
Standards of proficiency

Practitioner psychologists

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Foreword

We are pleased to present the Health and Care Professions Council's (HCPC) standards of proficiency for practitioner psychologists.

We first published standards of proficiency for practitioner psychologists in July 2009. We made minor changes to the standards following publication in October 2010. We review the standards regularly to look at how they are working and to check whether they continue to reflect current practice in the professions we regulate.

These new revised standards are a result of our most recent review of the standards of proficiency. As a result of the first stage of the review, and the results of a public consultation, we have revised our generic standards which apply to all the professions we regulate. The revised standards are now based around 15 generic statements. This new structure means that we can retain the standards which are shared across all the professions we regulate, whilst allowing us more flexibility in describing the detailed standards which are specific to individual professions.

The profession-specific standards for practitioner psychologists included in this document were developed through the input of the relevant professional bodies and the views of all stakeholders during a further public consultation. The review process and consultation produced valuable feedback and we are grateful to all those who gave their time to help us in shaping the new standards.

We have made a small number of changes to the standards overall, mainly to reflect developments in education and practice, to clarify our intentions and to correct any errors or omissions. We have also made some minor changes to the introduction, in particular to explain the language we use in the standards.

We are confident that the standards are fit for purpose and reflect safe and effective professional practice for practitioner psychologists.

These standards are effective from Wednesday 1 July 2015.

Introduction

This document sets out the standards of proficiency. These standards set out safe and effective practice in the professions we regulate. They are the threshold standards we consider necessary to protect members of the public. They set out what a student must know, understand and be able to do by the time they have completed their training, so that they are able to register with us. Once on our Register you must meet those standards of proficiency which relate to the areas in which you work.

We also expect you to keep to our standards of conduct, performance and ethics and standards for continuing professional development. We publish these in separate documents, which you can find on our website.

In the practitioner psychologist part of our Register, there are seven distinct domains. The standards of proficiency in this document include both generic elements, which apply to all our registrants, profession-specific elements which are relevant to all practitioner psychologists and domain-specific standards which apply to a particular domain. The generic standards are written in **bold**, the profession-specific standards are written in plain text, with the domain-specific standards written in plain blue text.

We have numbered the standards so that you can refer to them more easily. The standards are not hierarchical and are all equally important for practice.

A note about our expectations of you

You must meet all the standards of proficiency to register with us and meet the standards relevant to your scope of practice to stay registered with us.

It is important that you read and understand this document. If your practice is called into question we will consider these standards (and our standards of conduct, performance and ethics) in deciding what action, if any, we need to take.

The standards set out in this document complement information and guidance issued by other organisations, such as your professional body or your employer. We recognise the valuable role played by professional bodies in providing guidance and advice about good practice which can help you to meet the standards in this document.

Your scope of practice

Your scope of practice is the area or areas of your profession in which you have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets our standards and does not pose any danger to the public or to yourself.

We recognise that a registrant's scope of practice will change over time and that the practice of experienced registrants often becomes more focused and specialised than that of newly registered colleagues. This might be because of specialisation in a certain area or with a particular client group, or a movement into roles in management, education or research. Every time you renew your registration, you will be asked to sign a declaration that you continue to meet the standards of proficiency that apply to your scope of practice.

Your particular scope of practice may mean that you are unable to continue to demonstrate that you meet all of the standards that apply for the whole of your profession.

As long as you make sure that you are practising safely and effectively within your given scope of practice and do not practise in the areas where you are not proficient to do so, this will not be a problem. If you want to move outside of your scope of practice, you should be certain that you are capable of working lawfully, safely and effectively. This means that you need to exercise personal judgement by undertaking any necessary training and experience, before moving into a new area of practice.

Meeting the standards

It is important that you meet our standards and are able to practise lawfully, safely and effectively. However, we do not dictate how you should meet our standards. There is normally more than one way in which each standard can be met and the way in which you meet our standards might change over time because of improvements in technology or changes in your practice.

We often receive questions from registrants who are concerned that something they have been asked to do, a policy, or the way in which they work might mean they cannot meet our standards. They are often worried that this might have an effect on their registration.

As an autonomous professional, you need to make informed, reasoned decisions about your practice to ensure that you meet the standards that apply to you. This includes seeking advice and support from education providers, employers, colleagues, professional bodies, unions and others to ensure that the wellbeing of service users is safeguarded at all times. So long as you do this and can justify your decisions if asked to, it is very unlikely that you will not meet our standards.

Language

We recognise that our registrants work in a range of different settings, which include clinical practice, education, research and roles in industry. We also recognise that the use of terminology can be an emotive issue.

Our registrants work with very different people and use different terms to describe the groups that use, or are affected by, their services. Some of our registrants work with patients, some with clients which can include organisations, and others with service users. We have used the term 'service user' in a broad sense in the standards to refer to anyone who uses or is affected by the services of our registrants. However, the term you use to describe the groups that use, or are affected by, the services you offer will be guided by context and the area or domain you practise in.

When we consulted on the standards we received a lot of different feedback about our use of the terms 'evidence-based' and 'evidence-informed' but with no clear consensus on which of these terms were preferred. These terms are about practitioner psychologists' awareness and use of research and other evidence, where this is available, to guide their practice. As a result, in standard 12.1, which applies to all practitioner psychologists and is about use of evidence more generally, we have used both terms. In the other standards which apply to specific psychological models or frameworks, we have retained our existing terminology of 'evidence-based'.

In the standards of proficiency, we use phrases such as 'understand', 'know', and 'be able to'. This is so the standards remain applicable to current registrants in maintaining their fitness to practise, as well as prospective registrants who have not yet started practising and are applying for registration for the first time.

These standards may change in the future

We have produced these standards after speaking to our stakeholders and holding a formal public consultation.

We will continue to listen to our stakeholders and will keep our standards under continual review. Therefore, we may make further changes in the future to take into account changes in practice.

We will always publicise any changes to the standards that we make by, for instance, publishing notices on our website and informing professional bodies.

Standards of proficiency

Registrant practitioner psychologists must:

1 be able to practise safely and effectively within their scope of practice

- 1.1 know the limits of their practice and when to seek advice or refer to another professional
- 1.2 recognise the need to manage their own workload and resources effectively and be able to practise accordingly

2 be able to practise within the legal and ethical boundaries of their profession

- 2.1 understand the need to act in the best interests of service users at all times
- 2.2 understand what is required of them by the Health and Care Professions Council
- 2.3 understand the need to respect and uphold the rights, dignity, values and autonomy of service users including their role in the assessment, treatment and intervention process and in maintaining health and wellbeing
- 2.4 recognise that relationships with service users should be based on mutual respect and trust, and be able to maintain high standards of practice even in situations of personal incompatibility
- 2.5 understand current legislation applicable to the work of their profession
- 2.6 understand the importance of and be able to obtain informed consent
- 2.7 be able to exercise a professional duty of care
- 2.8 understand the complex ethical and legal issues of any form of dual relationship and the impact these may have on service users
- 2.9 understand the power imbalance between practitioners and service users and how this can be managed appropriately
- 2.10 be able to recognise appropriate boundaries and understand the dynamics of power relationships
- 2.11 understand the organisational context for their practice as a practitioner psychologist

3 be able to maintain fitness to practise

- 3.1 understand the need to maintain high standards of personal and professional conduct
- 3.2 understand the importance of maintaining their own health
- 3.3 understand both the need to keep skills and knowledge up to date and the importance of career-long learning
- 3.4 be able to manage the physical, psychological and emotional impact of their practice

4 be able to practise as an autonomous professional, exercising their own professional judgement

- 4.1 be able to assess a professional situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
- 4.2 be able to make reasoned decisions to initiate, continue, modify or cease treatment, intervention or the use of techniques or procedures, and record the decisions and reasoning appropriately
- 4.3 be able to initiate resolution of problems and be able to exercise personal initiative
- 4.4 recognise that they are personally responsible for and must be able to justify their decisions
- 4.5 be able to make and receive appropriate referrals
- 4.6 understand the importance of participation in training, supervision and mentoring

5 be aware of the impact of culture, equality and diversity on practice

- 5.1 understand the impact of differences such as gender, sexuality, ethnicity, culture, religion and age on psychological wellbeing or behaviour
- 5.2 understand the requirement to adapt practice to meet the needs of different groups and individuals

6 be able to practise in a non-discriminatory manner

7 understand the importance of and be able to maintain confidentiality

- 7.1 be aware of the limits of the concept of confidentiality
- 7.2 understand the principles of information governance and be aware of the safe and effective use of health, social care and other relevant information
- 7.3 be able to recognise and respond appropriately to situations where it is necessary to share information to safeguard service users or the wider public

8 be able to communicate effectively

- 8.1 be able to demonstrate effective and appropriate verbal and non-verbal skills in communicating information, advice, instruction and professional opinion to service users, colleagues and others
- 8.2 be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5¹
- 8.3 understand how communication skills affect assessment of, and engagement with, service users and how the means of communication should be modified to address and take account of factors such as age, capacity, learning ability and physical ability
- 8.4 be able to select, move between and use appropriate forms of verbal and non-verbal communication with service users and others
- 8.5 be aware of the characteristics and consequences of verbal and non-verbal communication and how this can be affected by factors such as age, culture, ethnicity, gender, socio-economic status and spiritual or religious beliefs

¹ The International English Language Testing System (IELTS) tests competence in the English language. Applicants who have qualified outside of the UK, whose first language is not English and who are not nationals of a country within the European Economic Area (EEA) or Switzerland, must provide evidence that they have reached the necessary standard. Please visit our website for more information.

- 8.6 understand the need to provide service users or people acting on their behalf with the information necessary to enable them to make informed decisions
- 8.7 be able to select the appropriate means for communicating feedback to service users
- 8.8 be able to provide psychological opinion and advice in formal settings, as appropriate
- 8.9 be able to communicate ideas and conclusions clearly and effectively to specialist and non-specialist audiences
- 8.10 be able to explain the nature and purpose of specific psychological techniques to service users
- 8.11 be able to summarise and present complex ideas in an appropriate form
- 8.12 understand the need to assist the communication needs of service users such as through the use of an appropriate interpreter, wherever possible
- 8.13 recognise the need to use interpersonal skills to encourage the active participation of service users
- 8.14 be able to use formulations to assist multi-professional communication and understanding
- 8.15 understand explicit and implicit communications in a practitioner – service user relationship
- 8.16 be able to appropriately define and contract work with commissioning service users or their representatives

Counselling psychologists only

- 8.17 understand how empathic understanding can be helped by creativity and artistry in the use of language and metaphor

9 be able to work appropriately with others

- 9.1 be able to work, where appropriate, in partnership with service users, other professionals, support staff and others
- 9.2 understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team
- 9.3 understand the need to engage service users and carers in planning and evaluating assessments, treatments and interventions to meet their needs and goals
- 9.4 understand the need to implement interventions, care plans or management plans in partnership with service users, other professionals and carers
- 9.5 be able to initiate, develop and end a practitioner – service user relationship
- 9.6 understand the dynamics present in relationships between service users and practitioners
- 9.7 be able to contribute effectively to work undertaken as part of a multi-disciplinary team
- 9.8 be able to plan, design and deliver teaching and training which takes into account the needs and goals of participants
- 9.9 be able to support the learning of others in the application of psychological skills, knowledge, practices and procedures
- 9.10 be able to use psychological formulations with service users to facilitate their understanding of their experience or situation

10 be able to maintain records appropriately

- 10.1 be able to keep accurate, comprehensive and comprehensible records in accordance with applicable legislation, protocols and guidelines
- 10.2 recognise the need to manage records and all other information in accordance with applicable legislation, protocols and guidelines

11 be able to reflect on and review practice

- 11.1 understand the value of reflection on practice and the need to record the outcome of such reflection
- 11.2 recognise the value of case conferences or other methods of review
- 11.3 be able to reflect critically on their practice and consider alternative ways of working
- 11.4 understand models of supervision and their contribution to practice

Counselling psychologists only

- 11.5 be able to critically reflect on the use of self in the therapeutic process

12 be able to assure the quality of their practice

- 12.1 be able to engage in evidence-based and evidence-informed practice, evaluate practice systematically and participate in audit procedures
- 12.2 be able to gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care or experience
- 12.3 be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures
- 12.4 be able to maintain an effective audit trail and work towards continual improvement
- 12.5 be aware of, and able to participate in, quality assurance programmes, where appropriate
- 12.6 be able to evaluate intervention plans using recognised outcome measures and revise the plans as necessary in conjunction with the service user
- 12.7 be able to revise formulations in the light of ongoing intervention and when necessary reformulate the problem

- 12.8 recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes
- 12.9 be able to monitor agreements and practices with service users, groups and organisations

13 understand the key concepts of the knowledge base relevant to their profession

- 13.1 understand the structure and function of the human body, together with knowledge of health, well-being, disease, disorder and dysfunction relevant to their domain
- 13.2 be aware of the principles and applications of scientific enquiry, including the evaluation of the effectiveness of interventions and the research process
- 13.3 recognise the role of other professions and stakeholders relevant to the work of their domain
- 13.4 understand the structures and functions of UK service providers applicable to the work of their domain
- 13.5 understand the theoretical basis of, and the variety of approaches to, assessment and intervention
- 13.6 understand the role of the practitioner psychologist across a range of settings and services
- 13.7 understand the concept of leadership and its application to practice
- 13.8 understand the application of consultation models to service-delivery and practice, including the role of leadership and group processes

Clinical psychologists only

- 13.9 understand theories and evidence concerning psychological development and psychological difficulties across the lifespan and their assessment and remediation

- 13.10 understand more than one evidence-based model of formal psychological therapy
- 13.11 understand psychological models related to how biological, sociological and circumstantial or life-event-related factors impinge on psychological processes to affect psychological wellbeing
- 13.12 understand psychological models related to a range of presentations including:
- service users with presentations from acute to enduring and mild to severe;
 - problems with biological or neuropsychological aspects; and
 - problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions
- 13.13 understand psychological models related to service users:
- from a range of social and cultural backgrounds;
 - of all ages;
 - across a range of intellectual functioning;
 - with significant levels of challenging behaviour;
 - with developmental learning disabilities and cognitive impairment;
 - with communication difficulties;
 - with substance misuse problems; and
 - with physical health problems
- 13.14 understand psychological models related to working:
- with service users, couples, families, carers, groups and at the organisational and community level; and
 - in a variety of settings including in-patient or other residential facilities with high-dependency needs, secondary health care and community or primary care

- 13.15 understand change and transition processes at the individual, group and organisational level
- 13.16 understand social approaches such as those informed by community, critical and social constructivist perspectives
- 13.17 understand the impact of psychopharmacological and other clinical interventions on psychological work with service users

Counselling psychologists only

- 13.18 understand the philosophical bases which underpin those psychological theories which are relevant to counselling psychology
- 13.19 understand the philosophy, theory and practice of more than one evidence-based model of formal psychological therapy
- 13.20 understand psychological models related to a range of presentations including:
 - service users with presentations from acute to enduring and mild to severe;
 - problems with biological or neuropsychological aspects; and
 - problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions
- 13.21 understand the therapeutic relationship and alliance as conceptualised by each model
- 13.22 understand the spiritual and cultural traditions relevant to counselling psychology
- 13.23 understand the primary philosophical paradigms that inform psychological theory with particular regard to their relevance to, and impact upon, the understanding of the subjectivity and inter-subjectivity of experience throughout human development
- 13.24 understand theories of human cognitive, emotional, behavioural, social and physiological functioning relevant to counselling psychology

- 13.25 understand different theories of lifespan development
- 13.26 understand social and cultural contexts and the nature of relationships throughout the lifespan
- 13.27 understand theories of psychopathology and of change
- 13.28 understand the impact of psychopharmacology and other interventions on psychological work with service users

Educational psychologists only

- 13.29 understand the role of the educational psychologist across a range of school and community settings and services
- 13.30 understand the educational and emotional factors that facilitate or impede the provision of effective teaching and learning
- 13.31 understand psychological theories of, and research evidence in, child, adolescent and young adult development relevant to educational psychology
- 13.32 understand the structures and systems of a wide range of settings in which education, health and care are delivered for children, adolescents and young adults, including child protection procedures
- 13.33 understand psychological models related to the influence of school ethos and culture, educational curricula, communication systems, management and leadership styles on the cognitive, behavioural, emotional and social development of children, adolescents and young adults
- 13.34 understand psychological models of the factors that lead to underachievement, disaffection and social exclusion amongst vulnerable groups
- 13.35 understand theories and evidence underlying psychological intervention with children, adolescents, young adults, their parents or carers, and education and other professionals

- 13.36 understand psychological models related to the influence on development of children, adolescents and young adults from:
 - family structures and processes;
 - cultural and community contexts; and
 - organisations and systems
- 13.37 understand change and transition processes at the individual, group and organisational level
- 13.38 understand the theoretical basis of, and the variety of approaches to, consultation and assessment in educational psychology

Forensic psychologists only

- 13.39 understand the application of psychology in the legal system
- 13.40 understand the application and integration of a range of theoretical perspectives on socially and individually damaging behaviours, including psychological, social and biological perspectives
- 13.41 understand psychological models related to a range of presentations including:
 - service users with presentations from acute to enduring and mild to severe;
 - problems with biological or neuropsychological aspects; and
 - problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions
- 13.42 understand psychological theories and their application to the provision of psychological therapies that focus on offenders and victims of offences
- 13.43 understand effective assessment approaches with service users presenting with individually or socially damaging behaviour

13.44 understand the development of criminal and antisocial behaviour

13.45 understand the psychological interventions related to different service user groups including victims of offences, offenders, litigants, appellants and individuals seeking arbitration and mediation

Health psychologists only

13.46 understand context and perspectives in health psychology

13.47 understand the epidemiology of health and illness

13.48 understand:

- biological mechanisms of health and disease;
- health-related cognitions and behaviour;
- stress, health and illness;
- individual differences in health and illness;
- lifespan, gender and cross-cultural perspectives; and
- long-term conditions and disability

13.49 understand applications of health psychology and professional issues

13.50 understand healthcare in professional settings

Occupational psychologists only

13.51 understand the following in occupational psychology:

- human-machine interaction;
- design of environments and work;
- personnel selection and assessment;
- performance appraisal and career development;
- counselling and personal development;
- training;
- employee relations and motivation; and
- organisational development and change

Sport and exercise psychology

13.52 understand cognitive processes, including motor skills, practice skills, learning and perception; and self-regulation

13.53 understand psychological skills such as:

- goal setting;
- self-talk;
- imagery;
- pre-performance routines;
- arousal control, such as relaxation and activation; and
- strategies for stress and emotion management

13.54 understand exercise and physical activity including:

- determinants, such as motives, barriers and adherence;
- outcomes in relation to affect, such as mood and emotion;
- cognition and mental health issues, such as self-esteem, eating disorders, depression and exercise dependence;
- lifestyle and quality of life; and
- injury

13.55 understand individual differences including:

- mental toughness, hardiness and resilience;
- personality;
- confidence;
- motivation;
- self-concept and self-esteem; and
- stress and coping

13.56 understand social processes within sport and exercise psychology including:

- interpersonal skills and relationships;
- group dynamics and functioning;
- organisational issues; and
- leadership

13.57 understand the impact of developmental processes, including lifespan issues and processes related to career transitions and termination

14 be able to draw on appropriate knowledge and skills to inform practice

- 14.1 be able to apply psychology across a variety of different contexts using a range of evidence-based and theoretical models, frameworks and psychological paradigms
- 14.2 be able to change their practice as needed to take account of new developments or changing contexts
- 14.3 be able to conduct appropriate assessment or monitoring procedures, treatment, interventions, therapy or other actions safely and effectively
- 14.4 be able to conduct consultancy
- 14.5 be able to formulate specific and appropriate management plans including the setting of timescales
- 14.6 be able to manage resources to meet timescales and agreed project objectives
- 14.7 be able to use psychological formulations to plan appropriate interventions that take the service user's perspective into account
- 14.8 be able to direct the implementation of applications and interventions carried out by others
- 14.9 be able to gather appropriate information

- 14.10 be able to make informed judgements on complex issues in the absence of complete information
- 14.11 be able to work effectively whilst holding alternative competing explanations in mind
- 14.12 be able to generalise and synthesise prior knowledge and experience in order to apply them critically and creatively in different settings and novel situations
- 14.13 be able to select and use appropriate assessment techniques
- 14.14 be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment
- 14.15 be able to choose and use a broad range of psychological assessment methods, appropriate to the service user, environment and the type of intervention likely to be required
- 14.16 be able to decide how to assess, formulate and intervene psychologically from a range of possible models and modes of intervention with service users or service systems
- 14.17 be able to use formal assessment procedures, systematic interviewing procedures and other structured methods of assessment relevant to their domain
- 14.18 be able to undertake or arrange investigations as appropriate
- 14.19 be able to analyse and critically evaluate the information collected
- 14.20 be able to critically evaluate risks and their implications
- 14.21 be able to demonstrate a logical and systematic approach to problem solving
- 14.22 be able to use research, reasoning and problem solving skills to determine appropriate actions
- 14.23 be able to recognise when further intervention is inappropriate, or unlikely to be helpful

- 14.24 recognise the value of research to the critical evaluation of practice
- 14.25 be aware of a range of research methodologies
- 14.26 be able to evaluate research and other evidence to inform their own practice
- 14.27 be able to initiate, design, develop, conduct and critically evaluate psychological research
- 14.28 understand a variety of research designs
- 14.29 be able to understand and use applicable techniques for research and academic enquiry, including qualitative and quantitative approaches
- 14.30 be able to use professional and research skills in work with service users based on a scientist-practitioner and reflective-practitioner model that incorporates a cycle of assessment, formulation, intervention and evaluation
- 14.31 understand research ethics and be able to apply them
- 14.32 be able to conduct service and large scale evaluations
- 14.33 be able to use information and communication technologies appropriate to their practice

Clinical psychologists only

- 14.34 be able to assess social context and organisational characteristics
- 14.35 be able to develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models
- 14.36 be able to draw on knowledge of developmental, social and neuropsychological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities

- 14.37 understand therapeutic techniques and processes as applied when working with a range of individuals in distress including:
- those who experience difficulties related to anxiety, mood, adjustment to adverse circumstances or life-events, eating, psychosis, use of substances; and
 - those with somatoform, psychosexual, developmental, personality, cognitive and neurological presentations
- 14.38 be able, on the basis of psychological formulation, to implement psychological therapy or other interventions appropriate to the presenting problem and to the psychological and social circumstances of the service user
- 14.39 be able to implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy, including the use of cognitive behavioural therapy
- 14.40 be able to promote awareness of the actual and potential contribution of psychological services
- 14.41 be able to evaluate and respond to organisational and service delivery changes, including the provision of consultation

Counselling psychologists only

- 14.42 be able to contrast, compare and critically evaluate a range of models of therapy
- 14.43 be able to draw on knowledge of developmental, social and neuropsychological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities
- 14.44 be able to critically evaluate theories of mind and personality
- 14.45 understand therapy through their own life-experience
- 14.46 be able to adapt practice to take account of the nature of relationships throughout the lifespan

- 14.47 be able to formulate service users' concerns within the chosen therapeutic models
- 14.48 be able to critically evaluate psychopharmacology and its effects from research and practice
- 14.49 be able to critically evaluate theories of psychopathology and change
- 14.50 be able, on the basis of psychological formulation, to implement psychological therapy or other interventions appropriate to the presenting problem and to the psychological and social circumstances of the service user
- 14.51 be able to implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy
- 14.52 be able to promote awareness of the actual and potential contribution of psychological services
- 14.53 be able to evaluate and respond to organisational and service delivery changes, including the provision of consultation

Educational psychologists only

- 14.54 be able to develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models
- 14.55 be able to carry out and analyse large-scale data gathering, including questionnaire surveys
- 14.56 be able to work with key partners to support the design, implementation, conduct, evaluation and dissemination of research activities and to support evidence-based research
- 14.57 be able to formulate interventions that focus on applying knowledge, skills and expertise to support local and national initiatives
- 14.58 be able to develop and apply effective interventions to promote psychological wellbeing, social, emotional and behavioural development and to raise educational standards

- 14.59 be able to implement interventions and plans through and with other professions and with parents or carers
- 14.60 be able to adopt a proactive and preventative approach in order to promote the psychological wellbeing of service users
- 14.61 be able to choose and use a broad range of psychological interventions, appropriate to the service user's needs and setting
- 14.62 be able to integrate and implement therapeutic approaches based on a range of evidence-based psychological interventions
- 14.63 be able to promote awareness of the actual and potential contribution of psychological services

Forensic psychologists only

- 14.64 be able to plan and design training and development programmes
- 14.65 be able to plan and implement assessment procedures for training programmes
- 14.66 be able to promote awareness of the actual and potential contribution of psychological services
- 14.67 be able to assess social context and organisational characteristics
- 14.68 be able to research and develop psychological methods, concepts, models, theories and instruments in forensic psychology
- 14.69 be able to evaluate and respond to organisational and service delivery changes, including the provision of consultation
- 14.70 be able to draw on knowledge of developmental and social changes and constraints across an individual's lifespan to facilitate adaptability and change
- 14.71 be able to implement interventions and care-plans through and with other professionals who form part of the service user care-team

- 14.72 be able, on the basis of empirically derived psychological formulation, to implement psychological therapy or other interventions appropriate to the presenting maladaptive or socially damaging behaviour of the service user
- 14.73 be able to integrate and implement evidence-based psychological therapy at either an individual or group level

Health psychologists only

- 14.74 be able to plan and implement assessment procedures for training programmes
- 14.75 be able to develop appropriate psychological assessments based on appraisal of the influence of the biological, social and environmental context
- 14.76 be able to develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models
- 14.77 be able to carry out and analyse large-scale data gathering, including questionnaire surveys
- 14.78 be able to draw on knowledge of developmental, social and biological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities
- 14.79 be able to contrast, compare and critically evaluate a range of models of behaviour change
- 14.80 understand techniques and processes as applied when working with different individuals who experience difficulties
- 14.81 be able to develop and apply effective interventions to promote psychological wellbeing, social, emotional and behavioural development and to raise educational standards
- 14.82 be able to evaluate and respond to change in health psychology and in consultancy and service-delivery contexts

- 14.83 be able, on the basis of psychological formulation, to implement psychological therapy or other interventions appropriate to the presenting problem, and to the psychological and social circumstances of the service user
- 14.84 be able to integrate and implement therapeutic approaches based on a range of evidence-based psychological interventions
- 14.85 be able to choose and use a broad range of psychological interventions, appropriate to the service user's needs and setting

Occupational psychologists only

- 14.86 be able to assess individuals, groups and organisations in detail
- 14.87 be able to use the consultancy cycle
- 14.88 be able to research and develop psychological methods, concepts, models, theories and instruments in occupational psychology
- 14.89 be able to use psychological theory to guide research solutions for the benefit of organisations and individuals
- 14.90 understand and be able to act and provide advice on policy development concerning employees' and job seekers' rights
- 14.91 be able to run, direct, train and monitor others in the effective implementation of an application

Sport and exercise psychologists only

- 14.92 be able to assess social context and organisational characteristics
- 14.93 be able to develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models
- 14.94 be able to formulate service users' concerns within the chosen intervention models

15 understand the need to establish and maintain a safe practice environment

- 15.1 understand the need to maintain the safety of both service users and those involved in their care or experience
- 15.2 be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these
- 15.3 be able to establish safe environments for practice, which minimise risks to service users, those treating them and others

Sport and exercise psychologists only

- 15.4 be aware of the possible physical risks associated with certain sport and exercise contexts

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