



The  
University  
Of  
Sheffield.

## Clinical Psychology Unit.

Doctor of Clinical Psychology

# Annual Feedback Report

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Department Of Psychology

Faculty of Science

*in collaboration with*

NHS Yorkshire and the Humber  
and local Psychology Services

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## Section 1: Executive Summary

### **1. Background**

This report summarizes the views of the Sheffield DClin Psy Programme stakeholder groups obtained through online survey questionnaires. The survey was sent to all trainees, supervisors, and external teachers. The findings from the questionnaires form part of the Course's internal quality monitoring process, and are fed back to the Course Training Committee via the Curriculum sub-Committee.

### **2. Response Rate**

The response rate across each group was as follows: First Year group: 67% (12/18 questionnaires); Second Year group: 65% (13/20); Third Year group: 75% (15/20); Supervisors: 39% (32/82); External teachers: 24% (42/172). The first year trainee response rate of 67% is 18% lower than last year and the second year trainee response rates were 25% lower. However, the third year response rate of 75% was 5% higher than last year. External speaker response rates remained roughly the same this year, as 25% responded last year, however there was a marked increase in the number of responses from supervisors, from 19% last year.

### **3. Summary of Results**

#### **3.1 Trainee Feedback**

The majority of trainees indicated that on the whole they felt positive about their training. This included teaching, placements and academic requirements. The first year trainees were again positive about the teaching on Psychological Therapies, although second year trainees indicated that they had insufficient teaching of psychological therapies for working with children and people with a learning disability. The first year trainees indicated that they would like more Forensic teaching, the second years, more teaching on organizational issues and the third years, more research skills teaching. Furthermore some trainees felt that diversity issues were not integrated well into teaching and there were overlaps in some of the teaching. With regards to academic requirements, case studies were viewed as particularly beneficial to learning across all years. Placements were also generally highly regarded, however there was some concern expressed about the process of placement allocation. Facilities were also generally viewed positively, although some trainees felt that the general library facilities and the third year trainees expressed dissatisfaction with the computers in CPU. Finally all years expressed satisfaction with the support systems and PPD provision, although some third year trainees indicated there found the Reflective Practice groups problematic.

#### **3.2 Supervisor Feedback**

Supervisors were generally very positive about the trainees and about the support and information they received from staff. As with last year, some supervisors thought that the information they received about trainees was also limited and sometimes out of date. Some supervisors also found the placement forms to be too long and time consuming. However on the whole supervisors were very positive about the standard and capability of trainees, and were happy with the communication between placement and the programme.

#### **3.3 External Teacher Feedback**

External teachers were very positive about their teaching experience and about most aspects of the support provided by staff. They indicated that they would welcome more information to help them contextualize their teaching with other teaching sessions, but otherwise the teachers indicated that they enjoyed teaching and found all members of the programme team and trainees helpful.

### **4. Action List**

- Looking at ways to increase response rate of the Annual Feedback Questionnaire
- Review the feedback questionnaires
- Review the new PPD structure across the three years of training
- Review the Forensic and organisational issues teaching
- Consider ways of improving information provided to teachers
- Improve info on the web for placement supervisors

## Section 2: Trainee Feedback

### Teaching

A total of 40 trainees provided feedback. This is slightly less than last year when 49 trainees provided feedback. Trainees were asked to provide feedback about the *quantity and quality* of teaching. They were also asked about whether core competencies were covered and diversity issues integrated. Additionally trainees were asked about the relevance of teaching and the amount of repetition across teaching. For the second time trainees were also asked about specific core competencies, for example, 'Public and Patient Involvement', 'Self-awareness and Reflective Practice' and 'Consultancy Skills'.

#### 1<sup>st</sup> Year

**QUANTITY:** Considering responses across all areas of teaching, almost 77% (138 out of 180) indicated that first year trainees thought that the quantity was 'about right'. Only just over 2% (4 responses) indicated 'too much' teaching on various topics, which was almost identical as last year's feedback. Almost 28% of responses (38 out of 138) indicated 'too little' teaching. With regards to specific content, it is noticeable that just over 58% (7 out of 12) felt that there was 'too little' *Forensic* teaching. Just over 58% felt that there was 'too little' teaching on *Working with Difference*. This was followed by *Interviewing Skills* (almost 42%), and *Psychosocial Rehabilitation* (just over 33%). All of these elements were rated very similarly to last year. With regards to *Psychological Therapies*, these results indicate a further marked improvement, continuing the improvement of last year's feedback. Similarly, there continued to be an improvement in the number of trainees who felt there was 'too little' teaching on formulation, down again from 12% (2 out of 17) to 0% this year – a significant improvement from the figure of 72% two years ago. There was also an improvement on the number of trainees who felt there was 'too little' Neuropsychology teaching, from 35% (6 out of 17) last year to just over 8% (1 out of 12) this year – in fact this year the same number felt there was 'too much' teaching on Neuropsychology. In addition, just under 17% felt that there was 'too much' teaching on Health Psychology, however the same proportion felt there was 'too little'. A few trainees commented that it would be useful to have more PPD sessions and more guidance on practical approaches to PPI and that whilst the quantity of research and statistical skills teaching was about right, they would have preferred more of this earlier in training, in order to prepare for SAQs.

**Table 1. Views On The Quantity of Taught Content: First Year Responses**

	Too much	About right	Too little	Omitted
Adult Mental Health	0	11	1	0
Psychosocial Rehabilitation	0	8	4	0
Neuropsychology	1	10	1	0
Older Adults	0	10	2	0
Health Psychology	2	8	2	0
Personal and Professional Development	1	9	2	0
Psychological Therapies	0	11	1	0
Research Skills	0	11	1	0
Statistical Skills	0	9	3	0
Working with Difference	0	5	7	0
Professional Issues	0	12	0	0
Interviewing Skills	0	7	5	0
Forensic	0	5	7	0
Formulation	0	12	0	0
Public and Patient Involvement	0	10	2	0
Total responses	4	138	38	0
<b>Percent* of responses</b>	<b>2.2%</b>	<b>76.7%</b>	<b>21.1%</b>	<b>0.0%</b>

\*rounded to 1 decimal place

**QUALITY:** Across all areas of teaching in the first year, more than 71% of responses (128 out of 180) rated the quality of teaching as either 'excellent' or 'good' category. *Older Adults and Personal and Professional*

*Development* teaching was again rated particularly highly. With regards to comments, some thought that whilst the working with difference module was good, it lacked specific focus on other cultures, religions etc.

**Table 2. Quality of Taught Content: First year responses.**

	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Adult Mental Health	3	7	2	0	0
Psychosocial Rehabilitation	2	6	2	2	0
Neuropsychology	4	6	2	0	0
Older Adults	6	4	2	0	0
Health Psychology	3	8	1	0	0
Personal and Professional Development	6	3	3	0	0
Psychological Therapies	2	6	4	0	0
Research Skills	0	6	5	1	0
Statistical Skills	2	7	2	1	0
Working with Difference	1	3	6	2	0
Professional Issues	1	7	4	0	0
Interviewing Skills	3	6	2	1	0
Forensic	1	4	5	2	0
Formulation	4	8	0	0	0
Public and Patient Involvement	1	8	2	1	0
<b>Total Responses</b>	<b>39</b>	<b>89</b>	<b>42</b>	<b>10</b>	<b>0</b>
<b>Percent of responses</b>	<b>21.7%</b>	<b>49.4%</b>	<b>23.3%</b>	<b>5.6%</b>	<b>0.0%</b>

**CORE COMPETENCIES:** Almost Eighty-six percent (154 out of 180) of responses indicated that core competencies were covered 'very well' or 'reasonably well' across the first year curriculum. *Supervision and Self awareness and Reflective Practice* was particularly well covered. The core competency relating to 'Diversity' was viewed as being covered to a 'very little' extent by a third of respondents, followed by 'Service Delivery and Legislation', 'Public and Patient Involvement' and 'Consultation Skills'.

**Table 3. Coverage of Core Competencies: First year responses.**

	Reasonably				Omitted
	Very well	well	Very little	Not at all	
Relationship Building	2	10	0	0	0
Psychological Assessment	4	7	1	0	0
Psychological Formulation	8	4	0	0	0
Psychological Intervention	5	5	2	0	0
Evaluation	0	10	2	0	0
Communication	4	7	1	0	0
Service Delivery and Legislation	0	9	3	0	0
Teaching and Training	3	6	3	0	0
Diversity	1	7	4	0	0
Public and Patient Involvement	1	8	3	0	0
Professional Development	3	7	2	0	0
Supervision	7	5	0	0	0
Research	2	10	0	0	0
Self awareness and Reflective Practice	6	5	1	0	0
Consultation Skills	0	8	3	1	0
<b>Total responses</b>	<b>46</b>	<b>108</b>	<b>25</b>	<b>1</b>	<b>0</b>
<b>Percent of responses</b>	<b>25.6%</b>	<b>60.0%</b>	<b>13.8%</b>	<b>0.6%</b>	<b>0.0%</b>

**DIVERSITY:** For the second year, a definition<sup>1</sup> of diversity was included with this particular set of questions. Just over eighty-three percent (10 out of 12) of trainees felt that diversity issues were integrated either 'very well' (1 out of 12) or 'reasonably well' (9 out of 12). When asked to comment on areas of teaching where the topic of diversity was particularly well integrated, there was a mix of responses from trainees, with working with self harm and consequences of childhood sexual abuse; addressing 'race' discrimination in the workplace; older adults; working with interpreters and trauma; stigma in health settings; recovery and more generally teaching in health psychology and formulation being cited as well integrated. Trainees were also asked to identify areas of teaching where the topic of diversity was not well integrated. Whilst some trainees commented that they couldn't identify any specific areas, one trainee suggested that it might be interesting to explore different issues of diversity within research teaching, and another commented they did not feel racism was well covered on the day on racism and discrimination, which they felt focussed more on discrimination.

**RELEVANCE:** One hundred percent (12 out of 12) of first year trainees rated the relevance of teaching to clinical work as either 'very relevant' or 'quite relevant'. It was noted in the comment provided that some elements of the teaching came too late for placements, although it was acknowledged that it may have come at the right time for others and therefore this could not be helped.

**REPETITION:** One trainee felt that there had been 'very much' overlap or repetition across teaching, with a further 75% (9 out of 12) feeling there had been 'some', compared to 65% last year. The remaining 17% (2 out of 12) felt that there had been 'a little' overlap, again compared with 35% last year. As with last year, comments indicated that Health Psychology and CBT teaching were areas where repetition occurred, with one trainee stating that formulation of specific topics were often CBT focused. Additionally, older adults was again mentioned by some trainees as an area of repetition, as well as neuropsychology, however one trainee said that sessions did become less repetitious as the speakers moved into more specific material.

## 2<sup>nd</sup> Year

**QUANTITY:** Considering responses across all modules, just over 74% (87 out of 117) of responses indicated that trainees felt that the amount of teaching was 'about right'. 'Organisational Issues' perhaps could have benefitted from more teaching as almost 54% (7 out of 13) trainees felt there was 'too little' training on this. As with last year, just over 46% of trainees felt there was 'too little' teaching on 'Public and Patient Involvement' and the same number felt there was 'too little' teaching on 'Psychological Therapies within Child/Adolescent & Learning Disabilities'. There was however, an increase in the percentage of trainees who felt that the quantity of teaching on 'working with difference/community' was 'about right', which was almost 77% this year, from almost 59% last year. Comments noted that teaching this year had been more discussion focused, which they did find useful. The other comments requested more teaching on systemic ways of working with children and families and more teaching on working with the community and the use of functional analysis.

**Table 4. Quantity of Taught Content: Second year responses**

	Too much	About right	Too little	Omitted
Child, Adolescent and Family Learning Disabilities	0	13	0	0
Professional issues within Child/Adolescent & Learning Disabilities teaching	1	8	4	0
Psychological Therapies within Child/Adolescent & Learning Disabilities teaching	0	12	1	0
Research skills	0	7	6	0
Statistical skills	0	13	0	0
Working with difference/Community	0	12	1	0
Organisational issues	0	10	3	0
	0	6	7	0

<sup>1</sup> Diversity refers to "variety and difference between people, which may be experienced by individuals or groups as a basis for disempowerment and discrimination"

Public and Patient Involvement	1	6	6	0
Total responses	2	87	28	0
<b>Percent of responses</b>	<b>1.7%</b>	<b>74.4%</b>	<b>23.9%</b>	<b>0.0%</b>

**QUALITY:** Just under sixty-seven percent of trainees viewed the quality of teaching as either 'Excellent' or 'Good' in the second year, with 2 trainees not providing a rating. 'Child, Adolescent and Family' teaching was again highlighted as an area of particular strength, with just over 46% (6 out of 13) viewing teaching as 'excellent', closely followed by 'Psychological Therapies within Child/Adolescent & Learning Disabilities' teaching. As with last year's report, one trainee viewed teaching on 'Working With Difference/Community' as 'unsatisfactory'. Only one trainee provided further comments, stating that the child teaching in particular has been of high quality, reinforcing the ratings.

**Table 5. Quality of Taught Content: Second year responses.**

	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Child, Adolescent and Family	6	4	1	0	2
Learning Disabilities	3	7	1	0	2
Professional issues within Child/Adolescent & Learning Disabilities teaching	3	7	1	0	2
Psychological Therapies within Child/Adolescent & Learning Disabilities teaching	5	5	1	0	2
Research skills	2	5	4	0	2
Statistical skills	1	8	2	0	2
Working with difference/Community	1	6	3	1	2
Organisational issues	1	8	1	1	2
Public and Patient Involvement	1	5	3	1	3
Total responses	23	55	17	3	19
<b>Percent of responses</b>	<b>19.7%</b>	<b>47.0%</b>	<b>14.5%</b>	<b>2.6%</b>	<b>16.2%</b>

**CORE COMPETENCIES:** Just over sixty-nine percent of responses (135 out of 195) indicated that core competencies were covered 'very well' or 'reasonably well' in the teaching, with 1 trainee not providing ratings for this question. However a number of core competencies were viewed as being covered to a 'very little' extent. Most notably, 'Teaching and Training', with almost 54% (7 out of 13) of trainees supporting this view, and Supervision, where just over 46% (6 out of 13) expressed the view that it was covered 'very little' and just over 23% (3 out of 13) that it was covered 'not at all'. This presents a very similar picture to the results for these competencies last year. Trainees' comments suggested that more teaching on consultation would be useful.

**Table 6. Coverage of Core Competencies: Second year responses.**

	Reasonably				Omitted
	Very well	well	Very little	Not at all	
Relationship Building	6	5	1	0	1
Psychological Assessment	10	2	0	0	1
Psychological Formulation	5	6	1	0	1
Psychological Intervention	4	7	1	0	1
Evaluation	0	9	3	0	1
Communication	4	6	1	1	1
Service Delivery and	1	6	5	0	1

Legislation					
Teaching and Training	1	4	7	0	1
Diversity	2	7	3	0	1
Public and Patient Involvement	2	5	4	1	1
Professional Development	1	9	2	0	1
Supervision	1	2	6	3	1
Research	4	7	1	0	1
Self awareness and Reflective Practice	6	5	1	0	1
Consultation Skills	3	5	4	0	1
Total responses	50	85	40	5	15
<b>Percent of responses</b>	<b>25.6%</b>	<b>43.6%</b>	<b>20.5%</b>	<b>2.6%</b>	<b>7.7%</b>

**DIVERSITY:** Almost seventy-seven percent of trainees felt that diversity issues were integrated ‘very well’ or ‘reasonably well’ across the teaching, which is an improvement on the feedback last year. Learning disability and child teaching were frequently mentioned as areas where diversity was particularly well integrated into teaching, although one trainee felt that there was too little service user involvement. Attachment across cultures and teaching on sexuality were also mentioned positively. In terms of teaching where diversity issues were not well integrated, one suggestion was that teaching with a focus on working with refugee families might have been useful. Another suggestion was that issues of diversity be included within teaching on providing consultation to a multi-disciplinary team e.g. working with different employment backgrounds.

**RELEVANCE:** The majority of trainees, almost 77% (10 out of 13) rated the relevance of teaching to clinical work as ‘very relevant’ (7 out of 13) or ‘quite relevant’ (3 out of 13). Two comments were left, one of which stated that the teaching was useful in preparing them for working with clients and the other noting that there was very little teaching in the area of their placement (neuro-rehab). This trainee did however concede that people doing this placement are in a minority.

**REPETITION:** Just over sixty-nine percent (9 out of 13) of trainees stated that there was ‘some’ repetition across areas of teaching. In answer to the question about which areas of teaching most overlapped, parts of the child teaching; attachment theory; functional analysis; mental capacity and parts of the LD teaching were cited.

### 3<sup>rd</sup> Year

**QUANTITY:** Considering responses across all areas, almost 73% of responses (142 out of 195) indicated that the quantity of teaching was ‘about right’. As with last year, the quantity of teaching ‘Public and Patient Involvement’ was highlighted as an area of concern, with almost 67% of trainees (10 out of 15) regarding this as ‘too little’ – an increase on last year’s figure of 50%. ‘Research skills’ was also identified an area in which trainees felt there has been ‘too little’ teaching, with just over 53% of trainees (8 out of 15) holding this view. Conversely, almost 67% of trainees (10 out of 15) felt that there had been ‘too much’ teaching on ‘Neuropsychology’. However, ratings for the quantity of teaching on ‘Psychological Therapies’ were much improved on last year, with just over 73% of trainees rating this as ‘about right’ (11 out of 15), compared with last year when almost 57% rated this as ‘too little’.

Table 7. Quantity of Taught Content: Third year responses

	Too much	About right	Too little	Omitted
Psychology of Health and Illness	1	9	5	0
Forensic	0	12	3	0
Neuropsychology	10	5	0	0
Working with difference/Community	1	10	4	0
Professional issues	0	9	6	0
Psychological Therapies	0	11	4	0

Research skills	0	7	8	0
Statistical skills	0	12	3	0
Learning Disability Specialist Teaching	0	13	2	0
Child Specialist Teaching	0	12	3	0
Adult Mental Health Specialist Teaching	0	15	0	0
Older Adult Specialist Teaching	0	10	5	0
Public and Patient Involvement	0	5	10	0
Total responses	12	130	53	0
Percent of responses	6.2%	66.7%	27.2%	0.0%

**QUALITY:** Almost 67% of responses across all teaching areas fell within the 'excellent'/'good' category, with one trainee not providing ratings for this question. 'Child specialist teaching' was rated as 'good' by almost 87% of trainees (13 out of 15), with one trainee rating this as 'excellent'. 'Learning Disabilities specialist teaching' was also rated highly, as was 'Adult mental health specialist teaching'. The 'Statistical Skills' teaching was rated as highly as last year, with almost 47% of trainees (7 out of 15) rating this as 'satisfactory', whereas last year it was rated as 'excellent' by 43% of trainees (6 out of 14). Comments on stats teaching suggested more interactive work and potentially some assignments would be useful. It was also suggested that some more on writing up would be a useful addition to the research skills teaching.

**Table 8. Quality of Taught Content: Third year responses.**

	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Psychology of Health and Illness	0	8	5	0	2
Forensic	2	6	5	1	1
Neuropsychology	1	12	1	0	1
Working with difference/Community	2	9	2	0	2
Professional issues	1	10	3	0	1
Psychological Therapies	0	11	2	1	1
Research skills	0	5	8	1	1
Statistical skills	1	5	7	1	1
Learning Disabilities Specialist Teaching	1	12	1	0	1
Child Specialist Teaching	1	13	0	0	1
Adult Mental Health Specialist Teaching	3	10	1	0	1
Older Adult Specialist Teaching	0	8	4	2	1
Public and Patient Involvement	0	9	4	1	1
Total responses	12	118	43	7	15
Percent of responses	6.2%	60.5%	22.1%	3.6%	7.7%

**CORE COMPETENCIES:** Almost sixty-three percent of responses (141 out 225) indicated that core competencies were covered either 'very well' or 'reasonably well' in the teaching, with 2 trainees not providing a rating for this question. However the core competencies of 'Service Delivery and Legislation' and 'Teaching and Training', were viewed as being covered to a 'very little' extent. This was reflected in the comments, in which more teaching on service delivery was requested. Other comments centered around supervision and consultancy teaching, with a number of trainees stating that the practical workshop style sessions were very useful, whereas others felt that 'core clinical skills type teaching on supervision and consultancy would be good e.g. with role plays of situations'.

**Table 9. Coverage of Core Competencies: Third year responses.**

	Very well	Reasonably well	Very little	Not at all	Omitted
Relationship Building	2	11	0	0	2
Psychological Assessment	2	10	1	0	2
Psychological Formulation	4	9	0	0	2
Psychological Intervention	3	10	0	0	2
Evaluation	0	8	5	0	2

Communication	2	10	1	0	2
Service Delivery and Legislation	0	2	11	0	2
Teaching and Training	0	2	9	2	2
Diversity	2	10	1	0	2
Public and Patient Involvement	1	4	5	3	2
Professional Development	0	8	5	0	2
Supervision	1	8	4	0	2
Research	1	8	4	0	2
Self awareness and Reflective Practice	5	5	3	0	2
Consultation Skills	5	8	0	0	2
Total responses	28	113	49	5	30
<b>Percent of responses</b>	<b>12.4%</b>	<b>50.2%</b>	<b>21.8%</b>	<b>2.2%</b>	<b>13.3%</b>

**DIVERSITY:** Eighty percent of trainees felt that diversity issues were either ‘very well’ (3 out of 15) or ‘reasonably well’ (9 out of 15) integrated across the teaching in the third year, with 2 trainees not providing a rating for this question. Some comments indicated that this had been variable across sessions, and trainees had found that coverage of diversity issues had felt tokenistic in some sessions. However, Sara Whittaker’s teaching was praised by several trainees as excellent. In addition, neuropsychology; Maria Downs’ teaching; psychology and alternative models; cultural identity and beliefs; teaching on HIV/AIDS and on working with victims of torture and organised violence were all mentioned as areas where trainees felt diversity issues were integrated well.

On the other hand, supervision and consultancy was specifically mentioned as an area where diversity issues were not well integrated. In addition some trainees stated that whilst diversity was covered in some way in most teaching, there was very little research evidence or academic perspectives.

**RELEVANCE:** Just over thirteen percent of trainees (2 out of 15) rated the relevance of teaching to clinical work as ‘very relevant’ and a further almost 67% as ‘quite relevant’ (10 out of 15), with 2 trainees not providing a rating. Most comments indicated that often teaching did not directly relate to trainee placements in the third year, particularly when it covered specialist areas. A few trainees suggested that more teaching on broad areas e.g. organisational, supervision, consultation, working in teams, presenting research findings would have been beneficial. However there was acknowledgement within other comments that it was somewhat inevitable that teaching would feel less relevant in the third year given the specialised placements.

**REPETITION:** Sixty percent (9 out of 15) of trainees stated there was ‘some’ repetition across areas of teaching, with 1 trainee categorising this as ‘very much’ and 3 rating this as ‘very little’. 2 trainees did not provide ratings. Comments consistently mentioned neuropsychology teaching and teaching on pain as containing the most repetition.

### Course Assignments and Feedback

**1<sup>st</sup> Year:** First year trainees were asked to rate the usefulness of SAQs, literature reviews, case studies, and case presentations. Case studies were highlighted as being ‘very useful’ by 100% of trainees (12 out of 12). This was followed by the Literature Review, as 75% (9 out of 12) of trainees viewed these as ‘very useful’. Case Presentations (7 out of 12), and SAQs 50% (6 out of 12) were rated as ‘very useful’. With regards to comments, a number of trainees stated that they felt much more confident in appraising literature following the SAQs and Literature Review. Some trainees also mentioned the Case Study in positive terms.

In terms of the usefulness of feedback on course assignments, trainees were split between those who found this to be ‘Quite helpful’ (almost 46%) and those who found it ‘Neither helpful nor unhelpful’ (almost 55%). No trainees found feedback to be ‘Very helpful’ or ‘Very unhelpful’.

**2nd Year:** Second year trainees were asked to rate SAQs, case studies, single case experimental study, service evaluation, case presentations and research presentations as either ‘very useful’, ‘useful’ or ‘not at all useful’. Case studies were highlighted as being ‘very useful’ by almost 77 % of trainees (10 out of 13), with 2 not providing a rating for any coursework assignments. This was closely followed by research presentations,

as just over 69% (9 out of 13) of trainees viewed these as 'very useful'. This was then followed by case presentations with almost 62% (8 out of 13) and service evaluation with almost 54% (7 out of 13) of trainees rating these as 'very useful'. Other comments stated that the research presentations were 'useful in helping us to finalise our proposals'.

With regards to feedback received on course assignments, this was viewed as largely positive, with just over 23% (3 out of 13) rating this as 'very helpful' and the majority of trainees (almost 54% or 7 out of 13) rating feedback as 'quite helpful'. Comments indicated that feedback was sometimes inconsistent, and occasionally too negative.

**3<sup>rd</sup> Year:** Third year trainees were asked to rate SAQs, case studies, service evaluation, research thesis and case presentations as either 'very useful', 'useful' or 'not at all useful'. Similarly to the first and second year, 'case studies' were rated as 'very useful' by the majority of trainees, with 60% (9 out of 15) rating 'case studies' and other assessed work in this way. In line with these figures, comments were generally positive regarding all types of coursework and reflected the view that trainees felt their coursework had been 'relevant and useful'. One trainee reflected that it would be good to have more support for pursuing publication of other pieces of coursework other than the thesis throughout the course. Another comment stated that more teaching/support with service evaluations would be helpful, however a different trainee reflected that the service evaluation had given them an opportunity to get a broader experience and network.

No trainees rated feedback from coursework assignments as 'very helpful', The majority rated this as 'quite helpful' (almost 47% - 7 out of 15). However, almost 27% found the feedback to be 'quite unhelpful'. These results are lower than last year, when 50% of trainees (7 out of 14) found the feedback to be either 'very helpful' or 'quite helpful'. In addition to the comments provided above on feedback, 10 trainees provided further comments. Some of these referred to the 'generic' nature of some of the feedback which made it difficult to learn from. It was felt that more detail about the strengths/weaknesses of the work would be useful.

### Other Timetabled Activities

#### 1<sup>st</sup> Year:

Trainees were asked to rate case presentation workshops. Just over 33% rated these as 'Excellent' (4 out of 12), with almost 42% rating them as 'Good' (5 out of 12) and 25% (3 out of 12) rating them as 'Satisfactory'. No trainees rated Case Presentations as 'Unsatisfactory'. Comments were mixed, but some trainees stated that they found them to be useful learning opportunity, prompting 'thought provoking discussions'.

#### 2<sup>nd</sup> Year:

Second year trainees were asked to rate the usefulness of RP slots, case presentations and research workshops. Just over 69% (9 out of 13) of second year trainees categorised RP slots, as 'excellent', with the other trainee who rated RP categorising these as 'good'. Case presentations were rated as 'excellent' by just over 46% (6 out of 13), with the other 5 trainees who provided a rating categorising these as 'good'. Research presentations were rated as 'good' by nearly 54% of trainees; however 1 trainee rated this as 'satisfactory' and 1 as 'unsatisfactory', with a further 4 trainees not providing a rating. All the comments mentioned that this year the trainees had participated in Balint groups rather than RP, which were viewed very positively. Comments stated that trainees found them to be 'brilliant, really valuable sessions'; 'excellent' and 'fantastic'. Two trainees commented that it would be useful if they could be continued into the third year. In relation to RP however, one trainee stated that it was 'unsettling to have to start a new type of RP group'.

#### 3<sup>rd</sup> Year:

Third year trainees were asked to rate the usefulness of *RP* slots and *case presentations*. Almost 47% of trainees (7 out of 15) rated RP slots as 'excellent' or 'good', which is a decrease compared to last year when 71% (10 out of 14) rated RP as such. 20% of trainees (3 out of 15) rated RP as 'satisfactory' and almost 27% rated it as 'unsatisfactory'. Case Presentations were rated more highly, with almost 47% rating these as 'excellent' (7 out of 15) and the same number rating it as 'good'. There were a number of comments given regarding RP, the majority of which reflecting the fact that trainees find this challenging, with some finding it difficult to engage with. There were also mixed reviews of the facilitators. Some trainees felt that despite the challenges, they had found it valuable, with some describing it as 'an excellent experience'. Comments highlighted the importance of preparatory work and the role of facilitators as important in setting up the groups. Other comments concerned case presentations, which were viewed as useful and interesting.

## Clinical Placements

**1<sup>st</sup> Year:** Considering responses across all domains, almost 87% of responses (52 out of 60) indicated that trainees rated their clinical placements as either 'excellent' or 'good'. *Placement Supervisor/University links* and *Supervision (ii) Professional growth and development* in particular were both rated as 'Excellent' by just over 58% of trainees (7 out of 12). *Supervision (i) Theory/Practice Links* were also rated as 'excellent' by 50% (6 out of 12). There were no 'unsatisfactory' ratings. Some trainees commented that their experience had varied a lot between placements, due to their different supervisors. Another commented that some additional, easily digested information about what to expect on their first placement might have helped alleviate anxiety.

**Table 10. Clinical Placements: First year responses**

Clinical Placements	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Preparation for (both academically and practically)	3	6	3	0	0
Placement Supervisor/University links	7	4	1	0	0
Experience available	5	6	1	0	0
Supervision (i) Theory/Practice links	6	4	2	0	0
Supervision (ii) Professional growth and development	7	4	1	0	0
Total responses	28	24	8	0	0
<b>Percent of responses</b>	<b>46.7%</b>	<b>40%</b>	<b>13.3%</b>	<b>0.0%</b>	<b>0.0%</b>

**2<sup>nd</sup> Year:** The majority of trainees' responses (almost 79%, 51 out of 65) indicated that they rated their clinical placements overall, as either 'good' or 'excellent', with 2 trainees not providing ratings. In particular 'experience available' was rated as 'excellent' by almost 62% (8 out of 13) of trainees, with 'placement supervisor/University links' being rated as 'excellent' by just over 46% (6 out of 13).

**Table 11. Clinical Placements: Second year responses**

Clinical Placements	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Preparation for (both academically and practically)	4	6	1	0	2
Placement Supervisor/University links	6	5	0	0	2
Experience available	8	3	0	0	2
Supervision (i) Theory/Practice links	5	5	1	0	2
Supervision (ii) Professional growth and development	5	4	2	0	2
Total responses	28	23	4	0	10
<b>Percent of responses</b>	<b>43.1%</b>	<b>35.4%</b>	<b>6.2%</b>	<b>0.0%</b>	<b>15.4%</b>

**3<sup>rd</sup> Year:** Just over 76% (57 out of 75) of responses indicated that trainees regarded their placement experience overall as either 'good' or 'excellent'. 'Professional growth and development' and 'Experience available' were rated particularly highly, with almost 87% (13 out of 15) and 80% (12 out of 15) respectively rating this 'excellent' or 'good'. Comments indicated that trainees found some placement experiences very variable. Some comments concerned placement allocation and managing expectations.

**Table 12. Clinical Placements: Third year responses**

Clinical Placements	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Preparation for (both academically and practically)	2	7	3	1	2
Placement Supervisor/University links	3	7	3	0	2
Experience available	8	4	1	0	2
Supervision (i) Theory/Practice links	7	6	0	0	2
Supervision (ii) Professional growth and development	9	4	0	0	2
Total responses	29	28	7	1	10
<b>Percent* of responses</b>	<b>38.9%</b>	<b>37.3%</b>	<b>9.3%</b>	<b>1.3%</b>	<b>13.3%</b>

\*rounded to 1 decimal place

## Research Thesis

**1<sup>st</sup> Year:** Trainees rated *Information about research requirements* and the *Research Presentations*. One hundred percent (12 out of 12) of responses indicated that overall trainees rated research support as either 'useful' or 'very useful'. Just over 36% of trainees rated *Information about research requirements* as 'very useful', with the remaining just under 64% (7 out of 12) rating this as 'useful'. This year the format of the Research Fair was changed to that of Research Presentations for the first time, and 75% (9 out of 12) indicated that they found this 'useful' – the remaining 25% reporting that they found it 'very useful'. This is a very similar outcome to last years' rating of the Research Fair, which 76% of trainees had found 'useful'. Comments focussed on the Research Presentations and the process of choosing a supervisor. Generally, comments suggested that trainees would have liked more time between the presentations and having to pick a supervisor.

**2<sup>nd</sup> Year:** Trainees were asked to rate *Support from their University Supervisor*, *Support from their NHS Research Supervisor*, *Research Workshops*, *Statistical Consultancy* and *Full Project Approval Procedures*. Overall *Support from NHS supervisor* was rated as 'very useful' by just over 46% (6 out of 13) of trainees, with the remaining 3 trainees who answered this question rating this as 'useful'. *Support from University supervisor* was also rated highly, with just over 38% (5 out of 13) rating this as 'excellent' and the same number rating this as 'good'. It is notable that 4 trainees rated *Statistical Consultancy* as 'not at all useful'. This was reflected in the comments, in which *statistical consultancy* was described as 'hit and miss'. The ratings given regarding *full project approval procedures*, just over 69% of trainees rated as 'very useful' or 'useful'.

**3<sup>rd</sup> Year:** Trainees rated *Support from their University Supervisor*, *Support from their NHS Research Supervisor*, *Statistical Consultancy* and *Computing Facilities for Research*. 80% of trainees (12 out of 15) felt that that 'support from University supervisor' was 'very useful' or 'useful'. 'Support from NHS research supervisor' was found to be 'very useful' or 'useful' by just over 53% of trainees. Results for 'statistical consultancy' were less positive, with 40% rating this as 'very useful' or 'useful', but with almost 27% rating this as 'not at all useful'. Computing facilities for research were rated poorly, with 80% of trainees rating these as 'not at all useful'. This was reflected in the comments, with several trainees bemoaning the lack of working computers in the study room, and the fact that SPSS was out of date. Comments on statistical consultancy indicated that trainees would have liked more support in this area e.g. statistical teaching for the single case. A couple of comments also concerned the university supervisors, which reflected their individual experiences – one trainee stating that they found their supervisor may not respond to requests for support, whereas another stated their supervisor had provided 'excellent support and feedback'.

## Personal Support Systems

**1<sup>st</sup> Year:** Trainees rated support across three domains: *Personal tutorial*, *clinical tutoring* and *administrative support*. Overall, responses were positive, with just over 86% (31 out of 36) indicating that overall personal support was experienced as either 'good' or 'excellent'. 'Administrative support' was highlighted as particularly useful with almost 67% (8 out of 12) of trainees rating this as 'excellent' and the remaining just over 33% rating this as 'good'.

**Table 13. Support Systems: First year responses**

Support	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Personal Tutorial	5	4	3	0	0
Clinical Tutoring	6	4	2	0	0
Administrative Support	8	4	0	0	0
Total responses	19	12	5	0	0
<b>Percent of responses</b>	<b>52.8%</b>	<b>33.3%</b>	<b>13.9%</b>	<b>0.0%</b>	<b>0.0%</b>

**2<sup>nd</sup> Year:** Trainees rated support with reference to *personal tutorial* sessions, *clinical tutoring* and *administrative support*. Responses were largely positive, with just over 74% (29 out of 39) indicating that overall support is considered as either 'good' or 'excellent', with 2 trainees not providing a rating. Administrative support was again viewed as a particular strength, with almost 62% (8 out of 13) of trainees

rating this support as 'excellent'. Clinical tutoring was also viewed as a strength, with the same proportion of trainees also rating this as 'excellent'. Results for personal tutorials were slightly less positive. Whilst almost 24% (3 out of 13) rated this as excellent and almost 31% (4 out of 13) rated this as 'good', the same proportion (4 out of 13) rated this as 'satisfactory'.

**Table 14. Support Systems: Second year responses**

Support Systems/Communication	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Personal Tutorial	3	4	4	0	2
Clinical Tutoring	8	3	0	0	2
Administrative Support	8	3	0	0	2
Total responses	19	10	4	0	6
<b>Percent of responses</b>	<b>48.7%</b>	<b>25.6%</b>	<b>10.3%</b>	<b>0%</b>	<b>15.4%</b>

**3<sup>rd</sup> Year:** Trainees rated support across four domains: *Personal tutorial, research supervision, clinical tutoring* and *administrative support*. Responses were largely positive, with 65% of responses (39 out of 60) rating support overall as either 'Excellent' or 'Good'. *Administrative support* and *Clinical Tutoring* were particularly notable, just over 73% (11 out of 15) and 60% (9 out of 15) rating these as 'excellent' respectively. Conversely, (7 out of 15) trainees rated *Personal Tutorial* as 'unsatisfactory'. This was reflected in the comments, with a number of trainees stating that there were not enough of these, and when they were held they were usually in groups, which trainees did not feel was always appropriate. A couple of trainees noted that they were able to get extra support from other members of the course e.g. their clinical tutor or research supervisor. One trainee said they felt very well supported by their clinical tutor who 'has helped me to learn more about myself both personally and professionally'. Comments on the admin team were very positive, indicating that trainees recognised that they were 'overstretched'. However despite this, trainees' experience of the admin team was that they were 'consistently understanding and helpful' and 'willing to go the extra mile for us'.

**Table 15. Support Systems: Third year responses**

	Excellent	Good	Satisfactory	Unsatisfactory	Omitted
Personal Tutorial	2	2	2	7	2
Research Supervision	7	4	1	1	2
Clinical Tutoring	9	3	1	0	2
Administrative Support	11	1	1	0	2
Total Responses	29	10	5	8	8
<b>Percent of Responses</b>	<b>48.3%</b>	<b>16.7%</b>	<b>8.3%</b>	<b>13.3%</b>	<b>13.3%</b>

### Course Team

Trainees were asked whether they felt that the course team were *supportive, interested in their training* and *prepared to listen and discuss things*.

**1<sup>st</sup> Year:** One hundred percent (17 out of 17) of first year trainees felt that the course team are interested in their training and supportive. Just under 92% (11 out of 12) felt the course team were prepared to listen and discuss things, with 1 trainee indicating that this was not the case.

**2<sup>nd</sup> Year:** Almost eighty-five percent of trainees (33 out of 39) indicated that overall, trainees felt that staff are interested in their training, prepared to listen and supportive. One trainee commented on how supportive the team were in relation to a personal issue, however another commented that this depended on the member of the course team.

**3<sup>rd</sup> Year:** Just over seventy-one percent of trainees (32 out of 45) indicated that overall, staff were interested in their training, prepared to listen and supportive, with 1 not providing a rating. However, 2 trainees indicated that the course were not prepared to listen and discuss things, with 1 answering 'no' to the statement about interest in their training and whether the course were supportive. Several comments were left, many of which indicated that trainees found it very difficult merely to answer 'yes' or 'no' to this question, given the extremely

variable experience across the course team and throughout the course. It was suggested that, as for other such questions, as sliding scale might be more useful.

### Study Support and Course Facilities

Trainees were asked to rate facilities that support their studying experience. This included the library, photocopying, computing, MOLE, the resource library and study days.

**1<sup>st</sup> Year:** Just under eighty-eight percent of responses (63 out of 72) indicated that the course facilities overall were viewed as either 'excellent' or 'good'. *Photocopying* and *computing* were highlighted as being particularly 'excellent' by 75% (9 out of 12) and almost 67% (8 out of 12) of trainees respectively. This was followed by *Study Days*, as just over 58% of trainees (7 out of 12) rated these as 'excellent'. *MOLE* was rated as 'excellent' by 50% of trainees, with the remaining 50% rating this as 'good'. No facilities were rated as 'unsatisfactory', however whilst just under 42% (5 out of 12) trainees rated the *Resource Library* as 'good', just over 33% rated this as 'satisfactory'. Two trainees commented about study days, suggesting that these were not always available at the appropriate time.

**2<sup>nd</sup> Year:** Just over 74% of responses (58 out of 78) indicated that the course facilities overall were viewed as either 'excellent' or 'good'. 2 trainees did not provide any ratings. *Photocopying* was again highlighted as being particularly 'excellent' by almost 62% (8 out of 13) of trainees. This has been the case for a number of years. One trainee rated the *resource library* as 'unsatisfactory'. Comments indicated that the resource library would benefit from having more resources available. Study days were rated positively overall (with almost 77% or 10 out of 13 of trainees rating these as 'excellent' or 'good').

**3<sup>rd</sup> Year:** There was a mixed response to course facilities in the third year. Photocopying was viewed as 'excellent' or 'good' by 80% (12 out of 15) of trainees. Conversely, just over 53% of trainees rated computing as 'unsatisfactory'. Lack of working computing facilities was unsurprisingly mentioned in several comments. A new suite of computers were installed at the beginning of 2011-12 academic year, which will hopefully go some way in addressing this. Two trainees mentioned access to journals as being limited, and trainees have not received the longer loan period they were expecting in the final year. This is reflected in the overall rating for the library, with 3 trainees rating this as 'unsatisfactory'. As of this academic year, the DClin Psy is now a research course, so trainees library status has now been accordingly upgraded, which will significantly increase loan periods. One trainee commented on study leave, stating that taking this as blocks 'does not always work well' – they suggested that the model of 2 days a week, as with some other courses, might be better. Ratings for study days were however very positive, with no trainees rating this as 'unsatisfactory' and 80% (12 out of 15) rating this as 'excellent' or 'good'.

### Other Comments

**1<sup>st</sup> Year:** Trainees were asked how they felt about training over the past year. Comments were generally very positive, with trainees stating that they felt supported and welcomed and confident about going into the next year of training. One trainee commented on the steep learning curve at the beginning but appreciated the support they had got from the course team in the first few weeks. Another trainee commented on the personal growth/reflection element of the course, which they felt was 'outstanding'. A number of trainees were very positive about their experience on placements, however another mentioned they had found it difficult linking clinical placements and academic demands. Comments on the teaching were more mixed, with some comments mentioning this positively and others less so – for example one trainee stated this was 'repetitive and often protracted'.

Trainees were asked whether there were any significant gaps. As with last year, several trainees stated that there were not, with one mentioning that they had fed back to the various committees about some minor changes. All other comments related to teaching, with several training mentioning timing issues. Specifically, some trainees mentioned that the single case teaching as coming too late to be able to collect data on their first placement. Some trainees also mentioned that they would like to see more specific training on cultural and religious diversity, and that research teaching would ideally start much earlier. This will hopefully be addressed next year, as the research timetable has moved forward in line with an earlier thesis submission date from 2014.

Trainees were also asked about aspects of the course that supported (or hindered) their professional development. A number of trainees indicated that they had enjoyed the year and several said they felt well

supported. One specifically mentioned mentoring and peer support systems as being helpful. Two trainees mentioned PPD sessions as having a positive effect on their self-reflection and another mentioned teaching on integration and their placement supervisors as having a positive impact.

**2<sup>nd</sup> Year:** With regards to how trainees have felt about the past year, in general comments indicated that although it had been a busy year, it had also been a positive experience. Several trainees mentioned the support systems provided by the course positively. A number of trainees referred to their assignment workload as challenging, however they felt that this was on the whole manageable and good preparation for the reality of work in the NHS. It was suggested however, that the single case assignment added significant pressure for those who had not collected data in the first year. It was also noted that the research week would be more useful if it were earlier, and not in the same week as half term when supervisors are often not available. Another trainee stated that teaching, which was more focussed on clinical skills, has been useful for clinical work on placements, and had been diverse despite the lack of service user involvement.

Concerning specific deficits, some trainees indicated that they could not think of any. Several of those who did mention teaching, however there were mixed comments about this and no one element of teaching was consistently mentioned as a deficit. For example, some trainees stated that they 'would have liked teaching on a wider range of therapeutic models (eg 3rd wave approaches, systemic models, CAT). Some trainees commented that they enjoyed the joint teaching with Leeds and Hull, but 'would have liked more teaching on service development and delivery'. They anticipated this would come in the third year however. There were some suggestions for improvements to the protocol review process – they felt it lacked constructive feedback and would benefit from the opportunity to meet 1:1 with reviewers.

With regards to final comments, these were generally very positive. In terms of factors that supported professional growth, trainees mentioned PPD and interprofessional learning; placements; the chance to attend conferences/workshops and case studies with several trainees also mentioning Balint groups positively. A couple of trainees mentioned issues with teaching, with one stating that 'teaching could have been improved to match the challenges and needs of placements (i.e., more practical and less didactic)'. Single case teaching was mentioned again in another comment in terms of timing (too late). In terms of placements, these were generally commented on positively, and one trainee commented on what they perceived to be a 'good balance of teaching and placement time'.

**3<sup>rd</sup> Year:** Trainees were asked how they felt about training over the past three years. Several trainees indicated that they had mixed feelings overall. They described their training as very challenging; with one trainee stating that 'the demands and stressors placed upon trainees are too high'. However, several stated that they felt well prepared for the real world of working post-qualification. Trainees commented on individual difficulties they had throughout the course, however the overall feeling of most was that standards were generally excellent with one stating that they 'will always be proud to say that they qualified from Sheffield'. There were mixed comments regarding teaching, with some describing this very positively and others as variable. Some trainees mentioned that they would have liked teaching on more therapeutic models and more one these earlier in the course as well as more opportunity to practice these. With regards to placements, comments were generally very positive, with most comments indicating that placements and supervisors were excellent. Also, in general the support provided by the course was rated positively, which helped trainees to manage the challenges of training. Support from clinical tutors; mentors; the admin team; and placement supervisors were specifically mentioned as excellent by trainees. There were more mixed comments about the research process, with some trainees indicating they found this very challenging and one stating they had 'not felt very supported by my research supervisor at times'. A few trainees specifically mentioned RP in negative terms. Feedback was again mentioned, with one trainee noting that it was frustrating that they did not find out the results of the feedback they gave. Also, it was noted that sometimes only a few course team members attended year team meetings.

With regards to specific deficits, RP was again mentioned as 'very difficult'. However, this feeling was not shared by all trainees. As noted elsewhere, comments on teaching were mixed. Some trainees stated that they 'would like to see more structured training and opportunities to practice the use of therapeutic models, rather than relying on placements to provide this' and that clinical skills teaching could be improved. Another comment on teaching was that this would be 'broader and cover areas that are relevant to everyone - new ways of working, role of Clinical Psychologist'. Other trainees mentioned 'greater consideration of spirituality', working with interpreters; positive risk management; professional/local/national issues (e.g. funding of services) and expectations of newly qualifieds in negotiating some of those areas/issues which we are often

protected from on placements as areas that the course could cover more.

Third years were asked how they found the balance between different aspects of the course, e.g. clinical and academic. Most trainees indicated that they had found this to be about right and whilst sometimes it was a challenge to balance clinical and academic demands, it was ultimately 'doable' and helped to prepare them for the 'real world' post qualification. In particular, a few trainees commented that in the third year they had sometimes felt that it was very difficult to balance the demands of the thesis with their placements. It was suggested by one trainee that this was exacerbated by the difficulty of organising research time due all the rules surrounding this. Trainees suggested that starting research earlier in the course might help with this balance, and that more guidance from the course team about size and method of recruitment in relation to balancing workload would be helpful.

Third years were also asked what they would remember when they looked back over the last three years. Perhaps unsurprisingly there was a wide range of responses, with both positive and less positive elements being put forward by most trainees. Self-reflection and their personal development were mentioned by a number of trainees, as well as support from the course team, supervisors and their peers. The challenges of undertaking the course was also highlighted again, but several trainees stated that they had learned and developed from overcoming these challenges. RP again seemed to be an element that polarised opinion, with some trainees remembering this positively, and some negatively.

### Section 3: Supervisor Feedback

Placement supervisors were asked to rate various aspects of the trainee placements. A total of 32 supervisors (39%) provided feedback. This is an increase compared to last year, when 22 supervisors (19%) responded. Responses are displayed in Table 16.

#### **Placement Organisation**

**Information provided by course staff:** Just over eighty-one percent of respondents (26 out of 32) rated this as 'good' or 'excellent'. However, one supervisor rated this as 'very poor'. Of the two comments given, one stated that information was provided in a very timely manner, however the other speaker indicated that they didn't receive information from the course staff, but rather this was provided by the trainee checking whether the supervisor had received this.

**Communication by Email and CPU Website:** Just over 84% of supervisors (27 out of 32) felt that communication was either 'good' or 'excellent'. A few supervisors commented that they needed clearer deadlines for when they were required to return paperwork. Seventy-five percent of supervisors (24 out of 32) stated that they were aware of the CPU website. Of these, almost 62% (13 out of 21) rated the information on the CPU website as 'good', with the rest rating this as 'adequate'. All comments on the website indicated that these supervisors were aware of the website, but had not used it or had used it only briefly.

**Information about the trainee:** Just over fifty-three percent of supervisors (17 out of 32) rated this information as 'good' or 'excellent'. However, almost 38% (12 out of 32) rated it as 'adequate', with a further just over 9% (3 out of 32) rating it as 'poor'. In general, comments indicated that the information provided in the pen picture was too brief and sometimes out of date.

**Forums for Communication with other supervisors and course staff:** Just over fifty-three percent of supervisors (17 out of 32) rated this as 'excellent' or 'good'. Almost 22% (7 out of 32) rated this as 'adequate', however almost 16% (5 out of 32) rated this as 'poor' and 1 rated this as 'very poor'. Comments indicated that whilst supervisors found it easy to access the course team, they had less contact with other supervisors. One supervisor indicated that there were good opportunities for supervisor training which allow them to communicate as needed with others, however another felt that it would have been useful to hear from more experienced supervisors outside of the ISW training.

**Relevance of teaching to placement:** Just over fifty-three percent of supervisors (17 out of 32) rated the relevance of teaching to placement as 'good' or 'excellent'. However just over 28% also rated this as 'adequate' and six supervisors did not answer this question.

**Structure of day release/block arrangements:** Seventy-five percent of supervisors (24 out of 32) rated the structure of day release/block arrangements as either 'good' or 'excellent', with almost 19% (6 out of 32) rating this as 'average' and one rating this as 'poor'.

**Initial placement meeting (process and content):** This question was not applicable to third year trainee supervisors and 8 supervisors responded as such, with a further 2 skipping the question. Of the remaining supervisors, almost 82% (18 out of 22). Two supervisors provided further comments, with one suggesting that the meeting had helped to clarify expectations across a shared placement, and the other indicating that the meeting had been time consuming.

**Mid placement meeting (process and content):** Responses were largely positive with almost 72% (23 out of 32) of supervisors rating mid placement meeting as either 'good' or 'excellent'. Almost 19%, (6 out of 32) rated these meetings as 'adequate' and one supervisor rated this as 'poor'.

**Format for assessment of clinical competence:** Almost forty-seven percent (15 out of 32) of supervisors rated the assessment process as either 'good' or excellent', a much lower figure than last year when 73% rated it as such. Additionally, almost 38% (12 out of 32) rated the ACC as 'adequate', with a further almost 16% (5 out of 32) describing it as 'poor'. There were a number of comments on this question, and in general supervisors reported that the form is very long and time consuming to complete, albeit one supervisor recognising that the form is less cumbersome than before and another stating that it was very thorough.

**Balance of workload between placement and written assessment:** Almost sixty-six percent (21 out of 32) of supervisors rated the balance between placement and written assessments as either 'good' or 'excellent'. Just over 28% (9 out of 32) rated this as 'average' and 2 supervisors did not provide ratings. One supervisor commented that third year placements are challenging for trainees, as they are managing high levels of clinical complexity whilst completing a thesis.

**Involvement in academic/clinical projects:** Just over six percent (2 out of 32) of supervisors rated this as 'excellent', with the majority, almost 47% (15 out of 32), rating their involvement as 'good'. A little more than 35% (11 out of 32) rated their involvement as 'adequate' and 1 rated this as 'very poor'. Regarding service evaluations, issues about the timing of these were mentioned by 2 supervisors, with one citing an ongoing issue of trainees not being able to do a service evaluation in the first year

**Views of jointly supervising two trainees, or year-long placement:** This question was only applicable to just under 41% of supervisors (13 out of 32). Of these a little over 69% (9 out of 13) viewed arrangements for their involvement in jointly supervising two trainees, or year-long placements, as either 'good' or 'excellent'. Almost 24% (3 out of 13) viewed this as 'adequate' and one supervisor viewed this 'poor'. Comments were split between those supervisors who were happy to continue offering joint supervision and those who were not; with one stating that having 2 or 3 trainees with whom they could have peer and group supervision worked well. However, 3 other comments indicated that some supervisors would not take a trainee for one day a week again, given practical considerations e.g. organising appointments. One supervisor suggested the course require trainees to opt for one placement in the third year as the current situation 'leads to a choice of breadth over depth'.

**Preparation of trainees for placement by the clinical skills teaching and the introductory block:**

Significant changes were made to the clinical skills teaching for first year trainees in their preparatory block for the 2009-2010 academic year. Supervisors of first years were therefore asked for the second time how they felt this had affected the preparation of the trainees for placement. One supervisor rated the affect of clinical skills teaching as 'significantly better', and commented that 'the videoed role-plays with actors seem to have been particularly useful in increasing trainees' self awareness'. Three supervisors rated the effect as 'better', however four supervisors rated the affect as 'neither better nor worse'.

Supervisors of second and third year trainees were asked to rate the preparation for placement afforded by the introductory teaching block. Just over fifty-seven percent of second and third year supervisors (12 out of 21) rated this as 'good'. Almost twenty-nine percent (6 out of 21) rated this as 'adequate' and one supervisor rated this as 'poor'.

**Training available for supervisors:** Almost thirteen percent (4 out of 32) of supervisors had accessed training for supervisors provided by CPU in the last year – including initial supervisor training and the advanced supervisor workshop on diversity. However overall, 50% of the four supervisors who attended training rated this as 'excellent', with 25% rating this as 'good' and the remaining 25% rating this as 'adequate'.

**Other Comments:** Supervisors were asked for any other relevant views/comments they had about training which they would like the course to consider. Eight supervisors provided additional comments. Most of the comments concerned placements, and overall supervisors were positive about working with trainees. Several supervisors indicating that where more planning and negotiation had gone into placements, these ran more smoothly. One supervisor commented on their positive experience of the planning process and suggested that more information be made available to potential supervisors regarding the planning process as it may encourage them to have trainees. Another supervisor suggested placements be provided more systematically rather than being dependent on an elective system. Finally one supervisor felt that placements were not long enough, and commented again on the ACC, stating that filling this in 'before the end where the bulk of the written work is assessed is problematic'.

**Table 16. Supervisor Feedback: Placement Organisation Information**

Placement Organisation	Excellent	Good	Adequate	Poor	Very Poor	N/A	Omitted
Information Provided By Course Staff	6	20	5	0	1	0	0
Communication by Email	9	18	1	0	0	0	0
Information On CPU website	0	13	8	0	0	11	0
Information about the trainee	3	14	12	3	0	0	0
Forums for communication with other supervisors/course staff	2	15	7	5	1	0	2
Relevance of teaching to placement	4	13	9	0	0	0	6
Structure of day release/block arrangement	4	20	6	1	0	0	1
Initial Placement Meeting (Process and Content)	7	11	3	1	0	8	2
Mid Placement Meeting (Process and Content)	8	15	6	1	0	0	2
Format For Assessment of Clinical Competence	3	12	12	5	0	0	0
Balance of Workload between placement and written assessment	3	18	9	0	0	0	2
Your involvement in academic/clinical projects	2	15	11	1	0	0	3
Views on jointly supervising two trainees, or year-long placements	2	7	3	1	0	16	0
Total Responses	53	191	92	18	2	35	18
Percent of Responses	13.0%	46.7%	22.5%	4.4%	0.5%	8.6%	4.4%

## Section 4: External Speaker Feedback

External speakers were asked to rate their experience of teaching on the course. A total of 42 speakers provided feedback via the online survey. This is a slight increase on last year, the first year when the survey was conducted online, when 38 external speakers responded.

### **Preparation**

Feedback on communication and information provided overall was generally positive, with almost 66% of responses (83 out of 126) falling within the 'excellent' or 'good' categories – this builds on last years' positive feedback. See Table 17 below. Again, planning and communication with the course team in particular was rated highly, with almost 81% (34 out of 42) rating this as either 'excellent' or 'good' by external speakers. Additionally, 62% (26 out of 42) of speakers rated the information received to help plan sessions as either 'excellent' or 'good'. With regards to planning and communication, comments indicated that the information provided by the course secretary regarding arrangements, equipment and individual student's learning needs was highly rated, however speakers were not always sure which member of the course team was responsible for different areas of the curriculum. Also, speakers mentioned a lack of clarity about how their session fits within the wider curriculum and a lack of guidance about what their session was required to cover or what related teaching trainees had already had.

**Table 17. External Speaker feedback: Communication and Information**

	<b>Excellent</b>	<b>Good</b>	<b>Adequate</b>	<b>Poor</b>	<b>Very Poor</b>	<b>Omitted</b>
Planning and Communication	15	19	7	1	0	0
Information Received	8	18	11	2	1	2
Information on CPU website	4	19	6	1	0	12
<b>Total Responses</b>	<b>27</b>	<b>56</b>	<b>24</b>	<b>4</b>	<b>1</b>	<b>14</b>
<b>Percent of responses</b>	<b>21.4%</b>	<b>44.4%</b>	<b>19.0%</b>	<b>3.2%</b>	<b>0.8%</b>	<b>11.1%</b>

### **Curriculum**

58% (122 out of 210) of responses overall indicated that external speakers viewed the curriculum as either 'excellent' or 'good' – despite another relatively poor response rate to this question (29% omitted the question). This is an improvement from last year where 44% rated this as 'excellent' or 'good'. One speaker noted that it appeared that the role plays with actors and videotaping were invaluable to trainees.

**Table 18. External Speaker feedback: The curriculum**

<b>Curriculum</b>	<b>Excellent</b>	<b>Good</b>	<b>Adequate</b>	<b>Poor</b>	<b>Very poor</b>	<b>Omitted</b>
Balance between theory and practice	2	23	6	0	0	11
Coverage of necessary materials	2	25	4	0	0	11
Responsiveness to NHS needs	2	21	7	0	0	12
Relevance to current NHS practice	3	23	4	0	0	12
The revisions to the curriculum towards a competence based model	3	18	4	2	0	15
<b>Total responses</b>	<b>12</b>	<b>110</b>	<b>25</b>	<b>2</b>	<b>0</b>	<b>61</b>
<b>Percent of responses</b>	<b>5.7%</b>	<b>52.4%</b>	<b>11.9%</b>	<b>1</b>	<b>0</b>	<b>29.0%</b>

## The Teaching Experience

**Arriving and teaching:** Overall responses were very positive, with almost 71% (89 out of 126) of external speakers viewed their experience of arriving and teaching on the course as ‘excellent’ or ‘good’, with a number of others skipping this question. Few speakers appear to have experienced difficulty with maps/parking arrangements, with only just under 3% (1 out of 42) of external speakers rating these issues as ‘adequate’, a similar figure to last year (5%). The majority of comments indicated that speakers felt well looked after by administrative staff.

**Table 19. External Speaker feedback: Arriving and teaching**

Arriving and teaching	Excellent	Good	Adequate	Poor	Very poor	Omitted
Maps/Parking	20	13	1	0	0	8
Being welcomed	26	8	1	0	0	7
Looked after at lunchtime (if appropriate)	16	6	0	0	0	20
Total responses	62	27	2	0	0	35
Percent of responses	49.2%	21.4%	1.6%	0.0%	0.0%	27.8%

**Teaching Rooms:** Overall, responses indicated that teaching rooms were experienced as ‘excellent’ or ‘good’, with almost 63% (79 out of 126) of responses supporting this view. See Table 20 below. Some comments indicated that at some times of year noise and ventilation can be an issue. As with last year’s feedback, one external speaker mentioned a specific difficulty with the light from the windows affecting showing slides, however covering windows to counter this was not a comfortable option. One speaker noted that one of the break out rooms was too small.

40% of speakers who answered this question had used the CPU teaching room (14 out of 35 – 7 respondents skipped this question). A similar number had used the main psychology building room (13 out of 35). Around 17% (6 out of 35) of external speakers had used both of the teaching rooms. Fifty-percent (3 out of 6) of external speakers who responded to this part of the question indicated that they did not have a particular preference for either room, with the remaining 50% indicating a preference for the main Psychology Building room. One speaker who preferred the main Psychology building room commented that this room was cosier, with another stating that the CPU room is too small, hot and cramped. It was also noted that trainees were more likely to return to the session on time to the Psychology building and support staff were more readily available in that room. Two speakers had used another room. These other rooms included the IT computer room, other rooms in the main psychology building, and other rooms and staff offices in CPU.

Twenty-four percent (8 out of 33) of speakers who answered this question had used small ‘break out’ rooms. In general, the vast majority of those who did not use them stated that they did not have a need, although one speaker commented that they were not aware of them but may use the rooms in the future and one commented that some of the rooms were too small. However, of those who did use the ‘break out’ rooms, nearly 78% (7 out of 9) stated that they were ‘adequate in size’ and only two speakers stated that they were not.

**Table 20. External Speaker feedback: Teaching Rooms**

Teaching Rooms	Excellent	Good	Adequate	Poor	Very poor	Omitted
Physical (size, location, number of rooms)	6	20	10	0	0	6
Equipment (furniture, a/v facilities, etc)	10	19	6	0	0	7
Comfort (heating, ventilation, noise)	6	18	12	0	0	6
Total responses	22	57	28	0	0	19
Percent of responses	17.5%	45.2%	22.2%	0.0%	0.0%	15.1%

**Teaching the Trainees:** The majority of responses (just over 71% or 90 out of 126) indicated that external speakers were very satisfied with their experience of teaching on the course, as they rated aspects of the experience as either 'excellent' or 'good'. This includes a number of trainees who did not provide ratings. Several comments indicated that it was difficult for speakers to generalise regarding their experience of trainees' enthusiasm and openness this varying both between and within year groups. One speaker commented that timekeeping on the part of trainees is always problematic. With regards to the feedback form, two speakers commented that they hadn't seen them, however one commented that they found the qualitative comments at the end of the form helpful.

**Table 21. External Speaker feedback: Teaching the Trainees**

<b>Teaching the trainees</b>	<b>Excellent</b>	<b>Good</b>	<b>Adequate</b>	<b>Poor</b>	<b>Very poor</b>	<b>Omitted</b>
Enthusiasm and engagement	11	19	2	1	0	9
Openness and receptiveness	16	14	4	0	0	8
Usefulness of feedback forms	5	25	2	0	0	10
Total responses	32	58	8	1	0	27
<b>Percent of responses</b>	<b>25.4%</b>	<b>46.0%</b>	<b>6.3%</b>	<b>0.8%</b>	<b>0.0%</b>	<b>21.4%</b>

**Overall Experience of Teaching:** The majority (almost 81% or 34 out of 42) of external speakers were satisfied with their experience of teaching on the course, however of the 42 respondents, 7 speakers did not answer this question. Only one speaker was not satisfied and suggested that attendance and engagement be emphasised to trainees. They also noted it would be helpful to be provided with a copy of the curriculum and we made aware of the minimum that needed to be covered in teaching.

In general, comments were very positive, with several speakers commenting that they enjoyed teaching on the course and praising enthusiasm of the trainees. The course team were also specifically mentioned positively. One comment came from a service user who commenting favourably upon their experience of their involvement in the course and with trainees Two speakers commented on the survey itself, with one suggesting that it include questions about PPI, and another questioning both whether it adds very much to the feedback that teachers fill in at the time of teaching, as well as the accuracy of responses given the teaching may have taken place some time ago.