**DETAILS OF SUMMATIVE ASSESSMENT**

Form of Assessment	% of credit	Size of the assessment e.g. duration/length	ILOs assessed	Feedback method
<b>Clinical supervision essay</b> This assessment must be passed; failure in this assessment will lead to failure in the module and the programme	100	3000 words	1, 4-6	Written
<b>Supervision portfolio</b> Pass/fail only (this assessment must be passed; failure in this assessment will lead to failure in the module and the programme)	0	6000 words	1-9	Written
<b>Practice outcomes document (POD)</b> Pass/fail only -this assessment must be passed; failure in this assessment will lead to failure in the module and the programme	0	6000 words	1-9	Written

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

Original form of assessment	Form of re-assessment	ILOs re-assessed	Time scale for re-assessment
<b>Clinical supervision essay (100%)</b>	Clinical supervision essay	1, 4-6	Four weeks from the date that feedback was provided
<b>Supervision portfolio (0%)</b>	Supervision portfolio	1-9	Four weeks from the date that feedback was provided
<b>Practice outcomes document (0%)</b>	Practice outcomes document	1-9	Four weeks from the date that feedback was provided

**RE-ASSESSMENT NOTES**

In all summative submissions, re-assessment will be the same as the original assessment. Where you have been referred/deferred for any form of component detailed above, you will have the opportunity to retake within 4 weeks from the date that feedback was provided. If you pass re-assessments taken as a result of a fail, the overall module mark will be capped at 50%, except for the supervision portfolio and practice outcomes document which will not result in a module cap. If you fail re-assessments, you will be failed in the module and as a consequence you will be failed in the programme and your registration as a student at 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.



<b>MODULE TITLE</b>	Clinical Supervision Practice Placement (Wellbeing Practitioner for Children and Young People)			<b>CREDIT VALUE</b>	30
<b>MODULE CODE</b>	PYCM090	<b>MODULE CONVENER</b>		Dr Catherine Gallop	
<b>DURATION</b>	<b>TERM</b>	<b>1</b>	<b>2</b>	<b>Number Students Taking Module (anticipated)</b>	25
	<b>WEEKS</b>	10	9		

## Module 2

**DESCRIPTION – summary of the module content**

Within community and education settings it is becoming increasingly recognised that clinical supervision plays a fundamental role in improving clinical outcomes, supporting practitioners, and ensuring safe and efficient practice. In this module you will develop advanced skills and mastery of the supervision competencies associated with clinical and case management supervision, as well as supervision of the implementation of psychological interventions within community/education settings. Considerable opportunity for supervision and reflection on your supervisory practice will be afforded to enhance learning and ongoing action planning.

**MODULE AIMS – intentions of the module**

The aim of this module is to develop advanced reflective practice skills in clinical and case management supervision, as well as supervising the implementation of evidence-based psychological interventions in community/education settings. We aim to provide you with the didactic, procedural, and reflective skills that will enhance your professional practice and support your autonomous lifelong learning. We also aim to provide a supportive learning environment that fosters your clinical, academic, and personal development.

**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 | Synthesise theory and competencies in planning, delivering and reflecting on clinical supervision of psychological interventions in community/education settings |
| 2 | Demonstrate modality specific competencies in clinical supervision of psychological interventions in community/education settings                                |
| 3 | Identify how you meet the required national competency standards for clinical supervision of psychological interventions in community/education settings         |

**Discipline Specific Skills and Knowledge:**

- |   |   |
|---|---|
| 4 | Address the complexities of supervision practice whilst supporting practitioners to audit, appraise and implement psychological interventions in community/education settings |
| 5 | Support practitioners to maintain high caseloads through competencies in structured case management supervision   |
| 6 | Support practitioners to maintain fidelity to the low intensity model, whilst being able to adapt materials to suit a wide range of developmental ages and abilities          |
| 7 | Describe the wider ethical and professional issues encountered within enhanced low-intensity practice   |

**Personal and Key Transferable/ Employment Skills and Knowledge:**

8	Appraise your personal strengths and weaknesses in training and experience, and reflect upon the implications for your further training needs
9	Give accurate and constructive feedback

**SYLLABUS PLAN – summary of the structure and academic content of the module**

The module's precise content may vary from year to year and will be dependent on the pathway undertaken. An example of the overall structure is as follows;

The taught content of this module will be delivered over ten days, alongside a minimum of 6 days of supervision of supervision. Combined, these enhance your clinical skills, personal reflection, and ongoing action planning. The development of your practical understanding in the application of clinical supervision competences will be achieved through group supervision sessions and demonstration of competences through the various assessment methods. You will have extensive opportunities to deliver and reflect on your clinical supervision skills through your supervision practice placement and regular supervision via:

- Models of supervision
- Clinical supervision competencies
- Reflecting on clinical supervision skills and their influence on practice
- Addressing systematically complex supervision problems
- Adapting materials
- Ethical and professional issues
- Adapting practice to consider ethnic, cultural and/or other backgrounds, and protected characteristics

**LEARNING AND TEACHING****LEARNING ACTIVITIES AND TEACHING METHODS (given in hours of study time)**

Scheduled Learning and Teaching activities	79	Guided independent study	104	Placement/study abroad	117
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**DETAILS OF LEARNING ACTIVITIES AND TEACHING METHODS**

Category	Hours of study time	Description
Scheduled Learning and Teaching	31	Lectures (4x7 hours) Tutorials (3x1 hours)
Scheduled Learning and Teaching	48	Supervision of supervision groups (6X6 hours) POD/Portfolio workshop (2x6 hours)
Guided independent study	104	Further reading, assignments, reading and preparation for learning groups / classes
Placement	117	Work-based learning

**ASSESSMENT****FORMATIVE ASSESSMENT - for feedback and development purposes; does not count towards module grade**

Form of Assessment	Size of the assessment e.g. duration/length	ILOs assessed	Feedback method
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<b>Formative supervisor report (completed by staff)</b>	1-2 page report	1-9	Written
<b>Formative presentation outline</b>	500 words	1-2, 4-5, 7-9	Written
<b>Formative case management supervision assessment (CMSA)</b>	60 minutes	1-9	Written
<b>Formative reflective commentary</b>	2000 words	1-9	Written

**SUMMATIVE ASSESSMENT (% of credit)**

Coursework	100	Written exams	0	Practical exams	0
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**DETAILS OF SUMMATIVE ASSESSMENT**

Form of Assessment	% of credit	Size of the assessment e.g. duration/length	ILOs assessed	Feedback method
<b>Summative supervisor report – (completed by staff)</b> Pass/fail only (this assessment must be passed; failure in this assessment will lead to failure in the module and the programme)	0	1-2 page report	1-9	Written
<b>Supervision presentation</b> (This assessment must be passed; failure in this assessment will lead to failure in the module and the programme)	30	20 minutes	1-2, 4-5, 7-9	Written
<b>Case management supervision assessment</b> (CMSA recording) This assessment must be passed; failure in this assessment will lead to failure in the module and the programme	40	60 minutes	1-9	Written
<b>Reflective commentary</b> This assessment must be passed; failure in this assessment will lead to failure in the module and the programme	30	2000 words	1-9	Written

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

Original form of assessment	Form of re-assessment	ILOs re-assessed	Time scale for re-assessment
Summative Supervisor report (0%)	Summative Supervisor report	1-9	Four weeks from the date that the feedback was provided.



Supervision presentation (30%)	Supervision presentation	1-2, 4-5, 7-9	Four weeks for the date that feedback was provided
Case management supervision assessment (CMSA recording) (40%)	Case management supervision assessment (CMSA recording)	1-9	Four weeks from the date that feedback was provided
Reflective commentary (30%)	Reflective commentary	1-9	Four weeks from the date that feedback was provided

**RE-ASSESSMENT NOTES**

Four assessment components 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 component detailed above, you will have the opportunity to retake within 4 weeks from the date that feedback was provided, following additional supervision sessions as necessary with the agreement of the Module Convenor.

All assessment components must be passed. Failure in any of the components will lead to failure in the module. If you pass re-assessments taken following initial failure in the assessment, the overall module mark will be capped at 50%, except for the supervisor report which will not result in a module cap. If you fail re-assessments, you will be failed in the module and as a consequence you will be failed in the programme and your registration as a student at 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 Convenor.

Core reading:

- Child IAPT National curriculum (2012). London: Department of Health.
- Milne, D. (2009). *Evidence-based Clinical Supervision*. Chichester: Wiley-Blackwell.
- Proctor, B. (2000). *Group Supervision: a Guide to Creative Practice*. London, Sage.
- Roth, A.D. and Pilling, S. (2007). *Competencies required to supervise effective psychological therapies*. London: HMSO, Department of Health.
- Scaife, J. (2008). *Supervision in Clinical Practice; A Practitioner’s Guide*. London: Routledge.
- Turpin, G. and Wheeler, S. (2011). *IAPT Supervision Guidance*. London: Department of Health.

Web-based and electronic resources:

- ELE page - <https://vle.exeter.ac.uk/course/view.php?id=3647> (All resources will be made available on ELE. This includes additional material covered in the tutorials, the required readings, information about assessment and additional material (e.g., videos).)

Other resources:

- DVD/audio competency clips from IAPT and University of Exeter teaching team.

<b>CREDIT VALUE</b>	30	<b>ECTS VALUE</b>	15
<b>PRE-REQUISITE MODULES</b>	None		

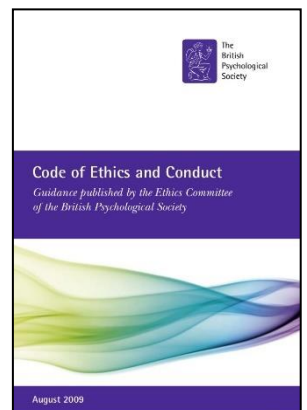


<b>CO-REQUISITE MODULES</b>	PYCM123 Supervising Evidence-Based Psychological Interventions in Child and Adolescent Community or Education Settings		
<b>NQF LEVEL (FHEQ)</b>	7	<b>AVAILABLE AS DISTANCE LEARNING</b>	No
<b>ORIGIN DATE</b>	07/01/2019	<b>LAST REVISION DATE</b>	07/11/2022
<b>KEY WORDS SEARCH</b>	Supervision, young people, children, improving access to psychological therapies, educational settings, evidence-based psychological interventions, competency assessment.		

## Professional Practice & Fitness to Practice Guidelines

Code of Ethics and Conduct

*Guidance published by the Ethics Committee  
of the British Psychological Society*



Students agree to adhere to these guidelines.

*Psychologists/practitioners should:*

- (i) Recognise that ethical dilemmas will inevitably arise in the course of professional practice.
- (ii) Accept their responsibility to attempt to resolve such dilemmas with the combination of reflection (reflective practice), supervision, and consultation.

Please familiarise yourself with the University's fitness to practice procedures, this is particularly important within clinical training

<http://www.exeter.ac.uk/staff/policies/calendar/part1/otherregs/fitness/>

This link covers;

### **Part I: Introduction**

[The University's Fitness to Practise Policy](#)

[Scope of this regulation](#)

[Fitness to Practise where programmes of studies are provided in partnership with other universities](#)

[Fitness to Practise during intercalated studies](#)

[Fitness to Practise for students studying for a University award employed by a body with its own Fitness to Practise regulation](#)

[Responsibilities of the University for supporting Fitness to Practise](#)

[Responsibilities to applicants](#)

[Responsibilities to students](#)

[Responsibilities of students](#)

[Student support](#)

[Data protection and confidentiality](#)

[The Academic Lead for Fitness to Practise](#)



[The responsible Persons in Fitness to Practise matters](#)  
[The Investigating Officer in Fitness to Practise matters](#)  
[Monitoring the effectiveness of this regulation](#)

## **Part II: Reporting and receiving concerns**

[Health and Wellbeing matters that might give rise to concerns about the Fitness to Practise of a student](#)  
[Unprofessional conduct that may give rise to concerns about the Fitness to Practise of a student](#)  
[The duty to raise concerns about the Fitness to Practise of a student](#)  
[Reporting concerns when the student is at the University](#)  
[Reporting concerns when the student is in a placement setting](#)  
[Reporters](#)  
[Anonymous reports of concern about the Fitness to Practise of a student on grounds of their health or wellbeing](#)

## **Part III: Investigating concerns**

[Temporary suspensions of students when there are concerns about their Fitness to Practise](#)  
[Appointing an Investigating Officer](#)  
[Informing the student of an investigation](#)  
[Investigating concerns relating to unprofessional conduct](#)  
[The Investigating Officer's report](#)  
[Investigation and reporting by an OH Professional](#)  
[Dealing with allegations of academic misconduct in the context of Fitness to Practise](#)

### Part IV: Preliminary hearings

[Receiving reports from an OH Professional and/or an Investigating Officer](#)  
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