

**PROGRAMME SPECIFICATION:
POSTGRADUATE CERTIFICATE IN COGNITIVE BEHAVIOURAL THERAPY
(Introductory level)**

1. Awarding institution/body	University of Oxford
2. Teaching institution	University of Oxford
3. Programme accredited by	N/A
4. Final award	Postgraduate Certificate
5. Programme	Cognitive Behavioural Therapy (Introductory Level)
6. UCAS code	N/A
7. Relevant subject benchmark statement	N/A
8. Date of programme specification	June 2011

9. Educational aims of the programme

The main aim of the programme is to offer a comprehensive introduction to the fundamental principles and practices of CBT, focusing in particular on its use in treating common mental health problems (such as anxiety and depression). The first module will cover cognitive-behavioural theory and development, assessment and formulation within a CBT framework and core therapeutic skills (including relationship skills). The second module will extend students' understanding of CBT principles and practices by considering CBT interventions for specific focal problems (depression, panic, obsessive-compulsive disorder, social anxiety, generalised anxiety, health anxiety). The training will be skills-based thus giving participants the opportunity to practice techniques relating to these specific disorders. The third and final module of the course is designed to support students in further developing CBT competencies through closely supervised practice. Teaching and clinical supervision will be provided by Oxford Cognitive Therapy Centre staff, all of whom are accredited or eligible for accreditation by the British Association of Behavioural and Cognitive Psychotherapies (the central regulatory body for Cognitive Behavioural Psychotherapists in the UK).

10. A. Programme outcomes

In addition to providing a theoretical understanding of the fundamental principles of CBT, the course will provide practical skills-training to facilitate skill development to a defined standard of competency (see under assessment/evaluation). The course will also aim to increase students' knowledge of the research and evidence-base underpinning CBT, thus promoting a critical approach to the subject.

Therefore, the Postgraduate Certificate has the following learning objectives.

1. To develop a conceptual understanding of CBT and its application to clinical practice
2. To develop basic knowledge of the theoretical and research literature relating to CBT

3. To develop introductory level knowledge and skills in basic Cognitive Behavioural Therapy for common psychiatric disorders such as depression and anxiety

At the end of the course students will be able to:

- Demonstrate knowledge of the fundamental principles of CBT and the evidence-base for the application of CBT techniques
- Critically appraise research evidence in relation to Cognitive Behavioural Therapy
- Demonstrate knowledge of CBT models of depression and anxiety disorders
- Establish and maintain a collaborative working alliance with clients
- Construct maintenance and developmental CBT conceptualisations for depression and anxiety disorders
- Design and implement basic CBT treatment plans/interventions for clients with mild-moderate depression and anxiety disorders under clinical supervision
- Make appropriate use of clinical supervision for addressing difficulties arising in therapeutic practice

Related teaching/learning methods and strategies

- Course structure: Knowledge and understanding of theory, research and clinical practice and principle will be taught during the teaching days. The teaching in each of the three terms will focus on: (i) fundamentals of CBT; (ii) applying CBT to common mental health problem; and (iii) supervision for CBT competencies.
- Students will attend small-group supervisions. The focus of the supervision will be on translating theoretical knowledge into clinical practice and implementing the skills learnt in routine clinical care.
- Teaching sessions will take the form of interactive workshops interweaving didactic presentations with role-plays and periods of reflection, questioning, discussion and consideration of how theory, research and clinical principle relate to their own practice and to their work with patients.

- Teaching sessions will be led by scientists and practitioners who are at the forefront of their specialist fields, and by those who practice CBT in the clinical settings that the students of this course are being trained to work in.
- Self-directed learning and private study. Tutors will provide guidance on reading relevant to their subject areas, and students will be expected to spend in the region of 6-7 hours per week in private study, consolidating and deepening knowledge acquired in teaching sessions.
- Written assignments. These are intended to provide a context within which students can develop their ability to think for themselves, and to relate knowledge and understanding of theory and research to their own clinical practice.

Assessment

Assessment for Module 1: Assessment, Formulation and Core Therapeutic Skills

- 4,000 word essay to assess critical appreciation of theory, research and practice

Assessment for Module 2: CBT for Common Mental Health Problems

- 4,000 word essay to assess critical appreciation of theory, research and practice

Assessment for Module 3: Supervision for Cognitive Behavioural therapy Competencies

- 4,000 word case report (including formulation and intervention plan)
- Audio/video recording (or digital equivalent e.g. .mp3, .wav etc, to be supplied on a suitable medium such as DVD or CD) of a clinical session, rated on the Cognitive Therapy Scale-Revised (Blackburn, James, Milne, Reichelt, 2004). *NB. Information governance within the NHS is currently being reviewed and students may in future be required to submit such recordings on encrypted USB flash drives for data protection purposes.* Students must achieve a minimum score of 2 on every item. The session length must be 50 minutes minimum and 60 minutes maximum. The clinical recording will be accompanied by a written reflective analysis outlining the patient's goals for therapy, the shared formulation, plans for the session and the student's reflection on how the session went.

Students will also keep a log book of their supervised CBT practice over the term (so that they may later submit this as evidence towards meeting BABCP's criteria for accreditation as a CBT therapist, should they wish to do so). The format for this logbook, taken from the BABCP, will be provided in the Course Handbook.

Students can only obtain the PG Certificate on completing the above requirements to the satisfaction of the examiners. In particular, failure to submit any assignment without dispensation automatically results in overall failure. Poor performance on one part of the course may, at the discretion of the examiners, be compensated for by excellent performance on the remaining parts.

Cases of Failure: University regulations provide that a student who has failed the overall examination for the Postgraduate Certificate may resit at most once. This means resubmitting assignments and project report/dissertation, but not re-attending modules. The Examiners may, at their discretion and under University regulations, dispense with some of these requirements, and so they will specify in each case which parts of the assessment must be repeated and which need not.

Submission of coursework: It is the students' responsibility to ensure that assignments are submitted to OCTC by the deadlines listed in the Student Handbook. These dates appear again in the notes for each module. (The examiners take into account, with the approval of the Chairman of the Board of Studies or the Proctors as appropriate, exceptional circumstances).

Assignments must be wholly the work of the student with due acknowledgement where appropriate. Plagiarism will be dealt with under the Departments published policy. Plagiarism consists of substantial or verbatim quotation from an unacknowledged source. This includes, in particular, unacknowledged collaboration with another student. For each submission made, students will be required to sign a declaration acknowledging authenticity of their work.

All assignments will be double marked. A number of assignments (usually those receiving borderline or exceptionally high marks or where there is a large disparity between marks awarded by first and second-markers) will be sent to an external examiner for moderation, as will a complete set of several individuals' work.

Extensions: Submission of assignments and the overall appraisal by the deadline is strictly regulated. If students cannot submit an assignment by the set deadline, they must apply in advance of the set deadline for an extension. Extension forms can be obtained from the Registry Office. If the extension is needed for more than 2 weeks after the deadline, then it must be approved by the Chairman of Board of Studies via the Registry Officer. Extensions will be considered in accordance with the Department's policy and will require approval of the Proctors.

Intermissions: Intermissions are periods of suspension of study used when a student's problems have become so severe, normally for reasons such as illness or redundancy that extensions will not help and are normally for a period of twelve months. Intermission is a term used by the department for non-matriculated students. Intermissions are subject to the approval of the Chairman of the Board of Studies via the Registry Officer and the Course Director. Applications must be supported by documentary evidence, e.g. medical note, together with supporting comments from the Course Director. Intermission application forms may be obtained from the Registry Office. Students may intermit for a maximum of 3 terms (one academic year only).

10.B. Skills and other attributes

Students will have the opportunity to develop the following skills during the course:

I. Intellectual skills

During the course, students will be expected to develop their capacity to:

- Interpret and evaluate theoretical literature relevant to CBT.
- Critically evaluate CBT's evidence base in clinical outcome research.
- Understand the value of an evidence based approach to psychological treatment
- Relate theory and research to the practicalities of work with patients.

- Use established bodies of knowledge as a basis for developing their own ideas on CBT theory and practice.
- Write clear, literate and well argued assignments that comply with established conventions of presentation and referencing.

Teaching/learning methods and strategies

- Teaching sessions on theory, research and clinical principle will model the desired critical stance and encourage questioning and independent thought.

- Feedback on written assignments and students' recorded therapy sessions will also encourage independent thought, and will highlight strengths and weaknesses in argument and in presentation.

Assessment:

- Informally, through observation of students' contributions to classroom discussions
- Formally, through students' performance in written assignments, supervision and evaluation of one recorded therapy session with a client

II. Practical skills (*specific to the content and aims of the course*)

At the end of the course, students will be expected to be able to:

- construct maintenance and developmental conceptualizations for common mental disorders
- develop CBT specific treatment plans
- practice CBT with mild-moderate depression and anxiety disorders systematically, creatively and with good clinical outcome
- demonstrate a systematic knowledge of the basic principles of CBT and the evidence base for the application of core CBT techniques
- demonstrate a systematic knowledge of CBT for depression and anxiety disorders
- demonstrate a critical understanding of the theoretical and research evidence for cognitive behaviour models for common mental health problems and an ability to evaluate the evidence

Teaching/learning methods and strategies

- *Supervision:* Small group supervision will be used to evaluate and reflect upon students' developing clinical skills in applying CBT theory to formulation and practice
- *Self-monitoring and self-supervision:* Students will be expected to prepare carefully for supervision sessions and to have listened to and reflected upon their own CBT sessions
- *Workshops:* The teaching on the course will be practical and interactive and focus on the development of clinical skill and on applying this in routine practice
- *Essays/Case reports:* Written assignments will encourage students to relate their personal practice of CBT to theory, research and clinical principle

Assessment

- *Observation of performance in workshops and in supervision:* Observation of students' in workshops and supervision will provide opportunity to informally assess their progress. and will provide opportunities for them to receive and act on constructive feedback from tutors and fellow students (*formative assessment*)
- *Observation of performance with patients:* Observations of students' performance with patients, via review of segments from therapy recordings played in supervision, plus submission of a full therapy session (on audio/visual tape or equivalent digital format), will provide continuing opportunity to give

them feedback on their developing clinical skills. (*formative and summative assessment*).

- *Reflective analysis*: Students' reflective analysis on their recording will provide an opportunity to demonstrate a capacity for self-reflection, and the ability to relate personal experience to theory, research and clinical principle (*summative assessment*)
- *Evaluation of Essays/Case Reports*: Students' written case reports will be used to assess their ability to formulate, plan treatment, and implement and reflect upon CBT treatment plans. (*summative assessment*)

III. Transferable skills

At the end of the course, students will also be expected to have developed a range of transferable skills including:

- The ability to work with a range of different concepts
- The ability to evaluate research literature
- The ability to relate theoretical principles to practice
- The discipline of independent and effective study and guided reading

- The ability to write clear and literate assignments, tailoring content and style to the reader
- The ability to work collaboratively patients/clients and with other mental healthcare professionals from a range of backgrounds
- The ability to foster the understanding, practical skills and personal development of others
- The ability to evaluate the quality of their own and others' clinical work
- Skills in self-reflection, self-monitoring, personal goal-setting and self-development
- Skills in note-taking, use of libraries, and other learning resources, including tutors and experienced peers

Teaching/learning methods and strategies

- These skills are fostered throughout the course, through teaching sessions, supervision of practice and skills development, reflection, discussion, private study and the preparation of assignments for evaluation purposes

Assessment:

- Assessed informally through observation of classroom performance
- Assessed formally through the completion of written and clinical assignments, as described above

11. Programme Structure and Features

- The course is conducted under the aegis of the Continuing Education Board as a collaborative programme between the Oxford Cognitive Therapy Centre and the Department for Continuing Education
- The module descriptions are given in Annex 1

12. Support for Students and their learning

The Director and Tutors of the course undertake to:

- Engage in regular continuing professional development so as to maintain their levels of knowledge and skill in cognitive therapy and thus the quality of their teaching and supervision
- Integrate study skills within the course by providing textual material and offering guidance where necessary on reading, note-taking, ethical considerations and assignment writing
- Develop a Course Handbook for students detailing all aspects of the course
- Provide individual course tutoring when necessary to support each student's understanding of theory, guide assignment writing, and link clinical and theoretical study
- Offer individual coaching/tutoring to assist students in coping with the psychological demands of the course (each student will be assigned a mentor offering both personal and academic advice)
- Offer help, advice and (where required) referral to University support systems in cases of student disability such as dyslexia
- Give detailed feedback on coursework assignments in the form of marker comments
- Give detailed feedback on clinical performance in the form of ratings and comments on tapes, and direct feedback during supervision
- Offer students the opportunity to discuss and review completed assignments with course tutors

UDCE provides:

- Welfare support and guidance through the Student Advisor in the Registry Office
- Financial advice and assistance through the Student Advisor in the Registry Office
- A study-skills programme designed for adult part-time learners
- Access to the computing and library facilities of the University

University provides:

- Access to University libraries and computing facilities via a student card, career and counselling services, limited childcare provision, and sporting and recreational facilities (as most students are likely to come to Oxford from elsewhere, it is envisaged that relatively little use will be made of these facilities)

13. Criteria for Admission

Applicants are expected to meet ONE of the following categories:

A) Be a graduate or have successfully completed a professional training in a related field such as mental health, social care or counselling (e.g. Nursing, Occupational Therapy, Social Work, Psychiatry, Psychology, Counselling, Teaching) PLUS 1 years' post-qualification relevant work experience. In addition, applicants must have completed a basic counselling skills course or received basic therapeutic skills training as part of their core professional training.

B) Applications from those who do not have a professional qualification as above will be considered, if they have an Honours degree in a relevant subject (e.g. Psychology, Health, Social Sciences) PLUS 2 years' post-degree work experience (e.g. in mental health or social care services), which should include relevant continuing professional development experiences gained as part of this work experience (supervised clinical

work with clients, attendance at psychological therapy/CBT workshops)

C) For students who do not have a first degree, their combination of qualifications and experience will be required to equate to graduate level standards and skills. This will be tested on application by submission of a piece of written work that will be assessed against graduate level academic standards. Applicants who successfully demonstrate graduate level standards and skills will be accepted on the programme. They must

- Have 5 years work experience since finishing full time education (e.g. in mental health or social care services), which should include a basic counselling skills training and relevant continuing professional development experiences gained as part of this work experience (supervised clinical work with clients, attendance at psychological therapy/CBT workshops) Be able to demonstrate the skills and capacity necessary for academic study at postgraduate level
- Have successfully completed relevant Further or Higher Education courses that are indicative of their academic ability beyond 'A' level limited education
- Be able to demonstrate the capacity for independent study and theoretical debate
- Have a high level of motivation
- Have achieved IELTS level 7.5 English language qualification with a minimum of 7.0 per component (or equivalent level required by the University)

(NOTE: The alternatives B) and C) are included as there are some experienced clinicians who do not have a professional qualification, yet have significant clinical experience and although already making a welcome contribution to health and social care services, appropriately wish to formally develop their CBT skills. The BABCP also have acknowledged that a CBT training - and the option of eventually applying for BABCP accreditation - should be open to those without a core professional training. Thus, those applicants who may apply for the Postgraduate Certificate under criteria B) or C) are advised to consult the BABCP website and review the requirements within the alternative accreditation route for those without a core professional qualification - which is called the Knowledge, Skills and Attitudes (KSA) route)

In addition to the above entry requirements, all successful applicants must:

- Be “psychologically minded”, i.e. used to working within the framework of psychological explanations of behaviour and using psychological treatment methods to achieve change. This does not imply commitment to any particular psychological model
- Have access to a computer with internet access. Have access to treatment settings where cognitive behavioural therapy skills can be practised and refined on a regular and systematic basis
- Be able to obtain time, funding and management support for the course
- Be able to demonstrate proficiency in English language to the level required by the University.

Course selection procedure:

- Information about the course, including selection criteria, will be publicised via the University's graduate prospectus, advertisements, printed prospectuses, the course web site, and other linked web sites (e.g. the British Association for Behavioural and Cognitive Psychotherapies)
- Applications must be accompanied by a CV (detailing relevant educational and professional qualifications and experience), transcripts from relevant higher education institutions, the names and contact details of three professional referees, and a personal statement describing the candidate's reasons

for wishing to undertake the training (500 words)

- All applications will be independently screened by two assessors, and interviewed by two assessors, one of whom will normally be the course director

14. Methods for evaluating and improving the quality and standards of learning

The course will be reviewed and modified as appropriate in response to the following:

- Student feedback and consultation. Written feedback (ratings and comments) will be requested from students on all teaching and supervision activities as the course progresses, and students will also provide annual ratings of quality and written comments on the structure and delivery of the course as a whole (including recommendations for improvement)
- Regular termly meetings of the Course Executive Committee (including an elected student member). They will monitor feedback from students and tutors (both formal written ratings and comments, and informal verbal feedback), take action as appropriate, and inform students and tutors of the outcome
- Regular termly meetings comprising members of the Oxford Cognitive Therapy Centre and the Department for Continuing Education. They will be responsible for monitoring communication between the two Departments, reviewing the conduct of the course, and considering amendments to it
- Annual meeting and report of the Board of Examiners, incorporating comments on standards of learning and performance in course assignments
- Annual report of the External Examiner, to be considered by the OUCDE Board of Studies, the CE Board and the Educational Committee (EdC). This will be based on scrutiny of a representative sample of assessed work, and incorporate comments on standards of teaching and assessment
- Information about pass rates and other relevant statistics
- Annual scrutiny by the relevant OUCDE Board of Studies, who will receive the Course Director's report on the progress and development of the course, the report of the Chair of Examiners, and the External Examiner's report, and will review the course and examination arrangements
- Initial five-year review of the programme by the Continuing Education Board, and also as part of subsequent periodic reviews of the subject area
- Ensuring consistency with relevant elements of the QAA framework as appropriate
- Number of applications for places on future courses
- Developments in the field (including accreditation criteria for CBT practitioners)
- Best practice from other HEIs as identified from the report of the External Examiner, contact with other similar courses, attendance at conferences, reading of journals and other forms of academic communication

15. Regulation of assessment

Attendance:

- Students are required to attend a minimum of 80% of scheduled teaching sessions

Assessment:

- There is no final examination. Rather, award of the Postgraduate Certificate will be made to students

who successfully and satisfactorily complete each assessment, i.e. achieve a pass grade on each piece of written work and practical assignment, as detailed below.

- Essays and Case reports will be marked out of 100 (pass = 50) (see criteria outlined below).
- For a recording to pass, students must achieve a minimum score of 2 on each item on the Cognitive Therapy Scale-Revised (Blackburn, James, Milne, Reichelt, 2004. This does not imply competence to practice as an independent CBT practitioner. The CTS-R is an established measure of CBT competency, developed by experts at the Newcastle Cognitive Therapy Centre. The scale consists of 12 items all of which reflect one important competence in CBT. The items are: agenda setting and adherence; feedback; collaboration; pacing and efficient use of time; interpersonal effectiveness; eliciting of appropriate emotional expression; eliciting key cognitions; eliciting behaviours; guided discovery; conceptual integration; application of change methods; and homework setting. Supervisors/ examiners rate all items using a 7-point continuous adjectival scale (0=incompetent, i.e. non-compliance with that aspect of therapy, through to 6=expert, i.e. compliance and very high skill in the face of difficulties). The CTS-R is widely used by postgraduate training courses in CBT.
- The recording will be accompanied by a written reflective analysis outlining the patient's goals for therapy, the shared formulation, plans for the session and the student's reflection on how the session went.

Additional requirements:

- Students will also keep a log book of their supervised CBT practice over the term (so that they may later submit this as evidence towards meeting BABCP's criteria for accreditation as a CBT therapist, should they wish to do so).
- In addition to attendance requirements and the requirement to pass all written and practical assignments, students are expected to complete: 6-7 hours of private study weekly (including completion of written assignments)

Assessment Criteria

Knowledge and understanding:

Range of knowledge of primary and secondary sources

Familiarity with and understanding of the course material

Awareness of appropriate contexts

Understanding of analytical terms and techniques

Knowledge of varying critical approaches

Ability to apply quantitative techniques to historical data

Argument and reasoning:

Appropriate use of relevant evidence

Logical progression of ideas

Clarity and completeness of intellectual structure

Overall judgement and detailed perception

Originality of argument and approach

Expression and presentation:

Clear, accurate and expressive use of language

Compliance with conventions of grammar, punctuation and spelling

Appropriate uses of references and bibliography.

Marking procedure:

- Written assignments will be marked 'blind' and double marked. Where markers cannot agree on a final mark, scripts will be referred to the External Examiner for final adjudication.
- Audio/video recordings cannot be marked 'blind', because the student will be recognisable on the recording of the CBT sessions evaluated. If any tape does not pass then it will be double marked with disagreements resolved by referral to the External Examiner

Award of qualification:

- Assignment results and overall awards will be determined by the Board of Examiners in consultation as necessary with the External examiner

Criteria for Marking Essays and Case Reports

DISTINCTION

70 or over EXCELLENT

- Excellent conceptualisation/treatment, based on in-depth knowledge of theory and research
- Penetrating clinical judgement (i.e. sophisticated clinical skills; highly sensitive to individual client needs; measures and interventions apt and extremely well implemented)
- Evidence of independent thought; finely developed ability to reflect on/learn from practice
- Excellent presentation (concise, coherent and articulate)

PASS 50-69

63-69 VERY GOOD

- Very good work, showing sound knowledge of theory and research
- Balanced, careful clinical judgement: very good clinical skill and sensitivity
- Some initiative, and very good ability to reflect on and learn from practice
- Consistently good presentation: clear and concise

56-62 GOOD

- Conceptualisation/treatment informed by some knowledge of theory and research
- Some clinical judgement (e.g. skills good, but lacking consistency; follows CBT protocol, but without much ability to adapt to the individual patient)
- Some evidence of independent thought; good attempt to reflect on and learn from practice
- Uneven presentation (e.g. diffuse report; some sections unclear or insufficiently developed)

50-55 ADEQUATE BUT BASIC

- Basic contribution, reflecting elementary knowledge of related theory and research
- Limited clinical judgement (e.g. basic clinical skills; conceptualisation insufficiently precise; appropriate measures and/or interventions omitted; limited attempt to adapt protocol to the individual patient; interventions, though cognitive-behavioural in nature do not follow logically from conceptualisation/problem list, or are not integrated into a coherent treatment plan)
- Little evidence of independent thought; limited ability to reflect on/learn from practice
- Careless presentation and/or confused expression (e.g. interventions appear appropriate but are not clearly described; report does not follow case guidelines; repetitive; too long/short)

FAIL

Under 50 POOR

- Significant ignorance or misunderstanding of CBT theory and research (e.g. errors in understanding of CBT literature; inappropriate or incorrect model/conceptualisation)
- Poor clinical judgement (e.g. serious omissions in treatment; persistence in using inappropriate interventions; treatment poorly carried out, mechanically applied, or not cognitive-behavioural in nature; interventions poorly selected and unrelated to diagnosis, conceptualisation or problem list; insensitivity to individual patient's needs)
- Little or no evidence of ability to reflect on or learn from practice

- Poor presentation (many errors, rambling, incoherent, difficult to follow)

Role of the Examiners and Boards

A Board of Examiners will be appointed under the procedures governing the Nomination of Examiners laid down in the Examination Decrees. The Board will be constituted of two internal examiners (one of whom who may also be the course director) and an external examiner, appointed by the Vice-Chancellor and Proctors on behalf of the University. Work is marked by the appointed assessors (who are normally the tutors who have taught the unit to which the assignment is related)

The external examiners comment on assignment topics and examination papers, review a sample of examination and coursework scripts to ensure consistency in marking, attend all Board of Examiner meetings and submit an annual report on the standards of the course, its content, structure and arrangements for its delivery to be considered by Departmental and University committees.

The Board of Examiners meets annually to discuss and agree marks progression and awards.

The Chairman of the Board of Studies responds on a day to basis to requests for extensions and appeals.

The course/programme committee will meet at least once per year

- i) To discuss the examiner reports, student data, student and tutor feedback,
- ii) To confirm the ongoing validity of the syllabus, the course delivery and the assessment methods,
- iii) To check accuracy of course documents and
- iv) To draft a reply to the external examiner.

Where possible the course committee will include a student representative.

The Department's Board of Studies will then receive the examiners' reports for each course and a note of the course committee meeting. The Board of Studies will reply formally to the external examiner.

The University Proctors carry overall responsibility for examinations, including issuing guidance to students and examiners and dealing with cases of potential breaches of examination rules (e.g. cases of suspected plagiarism) and approving any special arrangements.

The Education Committee sets the general policy framework for examinations and issues policy guidance and bears overall responsibility for educational standards within the University.

16. Indicators of programme quality

- The procedures outlined in Section 14 will also provide information on quality and standards
- Student evaluation of the programme (including the annual evaluation of programme quality) will provide indices of student satisfaction with course content and delivery, their learning, and the adequacy of student support
- The number of applicants for the course, especially those applying because of word of mouth, will indicate whether the course is making good a gap in current education and training provision

- Student retention and completion rates
- Evidence of desired outcome: Students disseminating competent basic CBT in clinical settings under appropriate supervision
- Profile of results on completion
- Publication of coursework in peer reviewed journals, and presentation at conferences
- The annual External Examiner's report will provide impartial feedback about programme process and content, the standard of teaching and learning and of students' work, and the evaluation process, in comparison with standards achieved by similar courses in other institutions
- External reviews undertaken periodically by external bodies such as the QAA