

Placement-specific personal development plan – Core Psychiatry exemplar

This exemplar provides suggestions of the ways in which capabilities can be developed and evidenced. It can be used to inform the conversation between trainee and trainer at the start of each placement / training post, in which they should agree activities and evidence as part of setting up a personal development plan.

Post Description	Core psychiatry – psychotherapy placement
Post Length	Six months single post or 12 months split post (combined with other psychiatric specialty e.g. CAMHs, Addictions Psychiatry)
Training Year	CT3
Career Progression Plan	
CT1	Adult inpatient, Old Age Psychiatry
CT2	ID, Forensic, General Adult CMHT
CT3	Medical Psychotherapy (single post), followed by CAMHs or relevant Subspecialty, or combined split post Medical Psychotherapy combined with CAMHS or Addictions or ID.

The below table outlines the High Level Outcomes (HLOs) and Key Capabilities (KCs) to be achieved under 16 key themes.

Specialty HLO statements

HLO1: Demonstrate the professional values and behaviours required of a medical doctor in psychiatry, with reference to Good Medical Practice, and Core Values for Psychiatrists (CR204) and other relevant faculty guidance.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
1.1 Professional Relationships	Work collaboratively with patients, families, their carers of all ages and colleagues respecting their autonomy, diversity and valuing their contribution.		
	Understand, recognise, validate and actively address systemic and structural inequalities, intersectionality, and their impact on clinical outcomes for patients and carers of all ages and on working relationships with colleagues.		
	Consistently demonstrate a person-centred holistic clinical approach to patients that is honest, empathic, compassionate, and respects their dignity while maintaining therapeutic optimism and boundaries.	<ul style="list-style-type: none"> Through your psychotherapeutic work with your patients develop a deepening understanding of each patient's unique identity, situation and life experiences. In supervision, reflect on and discuss patients' diverse characteristics and their effect on patients' experience of relationships with health 	Reflective notes. Mini-PAT. DONCS CbD CBDGA SAPE Psychotherapy Supervision

		professionals and mental health services.	
		<ul style="list-style-type: none"> Participate in reflective practice groups (Balint/CBD, + MDT groups) to develop your understanding of the complexities of professional boundaries and the unconscious psychological processes that influence boundaries. 	Psychotherapy Supervision CbD CbDGA
	Demonstrate flexibility, leadership, use of initiative, prioritisation, and adaptability, effectively managing your time and resources and using new technologies as appropriate.		
1.2 Professional Standards	Understand the impact of workload, patient and organisational dynamics on your own well-being.		
	Use supervision and reflection effectively recognising your skills, limitations and your duty of candour.	<ul style="list-style-type: none"> Use your continued attendance in Balint/Case based discussion groups to build an experiential understanding of how curiosity and illumination of the psychodynamics of the doctor-patient relationship, and the wider team and system dynamics, is creatively used to deepen clinical understanding and to enhance compassionate, 	Reflective notes CbDGA

		professional care, and indicate a developing self-awareness.	
		<ul style="list-style-type: none"> Participate in psychotherapy team meetings, including referral meetings and team reflective practice groups and group supervision, to develop your reflective capabilities. 	DONCS
	Develop strategies to take care of your wellbeing, seeking timely support and guidance, including acknowledging if you have a protected characteristic which might impact on your training or if you are having difficulties adapting to working in the UK.	<ul style="list-style-type: none"> Reflect on how working with psychological disturbance has a personal emotional impact and use psychiatric/psychotherapy supervision as a forum to discuss this. Consider personal therapy or other methods of developing self-reflective practice and accessing support as a way to develop your awareness of personal vulnerabilities and limitations. 	Reflective practice Psychiatric/psychotherapy supervision notes
	Use the method of receiving, reflecting and responding to understand and manage the emotional impact of work on yourself, the individual and the team, including the impact of suicide and homicide.		
	Consistently demonstrate a positive and conscientious approach to the completion of your work.		

	Make clear, accurate and contemporaneous records.		
	Demonstrate the ability to use reflective practice during psychiatric supervision throughout core training, and through consistent attendance at a Balint group or case-based discussion group for a recommended minimum of a year.	<ul style="list-style-type: none"> Continue to attend Balint/Case based discussion groups throughout your placement as a forum to discuss the emotional impact of work with patients, with colleagues, including the impact of suicide and homicide. 	CbD CbDGA
	Demonstrate an understanding of the principles of sustainability and how they underpin sustainable psychiatric practice.		

HLO 2.1: Demonstrate advanced communication and interpersonal skills when engaging with patients, their families, carers of all ages, their wider community, colleagues and other professionals.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
2.1 Communication	Demonstrate an appropriate understanding of the ways in which you, as well as patients and others, communicate both verbally and non-verbally.	<ul style="list-style-type: none"> Co-facilitate a Balint/CBD Group with an experienced facilitator to develop your listening and self-reflective skills. Participate in a reflective practice group (e.g. for CMHTs, or an eating disorder unit etc.) to develop listening and self-reflective skills 	CbD (Options may include, live supervision as in family therapy or recorded sessions as in CBT or process notes.)

<p>Consistently demonstrate effective communication approaches with patients and relevant others, including those with neurodevelopmental disorders making reasonable adjustments and adaptations where appropriate, including the use of new technologies.</p>	<ul style="list-style-type: none"> Practice the use of effective, sensitive and skilled communication and understanding within correspondence (verbal and written) with patients, CMHT and MDT groups. 	<p>DONCS</p>
<p>Consistently use active listening skills and empathic language which respects the individual, removes barriers and inequalities, ensures partnership and shared decision-making and is clear, concise, non-discriminatory and non-judgemental.</p>	<ul style="list-style-type: none"> Use supervised psychotherapeutic clinical experience to develop your listening skills further. 	<p>Supervision notes CbD SAPE</p>
	<ul style="list-style-type: none"> In your psychotherapeutic work, develop the ability to stay with difficult clinical material and emotional distress, while managing uncertainty by learning to contain one's own anxiety in order to strengthen and enhance listening skills. Facilitated through reflection in psychiatric supervision and psychotherapy clinical supervision. 	<p>Psychiatric supervision notes Psychotherapy supervision notes</p>
<p>Demonstrate effective communication and shared decision making with patients, taking into consideration their ideas, values, concerns and expectations.</p>		
<p>Explain the outcome of assessment, treatment and management to patients,</p>		

	families, carers of all ages as well as relevant others.		
	Demonstrate an inclusive approach which considers all aspects of communication, language, sensory and cognitive needs, as well as the ethnic, social, and cultural, context of a patient.		
HLO 2.2: Demonstrate skill in the psychiatric assessment, formulation, diagnosis and person-centred holistic management of an appropriate range of presentations in a variety of clinical and non-clinical settings.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
2.2 Clinical Skills	Demonstrate an understanding of the history of psychiatry, the development of diagnostic concepts and psychiatric treatments, as well as the profession, and the historical relationships between psychiatry and society.		
	Demonstrate an appropriate understanding of a person-centred holistic approach to mental disorders, including a knowledge of developmental, social, cultural, spiritual/religious, trauma, adversity, genetic and epigenetic risks (including resilience and vulnerability factors) and neuro-biological influences on mental disorders.		

<p>Demonstrate an in-depth understanding of human psychology, including the importance of early relationships, attachment styles, parenting, the impact of adverse childhood experiences, and traumatic events throughout life.</p>	<ul style="list-style-type: none"> • Through your psychotherapeutic work with your patients, psychiatric clinical practice, and engagement in reflective practice develop and deepen your understanding of the meaning of patients' individual experience in the context of their presentation to psychiatric services. 	<p>CbD Psychotherapy supervision notes</p>
	<ul style="list-style-type: none"> • Identify underlying psychological factors in psychiatric presentations by discussing on call cases in supervision. 	<p>CbD</p>
	<ul style="list-style-type: none"> • Undertake clinical experience in a personality disorder complex needs service. 	<p>Supervisor's report</p>
	<ul style="list-style-type: none"> • Through your psychotherapeutic work with your patients and your psychiatric clinical practice, alongside engagement in reflective practice gain experience in understanding patients' personality and how this may mediate other psychiatric disorders. 	<p>CBD ACE Mini-Ace</p>

	<ul style="list-style-type: none"> • Through your psychotherapeutic work with your patients and your psychiatric clinical practice, alongside engagement in reflective practice demonstrate enhanced skills in case formulation including recognising the impact of early life experience on psychiatric disorder and impact of relational factors on care. 	<p>CBD ACE Mini-Ace</p>
	<ul style="list-style-type: none"> • Through your psychotherapeutic work with your patients and your psychiatric clinical practice, alongside engagement in reflective practice develop clinical skills in understanding psychopathology and formulation, to facilitate engagement with patients with a range of moderate to severe personality disorders, who have experienced significant adverse childhood events/trauma. 	<p>CBD ACE Mini-Ace</p>

Demonstrate an appropriate understanding of learning and behavioural stages of human development through the lifespan including awareness of normative as well as variations in presentations, for example with neurodevelopmental conditions and across cultures.		
Demonstrate an appropriate in-depth understanding of social determinants of health including the lived environment, deprivation and disadvantage and the impact these have on the aetiology and presentation of mental disorder across the lifespan.		
Apply knowledge of the pharmacodynamics, pharmacokinetics, efficacy, tolerability, interactions, and short and long-term side effects of medication.		
Receive a full psychiatric history from and perform a Mental State Examination (MSE) on, patients within a range of mental and neurodevelopmental disorders across the lifespan, in routine, urgent and emergency situations incorporating appropriate terminology		
Also assess patients from a range of different cultural, spiritual, and religious backgrounds, including asylum seekers and refugees, and demonstrate an understanding of how protected characteristics may impact on clinical presentation.		

<p>Assess the risk of self-harm, suicide, risk to others as well as other risks, and ensure a safety plan is in place.</p>	<ul style="list-style-type: none"> Through your psychotherapeutic work with your patients and your psychiatric clinical practice, alongside engagement in reflective practice develop an understanding of the dynamics of risk assessment through exploration of psychological factors which influence risk to self and others, including self-harm. 	<p>CbD Psychotherapy supervision notes Psychiatric supervision notes</p>
	<ul style="list-style-type: none"> Through reflective practice in Balint groups, and in psychotherapy and psychiatric supervision, recognise the impact of anxiety elicited by risk on one's self and on teams and how this influences clinical management. 	<p>CbD CbDGA Psychotherapy supervision notes Psychiatric supervision notes</p>
	<ul style="list-style-type: none"> Through your psychotherapeutic work with your patients and your psychiatric clinical practice, alongside engagement in reflective practice, understand and respect patients' defence mechanisms and how these can serve a protective function against risk. 	<p>CbD SAPE</p>
<p>Receive a collateral history from a range of informants involved in patient care.</p>		

Conduct a thorough physical examination, undertaking relevant physical investigations and take responsibility for acting on your findings in a timely fashion.		
Thoroughly assess the general health of your patients, taking into account the interplay between physical health and psychiatric needs, considering nutritional, metabolic, endocrine, and reproductive factors, and the physical impact of substance use and addiction.		
Demonstrate skills in assessing and managing patients with addictions.		
Demonstrate an understanding of the inherent power imbalance between doctor and patient, particularly for those with protected characteristics, which can result in barriers to clinical effectiveness.		
Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism.		
Clearly and concisely present the history, mental state examination, diagnosis and differential diagnosis, and findings of the physical examination using appropriate classification systems to other professionals.		

<p>Use an appropriate formulation framework to devise a safe, systemic, effective, collaborative and co-productive management plan to ensure continuity of care in the immediate, short and longer term.</p>	<ul style="list-style-type: none"> • Through consultation/ treatment with patients and the wider MDT team, develop psychotherapeutic aspects of formulation taking into account patients' life experiences, personality development, and relationship patterns to foster holistic understanding of their difficulties. 	<p>CBD SAPE Mini-ACE Reflective notes.</p>
	<ul style="list-style-type: none"> • Through your psychotherapeutic work with your patients and your psychiatric clinical practice, and in your supervision, demonstrate a developing capacity to incorporate enhanced formulation skills for both patients presenting for psychotherapy and also to patients presenting to psychiatric teams with a range of diagnoses 	<p>Mini-ACE CBD Psychiatric supervision</p>
	<ul style="list-style-type: none"> • Engage in personal and group reflection, and through discussion in supervision, to develop your ability to process the emotional impact of the clinical encounter and projected distress and incorporate this into case formulation. 	<p>Psychotherapy supervision notes Reflective notes CbD CbDGA</p>

	<ul style="list-style-type: none"> Undertake supervised ./ joint assessments 	ACE Mini-ACE
Where appropriate, safely prescribe evidence-based pharmacological treatment referring to relevant guidelines.		
Demonstrate an understanding of how Electro-Convulsive Therapy (ECT) and other physical treatments can be used for the treatment of mental disorders and apply this under supervision.		
Demonstrate appropriate psychotherapeutic capabilities through having delivered treatment in a minimum of two psychotherapeutic modalities over both short and long durations in a suitable setting, under the governance of the Medical Psychotherapy Tutor.	<ul style="list-style-type: none"> Gain further clinical experience in delivering psychodynamic psychotherapy alongside different modalities of individual psychotherapy (CBT, CAT, etc.). 	Psychotherapy supervision CbD SAPE PACE
	<ul style="list-style-type: none"> Co-facilitate a group with an experienced psychotherapist trainer (e.g., MBT group). 	Supervisor's report
	<ul style="list-style-type: none"> Gain clinical experience in skills based or psychoeducation groups (e.g., Emotional Coping Skills (ECS) group; MBT, DBT, etc). 	ACE Mini-ACE
	<ul style="list-style-type: none"> Participate as a member of a reflective team in systemic family therapy. 	CbD Mini-ACE

HLO 2.3: Demonstrate an understanding of the various factors that contribute to complexity and uncertainty within psychiatric practice and the impact that they have on self, patients, carers of all ages, and colleagues.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
2.3 Complexity & Uncertainty	Demonstrate an understanding of unconscious processes, including transference, countertransference, projection and splitting and the impact of these on yourself and others.	<ul style="list-style-type: none"> • Undertake extended closely supervised psychotherapeutic work with a range of patients in different settings. • Shadow a consultant providing consultation to community/in-patient teams about team dynamics and containment of anxiety 	CbD SAPE PACE
	Review treatment and management plans of patients when the outcome is not as expected or hoped for.		
	Understand the limits of your clinical capabilities, seeking timely support and supervision when appropriate.		
	Observe, absorb, contain and reflect on complex clinical/non-clinical situations to develop a balanced response.	<ul style="list-style-type: none"> • Participate in referral meetings to understand the unconscious dynamics around referral processes • Participate in team reflective practice and complex case panels 	DONCS

	Manage increasing levels of uncertainty safely under supervision.		
HLO 3.1: Apply advanced knowledge of relevant legislative frameworks across the UK to safeguard patients.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
3.1 Knowledge of legal and organisational frameworks in your UK jurisdiction	Apply knowledge of the current legislation governing the care and treatment of people with mental disorders.	<ul style="list-style-type: none"> Understand the boundaries of confidentiality in your psychotherapy practice with particular regard to risk and safeguarding and the need to share information as appropriate. 	Psychotherapy supervision notes Psychiatric supervision notes
	Balance the duty of care to the patient and the protection of others with the restriction of human rights when considering the use of legal powers.	<ul style="list-style-type: none"> Understand the boundaries of confidentiality in your psychotherapy practice with particular regard to risk and safeguarding and the need to share information as appropriate. 	Psychotherapy supervision notes Psychiatric supervision notes
	Meet the requirements to apply for relevant statutory approval where appropriate.		

HLO 3.2: Work effectively within the structure and organisation of the NHS, and the wider health and social care landscape.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
<p>3.2 Working within NHS and organisational structures</p>	<p>Demonstrate working knowledge of local health and social care services, national health and care services and regulatory authorities through your interactions with them, both routinely and in unforeseen circumstances.</p>	<ul style="list-style-type: none"> • In your contribution to MDT team discussions show a working knowledge of primary, secondary and tertiary care and other available Psychological therapy provision. • In your written and verbal communications demonstrate the ability to liaise and communicate effectively between psychological therapy services and other health services in primary and secondary care, and the third sector. 	<p>DONCS Psychiatric Supervision notes</p>

HLO 4: Apply core knowledge of mental and physical health promotion and illness prevention for patients and the wider community.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
<p>4.1 Health promotion and illness prevention in community settings</p>	<p>Apply an understanding of the factors contributing to health inequalities, and the social, cultural, spiritual and religious determinants of health.</p>	<ul style="list-style-type: none"> • Through your psychotherapeutic experience with individuals, groups and teams understand the impact of early relationships and trauma on physical well-being and self-care through psychotherapeutic experience with individuals, groups and teams. • Participate in psycho-education with individuals, families or groups about causes of illness, distress and therapeutic methods as appropriate (for example, the role of emotional regulation, thinking patterns, attachment needs and patterns, psychological defences, coping skills etc.) 	<p>Supervision record CbD</p>

	Promote mental well-being and prevention of mental disorders within the context of societal change and social technology, identifying and challenging stigma and discrimination against people experiencing mental disorder.	<ul style="list-style-type: none"> • Through attending training facilitated, or using training resources, developed by people with lived experience appreciate the importance of contributions from people with lived experience in training and developing services delivery through sharing their experience of the effects on mental health on their lives. • Consider undertaking an audit of departmental referrals to identify if any disadvantaged groups are underrepresented and explore ways to promote referrals from these groups. 	Reflective notes Portfolio records.
--	--	--	--

HLO 5: Apply teamworking and core leadership skills to work constructively and collaboratively within the complex health and social care systems that support people with mental disorder.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
5.1 Teamworking	Demonstrate an awareness of how individual personal qualities, emotions and behaviours of both yourself and your team, impact on teamworking and the quality of patient care.	<ul style="list-style-type: none"> • Working within a MDT psychotherapy team develop an understanding of the different therapeutic capabilities and skills of team members and how these are integrated to provide effective and safe psychotherapeutic clinical care. (care pathways) 	DONCS Reflective Notes

	Demonstrate a working knowledge of the roles and responsibilities of, and the interface between, multidisciplinary team members.	<ul style="list-style-type: none"> Develop a working knowledge of how transference, countertransference, and unconscious projective processes can impact on you and other clinicians in the psychotherapy team and that understanding these can help prevent enactments and improve safe compassionate patient care. 	Psychiatric supervision notes
5.2 Leadership	Recognise the leadership skills of others in a range of contexts.	<ul style="list-style-type: none"> Develop observational skills on leadership styles through team meetings, and participation in clinical groups. 	DONCS
	Demonstrate the development and application of your own leadership skills.	<ul style="list-style-type: none"> Consider taking on representative roles for core trainees at trust, regional and RCPsych levels. 	Mini-PAT
	Demonstrate inclusive leadership style and awareness of the impact of hierarchy and power within relationships with patients and colleagues.		

HLO 6: Participate in and promote activity to improve the safety and quality of patient care and clinical outcomes in your psychiatric practice of a person with mental disorder.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
6.1 Patient safety	Ensure patient safety is paramount by understanding the principles and engage with the systems of clinical governance that assure safety and quality of patient care.	<ul style="list-style-type: none"> • Learn about record keeping of process notes and mechanisms for protecting confidentiality of sensitive clinical material while ensuring adequate information sharing to ensure patient safety and joined up care. • Demonstrate an ability to assess and manage risk for patients involved in psychological treatment whilst also maintaining a stance of curiosity about possible underlying reasons for an increase in risk during treatment 	Psychotherapy supervision notes
6.2 Quality improvement	Demonstrate an understanding of the impact on quality improvement activities in improving patient outcomes and system performance.	<ul style="list-style-type: none"> • Seek feedback from patients and analyse results using appropriate tools to improve effectiveness of psychotherapy services, e.g. measures of therapeutic alliance-Session Rating Scale (SRS) 	Add results to portfolio

	Undertake quality improvement activities relevant to your clinical practice.	<ul style="list-style-type: none"> Develop an audit project with psychotherapy team colleagues to examine relevant areas linked to quality improvement, e.g. referral pathways, morbidity of referrals and outcome monitoring 	Add results to portfolio
HLO 7: Identify patients, their families and others from the wider community who may be vulnerable and work collaboratively in safeguarding their welfare.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
7.1 Safeguarding	Demonstrate knowledge of the individual and systemic factors contributing to the vulnerabilities and safeguarding concerns in people of all ages.	<ul style="list-style-type: none"> Through your psychotherapeutic clinical work learn about the impact of trauma and its enduring effects on patient vulnerabilities and the interface with safeguarding and the boundaries of confidentiality. 	CbD Reflective notes
	Work within legislative frameworks and local procedures to raise and report safeguarding and welfare concerns in a timely manner and contribute to safeguarding processes.		

HLO 8.1: Plan and provide effective education and training in clinical, academic and relevant multi-disciplinary settings.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
8.1 Education & Training	Apply the principles of lifelong learning to your own learning and teaching of others, including the principles of feedback.	<ul style="list-style-type: none"> Participate in departmental CPD and postgraduate educational programmes. 	AOT JCP
		<ul style="list-style-type: none"> After completing therapy, present your psychotherapy cases in post graduate teaching to share learning, knowledge, skills and to stimulate interest in psychotherapy 	AOT
		<ul style="list-style-type: none"> Consider developing or participating in local training initiatives for other MDT colleagues e.g. teaching session on medication for non-medical colleagues, or understanding psychiatric nosology. 	Portfolio records AOT Mini-PAT
		<ul style="list-style-type: none"> Become familiar with recommended literature from supervision about psychotherapy and consider presenting this learning at a journal club. 	AOT

HLO 8.2: Demonstrate effective supervision and mentoring skills as essential aspects of education to promote safe and effective learning environments.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
8.2 Supervision	Actively participate in clinical, psychiatric and educational supervision.		
	Consider how unconscious processes are managed effectively and safely to help with ongoing clinical care via supervision and reflective practice.	<ul style="list-style-type: none"> Develop an understanding of how unconscious parallel processes of patient- therapist relationship may be mirrored in supervisee-supervisor relationship. 	Psychotherapy/Psychiatric Supervision. Reflective notes.
HLO 9: Apply an up-to-date knowledge of research methodology, critical appraisal and best practice guidance to your clinical practice.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
9.1 Undertaking research and critical appraisal	Demonstrate knowledge of ethical frameworks and research methodologies when carrying out or appraising research.	<ul style="list-style-type: none"> Complete MRCPsych paper B. Participate in Journal club. 	Exam result. JC Attendance record
	Discuss the differences between research, audit, and quality improvement and how these approaches can complement each other.	<ul style="list-style-type: none"> Conduct an audit or QI project and present to relevant team. 	Written report Presentation of completed audit or QI project. DONCs by supervisor.

	<p>Critically appraise research and understand generalisability of findings to different groups in the implementation of research findings in your clinical practice.</p>	<ul style="list-style-type: none"> • Participate in journal clubs, presenting and critiquing quantitative and qualitative research papers in psychotherapy, to learn strengths and weaknesses of research methodology in psychotherapy. 	<p>JC Attendance record. JCP</p>
	<p>Develop or participate in a research project where relevant research support is available.</p>	<ul style="list-style-type: none"> • Complete/continue with your research project with the research team. • Contribute to data collection or analysis of data for a research project. • Take part in qualitative psychotherapy research in a rea of interest. 	<p>Supervisor report Email from research supervisor. Presentation/write up of research project.</p>