

# UNIVERSITY OF SUSSEX SCHOOL OF PSYCHOLOGY

Clinical Psychology 3rd Year: C8002 Spring Term 2017

Course Convenor: PROF SAM CARTWRIGHT-HATTON

NOTE: Most of the questions you need answers to about this course are in this document. Please read it fully and carefully before your first lecture.

NOTE: This document concerns the <u>structure and content</u> of the course. If you have questions about procedures, please consult the School of Psychology Administration Office or via <u>psychology@sussex.ac.uk</u>

### SCHOOL OF PSYCHOLOGY

### **Third Year Elective 2016/17**

### **CLINICAL PSYCHOLOGY (C8002)**

**TITLE:** Clinical Psychology

**TIMING AND DURATION**: Year 3, running for 12 weeks during the Spring term.

**CONTACT HOURS AND TEACHING METHODS**: 2 x 1 hour lectures per week for the first 8 weeks, and 5 x 2 hour seminars following week 7.

#### TIME & PLACE:

Thursday Lecture: 1600-1700pm, Arts A Lecture Theatre A01 (Asa Briggs)
Friday Lecture: 0900-1000pm, Arts A Lecture Theatre A01 (Asa Briggs)
Seminar Groups: Please check Sussex Direct for the times and locations of your seminar groups. There will be five 2hr seminar

groups for each student sometime during weeks 8-12.

#### **FULL COURSE OUTLINE:**

This module will give students an insight into aetiology, assessment, treatment, and service provision in clinical psychology in the UK. Selected topics covering adult psychological disorders, child and adolescent problems, research and training in clinical psychology, and learning disabilities will be presented mainly by practicing clinical psychologists with expertise in these areas. At the end of the module students should be able to describe theories of the aetiology of a selected range of disorders, and compare treatment used across a range of disorders and client groups

#### **LEARNING OUTCOMES:**

At the end of the module the student should be able to:

1	Describe and evaluate theories of the aetiology of a selected range of psychological disorders
2	Describe, compare and evaluate treatments and service provision across a range of client groups
3	Describe, compare and evaluate treatments used across a range of

	psychological disorders
4	Describe and evaluate the contribution made by clinical
	psychologists to the diagnosis, assessment, and treatment of psychological disorders in the UK

#### **ASSESSMENT**

Mode	Learning outcome	Duration/Word Length	Submission date (see Study Direct)	Relative weighting of sub-units of
				assessment
ESSAY	1-4	3000	SUMMER TERM	80%
PRESENTATION	1-4	15 min	SPRING TERM (weeks 8-10)	20%

#### ASSESSMENT INFORMATION

Assessments deadlines and methods of submission can be found on your assessment timetable via Sussex Direct.

Information on the following can be found at the link below:

- Submitting your work
- Missing a deadline
- Late penalties
- Exceptional circumstances
- Exams
- Help with managing your studies and competing your work
- Assessment Criteria

http://www.sussex.ac.uk/psychology/internal/students/examinationsandassessment

#### ATTENDANCE, ABSENCE AND ENGAGEMENT

You are expected to be 'in attendance' at the University for the full duration of the published term dates for your course of study. That means you should be regularly attending lectures, seminars, labs etc. and committing time to your studies to be in a position to comply with academic and administrative expectations.

The university has an 80% attendance policy in place, so it's really important that you let us know if you are ill or cannot attend classes so that we can register this as a notified absence.

If you are unable to attend your seminars or workshops, you need to send an email to <a href="mailto:psychologyabsence@sussex.ac.uk">psychologyabsence@sussex.ac.uk</a> setting out the following information:

- Seminar(s) / workshop(s) that you will be absent from (list all of them)
- Tutor name
- Brief reason for absence

Please see the following link for further information: <a href="http://www.sussex.ac.uk/psychology/internal/students/attendance">http://www.sussex.ac.uk/psychology/internal/students/attendance</a>

#### **METHOD OF STUDENT FEEDBACK:**

The module convenor will create opportunities for you to provide feedback (online, on paper, and/or in person) on your experience of the module during the term. In addition, you will be asked to complete an online course evaluation questionnaire at the end of every term, and this will provide an opportunity for you to comment on each module as well as the course overall.

#### **MODULE CONVENOR:**

Prof Sam Cartwright-Hatton (School of Psychology)

Office No.: PEV 2 5B11

Email: s.cartwright-hatton@sussex.ac.uk

Internal telephone No.: 6690

SEMINAR TUTORS: to be announced

### **CLINICAL PSYCHOLOGY**

### **Broad Overview of the Module**

Week	Lecture	Lecture Title	Lecturer
1 Thursday	1	Introduction To The Module	Sam
-			Cartwright-
			Hatton
1 Friday	2	An Understanding of What Clinical Psychologists Do	Fergal
-			Jones*
2 Thursday		NO LECTURE	
2 Friday	3	Family Therapy Approaches to Child and Adolescent	Warren
		Mental Health	Matofsky*
3 Thursday	4	Play Therapy and Parenting Approaches	Susan
-			Brown-
			Jones*
3 Friday	5	Understanding Psychotic Experiences	Mark
			Hayward
4 Thursday		NO LECTURE	
4 Friday	6	An Introduction to Eating Disorders	Caroline
,			Haig*
5 Thursday	7	Clinical Psychology Training	Fergal
,		,	Jones*
5 Friday	8	The Aetiology and Epidemiology of Learning	Diane
-		Disabilities	Deignan*
6 Thursday	9	Assessment and Service Provision for Learning	Diane
		Disabilities	Deignan*
6 Friday	10	Personality Disorder	Beverley
			Moss-
			Morris*
7 Thursday	11	Doing Clinical Psychology Research in the NHS	Mark
			Hayward
7 Friday	12	Group Treatment Approaches	Warren
-			Matofsky*
8 Thursday	13	Self-harm and Suicidality	Susan
-			Brown-
			Jones*
8 Friday	14	Post Traumatic Stress Disorder	Laura
			Pipon-
			Young*

<sup>\*</sup>External Lecturers

# <u>CLINICAL PSYCHOLOGY – SPRING TERM 2017</u> <u>LECTURE SYNOPSIS</u>

#### **LECTURE 1**

#### INTRODUCTION TO THE MODULE

#### SAM CARTWRIGHT-HATTON - UNIVERSITY OF SUSSEX

This lecture will be an Introduction to the module and will describe the structure of the module, its learning outcomes, the assessments and coursework requirements, and the lecture and seminar structure.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning Outcomes:** At the end of the lecture, students will understand the structure of the course, its learning outcomes and how it will be assessed.

#### AN UNDERSTANDING OF WHAT CLINICAL PSYCHOLOGISTS DO

# FERGAL JONES - CANTERBURY CHRIST CHURCH UNIVERSITY & SUSSEX PARTNERSHIP NHS FOUNDATION TRUST

This lecture will give an overview of what it means to be a clinical psychologist and cover some of the different services that clinical psychologists can provide.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning Outcomes**: A broad understanding of what clinical psychologists do and their role in providing services for individuals with mental health problems.

## FAMILY THERAPY APPROACHES TO CHILD AND ADOLESCENT MENTAL HEALTH

#### DR WARREN MATOFSKY - SUSSEX PARTNERSHIP FOUNDATION TRUST

Psychology has often been criticised for being too focused on the individual and thereby obscuring the familial, social, economic and cultural roots of distress. The lecture will explore how the concepts and practices of family (or systemic) therapy can serve as a buffer against such thinking and inform clinical work with young people, their families and communities. Case study material will be used to show how systemic hypotheses are constructed and techniques employed in therapeutic conversations.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes**: Students should have awareness of some of the main ideas in family therapy and how they can be applied in working with families

#### PLAY THERAPY & PARENTING APPROACHES

# SUSAN BROWN-JONES - SUSSEX PARTNERSHIP NHS TRUST, CHILD AND ADOLESCENT MENTAL HEALTH SERVICE

This lecture will provide a broad overview of different types of play-based approaches and parenting interventions. There will be discussion of linking different types of presenting problems with the various therapeutic interventions

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning Outcomes**: From this lecture students should have an awareness of play-based therapies and parenting interventions that can be used with children, adolescents and their families

#### **UNDERSTANDING PSYCHOTIC EXPERIENCES**

# MARK HAYWARD - UNIVERSITY OF SUSSEX & SUSSEX PARTNERSHIP TRUST

This lecture will take a symptom (rather than a syndrome) approach to understanding psychotic experiences. Specifically, the experience of hearing voices will be explored with reference to cognitive and relational models. Attention will be drawn to the meaning of the voice hearing experiences and how this influences therapeutic responses.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes:** By the end of the lecture the students will: (1) be able to describe at least one model for understanding voice hearing experiences, and (2) have a framework for understanding therapeutic responses to distressing voices.

#### AN INTRODUCTION TO EATING DISORDERS

#### **CAROLINE HAIG - SUSSEX PARTNERSHIP NHS FOUNDATION TRUST**

The lecture will introduce students to the different eating disorder diagnoses. The state of the evidence base for treatment approaches will then be described along with some of the challenges involved in developing this evidence base. Finally, treatment approaches will be outlined along with ways to maximise the effectiveness of therapeutic work.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes:** By the end of the lecture students will have a greater understanding of the different eating disorder diagnoses. They will be aware of the state of the evidence-base relating to treatment of eating disorders and able to describe the challenges inherent in developing this base. They will have an idea of how a clinical psychologist might deliver treatment to support an individual presenting with an eating disorder.

#### **CLINICAL PSYCHOLOGY TRAINING**

# FERGAL JONES - CANTERBURY CHRIST CHURCH UNIVERSITY & SUSSEX PARTNERSHIP NHS FOUNDATION TRUST

This lecture will give an overview of the training process for clinical psychologists and the entry requirements for clinical psychology training courses.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning Outcomes:** An understanding of what clinical psychology training involves and how to become a clinical psychologist.

#### THE AETIOLOGY & EPIDEMIOLOGY OF LEARNING DISABILITIES

#### **DIANE DEIGNAN - SUSSEX PARTNERSHIP NHS FOUNDATION TRUST**

This lecture will cover (1) what do we mean by Learning Disabilities? (2) Causes and syndromes of learning disabilities, (3) Epidemiology – and statistics, and (4) History of support services.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes**: At the end of the lecture students will possess a broad understanding of the definition of Learning Disabilities, some causes and various syndromes of Learning Disabilities, and aspects of society's response to and support for people with Learning Disabilities.

#### ASSESSMENT AND SERVICE PROVISION FOR LEARNING DISABILITIES

#### DIANE DEIGNAN - SUSSEX PARTNERSHIP NHS FOUNDATION TRUST

This lecture will cover the changing role of psychology in learning disability services, the range of psychological models used within Learning Disability Services (assessment techniques, formulation and interventions), and working with systems in human services

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes**: At the end of the lecture students will possess knowledge of the role of psychology in learning disability services, the main approaches to assessment and intervention, and the importance of working with systems in human services

#### PERSONALITY DISORDERS

# BEVERLEY MOSS-MORRIS – SUSSEX PARTNERSHIP MENTAL HEALTH TRUST

An introduction to what is meant by the term 'personality disorders' including discussion of some of the challenges and controversies surrounding the concept as well as issues involved in working with this client group in clinical settings.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes**: To gain an understanding of what is meant by the term 'personality disorder', and an introduction to some of the challenges and controversies around the concept itself as well as working with this client group in the clinical field.

#### DOING CLINICAL PSYCHOLOGY RESEARCH IN THE NHS

## MARK HAYWARD - UNIVERSITY OF SUSSEX & SUSSEX PARTNERSHIP TRUST

This lecture will define the nature, landscape and processes of research within the NHS. Specifically, the relationship between clinical psychology and research within the NHS will be considered. Attention will be drawn to the limited research activity of many clinical psychologists, and the possible barriers to participation.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning Outcomes**: By the end of the lecture the students will: (1) be able to define research within an NHS context, and (2) understand some of the variables that can enable and prohibit the research activity of clinical psychologists.

#### **GROUP INTERVENTION IN MENTAL HEALTH**

#### WARREN MATOFSKY – SUSSEX PARTNERSHIP MENTAL HEALTH TRUST

Group work is one of the oldest mental health interventions and predates the birth of medical psychiatry. Why bother with groups? Isn't individual therapy always going to be better than group? Isn't mental health a problem of the individual? Why not "treat" the individual with medications for faulty brain chemistry and therapy to sort out their faulty cognitions and be done. Why demand patients make a new set of relationships to "treat" their mental health problem. Don't people in groups just get overloaded with everyone else's distress?

Well, we know that relationships impact on mental health and that mental illness can get in the way of sustaining relationships. Research shows social isolation is one of the most significant risk factors of relapse for both common & complex mental health problems. Groups provide a space where we can explore and develop these possibilities. In order to help you begin to answer your questions about group interventions, this lecture will introduce you to group theory & practice through looking at key concepts, how they help us to track group processes and key techniques used by group therapists.

For Reading List, please see module page on Study Direct (right at the bottom).

#### Learning outcomes:

By the end of the lecture, students will:

- Have a basic understanding of Group Theory
- Know some of the basic techniques employed by group therapists
- Understand the benefits of group interventions

#### **SELF-HARM & SUICIDALITY**

# SUSAN BROWN-JONES - SUSSEX PARTNERSHIP NHS TRUST, CHILD AND ADOLESCENT MENTAL HEALTH SERVICE

Provides an overview of self-harm particularly but also will discuss and contrast this with suicidality.

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes**: Increased understanding of self-harm and suicidality and factors linked with both. Differences and links between self-harm and suicidality. Understanding of treatment approaches

## POST-TRAUMATIC STRESS DISORDER (PTSD): WHAT IS IT AND WHAT PSYCHOLOGICAL APPROACHES ARE AVAILABLE?

#### LAURA PIPON-YOUNG - SUSSEX PARTNERSHIP NHS FOUNDATION TRUST

This lecture will cover the topic of post-traumatic stress disorder (PTSD), beginning with the current DSM-V criteria for diagnosis, cross-cultural validity, what can cause PTSD and some of the ways PTSD presents in clinical practice. The different variants of PTSD will be discussed including so-called developmental trauma in childhood and complex PTSD. The main psychological treatment models for PTSD will be considered (e.g. CBT; EMDR) along with an evaluation of the current evidence base for these approaches. The high rates of PTSD symptomology in the development of certain psychological problems (e.g. borderline personality disorder) and clinical groups (e.g. forensic service users) as well as the role of protective factors such as resilience will also be highlighted and explored

For Reading List, please see module page on Study Direct (right at the bottom).

**Learning outcomes:** (1) To understand the construct of PTSD including its different developmental pathways, clinical presentations, variants and diagnostic controversies, and (2) To understand the main psychological treatment options for people with PTSD presentations and the evidence base for these.

#### **CLINICAL PSYCHOLOGY**

#### **SEMINARS**

You will attend five x 2-hour seminars during weeks 8-12 of the Spring Term after the lecture course has finished. The purpose of these seminars is to discuss any issues that may arise from the lectures and for each student on the course to make their 10-15-min presentation that contributes 20% to the formal module assessment. It is important that you take advantage of these seminars, because it is unlikely that you will have direct access to any of the practitioners who are providing lectures, other than during the lectures themselves.

#### **SEMINAR PRESENTATIONS**

During weeks 8-12 in one of your seminar sessions you will give a 10-15 minute presentation based on one of the titles given below under "Presentation Topics". This must be a PowerPoint presentation and will be formally assessed by your seminar tutor according to the assessment guidelines for presentations given in Appendix 1. The timetable for individual student presentations will be organised during the term. Because you will only get access to the lecturers during their lectures, student-led presentations are a useful way for the class to supplement the lecture material on individual topics on the module. You should therefore treat the presentations as an important source of supplementary information.

However, because there are a large number of students on the module and only a limited number of presentation slots, there are unlikely to be opportunities for those who miss their presentation slot to reschedule their presentation. If you fail to give your presentation in the pre-arranged time slot you should arrange to see a student advisor and take your evidence for missing the presentation with you to that meeting.

Your presentation and your end of year essay MUST be on topics from different lectures.

#### **PRESENTATION TOPICS (2017)**

- Pick one approach to understanding and addressing mental health problems out of the following: cognitive-behavioural, psychodynamic and systemic.
   Describe the key principles of the approach that you have chosen and give examples of how these principles might be applied in clinical work.
- 2. What use might creativity, i.e. drawing, games, drama have in the application of CBT for use with children and young people?
- 3. What family therapy approaches could be used to help a family who are concerned about their 10-year old son, because of his defiant behaviour? Which other professionals (teacher, social worker, church youth worker etc.) involved in the child's life might it be useful to involve and why?
- 4. How is deliberate self-harm defined and what kinds of problems lead adolescents in particular to self-harm?
- 5. What are the risk factors for adolescent self-harm and can self-harm be predicted and prevented?
- 6. Why do many people suffering psychosis hear voices?
- 7. Should we diagnose personality disorders? Consider both the pros and cons of this issue.
- 8. How can personality disorders be treated?
- 9. Many clinical psychologists don't publish any research. Is this helpful to the profession?
- 10. Why do some people experience PTSD following a traumatic event and others do not?
- 11. Discuss the factors that might influence decision-making when it comes to determining a treatment approach for an individual with an eating disorder.
- 12. How has society's response to people with learning disabilities changed over time? Consider this both in terms of the concept of learning disability and the types of service offered to this group of people.
- 13. What might need to be taken into account when using a CBT model of intervention with someone with a learning disability, and what adaptations might need to be made?

#### **END OF YEAR ESSAY (80% of formal assessment)**

For the end of year essay, you must choose one of the essay titles from the list below.

#### End-of year 3000 word assessed essay

The deadline date for submission is in May. The exact date and time of the deadline will be available on your Sussex Direct assessment timetable.

You should chose an essay topic that is <u>DIFFERENT</u> to that on which you gave your seminar presentation

#### Write an essay using ONE of the following essay titles

- Often the clinical work of clinical psychologists is structured around four stages: assessment, formulation, intervention and evaluation. Describe what these four stages are and explain why they are each important. Support your description by giving examples of these stages drawn from some of the areas of clinical psychology covered in the lecture course.
- 2. Select either the field of play therapy or parenting approaches. Discuss historical developments, major schools of thought, and what types of clinical presentations/types of cases would be treated by this therapy.
- 3. Compare and contrast Deliberate Self-harm and Suicidality. Discuss effective treatments for these presenting problems.
- 4. Critically discuss the view that Learning Disabilities is a social construct and not a medical diagnosis.
- 5. Discuss the possible benefits of integrating cognitive and social/interpersonal understandings of distressing voices.
- 6. Between 1994 and 2004, prescriptions for stimulant medication [for use in the "treatment" of childhood ADHD] rose from 6000 to 350,000 (Newnes & Radcliffe, 2005). How do you account for this dramatic rise? What theories and practices might a clinical psychologist employ in their work with children, families, schools & communities in responding to this problem?
- 7. What is meant by the term 'personality disorder'? What is the evidence for treatment outcomes for personality disorders?
- 8. Does the current state of the evidence base for the treatment of eating disorders mean that Clinical Psychologists can do what they like when it

comes to treating individuals presenting with an eating disorder? Illustrate your discussion with evidence from the literature on the treatment of eating disorders.

- 9. What are the strengths and limitations of the main psychological interventions for PTSD?
- 10. Community psychologists use group work as their main intervention. Compare and contrast a standard psycho-educational group used in mental health services
  - (e.g. http://www.ori.org/files/Static%20Page%20Files/CWDC.pdf) with the use of groups in the "Psychology in the real world" programme (Holmes, 2010\*). Include consideration of
  - (1) Content (what is done & said) and process (how things are done & said) of group sessions
  - (2) The role of the group therapist
  - (3) What participants can hope to get from involvement
  - (4) The theory & assumptions underlying the two approaches

### PRESENTATION ASSESSMENT GUIDELINES 2016-17

### Marking Criteria for Oral Presentations of single studies or literature reviews

Categorical Marks	Classification	Slides	<u>Delivery</u>
95	Exceptional 1 <sup>st</sup>	A truly exceptional presentation, combining a faultless presentation with very substantial novel insights. The presentation is similar in standard to that for a very good presentation at an international research conference.	Student delivers
82, 88	Outstanding 1 <sup>st</sup>	An outstanding presentation, with near-perfect delivery, excellent structure and use of visual aids.  Single Study: All key aspects are clear, concise and precise, and there is substantial evidence of critical thinking and novel insights.  Literature review: The review makes substantial use of novel material beyond the core reading.  For the higher mark there is clear evidence of both insight and analysis and integration of novel work demonstrating outstanding research and presentation skills.	presentation with clarity and authority, within allocated time, showing evidence of knowledge and engagement. Able to answer questions confidently.
72, 75, 78	Clear 1 <sup>st</sup>	The presentation is very clear and well presented. The background/rationale is presented clearly and concisely. There is a very clear structure with clearly identified sections. The use of figures and visual aids is excellent. The take-home message is very clearly stated.  Single study: the key aspects of the method and results are highlighted without any clutter. There is evidence of critical insight regarding the implications of the studies. Literature review: The core material is covered well and presented in a logical sequence. For the higher mark there is substantial evidence of the student's insight and analysis of the literature OR integration of material beyond core reading.	

62, 65, 68	2.1	The presentation is generally clear and well presented but could be improved. The background/rationale is generally clear. The slides layout and organisation facilitates logical flow of content. The use of figures and visual aids is good. The take-home message is stated clearly.  Single study: the key aspects of the methods and results are highlighted without too much clutter. The conclusions drawn are appropriate for the results obtained and reveal some evidence of independent thought.  Literature review: the analysis of the literature is appropriate and explained well. The review shows evidence of wide reading and generally good use and understanding of material.	Student delivers presentation with clarity, and shows evidence of engagement, but 1 or 2 small gaps in knowledge. Presentation might be slightly too long or too short. Able to answer questions but not with complete confidence.
52, 55, 58	2.2	The presentation is adequate but lacks clarity in a number of places.  The slides layout and organisation lack structure and do not facilitate the logical flow of the content. Sections may be too long or too short, or one section may be missing. The background/rationale is stated but lacks focus. There are too many/too few figures and visual aids OR the level of detail is inappropriate. The take-home message is stated but lacks clarity/focus.  Single study: the method and results can be generally understood but require more explanation. There is a good level of detail in some areas but important aspects are missing. The conclusions drawn are appropriate for the results obtained but there is little evidence of independent thought.  Literature review: the review is relevant, and there is reasonable coverage of core material, but the analysis but lacks depth.	Adequate delivery of presentation, with several gaps in knowledge, satisfactory engagement. Presentation might be significantly too long or too short. Limited ability to answer related questions.
42, 45, 48	3rd	Some understanding of the material is evident, but the effectiveness of the presentation is limited by some of the following problems: the background/rationale is unclear; the presentation lacks a clear structure; the presentation is insufficiently or overly detailed; the use of figures and other visual aids is inappropriate; there is evidence of significant confusion or omission of core material; there is no clear take-home message.  Single study: Some basic information is provided but details of the method and results cannot be clearly discerned. Inappropriate use of figures and other visual aids. The conclusions drawn are sketchy and reveal a failure to understand core concepts. Literature review: there is a basic review of some relevant literature but it is scant and the analysis is problematic.	Some basic information is communicated but delivery is problematic, reflecting lack of preparation. Only able to answer questions on aspects directly related to presentation.

35, 38	Marginal Fail	Very limited understanding of basic principles of oral presentation.  The presentation is very poor and either insufficiently or overly detailed.  The use of figures and other visual aids is inappropriate. There is no takehome message.  Single study: the methods and results sections lack basic details AND/OR the methods and results cannot be discerned. The conclusions drawn are not supported by the results. Literature review: the analysis of the papers is crude or inappropriate, suggesting little understanding of the topic.	Very poor delivery. Clear lack of understanding of the material presented in the presentation, with lack of engagement. Unable to answer any question related to the theme of the
0, 10, 20, 30	Absolute Fail	The presentation has little or no structure, and contains no appropriate material, or disconnected and mostly irrelevant fragments. There is minimal evidence of information beyond the level expected from a layperson.	presentation.

**Note:** These criteria are interpreted more generously for students in earlier stages of their degree course, in the sense that first- and second-year students are not expected to display the breadth of knowledge or maturity of judgement expected of finalists.

#### **SCHOOL OF PSYCHOLOGY**

#### **CLINICAL PSYCHOLOGY C8002**

#### THIRD YEAR ELECTIVE - SPRING TERM 2017

### **SEMINAR PRESENTATION TOPIC**

List your three chosen presentation topics in order of preference (you must choose a presentation topic from the list of presentation topics provided in the module handbook)
STUDENT NAME
SEMINAR GROUP NUMBER
1 <sup>st</sup> CHOICE.
2 <sup>nd</sup> CHOICE
3 <sup>RD</sup> CHOICE
Please write the exact title of the presentations you have chosen!!
Print off and complete this form.
When completed leave this form in the pigeon hole of PROF SAM CARTWRIGHT-HATTON in the School Office.
Deadline for submission of presentation choices is 3.30PM <b>FRIDAY 10<sup>th</sup> FEBRUARY 2017</b> .

If you have NOT submitted your choices by this deadline, you will be allocated a

presentation topic by your seminar tutor.