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Professional Doctorates for Practitioner Psychologists: Understanding the territory and its impact on programme development

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Abstract

This paper aims to articulate the multi-regulatory and complex territory that programme developers of professional doctorates are required to navigate, and, using examples from Health Psychology and Sport and Exercise Psychology, discusses the impact of this territory on programme development. ‘Practitioner Psychologist’ is a legally protected title for use by those listed on the UK’s Health and Care Professions Council (HCPC) register of practitioner psychologists. Achieving registration involves undergoing training to meet the HCPC prescribed standards, with the professional practitioner doctorate representing a viable training vehicle. The paper makes critical comparison between the HCPC standard-driven research and practice competences required of psychology professionals in a professional doctorate framework, versus traditional professional doctorates that provide a platform for qualified ‘in situ’ professionals to undertake research that problem solves and generates real-world application. For programme developers, the paper outlines a number of key considerations, including the importance of considering the territorial compatibility between the professional body requirements and the associated university framework to develop a viable product. The paper also provides some useful and informative suggestions for programme developers who may encounter similar territorial challenges, and is of relevance to an international audience interested in programme design for certified professional practitioners.

Keywords: professional doctorates, practitioner psychologists, programme development
Introduction

This paper aims to articulate the multi-regulatory and therefore complex territory that programme developers of professional doctorates for practitioner psychologists are required to navigate, using the unique case of chartered psychology in the UK. Secondly, the paper discusses the impact of this territory on programme development, and the associated elements of teaching, supervision and assessment. As the paper unfolds, the paper seeks to provide some critical comparison between the territory of ‘traditional’ professional doctorate qualifications and practitioner doctorates, using examples from those developed for trainee psychology practitioners.

In the UK, the British Psychological Society (BPS) is the representative professional body responsible for the promotion of excellence and ethical practice in the science, education and application of psychology and psychologists. The title of Chartered Psychologist (C.Psychol.) is conferred, legally recognized and regulated by the BPS and reflects the highest standard of psychological knowledge and expertise in its members. Since 2009, the regulation of domain specific titles of psychologists has come under the jurisdiction of the Health and Care Professions Council (HCPC). In acting as the competent authority, the HCPC hold a register of practitioner psychologists across the various domains of the discipline (e.g. Clinical-Neuro Psychology, Counselling Psychology, Educational Psychology, Forensic Psychology, Occupational Psychology, Health Psychology and Sport and Exercise Psychology). These registrants have undergone training to meet the HCPC prescribed standards and are legally permitted to use the generic protected title of ‘Practitioner Psychologist’ and their own domain specific derivative (e.g. Health Psychologist, Sport and Exercise Psychologist). This ensures that in accessing the service of a practitioner psychologist, members of the public are employing
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individuals who are fit to practise by virtue of being bound by the professional standards and codes of ethics of competent authorities and have undergone the requisite training.

The British Psychological Society (BPS) is responsible for the training of psychologists in the UK. In this role, it accredits undergraduate, masters and doctoral programmes, which, upon their sequential completion, produces eligibility for ‘graduates’ to apply to the HCPC register. The BPS has established doctoral level standards for a Higher Education Institution (HEI) who wish to develop their own programme of training for practitioner psychologists. The professional doctorate represents a qualification, which, by meeting the HCPC and BPS’ own standards acts a route to practitioner psychologist registration via a doctorate award.

The professional doctorate territory for practitioner psychologists: Regulation and internationalisation

The HCPC standards of proficiency require that HCPC approved programme provision must enable a trainee to meet generic competencies relating to i) professional skills (e.g. ethics of practice, teaching and training, research, consultancy), profession-specific standards (e.g. being able to conduct consultancy), and domain-specific standards (e.g. Sport and Exercise Psychologists i.e., understand psychological skills such as stress and emotion management, and Health Psychologists i.e., understand the epidemiology of health and illness). In relation to understanding the territory of professional doctorates in psychology, the HCPC and BPS standards of proficiency must be palpably evident within the designed curriculum to achieve HCPC approval and BPS accreditation, in addition to the doctoral award conferred by the HEI.

The regulation of professional practitioner doctorates for psychologists in the UK requires meeting two sets of accrediting (BPS) and approving (HCPC) standards, as opposed to
programmes in other countries that have just one professional and statutory regulatory body (PSRB). On an international stage (e.g. the UK, US, Canada, Australia, but also elsewhere), professional practitioner doctorates have emerged across a number of fields, including psychology, in the past 10 to 15 years. An international search for professional practitioner doctorate programmes in psychology shows that there are a significant and growing number of related courses in the UK, which span a number of psychological domains (e.g. counselling, clinical-neuro, occupational, educational, forensic health and sport). From an international perspective, it is striking that while there are a good number of professional practitioner doctorate psychology programmes in North America (and some in Australasia) they tend to be located in the clinical psychology and counselling domains. As with the UK provision, these international courses base themselves on the distinct features of real-world training opportunities and required field experience under supervision, and many have accreditation with the relevant professional body, such as the American Psychological Association (APA) and the Australian Psychology Accreditation Council (APAC).

While intending to confirm the highest level of achievement (D level), international programme provision reflects no real consensus about what a professional doctorate contains or how D level is demonstrated. Research is often the obvious and common underpinning of most professional practice doctorates, yet how much research, and then how much of this is original research does vary quite considerably. Some programmes focus exclusively on research, normally requiring the research output to demonstrate the originality typical of successful doctoral study. Others, as in the case of professional practitioner doctorates, utilise both research and practice components, primarily because for some fields, like practitioner psychology, a doctoral level qualification is now the required or normative degree for a person to enter a
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particular field of professional practice. Professional doctorates like this involve practicum training, which enables professionals to serve their clients more effectively, meet new and more complex ‘real world’ needs along the way and even transform the organisations and settings in which they work. While such changes are a product of good applied practice they can be enhanced through original and high quality research that generates new knowledge about a real world problem in the workplace or how to practice more effectively.

One of the most common distinctions between HCPC and BPS standards of proficiency lies in the ability of the psychologist to use and do research. More specifically, HCPC standards place emphasis on the competence of the registrant practitioner psychologist to understand the key concepts of the knowledge base relevant to their profession and to draw on appropriate knowledge and skills to inform practice. BPS standards require these competencies, but also the ability of a chartered psychologist to actively research and develop new and existing psychological methods, concepts, models, theories and instruments in psychology. This necessitates the ‘doing’ of research’, which for the practitioner involves engaging in both practice-informed research and research-informed practice. This is more than just something a Psychologist must do to justify chartered psychologist status. Moreover, it is arguably the case that doing research improves the practitioner psychologists’ ability to understand and draw on its findings, and consequentially produces a more competent practitioner. The suggestion made by some that research has no place in a qualification for practitioners is, on this basis, flawed. Its presence in professional doctorates is not solely due to the fact that the HEI or PSRB says it has to be there to meet its own standards. The competence of the practitioner in being able to use, apply but also conduct research that generates new knowledge is fundamental to what research informed practice and practice informed research is all about.
Practitioner versus traditional professional doctorates

Numerous authors have documented the motivations of students in pursuing a professional doctorate (e.g. Wellington & Sykes, 2006), the differences between professional doctorates and traditional research-based PhDs (e.g. Neumann, 2005), and the rise in professional doctorates as a better route for developing researching professionals (e.g. Fenge, 2009; Wildy, Penden & Chan, 2014). In making the case, these studies are common in their conceptualisation of professional doctorate programmes. Specifically, they aim to enable existing ‘in-situ’ industry professionals, typically educationalists, managers, lawyers, nurses and creative artists who have identified an authentic problem in their particular domain, to design and undertake a programme of work-based research. The in-situ’ industry professionals mentioned are typically mid-career professionals, rather than those who are just embarking on their professional careers. The translation of research findings professionally informs and has organisational impact on the real world in which the industrialist practitioner operates. Many professional doctorates undergo development under the regulatory governance of postgraduate research (PGR) regulations, where there are no constraints placed upon programme providers by competent authorities (e.g. HCPC) or professional bodies (e.g. BPS). Such programmes are undertaken as a career ‘luxury’ for many individuals rather than a necessity, and often represent a laudable attempt by candidates to have high levels of expertise recognised to enhance their status and autonomy, often referred to as ‘credential creep’ (La Belle, 2004), as opposed to being pre-requisites for practice in that particular discipline.

Costley and Lester (2012) identify three generations of professional doctorates. Firstly, profession specific doctorates undertaken by early career practitioners for entry into an occupation. Secondly, doctorates undertaken by practicing professionals looking to engage in
research and development in their workplace, and thirdly, work based practitioner doctorates typically undertaken by mid / later career practitioners who self-determine and direct their own individual programme of learning and development. The function of second and third generation doctorates satisfies the aim of ‘professional extension’, where existing credentials, including substantial experience, knowledge, skills and expertise, underpinning an already well-carved out role and career, are further enhanced i.e. ‘crept’ upwards. In psychology, professional doctorates fit most closely with the first generation classification, as they are normally undertaken by early career practitioners for occupational entry. BPS accredited and HCPC approved programmes in this domain are therefore providing the training required to acquire legal status as a chartered and practitioner psychologist. In this context, ‘credential creep’ could equally well be applied to first generation doctorates requiring increasingly higher-level qualifications to enter professions, which may incidentally then create a disincentive to engage in traditional university PhD programmes for extension. For those wishing to train to become a BPS accredited and HCPC registered practitioner psychologist, a traditional research PhD is not a viable route, so offers no incentive against the practitioner doctorate that offers the ‘trainee’ both a doctoral award and eligibility to apply for chartered and HCPC registered status.

The territory is therefore rather different for trainee practitioner psychologists. Unlike in other domains where professional doctorates might be undertaken by those already employed and qualified to work, psychologists undertaking professional doctorates are by definition ‘not qualified’ and are in training. The emphasis here is on an education and training process that develops ‘service providers’ and helps trainee practitioner psychologists develop the required knowledge, skills, and characteristics needed to meet the needs of clients. In consultancy settings for example, this training includes, as an active ingredient of service delivery, the interventions
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practitioners employ to help service users, but also the development of the person (practitioner) employing those interventions. This recognises that the practitioner, and the person behind them, represents an equally, if not more important common ingredient of service delivery that is central to effective practice. (see Tod, Hutter, & Eubank, 2017).

As such, the key territorial distinction here is that unlike other professional doctorates, professional doctorates for practitioner psychologists stand on the foundation of practitioner competence development, which involves becoming a practitioner psychologist through training. This training is developmental and competence based, and the training base cannot be confined to research. This is in contrast to professional doctorates in other domains that are completely unconstrained in this regard to provide a D-level platform for research with real-world application to occur. This has implications for the way in which professional doctorates for practitioner psychologists exist, and programme developers are required to consider carefully the multiple regulations, frameworks and standards that parameterise, but also constrain, the programme provision.

Designing a Professional Doctorate Programme: Navigating the Complex Territory

For many professional doctorate programme developers, the only territorial consideration is the relevant HEI professional doctorate framework, and how best to design a programme that fits with it. In the case of practitioner psychology professional doctorates, this remains no less of a consideration, but compounded by the need to align to PSRB and HEI requirements. Of equal importance is the HEI framework and whether it is rigid and constraining or offers some flexibility to ‘fit’ the programme to the PSRB criteria while at the same time achieving successful university validation. Of further interest is whether the HEI professional doctorate
framework resides under the postgraduate taught (PGT) or postgraduate research (PGR) academic regulations and what the relative impact of that might be on programme development. The regulatory governance of professional doctorates and where they best reside is an interesting question that, due to its pros and cons, will probably divide opinion. Armsby et al (2017) advocate the benefits of conducting practitioner-driven research, but also highlight the tensions that often exist in a HEI in their willingness to recognize the value of production of knowledge through practice and then to provide the necessary infrastructure, framework and resources, including the importance of skilled research and practice supervision, that this entails. Some HEI’s locate professional doctorate programmes in a PGT residence, which certainly creates ongoing quality assurance challenges for programme developers and leaders in relation to, for example, recruitment, delivery, supervision, progression and annual monitoring of provision that operates in a non-standard academic calendar timeline. To provide a quality learning environment to develop professionals, programme leaders of professional doctorates do require some academic freedom and space to deliver their programme learning outcomes in a way that maximises the quality of the trainee’s experience and meets the relevant PSRB requirements. Programme governance by PGT regulations will be a ‘comfortable enough’ terra firma for professional doctorates to reside and thrive upon so long as the seeming obsession of the HEI sector to evoke a rising tide of chackling policies and protocols aimed to generate cross-programme conformity and alignment witnessed at undergraduate level doesn’t begin to contaminate level 8 provision and constrain the limits of academic freedom unnecessarily. That said there is sufficient empirical and case study-based research in the practitioner psychologist development literature (e.g. McEwan & Tod, 2014; Eubank, 2016) for a professional doctorate to live equally as well, if not more comfortably, within a PGR regulated territory. If any of the
academic constraints and concerns outlined above came into being, then a move into the more compatible PGR home alongside ‘traditional’ PhDs would certainly be something to advocate.

For professional doctorates that reside under HEI PGT regulations, the programme structure and curriculum design is inevitably steered by a professional doctorate framework. In effect, this creates a ‘third territory’ and set of regulations to adhere to for HEI validation. In a modular credit based structure, the challenge for the programme developer lies in how best to design the programme around these constraints and still meet the PSRB requirements. The concern here is that programmes design becomes too driven by the HEI framework rather than the needs of the trainee, yet it would have little point if the resultant product represented a ‘bad structure’ from a PSRB perspective, which would not then lead to the programme accreditation and approval required to generate appropriately qualified practitioners. In essence, this is a bad start and risks a dead end. To meet the BPS and HCPC standards but also be flexible in meeting trainee need, the ‘ideal’ professional doctorate taught model would arguably be one where a single ‘big’ module housed all the training required. Unfortunately, in the authors view PGT regulations rarely afford the programme developer this opportunity, and instead might provide a constraining modular and credit structure that may be some distance away from a position of ‘best fit’, and in some cases might not fit at all! For programme developers, considerable time will likely be devoted to this big question of territorial compatibility.

While the traditional PhD is not credit rated and therefore does not necessitate a modular structure or the assessment of module learning outcomes, it is common for research PhD’s to require students to undertake recognised research training, which is normally represented in the study of a university programme in D level research methods. In contrast, professional doctorates operating under PGT frameworks are commonly referred to as ‘taught doctorates’, as they are
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credit rated and have both programme and module level learning outcomes that need to be assessed. While there is certainly a greater taught element compared to a PGR PhD, the term ‘taught’ somewhat misrepresents the reality of the student experience, in that a substantial element of the programme requires independent research and applied practice enquiry and writing to create new knowledge through research and practice (Lunt, 2002).

The UK Council for Graduate Education (UKCGE) have previously recognised that learning on a professional doctorate may be best facilitated by going beyond conventional teaching and utilising other forms of directed and guided study (UKCGE, 2018). The QAA report on doctoral degree characteristics (QAA, 2015) articulates that “professional and practice-based doctorates usually contain taught elements with significant lecture and seminar content, but final award of the doctorate is based on a supervised research project, projects or portfolio” (QAA, 2015, pp. 9). While it is contended that practitioner doctorates developed in psychology are much more than just a research project, it is advocated that some taught content serves to facilitate the delivery of programme content and support the learning experiences of students. What is also clear is that taught content can be appropriately accommodated by PGT or PGR regulated doctorates. Furthermore, both PGR and PGT provision do enable the QAA’s doctoral level qualification descriptors (summarized as the i) creation and interpretation of new knowledge, ii) systematic acquisition and understanding of a substantial body of knowledge, iii) ability to conceptualise, design and implement a project for the generation of new knowledge, iv) understand applicable techniques for research and advanced academic enquiry, all at the forefront of a discipline) to be achieved. In considering the best regulatory territory for practice-base programmes, the QAA has expanded its list and description of doctoral programme types and published new documentation to accommodate the development of professional doctorates
in its various forms. Given this, a critical question for HEI’s is whether PGR/PGT frameworks are, or will, remain relevant to accommodate expansion in practice-based D level programmes, and whether another category (post graduate practice - PGP) is needed to capture the nature of, and the distinction between, taught, research and practice dominant programme provision?

Where the HEI framework fits relatively well with what practitioners need to do in their training, this affords a programme structure that enables the required PSRB standards to be attained in a congruent and compatible fashion. ‘Clinging’ to a simple ‘plan, do, reflect’ programme framework, irrespective of whether a professional doctorate is research or research and practice based, it makes perfect sense for some form of ‘planning’ to be completed in the qualification at the start. The trainee must plan, and then critically evaluate, how their competences (in consultancy, teaching and training, professional skills and research for practitioner psychologists) will develop on the programme. From this point, it would be useful to have a programme structure that affords the opportunity to have a large practice module housing all the ‘doing’ and a reflection module that runs alongside it, in parallel, not in sequence. This allows for reflection in, and on, practice to occur in an integrated ‘real time’ fashion, with meta-reflection occurring post practice to support both the doing of, and reflection on, trainee practitioner learning experiences. In essence, the plan, do, reflect processes can be construed as ‘practitioner research’ e.g. Costley and Armsby (2007).

While some taught delivery about how to do consultancy, teaching and training, research and professional skills is essential to trainee development (Tod, 2010), due to an absence of a credit based and modular framework, PGR regulations are arguably more accommodating with regard to what type of, and how much, taught delivery there is. Taught contact can be, and often is, included in response to student need, but is not normally modular or too tightly prescribed or
monitored in relation to contact time. Similarly, doctoral assessment under PGR regulations typically take the form of a research proposal followed by an ‘end product’ thesis and viva, assessed by an external examiner. In a modular structure, the need to have learning outcomes that are ‘taught, practiced and assessed’ is different territory, and governed by taught programme teaching and assessment regulations that dictate how and what is done. In this regard, it is useful for professional doctorates to be sufficiently flexible with regard to teaching and assessment strategy.

**Development of Professional Doctorates for Practitioner Psychologists**

The need for professional doctorates to accommodate both the BPS and HCPC requirements for practitioner psychologists demands a curriculum that ‘goes beyond the norm’ and not solely represented by D-level research, but also D-level practice. In the psychology context, ‘practice’ is best conceptualised as the ‘doing’ of applied work (e.g. consultancy), part of which is be able to carry out and understand research that will inform it (Keegan, 2015). This is an important position that helps to distinguish the role of the professional doctorate for practitioner psychologists in training from that of the ‘research professional’ conceived in most other professional doctorate programmes.

In developing professional doctorate programmes for practitioners, there are a number of key resource considerations. Expertise comes from appropriately qualified and research-active staff (in our case Health, and Sport and Exercise Psychologists) who offer a range of applied perspectives on, and approaches to, professional practice. We argue for programme teaching teams with research profiles, and those who have one in the topic of practitioner education, training and professional development, and have published and disseminated widely in this area,
are an added bonus! This enables a research led understanding of the learning experiences of trainees and their practitioner development, and informs the teaching, research and supervision support given to students on the programme. Naturally, it is key that programme staff have expertise in, for example, particular consultancy philosophies / approaches and research areas / methods, but collectively they provide students with a broad and diverse range of perspectives to draw upon and use as they develop. Thus, staff expertise is ‘exploited’ more broadly to provide a high quality trainee learning experience and support the delivery of the programme aims and learning outcomes.

Psychology is one of the few professional domains to base its professional doctorate training curriculum on a competence-based model, necessitated by the PSRB standards of practice that must be demonstrated to a threshold level for psychologists to be deemed fit to practice (Eubank & Cain, 2012). In its application to practitioner psychology, *competence* is best described as our professional ability to engage in habitual and judicious evidenced based practice that is consistent with our education and training (Fletcher & Maher, 2014). A relevant question to consider is how well the particular competence models used by BPS and HCPC support doctoral-level development, or whether there is a tendency for the doctoral programme to be constrained by having to meet lower-level or more restrictive professional criteria? The discussion that follows illustrates how the professional standards criteria *do* require doctoral levelness (and therefore map well to a professional doctorate), and how the programme can be designed to facilitate doctoral level development in trainees. That said, it is also important to recognize that the competence based model used in psychology is based on demonstrating D level to a minimum threshold standard. The notion of professional development as a life-long process means that helping the practitioner learn and develop competence draws on the principle
of expertise. In developing ‘expert practitioners’, the ongoing requirements for sustained effective sport psychology practice can then be derived from the practice of experts, not just those who have reached the minimum standards of competence.

In the competence ‘model’ adopted by psychology, research does have its important place, where research competences are evident through the completion of systematic reviews and empirical studies that inform applied psychology practice. Like most other professional doctorates, trainees must demonstrate the ability to conceptualise, design and conduct independent original research to extend the forefront of the discipline and be of a quality to satisfy peer review and merit publication. However, other professional standards competences related to the ‘doing of practice’ must be documented through, for example, consultancy case studies and reflections on applied practice, and require the same evidence of ‘doctoral-ness’ in their presentation. This system of training produces a balance and integration, not separation, between research and practice, where one informs the other in a reciprocal manner, and the assessment and representation of the doctoral students’ work is evident within a portfolio of competence rather than a thesis in preparation for viva. This represents a qualification structure and content that ‘hit the marks’ in providing professional training for professional competence (Eubank & Hudson, 2013) and satisfies the registered practitioner motivations of students pursuing a professional doctorate in, and outside, psychology.

In developing a practitioner doctorate for practitioner psychologists, the standards set by the PSRB define the research, teaching and training, consultancy and professional skills competencies the trainee needs to demonstrate, which, from a teaching / supervision, learning and assessment perspective must therefore be ‘designed in’. Fundamentally, these enable the trainee to do applied practice and research that is rigorous, independent, original, informed and
critical, both in its conceptualisation and evaluation of it. For example, to demonstrate competent professional skills, the trainee practitioner psychologists must demonstrate they can comply with the standards of conduct, performance and ethics that govern their work. This involves the need to develop and enhance themselves as professional applied psychologists and incorporate best practice into what they do. They also need to assure the integrity of themselves and the discipline, the privileges and responsibilities of the profession and the dignity, welfare, rights and privacy of their service users by operating within professional boundaries, and to work effectively with other related professionals and adapt practice to different organizational contexts of service delivery. To demonstrate competence in consultancy, the trainee must show an ability to identify client and service user need and assess the feasibility of consultancy. They also need to be able to determine the aims of consultancy and plan the objectives of interventions, establish, develop and maintain working relationships with clients, conduct consultancy by implementing planned interventions, monitor and review the implementation of consultancy, and implement and assess evaluation of their consultancy impact. To evidence competence in research, the trainee must have an ability to develop, design, conduct, analyze and evaluate their own original research to inform their applied practice, or to use research to solve a real world problem they have encountered. Finally, competence in teaching and training involves the ability to promote psychology services and benefits to service users in the relevant domain, to feedback information and provide advice and guidance to meet individual client needs, and prepare and present information to individuals, groups and organizations on the processes and outcomes of psychological interventions.

What is clear is that a significant amount of competence demonstration has to be in evidence, and programme developers must consider how to create an optimum learning
environment that will enable support for competence development through the teaching and supervision provided. In comparison to traditional PhDs, practitioner psychologist professional doctorate supervision and teaching must go beyond discussion about the research, and learning about the associated research methods, although this is still important. The trainee is doing practice under supervision, so the key competencies described above actually underpin many of the module leaning outcomes for the ‘practicum’ component of the doctorate. In addition, taught sessions can be most powerful and impactful when they are student owned and led, where experiences that have taken place across the learning outcomes are presented as case conferences to facilitate review and reflection on applied practice.

It is worth considering more widely the marriage between the specific competence based approached adopted by this and other professional doctorates in psychology and the general competency approach often used in higher education, including how this informs the positioning and shaping of the curriculum provision. In a situation where PSRB prescribes standards that need demonstrating, and the HEI learning outcomes to achieve, a competence approach provides a strong and convenient marriage. The benefit of a competence-based approach is that it creates a win-win for employer (service-use) and employee (trainee), in that they generate clear and objective role expectations, performance evaluation, and means of improvement for both parties. For curriculum design and delivery, the teaching, practising and assessing of learning through competence-based outcomes reflects a product based approach, with assessment based on the achievement of the outcomes. That said it is important to recognize that a competence based approach does not describe the learning process the individual has undertaken, and that even if the curriculum is, by necessity, product based, it has to create the opportunity to connect, and not divorce, the product from the process. Here, the power of the learning environment lies in the
interaction between trainees and teachers / supervisors in teasing out the ways in which competence has developed. This is particularly important in psychology, given that practitioners are not robots or clones of their supervisor, but rather individual beings who adopt differing approaches and toolkits to demonstrate competence. For example, a humanistic as opposed to cognitive behavioural oriented practitioner psychologist can both be competent in the same standard, but be different in the competencies they use within their professional practice process to achieve the same end product.

In its development, we argue for a professional doctorate for practitioners that enables the trainee to develop their ability to reflect and ‘meta-reflect’ on their personal development and the decisions and choices they have made during their training. For practitioner psychologists there is a great deal to learn from engaging in deep and meaningful reflection ‘on action’ that considers how they feel about the way they practice and what sense they can make of how they do it. Here, it is important to connect the competencies under development to the reflection that takes place about them. In other words, good reflection on professional practice forms an integral and career long component of a practitioner’s self-directed learning, and for the trainee it provides, in itself, a key source of competency development. For example, trainees in psychology reflect on the ethical scenarios they have encountered in practice, and the decisions they have made about how to enact the ethical code of conduct to which they are duty-bound. They also reflect extensively on their consultancy and teaching and training activity in terms of the process they have undertaken, the model of approach they have used and the philosophical assumptions that underpin their own practice. Exploring through reflection whether their approach is effective and congruent to their own core beliefs and values (and resultant professional practice philosophy) ensures that practitioners remain self-aware of how and why
what they do works when working with clients and other stakeholders. Reflection is also important for research activity. One of the outputs of good reflection on practice is its ability to inform salient research questions. Scant or non-existent reflection on practice is unlikely to ensure that the real-world questions that require an answer are as identifiable, if at all. Secondly, reflection on the research undertaken is important to ensure that it effectively informs practice, and professional doctorate trainees undertake this throughout their study to maximise the impact of research on their own and others practice. We argue that reflection, in and of itself, is enriched not only by the reflector but also with reference to the reflections of others, which is often found in the extant professional practice literature base. Thirdly, reflection can occur ‘on and in action’ through the research methodology. A clear example of this can be seen in action research, where a cycle of ‘plan, act, observe and reflect’ is used to progressively increase the practitioner-researchers knowledge of the original question to then inform a solution and affect and enact change.

Demonstrating professional development through reflection across all the relevant competencies forms a key activity in the teaching and supervision sessions on professional doctorate programmes. It is important that reflection forms part of the taught programme, given that reflective practice and being able to do it well is, in itself, a professional skill. Much has been written about reflective practice for practitioner psychologists (e.g. Knowles et al., 2014). What is important for the trainee is that they are able to use a model of reflection to describe the work they have engaged in, what happened, what they felt about it, what sense they made of it and what they learned from it. This encourages deep and structured levels of reflection beyond mere description of an event, and encourages meta-reflection that usefully and constructively communicates trainee experiences and their reaction to significant events that have occurred
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throughout the professional training period (e.g. McCormick & Meijen, 2015; Woodcock et al., 2008).

The supervisor also has a key role in facilitating trainee reflection in the way they pose questions in their supervisory encounters, and they encourage their trainee to reflect on their learning and practice and to engage in creativity, problem solving and the integration of theory into practice (e.g. Hutter et al, 2015, 2016). Once the supervisor has helped the trainee to prepare and review the initial plan of training at the outset of the programme, their main role is then to supervise practice. This involves providing the trainee with information relevant to their training, listening to their views and concerns regarding their work in progress to offer appropriate advice, giving guidance on opportunities relevant to the satisfactory completion of the key competencies and to observe their trainee working in a practitioner situation. The conclusion reached is that the generic role fulfilled by the practitioner psychologist supervisor is fundamentally similar to that of a research PhD director of studies, just in a professional practice context. However, the practitioner psychologist in training has to demonstrate that they can operate to an ethical and professional standard across teaching, consultancy and research settings, so competently supervising this much broader context is much more complex and challenging (Eubank, 2013c; Forshaw, 2006a; Lafferty & Eubank, 2013). This is evident in the requirements for trainee practitioner psychologists to be under the supervision of a HCPC registered psychologists in the relevant domain of study, not simply someone who has experience of supervising to D level. Supervisors also need to maintain their status as practitioners with HCPC. In essence, supervisors are supervising doctoral level research and applied practice. A clear distinction is made, and given not all academics in psychology are HCPC registered this is an important resource consideration for programme developers.
To demonstrate competence in consultancy, teaching and training, and associated professional skills, the assessment design a series of doctoral level case studies is recommended as a good output. These represent examples of the trainee’s work with different clients, and in considering their practitioner role and contribution in helping the client, draw on appropriate reference to ethical professional standards and the relevant professional practice literature that has informed their consultancy decisions. A further case study may involve submitting a contract the trainee negotiated and constructed with the client, along with the final report/recommendations submitted to the client on completion of the consultancy / contract research. This also includes feedback from the client on the report received. Finally, a Teaching and Training case study, which describes how the training needs of the client group where assessed, how the training programme structure, content and appropriate materials where selected and how learning outcomes of the training programme where assessed. Synthesis to current learning / teaching theory and how this informed the subsequent programme design can be used, with the trainee drawing on different methods of feedback to provide critical evaluation of the teaching programme described.

To demonstrate research competence, a systematic review and empirical papers may be key considerations of the programme’s assessment strategy. By conducting novel research, submission to the journal is expected, with the crucial criterion for success being that the work is judged to be of publishable quality, and published outputs are a desirable ‘end-product’ for both the trainee and their supervisor. To accompany these research products, a reflective commentary on the research process is recommended. The aim of this work is to demonstrate that the trainee has learned about the research process, reflected on that learning, and can show ‘scaffolded’ progression from the start to finish of the process.
Returning to the idea that ongoing requirements for competent psychologists can be derived from the practice of experts, we have learnt (from those who reside in this career phase) that experts possess an awareness of self that defines how they must ‘be’ in the applied environment and influences the judgements and decisions they make in professional practice. Put simply, the psychologist themselves are a key intervention ‘tool’ in their own service delivery. Self-exploration of ‘who you are’ as a psychologist, commonly referred to as ‘practitioner identity’ (Tod, Hutter and Eubank, 2017) requires time and attention and is a personal and evolving activity. It involves meaningful dialogue about how personal qualities, core beliefs and values help management of self in the work context and resolve the difficult challenges encountered in the practice territory. This development is important ‘work in progress’ across the career span, and while the need for trainees to ‘contribute to the continuing development of self as a professional applied psychologist’ is explicit as a standard within the disciplines competence model, it is not explicitly documented how this important practitioner development is best done. This is one example where the development of competence is open to interpretation, and where training providers and supervisors need to be ‘up to speed’ with what this means, and what is required. Put simply, some competence requirements are more objective and transparent than others, and in providing guidance to professional doctorate developers, trainees and supervisors it is important that subjectivity avoids missing something important in the development of expert practitioners, both during and beyond the qualification. While practitioner identity is fundamental to the professional training of a psychologist, it is also likely to be important in other domains, and therefore a relevant consideration for the wider professional doctorate community.
Conclusion

The traditional professional doctorate is best clarified as a qualification that facilitates career progression and development through the advancement of professional practice via the development of research professionals. In contrast, the professional doctorate for practitioners, psychologist or otherwise, has a similar, but bigger specification above and beyond traditional professional doctorates, where students are developing into practitioner-researchers through immersion in practice informed research and researched informed practice, but also training to become competent practitioners. The creation of a professional doctorate programme of this nature, is, by definition, driven by complex PSRB requirements within a PGT HEI regulatory framework. This requires the programme developer to have expert knowledge of the programme validation process, the salient QAA and HEI regulations, the PSRB standards, and then a clear vision and motivation as to how to translate this knowledge into an ‘accredited and approved’ programme that is, in turn, a good experience for the students undertaking it.

In articulating the multi-regulatory and complex territory that programme developers of professional doctorates for practitioner psychologists are required to navigate, this paper demonstrates how the professional doctorate can be an effective vehicle for the professional training of psychologists. Its component parts are determined by the standards set by the competent PSRB authorities (HCPC and BPS), which require the vehicle’s specification to be loaded with features that reflect the competences required of psychology professionals. We have argued that the professional doctorate for practitioner psychologists has a different specification from both traditional research-based PhDs and traditional professional doctorates. In building a vehicle that is fully equipped, the psychology practitioner professional doctorate has to be able to train and develop a research and practice skilled professional who has the generic, profession-
specific and domain-specific standards the competent authorities require for them to work independently on the open road, with professional accreditation being paramount to the training process.

Before reaching the HEI production line, there are a number of key considerations for the programme design team. Where programme development is constrained, by the university’s own professional doctorate framework, this requires very careful consideration of the territorial compatibility between the HEI and professional body regulations to ensure the end-result is not a flawed vehicle that fails to work. In providing examples from practitioner doctorates in psychology, personal experiences of this territorial impact on the decisions taken about, for example, the design of the programme are given. The paper provides some useful and informative suggestions for programme developers who may encounter similar territorial challenges, and is of interest to an international audience interested in programme design for certified professionals in their respective fields.

The paper offers a number of recommendations for programme developers. Firstly, there is great value for the professionalization and advancement of the psychology profession to have programmes that are accredited by the relevant PSRB, and it is advocated that existing and future programmes across the international spectrum pursue such ‘kite-marking’ for their programme provision by working with appropriate professional organisations / bodies. Secondly, through HE collaboration and working alongside relevant professional bodies, there is also value in having more consistency across programmes in the balance between research and practice content, with emphasis on the ability of the research to be original and generate knowledge with real world impact that informs the applied practice of practitioner psychologists. Thirdly, programme developers are encouraged (if the opportunity is there given the influence of HE in curriculum
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design) to consider whether professional practitioner doctorates are best located under the governance of postgraduate taught or postgraduate research regulations. It is then apposite to make best of any flexibility afforded by the resident professional doctorate framework and design the programme as much as possible from a ‘quality of student experience’ perspective.

Fourthly, based on premise that it can support the development of situated practice, consider utilising a ‘plan, do, reflect’ programme framework, which also ensures that reflection on practice and the teaching and supervision of it is a central theme in supporting the practitioner’s development. Fifthly, make as much use of staff expertise and student interaction across the salient available domains (in our case Health and Sport and Exercise Psychology) as possible to maximise student experiences and learning opportunities that have real impact on their professional practice development. Finally, give due consideration to the supervision resource.

Effective supervision on a professional practitioner doctorate is much different than being a Director of D level research study. Good supervisors also need to possess experience and skills in applied practice, and be able, through supervisor training, to supervise the trainee in the development of research and applied practice competence.
References


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