

New Programme (Major Award) External Validation Report

Section A

Report of the External Review Panel

Programme Reference Number:	45
Faculty/School(s):	Science
Department(s):	Nursing, Health & Disability

Details of Programme(s) Reviewed

Title:	Master of Health Science in Cognitive Behavioural Psychotherapy
Type of Award:	Masters (Taught)
NFQ (National Framework of Qualifications) Level:	9
ECTS:	90
ISCED:	0913
Duration:	2 academic years
Proposed Student Intake:	12
Proposed Start Date:	Sep. 2024
Delivery Mode(s):	Part time

Title:	Postgraduate Diploma in Science in Cognitive Behavioural Psychotherapy
Type of Award:	Postgraduate Diploma
NFQ Level:	9
ECTS:	60
ISCED:	0913
Duration:	12 months
Proposed Student Intake:	Direct Entry 12 combined MSc and PG Dip
Proposed Start Date:	Sept 2024
Delivery Mode(s):	Part time

Date of Review:	16 th May 2024
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Review Panel

Panellist Role	Name	Organisation	Job Title
Chair	Mary Goode	TUS, Midlands	Assistant Registrar and Head of Quality
External Academic Discipline Expert	Mr Jim Maguire	TUS	Lecturer in Mental Health Nursing
External Academic Discipline Expert	Dr Des Cawley	TUS, Midlands	Head of Department of Nursing and Healthcare
Industry/ Community Representative	Ms Kathleen Barry	HSE/NHS	Former CBP Practitioner
Student Representative	Ms Belinda Doyle	ATU	Student representative
Vice President for Academic Affairs and Registrar (VPAAR) Nominee (Academic Secretary)	Dr Aodhmar Cadogan	ATU Sligo	Assistant Registrar (Policy and Regulatory Affairs)
Recording Secretary	Dr Aodhmar Cadogan	ATU Sligo	As above

All external members of the panel have declared that they are independent of ATU (Atlantic Technological University), and all have declared that they have no conflict of interest.

Programme Design Team

The panel met the staff listed below during the review process.

Dr Amanda McCloat	Head of St Angelas College
Dr Edel McSharry	Head of School of Nursing, Health Science and Disabilities
Patsy McSharry	Programme lead and Lecturer ATU St Angelas
Sharon McGuinness	Cognitive Behavioural Psychotherapist and ANP in Early Intervention for Psychosis, Sligo Leitrim Mental Health Services, Sligo.
Maria Gray	Cognitive Behavioural Psychotherapist, Sligo Leitrim Mental Health Services, Sligo.
Monica McGrath	Lecturer, ATU Donegal

Introduction

Background Context:

As far back as 2008, the WHO ranked mental health conditions such as depression as the third highest contributor to the global burden of disease worldwide and projected that it will rank first by 2030. There is no doubt that mental health services are continuously being challenged to meet the growing mental health needs of the Irish population. As the services are stretched to respond to growing levels of anxiety in our young people, a fact compounded by the recent Covid-19 pandemic, there has been a restriction of the development of normal milestones in our young people and leading to increasing levels of social anxiety. Also, the growing number of refugees within Ireland has also placed increasing strain on the mental health services, many of whom often have significant trauma in their background as they flee from war-torn countries.

Policy Context

The current mental health policy entitled 'Sharing the Vision (StV) – A mental health policy for everyone 2020 – 2030' is Ireland's whole system policy to enhance the provision of mental health services. Its first Implementation Plan outlines a programme of work for the next three years from 2022 – 2024 to deliver the StV recommendations. One of their recommendations is that 'improved counselling supports and talk therapies will be available, based on identified need'.

Also, objective 1 of the National Implementation Plan (2020) includes recommendations for 'the expansion of digital supports and interventions to support service users' journeys through both primary and secondary care services. It also plans to enhance the provision of talk therapies for young people and the general adult population through a range of initiatives including the further training of talk therapists and increasing provision of online cognitive behavioural therapy services.

The National Clinical Programmes (NCPs) are part of the Office of the Chief Clinical Officer (CCO) in the HSE. The Mental Health Clinical Programmes are a joint initiative between this office, HSE Mental Health Services, and the College of Psychiatry of Ireland (CPsychI). The overarching aim of the NCPs is to standardise quality evidence-based practice across the Mental Health Services. Presently, there are four established NCPs for mental health with others in development. These are:

- National Clinical Programme for Self-Harm and Suicide Related Ideation
- Eating Disorders Service (spanning Child and Adolescent and Adult Mental Health Services)
- Early Intervention in Psychosis
- ADHD in Adults

The evidenced based therapeutic modality of choice for all of these four programmes is that of Cognitive Behavioural Psychotherapy (CBP). In order to ensure the success of such care programmes' the Department of Health (2020) claims that it is committed to working with the education sectors, regulators, and professional bodies to improve the availability of health professionals and reform their training to support integrated care across the entire health service and goes on to say, that key to the success of the National Clinical Programmes is the close collaboration between the HSE and the postgraduate training bodies, and working in partnership with patients, nursing and therapy leads, and with the Department of Health.

Regardless of their nature or indeed their cause, the majority of mental health presentations lend themselves to a Cognitive Behavioural treatment approach. In this world of evidenced based care, providers are charged with the responsibility of providing care that is based on sound evidence.

Although a number of therapeutic modalities exist, CBP is the intervention of choice utilised in mental health and is recommended in national and international (NICE; WHO) guidelines for common (e.g., Anxiety and Depression) and less common presentations (e.g., Psychosis, OCD, Eating Disorders etc).

The local Mental Health Services currently have a significant waiting list for CBP referrals and a shortage of CBP Clinical Nurse Specialists. Although there exists a panel of qualified CNS's, none of those on the panel are qualified CBP therapists.

Rationale for Programme(s)

The overarching aim of this programme is to provide education and advanced skills training for Registered Mental Health Nurses (RPNs/RMNs) to progress their competence to become autonomous Clinical Nurse Specialists in Cognitive Behavioural Psychotherapy (CBP). On successful completion of the programme, graduates will be competent to practice in a variety of mental health care settings. On successful completion of the programme, the graduate will act as a member of the therapeutic team to provide Cognitive Behavioural Psychotherapy to suitable clients with a wide range of mental health presentations. On completion of this programme the graduate will also have developed advanced competencies in research practice that will contribute to mental health research, with the production of a CBP related research project that will contribute to the evidence base within this defined area of practice. Graduates will also develop professional practice skills to work autonomously and in collaboration with a broad range of relevant inter-professional colleagues.

Validation Criteria

ATU's Developing and Validating New Taught Programmes Policy specifies that new programmes must comply with the following criteria for validation:

1. The programme aims and learning outcomes are clear and aligned with the proposed award title.
2. The rationale for the programme is well informed and justified.
3. The design of the programme is suitably structured and fit for purpose.
4. The design of the programme ensures that students can successfully achieve the Programme Learning Outcomes.
5. The teaching, learning and assessment strategy is well planned and appropriate for the discipline area and type of award.
6. Assessment techniques are fair, valid, reliable, consistent and a credible measure of the academic standard attained by students.
7. The planned resources, including staff, physical, online, library and student supports, sufficiently support the teaching, learning and assessment strategy for the programme.
8. The programme facilitates lifelong learning for a diverse student population by setting out appropriate entry requirements and opportunities for access, transfer, and progression.
9. There is demand for potential graduates from the programme.
10. The learning environment and mode of delivery are consistent with the needs of the intended students of the programme and accessible and appropriate support services for students have been provided for.

11. Students will be well informed on the requirements of the programme, guided to relevant resources and supported in their studies in a caring environment.

The Panel is satisfied that the proposed programme(s) meet ATU's validation criteria above subject to meeting the conditions outlined below. They are satisfied that there is a strong rationale and need for the programme and that the delivery of the programme and the planned supports for students have been considered and planned for.

Findings

Overall Finding

Validated without changes	
Validated subject to condition(s) and/or recommendation(s)	X
Rejected	

Reason for Overall Finding

Overall, the Panel is supportive of what they consider to be a strong programme proposal with the embedded award of postgraduate diploma. The Panel consider that the programme concept is valid; that the rationale for the programme is solidly grounded and well-researched; that there will be a demand for the programme; that the programme will meet genuine education and skills need; that the programme is highly relevant to meet identified skills shortages in line with skills deficits that have been clearly articulated by HSE and government reports.

Commendations

The Validation Panel advises Academic Council of the following commendations.

1. Compliment the team for developing a programme with staff across three campus locations and with clinical stakeholders, this combined input and expertise has made a significant contribution to the development of the programme.
2. The high calibre and expertise of the existing staff in the ATU and the planned guest lecturers that are available or will be invited to teach on the programme.
3. The programme has set a high standard in the design of the programme to aim at the BABCP accreditation requirements.
4. The positive and open engagement with the panel during the panel discussions.

Conditions

The Validation Panel advises Academic Council that subject to satisfying any condition(s) detailed below, the panel is satisfied that the proposed programme(s) meets the validation criteria as set out in Atlantic Technological University's Developing and Validating New Programmes Policy.

1. The Validation panel considered and are recommending for approval both programmes for direct entry i.e. the Master of Health Science (MHS) and Postgraduate Diploma and an exit from the MHS to postgraduate diploma. This needs to be clearly articulated in the Postgraduate Diploma documentation in particular. Specify any restriction on the currency of the learning for a student to be admitted to the MHS i.e. the currency of the Postgraduate Diploma that would be required if a student was to return to complete the MHS.
2. The Approved programme schedule (APS) and the programme delivery schedule need to reflect the stage 1 and stage 2 of the programme and the alignment of the semesters to the examination stages.
3. In regard to the professional recognition of the programme some re-phrasing is required as suggested below. Current Sections 6.1 *'Careful consideration has went into the structuring of the programme so that it fulfils criteria for CBP accrediting bodies going forward. Content and contact time of modules and programme are in keeping with requirements for accreditation with The British Association for Behavioural and Cognitive Psychotherapies (BABCP)'* and section 6.4 *'This course will provide the student with the core training, academic and theoretical requirements for accreditation as a Cognitive Behavioural Psychotherapist (CBP)'* should be changed to the following:

Section 6.1 to read Careful consideration of minimum accreditation training standards as documented currently by The British Association for Behavioural and Cognitive Psychotherapies (BABCP) have underpinned the course content, level of training and assessment of clinical competence.

Section 6.4 to read Theoretical contact hours and hours of supervised clinical practice have been aligned to BABCP accreditation criteria and standards of good practice.'

Recommendations

The panel advises Academic Council that the Programme Development Team and/or the Department should take cognisance of any recommendations outlined below.

1. Consider the title Cognitive Behavioural Therapy (CBT)(s) vs Cognitive Behavioural Psychotherapy (CBP) of both programmes. Ensure the current proposed title will not be a potential challenge to future Nursing and Midwifery Board of Ireland (NMBI) accreditation. Consider the alignment of the title to the level of practice expected of a graduate student. Consider also the module content of CBP versus CBT as CBP indicates an overarching term that covers many facets of the profession.
2. Provide clarification on the requirement for post qualification experience to be considered for CNS pathway and update the documentation accordingly.
3. Although Garda vetting is not required by ATU as part of the admission requirements *per se*, there would be a requirement for a student to be vetted by the placement practice provider or agency. State the requirements clearly in the documentation.
4. Review the student supports section 7.6 to reflect the bespoke nature of the programme.
5. Review the learning outcomes in all modules to ensure they are all at the higher order verbs relevant for a Level 9 programme in line with the Blooms Taxonomy, e.g., module NURS09027 Professional Practice a significant number of the learning outcomes start with 'demonstrate'.

6. Some of the recommended and essential reading lists contain references that appear to be quite dated. Revise to more updated material where appropriate.
7. Three of the modules are designed with two assessment components of equal weighting 50/50. Consider if a gate or threshold mark is required in any of these modules and add to the assessment strategy in the relevant module if required, NURS09026, NURS09028, and NURS09029.
8. In the module NURS09027 Professional Practice, the final assessment component finishes and is considered in the Autumn Exam boards (Sem 3/52 week duration). Make this explicit in the APS and the assessment strategy of the module. Make explicit the number of hours of supervised practice required to obtain a PASS/FAIL in that assessment component and outline how the hours may be achieved i.e. 450 hours or 12 week placement. The ECTS credits indicated for work placement and work based project credits on the title page are indicated 5 ECTS each, change this to 10 ECTS for one of the categories for a more simplified approach.
9. The module NURS09026 Theoretical Foundation of Therapeutic Communication and Cognitive Behavioural Psychotherapy includes the readiness to practice assessment element, a prerequisite and an eligibility for pass by compensation restriction. Remove the prerequisite on this module and give consideration to removing the failed component and/or the non eligibility for pass by compensation. In the Repeat Assessment Strategy, provide explicit details with regard to how a repeat opportunity for the readiness to practice component could be achieved if required. State the requirement for a student to operate in an observational mode only until the readiness to practice element has been successfully passed. Outline that the assessment element of this module will be completed by an actor. Attendance requirement is indicated to be 100 %, in NURS09026. Indicate in the Repeat Assessment strategy the repeat mechanism for students who do not meet this requirement.
10. NURS09028 Evidenced based Theory and Practice of Cognitive Behavioural Psychotherapy for Anxiety & Depression: In the indicative syllabus, reorganise the Cognitive Therapy Skills and Behavioural Therapy Skills examples into the right category.
11. NURS09029 Evidence based Theory and Practice of CBP and Complex Presentations, review the learning outcomes and bring them to higher order verbs to include for example, critical evaluation. Differentiate between the disorders that will be covered in depth and some that will be covered with less depth. It would appear that the assessment of this module is similar to that of NURS09028 and this should be reflected in the assessment strategy (i.e. practical assessment based on an actual CBP session with a client)
12. RSCH09046 Advanced Research Skills: the team indicated the module is being updated across other programmes in which the module is offered, but the new draft module was not presented. Submit the draft revised module for consideration by the panel. Include detail of ethical approval requirements and the timing of this approval should it be required for certain categories of project.
13. NURS09030 Evidenced Based Theory and Practice of Third wave and new Generation CBP is an excellent and innovative module. Consider other assessments types /strategies to combat generative AI such as poster or podcast as an alternative assessment strategy.

Report Approval

This report has been agreed by the review panel and is signed on their behalf by the chairperson.

Signed:



Name: Mary Goode
Validation Panel Chair

Date 06 June 2024