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DCP Conference 2020

Academic Partnerships Beyond DClinPsy: Enabling and Utilising the Resources of Universities for the Benefits of Clinical Practice

Disclaimer



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- Sorry this isn't a workshop!
- I submitted for a workshop, it got accepted as a presentation, but the abstract didn't get changed
- •I'll make these slides available on SlideShare

https://www.slideshare.net/MikeMarriott1



Who am I, and why do I think this is relevant?

- Undertook service evaluation and research as a Sheffield DClinPsy trainee 2004-2007
- Held a full-time clinical job in CAMHS for seven years post-qualification
- Hosted trainee psych placements
- –One out of seven did service evaluation projects
- Never had a trainee interested in doing their research project with my service
- Occasionally supported recruitment to academics' projects - rarely inspired by them



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Joining the dark side...



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- •My final full time clinical post was in a new CAMHS Eating Disorder service
- -Sandwich placement student
- Joined NTU in 2015 to devise a new placement-based MSc course
- My undisguised agenda to better harness academic resources to support clinically meaningful projects

(no further hard sell here – but it's a great course!)



Beyond DClinPsy...?

- Our colleagues (staff and trainees) in the course teams undertake brilliant work in many ways
- As clinical psychologists (having all come from a DClinPsy ourselves) we have a natural tendency to look to DClinPsy course teams for any and all academic consideration
- But... they have to prioritise training purposes and the accredited needs of trainees
- •In the meantime, there are >100 psychology departments who might have resources

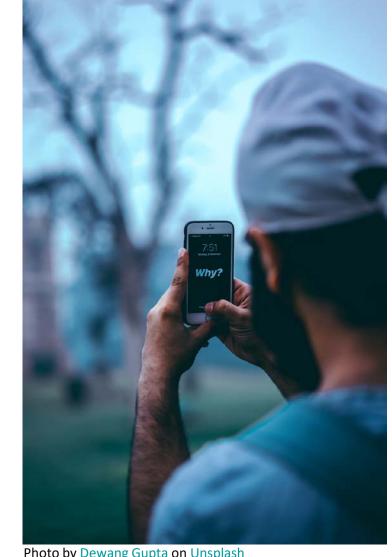


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The Context:

Why universities want to engage with you



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- Academia is a weird and varied space, but broadly, universities are interested in judgements according to league tables and formal assessment exercises (and money)
- The skill for the clinician seeking to build partnerships and collaborations is to recognise that you have a distinct value as a resource to them, and use this as leverage
- •NB "Academic" = PhD into lecturing

Research Excellence Framework (REF)

- Departments judged against the quality of their research
- Some central government funding is directly related to REF performance
- Judged by
- -Outputs (mostly peer-review papers) [probably of less relevance to clinicians]
- –Environment (PhD students and grant funding): There are increasing calls for collaborative projects
- -Impact (Case studies of research affecting practice): They need you to demonstrate the value of their research in the real world



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Teaching Excellence Framework (TEF)



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- Currently processed in a fairly simplistic and categorical way (Gold 28%, Silver 49%, Bronze 22%), but links to tuition fees
- Much is less relevant to clinicians
- But one element is Learning Environment, which include elements of work experience
- Additionally, assesses graduate outcomes which universities are translating into employability constructs and looking for practice links (e.g. sandwich years, experiential modules)

Knowledge Exchange Framework (KEF)

- Not yet undertaken, but Research England have just released their plan, and it is expected to sit alongside REF and TEF as a means of assessing university performance
- Heavily weighted to income metrics, with a focus on collaborative research grants
- Also Local growth and regeneration
- Probably most usefully, Public and **Community Engagement**



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So what good can this do for you?



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- •When in full time clinical work, I was often frustrated by the lack of time I had to do any thinking or follow any projects outside of the immediate clinical and team demands
- I believe that as clinical psychologists, we often have very good ideas; the painful process of getting projects off the ground stifles them from ever going further
- You can make use of collaborations in academia to share that process / do it for you

Student-based examples: Longer placements

- "Sandwich years" have been around for a relatively long time (I applied to 3/6 when I did UCAS) – typically between 2nd and 3rd year BSc
- Normally relatively low resource-cost
- Students tend to accept that they will have little clinical time, but need to do something that they can pull the psychology out of
- An opportunity to undertake longer term evaluation projects for services...

[NB Students often self-fund through loan...]



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Student-based examples: Short placements



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- With the rise in "employability" expectations, there is an increased demand for integrated work experience
- •30hrs 60 days at NTU...
- Again, a chance for focussed piece of project work
- With both long and short placements, the chances are there for you to consider these students as research assistants

Student-based examples: Mini projects

- There is an increasing move towards "Enquirybased" or "Problem-based" learning
- Students are given an issue of relevance to practice/industry, use their developing psychological skills to consider resolutions
- Typically, this can involve extensive literature reviews
- -broader access to databases than you have, as well as the time
- They are SO fresh in theory, they can surprise the clinicians...



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Non-student examples



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- Academics are constantly applying for grants for research projects; clinicians are often a resource to demonstrate applied purpose of research (and this should bring funding your way too...)
- They may also have skills that you know are needed in your work environment
- -Can develop workshops and CPD for you (probably at a cost)
- Get them involved in your network of interest, and they might host events for you

Take a minute to think about your working

practice...

- This is the bit that would have been very workshop-y!
- Take a few minutes to think for yourself or talk with your neighbour about something that you wish could be done at your work, and how what I have just said sparks a new possibility for you...



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What to do next (and a few notes of caution)



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- Simply contact the head of department at your local university, and say that you'd be interested to explore whether there might be any opportunities for collaboration
- •DO remember that academics are used to being the experts; might need to be reminded that they don't understand practice in full!
- **EXPECT** them to have a misconception of what it is you do and how you work
- DO insist on developing ideas that have a real meaning in your practice... that's what they need you for!

Thank you for listening!

Any Questions...?

