

# Level 7 Diploma in Relational Practice in Mental Health

**Qualification Specification** 

June 2023

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# **About QUALIFI**

QUALIFI is recognised and regulated by Ofqual (Office of Qualifications and Examinations Regulator). Our Ofqual reference number is RN5160. Ofqual regulates qualifications, examinations, and assessments in England.

As an Ofqual recognised Awarding Organisation, QUALIFI is required to carry out external quality assurance to ensure that centres approved for the delivery and assessment of QUALIFI's qualifications meet the required standards.

# Why Choose QUALIFI Qualifications?

QUALIFI qualifications aim to support learners to develop the necessary knowledge, skills and understanding to support their professional development within their chosen career and or to provide opportunities for progression to further study.

Our qualifications provide opportunities for learners to:

- apply analytical and evaluative thinking skills;
- develop and encourage problem solving and creativity to tackle problems and challenges;
- exercise judgement and take responsibility for decisions and actions;
- develop the ability to recognise and reflect on personal learning and improve their personal, social, and other transferable skills.

# **Employer Support for the Qualification Development**

During the development of this qualification QUALIFI consults a range of employers, providers, and existing centres (where applicable) to ensure rigour, validity and demand for the qualification and to ensure that the development considers the potential learner audience for the qualification and assessment methods.

# **Equality and Diversity**

QUALIFI's qualifications are developed to be accessible to all learners who are capable of attaining the required standard. QUALIFI promotes equality and diversity across aspects of the qualification process and centres are required to implement the same standards of equal opportunities and ensure teaching and learning are free from any barriers that may restrict access and progression.

Learners with any specific learning need should discuss this in the first instance with their approved centre who will refer to QUALIFI's Reasonable Adjustment and Special Consideration Policy.

# **Qualification Title and Accreditation Number**

This qualification has been accredited to the Regulated Qualification Framework (RQF) and has its own unique Qualification Accreditation Number (QAN). This number will appear on the learner's final certification document. Each unit within the qualification has its own RQF code. The QAN for this qualification is as follows:

# QUALIFI Level 7 Diploma in Relational Practice in Mental Health - 610/2836/8

# **Qualification Purpose, Rationale, Aims and Learning Outcomes**

# Purpose of the QUALIFI Level 7 Diploma in Relational Practice in Mental Health

The purpose of the qualification is to provide learners with the technical skills and knowledge needed to work in relational practice in mental health. This qualification provides an opportunity to build on the experience gained working in the community by engaging with a theoretical framework both to challenge and develop learners' practice.

# Rationale of the QUALIFI Level 7 Diploma in Relational Practice in Mental Health

The rationale for the qualification is that it provides a career path for learners who wish to develop the knowledge and skills that will enable them to work in relational practice in mental health

The technical skills and knowledge delivered through the successful achievement of the qualification are required and recognized internationally. It covers:

- Neurobiology, psychodynamic theory and practice
- Trauma-informed approach in mental health
- Presenting issues and diagnoses in mental health
- Enabling recovery in mental health
- Social dynamics in mental health
- Professional skills in mental health

The Diploma is accredited at Level 7 and has a total of 60 credits.

# Aims of the QUALIFI Level 7 Diploma in Relational Practice in Mental Health

The qualification provides the opportunity for individuals to forge a career in relational practice by seeking a greater knowledge and understanding of the profession and to support the individual's development into technical positions. Overall aims include:

- 1. To enable learners to develop their professional skills and knowledge in relational practice.
- 2. To develop the learner's ability to recognise and reflect on the process of personal learning and development which facilitates the enhancement of key personal, social and other transferable skills.
- 3. To encourage the learner's self-reflection, analytical, intellectual and transferable skills.

# Learning Outcomes of the QUALIFI Level 7 Diploma in Relational Practice in Mental Health

This vocational qualification aims to equip trainees with the necessary self-awareness, knowledge base and practical application skills to work effectively with clients experiencing mental distress and diagnosed and undiagnosed mental health problems in a range of settings using a relational approach. The programme offers opportunities for trainees to achieve and demonstrate learning outcomes that evidence post-graduate level self-directed research and development, depth of understanding and critical awareness, the articulation of knowledge, good professional practice and applied therapeutic skills.

On completion of the programme trainees will have evidenced across the wide range of assessment opportunities:

- A high level of critical self-reflexivity based on enhanced self-awareness that
  facilitates managing, understanding and making therapeutic use of the emotional
  processes that unfold in therapeutic settings with people who have experienced
  significant trauma.
- 2. An ability to engage effectively and ethically with clients who experience significant emotional and psychological distress, and who present with the characteristics of the main psychiatric diagnoses including personality disorders and psychoses.
- 3. An in-depth understanding of human development and the development and functioning of the mind through the twin lenses of neurobiology and psychodynamic theory.
- 4. A critical understanding of current models of mental health and mental health treatment, and of their place within science, culture and society.
- 5. A range of skills for applying their knowledge base to their day-to-day practice as relational practitioners in mental health, and the ability to articulate the reasoning behind their practice.

- 6. An ability to work reflectively and thoughtfully, and to work with clients in an egalitarian and collaborative way.
- 7. An ethical and professional approach to working with people in distress and their families, and with professional colleagues, and an understanding of the nature and importance of ethical practice and professional conduct.
- 8. A clear understanding of, and the ability to put into practice, the key content of each module of all six Units of the diploma course.

These are the overall learning outcomes in line with Level 7 equivalences. The learning outcomes for each unit are identified in Appendix 1 within the unit descriptors.

# **Delivering the Qualification**

# **External Quality Assurance Arrangements**

All centres are required to complete an approval process to be recognised as an approved centre. Centres must have the ability to support learners. Centres must commit to working with QUALIFI and its team of External Quality Assurers (EQAs). Approved centres are required to have in place qualified and experienced tutors. All tutors are required to undertake regular continued professional development (CPD).

Approved centres will be monitored by QUALIFI External Quality Assurers (EQAs) to ensure compliance with QUALIFI requirements and to ensure that learners are provided with appropriate learning opportunities, guidance and formative assessment.

QUALIFI's guidance relating to invigilation, preventing plagiarism and collusion will apply to centres.

Unless otherwise agreed, QUALIFI:

- sets all assessments.
- moderate's assessments prior to certification.
- awards the final mark and issues certificates.

# **Learner Induction and Registration**

Approved centres should ensure that all learners receive a full induction to their study programme and the requirements of the qualification and its assessment.

All learners should expect to be issued with the course handbook and a timetable and meet their personal tutor and fellow learners. Centres should assess learners carefully to ensure that they are able to meet the requirements qualification and that, if applicable, appropriate pathways or optional units are selected to meet a learner's progression requirements.

Centres should check the qualification structures and unit combinations carefully when advising learners. Centres will need to ensure that learners have access to a full range of information, advice and guidance to support them in making the necessary qualification and unit choices. During recruitment, approved centres need to provide learners with accurate information on the title and focus of the qualification for which they are studying.

All learners must be registered with QUALIFI within the deadlines outlined in the QUALIFI Registration, Results and Certification Policy and Procedure.

# **Entry Criteria**

Approved centres are responsible for reviewing and making decisions as to an applicant's ability to complete the learning programme successfully and meet the demands of the qualification. The initial assessment by the centre will need to consider the support that is readily available or can be made available to meet individual learner needs as appropriate.

The qualification has been designed to be accessible without artificial barriers that restrict access. For this qualification, applicants must be aged 19 years or over.

Learners are expected to hold the following:

- level 6 qualification or:
- first degree.

In the case of applicants whose first language is not English, then IELTS 6 (or equivalent) is required. International qualifications will be checked for appropriate enrolment to UK higher education postgraduate programmes where applicable. Applicants are normally required to produce two supporting references, at least one of which should preferably be academic.

In certain circumstances, applicants with considerable experience but no formal qualifications may be considered subject to interview and being able to demonstrate their ability to cope with the demands of the qualification.

# **Recognition of Prior Learning**

Recognition of Prior Learning (RPL) is a method of assessment (leading to the award of credit) that considers whether learners can demonstrate that they can meet the assessment requirements for a unit through knowledge, understanding or skills that they already possess and so do not need to develop through a course of learning.

QUALIFI encourages centres to recognise learners' previous achievements and experiences whether at work, home or at leisure, as well as in the classroom. RPL provides a route for the recognition of the achievements resulting from continuous learning. RPL enables recognition of achievement from a range of activities using any valid assessment

methodology. Provided that the assessment requirements of a given unit or qualification have been met, the use of RPL is acceptable for accrediting a unit, units or a whole qualification.

Evidence of learning must be valid and reliable. For full guidance on RPL please refer to QUALIFI's *Recognition of Prior Learning Policy*.

#### **Data Protection**

All personal information obtained from learners and other sources in connection with studies will be held securely and will be used during the course and after they leave the course for a variety of purposes and may be made available to our regulators. These should all be explained during the enrolment process at the commencement of learners' studies. If learners or centres would like a more detailed explanation of the partner and QUALIFI policies on the use and disclosure of personal information, please contact QUALIFI via email <a href="mailto:support@QUALIFI-international.com">support@QUALIFI-international.com</a>

#### **Learner Voice**

Learners can play an important part in improving the quality through the feedback that they give. In addition to the on-going discussion with the course team throughout the year, centres will have a range of mechanisms for learners to feed back about their experience of teaching and learning.

# **Professional Development and Training for Centres**

QUALIFI supports its approved centres with training relating to our qualifications. This support is available through a choice of training options offered through publications or through customised training at your centre.

The support we offer focuses on a range of issues including:

- planning for the delivery of a new programme;
- planning for assessment and grading;
- developing effective assignments;
- building your team and teamwork skills;
- developing learner-centred learning and teaching approaches;
- building in effective and efficient quality assurance systems.

Please contact us for further information.

# **Progression and Links to other QUALIFI Programmes**

Completing the QUALIFI Level 7 will enable learners to progress to:

- QUALIFI Level 8 Diploma;
- university to complete a master's degree;
- employment in an associated profession.

# **Qualification Structure and Requirements**

# **Credits and Total Qualification Time (TQT)**

The QUALIFI Level 7 Diploma in Relational Practice in Mental Health is 60 credits which equates to 600 hours of TQT.

**Total Qualification Time (TQT):** is an estimate of the total amount of time that could reasonably be expected to be required for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification.

Examples of activities that can contribute to Total Qualification Time include guided learning, independent and unsupervised research/learning, unsupervised compilation of a portfolio of work experience, unsupervised e-learning, unsupervised e-assessment, unsupervised coursework, watching a prerecorded podcast or webinar, unsupervised workbased learning.

**Guided Learning Hours (GLH):** are defined as the time when a tutor is present to give specific guidance towards the learning aim being studied on a programme. This definition includes lectures, tutorials and supervised study in, for example, open learning centres and learning workshops, live webinars, telephone tutorials or other forms of e-learning supervised by a tutor in real time. Guided learning includes any supervised assessment activity: this includes invigilated examination and observed assessment and observed workbased practice.

## **Rules of Combination**

Learners must complete 6 mandatory units to achieve a minimum of 40 credits total.

Unit Reference	Mandatory Units	Level	тот	Credits	GLH
M/650/7500	Neurobiology, Psychodynamic Theory and Practice	7	100	10	40
R/650/7501	Trauma-informed Approach in Mental Health	7	100	10	40
T/650/7502	Presenting Issues and Diagnoses in Mental Health	7	100	10	40
Y/650/7503	Enabling Recovery in Mental Health	7	100	10	40
A/650/7504	Social Dynamics in Mental Health	7	100	10	40
D/650/7505	Professional Skills in Mental Health	7	100	10	40
Total		Γotal	600	60	240

# **Achievement Requirements**

Learners must demonstrate they have met all learning outcomes and assessment criteria for all the required units to achieve this qualification. QUALIFI will issue certificates to all successful learners via their registered centres.

# **Awarding Classification/Grading**

This qualification grading is **Pass/Fail**. All units will be assessed internally through written assignment, marked internally by the QUALIFI approved centre and subject to external quality assurance by QUALIFI.

# **Assessment Strategy and Guidance**

QUALIFI will provide assessments for each unit of this qualification. These tasks will address all learning outcomes and related assessment criteria, all of which must be demonstrated/passed in order to achieve the qualification.

The tasks will enable learners to draw on work-related information and/or examples wherever possible. Some assessment tasks will contain a practical assignment which will require observation by an assessor (see Assessment Guidance for further information).

The assessment tasks will require learners to draw on real organisational information or case studies to illustrate their answers. To support this activity during the programme of learning, centres are required to make sure that they include case studies of relevant organisations and, wherever possible, encourage learners to draw on work-place opportunities to undertake research and investigation to support their learning.

QUALIFI provides a Candidate Workbook for each unit that learners should use to record their answers and/or cross-reference any supporting evidence relating to a practical task. Approved centres should request a copy of the assessment workbook.

Learner assessments will be marked internally by the approved centre and will be subject to external moderation by QUALIFI prior to certification.

All learning outcomes and related assessment criteria must be demonstrated/passed in order to achieve the qualification. To achieve a pass for each of the units, learners must provide evidence to demonstrate that they have fulfilled all the learning outcomes and meet the standards set for all assessment criteria.

Qualifi will provide a combination of assessment that cover the learning outcomes and assessment criteria. These may be as follows.

## 1: Formative Assessment

Formative assessment is an integral part of the assessment process, involving both the tutor/assessor and the learner about their progress during the course of study. Formative assessment takes place prior to summative assessment and focuses on helping the learner to reflect on their learning and improve their performance and does not confirm achievement of grades at this stage.

The main function of formative assessment is to provide feedback to enable the learner to make improvements to their work. This feedback should be prompt so it has meaning and context for the learner and time must be given following the feedback for actions to be complete. Feedback on formative assessment must be constructive and provide clear guidance and actions for improvement. All records should be available for auditing purposes as we may choose to check records of formative assessment as part of our ongoing quality assurance. Formative assessments will not contribute to the overall mark of the units.

# 2: Summative Assessment

Summative assessment is used to evaluate learner competence and progression at the end of a unit or component. Summative assessment should take place when the assessor deems that the learner is at a stage where competence can be demonstrated.

Learners should be made aware that summative assessment outcomes are subject to confirmation by the Internal Verifier and External Quality Assurer (EQA) and thus is

provisional and can be overridden. Assessors should annotate on the learner work where the evidence supports their decisions against the assessment criteria. Learners will need to be familiar with the assessment and grading criteria so that they can understand the quality of what is required.

Formative Assessment	Summative Assessment
used during the learning process	used at the end of the learning process
provides feedback on learning-in-process	evaluates achievement against learning outcomes and assessment criteria
dialogue-based, ungraded	graded pass / refer

Evidence of both formative and summative assessment MUST be made available at the time of external quality assurance – EQA.

# **Unit Specifications**

Unit RPMH701: Neurobiology, Psychodynamic Theory and Practice

Unit code: M/650/7500

RQF level: 7

# **Unit Aims**

This unit aims to address the contribution of neurobiology and psychodynamic theory and practice to our understanding of: The Mind, Object Relations Theory, Psychopathologies, The Individual and The Social. These four concepts are explored with reference to both their place within the theoretical framework and with respect to how they function within relational practice in a therapeutic environment.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve this unit, the learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
Understand neurobiology and psychodynamic theory and practice in relation to the mind.	<ul><li>1.1 Analyse the way in which human beings experience and function.</li><li>1.2 Evaluate the fundamental social nature of human beings.</li><li>1.3 Analyse the body-brain/mind system in accordance with relevant theory and practice</li></ul>
Understand neurobiology and psychodynamic theory and practice in relation to object relations theory.	2.1 Evaluate how thinking works and how it is limited/extended in accordance with relevant theory and practice. 2.2 Analyse the role of emotion in accordance with relevant theory and practice 2.3 Analyse the role and impact of splitting, idealization and denigration 2.4 Analyse the nature and role of acceptance
3. Understand neurobiology and psychodynamic theory and practice in relation to psychopathologies.	3.1 Evaluate psychopathology from a neuropsychodynamic perspective. 3.2 Analyse the processes that manifest in mental illness. 3.3 Assess the nature of the experiences of

	severe mental distress and its associated behaviours.
4. Understand neurobiology and psychodynamic theory and practice in relation to The Individual in the Social.	<ul> <li>4.1 Appraise the social production of mental illness in accordance with relevant theory and practice.</li> <li>4.2 Evaluate the nature and role of different modes of intersubjectivity and the mechanisms at play between individuals and in groups.</li> <li>4.3 Evaluate the role of culture and society in our experience of ourselves and others.</li> </ul>

## **Indicative Content**

- Biological motivational systems
- The unconscious
- The development of consciousness and the sense of self
- The nature of the mind
- Human beings as social animals
- The primacy of feelings
- The Reality and Pleasure Principles
- Continuity of being
- Splitting and psychotic processes
- The development of thought
- Gradual disillusion and the depressive position
- The experience of being human
- The physiology of object relations
- Psychopathology from a neuropsychodynamic perspective
- Challenge to concept of diagnosis
- Explaining concept of formulation
- Psychoses
- Personality Disorders
- Self-harming behaviours
- Suicide
- Addictions
- Social determinants of mental illness
- Social psychology and social neurobiology
- Freud: 'all psychology is social psychology'
- Winnicott: 'there is no such thing as an infant...'
- Bion: group processes and dynamics
- Transference and countertransference

Neuropsychodynamic formulations

- Defences
- Culture and society

# Assessment and Delivery Guidance

# **Delivery**

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

## Assessment

Learners' work presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as relational practitioners.

A variety of forms of assessment are used to incorporate breadth and depth of relevant knowledge, the ability to connect theory with practice and to grasp the inter-relationship between key concepts and their application. Assessment required for each module is specifically linked to that module and the pieces of submitted work vary according to the progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, including work-based pieces, and a supervised practice report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the workplace, and the underlying philosophy of the relational approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements, including the final presentation, are considered through the lens of the modules' focus.

# **Recommended Text**

Book: The Developing Mind, Dan Siegel Book: Why Love Matters, Gerhardt

Introduction: Toward a New Paradigm of Psychotherapy, Chapter 1: Modern Attachment Theory, the Central Role of Affect regulation in Development and Treatment, Chapter 4: The Right Brain Implicit Self Lies at the Core of Psychoanalysis, in Alan Schore Science and the Art of Psychotherapy,

Chapters 4, Freud, 5, Klein, and 6, Fairbairn in Greenberg and Mitchell, Object Relations in Psychoanalytic Theory

Chapter 1: An Object Relations Model of Personality and Personality Pathology, Eve Caligor and John Clarkin, in Clarkin, Fonagy and Gabbard, Psychodynamic Psychotherapy for Personality Disorders, Chapter 5, Love, Guilt and Reparation in Melanie Klein, Love, Guilt and Reparation

(Short) book: Matthew Dahlitz and Geoff Hall, The Psychotherapist's Essential Guide to the Brain

Article: Bessel van der Kolk, Developmental Trauma Disorder, in Psychiatric Annals

# Unit RPMH702: Trauma-informed Approach in Mental Health

Unit code: R/650/7501

RQF level: 7

# **Unit Aims**

This unit provides an in-depth knowledge of the effects that trauma can have on the mind and body, how practitioners work with this and work alongside Individual Psychotherapists and organisations to manage risk-taking behaviour within a community.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve this unit, the learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
Understand the nature and effects of trauma.	<ul> <li>1.1 Assess the effects of psychological and physical trauma.</li> <li>1.2 Evaluate the concept of compound trauma in accordance with relevant theory and practice.</li> <li>1.3 Assess the central role of trauma in mental health in accordance with relevant theory and practice.</li> <li>1.4 Analyse the basis of trauma-informed responses in accordance with relevant theory and practice.</li> </ul>
Evaluate the role of reflective practice in managing trauma.	2.1 Evaluate the role and significance of reflective practice in accordance with relevant theory and practice. 2.2 Evaluate the role and significance of the learning process in accordance with relevant theory and practice. 2.3 Distinguish between formal and informal reflective practice. 2.4 Differentiate between professional and personal reflective practice.
3. Understand the legal and regulatory requirements applying to mental capacity and abuse.	<ul> <li>3.1 Characterize different kinds of abuse.</li> <li>3.2 Assess the concept of the vulnerable adult in accordance with relevant theory and practice.</li> <li>3.3 Assess clients' mental capacity and when to raise safeguarding concerns in accordance</li> </ul>

	with relevant theory and practice. 3.4 Assess practitioners' role in safeguarding. 3.5 Appraise the requirements of physical safety and psychological thinking.
4. Understand the characteristics and effects of risk and risk-tolerant organizations in mental health.	<ul> <li>4.1 Evaluate the anxiety behind risk-averse responses in accordance with relevant theory and practice.</li> <li>4.2 Evaluate the role of positive risk in empowerment and providing positive experiences in accordance with relevant theory and practice.</li> <li>4.3 Assess the concept of compound trauma in accordance with relevant theory and practice.</li> <li>4.4 Differentiate the characteristics of "being with" and "doing with" in accordance with relevant theory and practice.</li> <li>4.5 Appraise the role of repeating risk as trauma re-enactment in accordance with relevant theory and practice.</li> </ul>

# **Indicative Content**

- Trauma and the activation of the fear system
- Trauma and re-enactment
- Trauma and the body.
- Vicarious trauma
- Reflection in Action
- Reflection on Action
- Reflection on Theory
- Learning as a culture
- Mental Capacity Act
- Safeguarding law
- Types of abuse & safeguarding
- Physical, Material, Psychological and Emotional abuse
- CHT's open door policy and DoLs
- Positive risk-taking and safeguarding
- The risk of risk averse organisations
- 'Working with' to mitigate risk
- Mind the gap
- Positive risk
- Repetition and trauma

# Assessment and Delivery Guidance

# Delivery

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

#### Assessment

Learners' work will be presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as therapeutic community practitioners.

A variety of forms of assessment are used to incorporate breadth and depth of relevant knowledge, the ability to connect theory with practice and to grasp the inter-relationship between key concepts and their application. Assessment required for each module is specifically linked to that module and the pieces of submitted work vary according to the progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, supervised practice report and training manager report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the therapeutic community and the underlying philosophy of the therapeutic community approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements are considered through the lens of the modules focus.

# **Recommended Text**

Book: Bessel van der Kolk, The Body Keeps the Score

Article: Felitti, on Adverse Childhood Events

Article: Schon and Reflective Practice

CHT Policies on Safeguarding, Mental Capacity

CHT clinical model

Risk assessment policy and documents

Risk assessment checklist CHT Safeguarding Policy

**CHT Mental Capacity Policy** 

Cooper, A., and Lousada, J. (2005) 'Introduction: the psyhchoanalytic study of welfare' in Cooper, A., and Lousada, J. (2005) *Borderline Welfare*, Karnac, London

Ferguson, H. (2016) 'Professional helping as negotiation in motion: social work as work on the move', *Applied Mobilities*, 1:2, 193-206

Dartington, T. (2010) Managing Vulnerability; The underlying dynamics of systems of care, Karnac, London

Halton, W. (2015) 'Obsessional-punitive defences in care systems: Menzies Lyth revisited' in Armstrong, D., and Rustin, M. (2015) *Social Defences Against Anxiety*, Karnac, London

## **Resources**

Scie learning resource on Adult Safeguarding: https://www.scie.org.uk/safeguarding/adults/

Scie learning resource on Mental Capacity: <a href="https://www.scie.org.uk/mca">https://www.scie.org.uk/mca</a>

Scie learning resource on DoLs: https://www.scie.org.uk/mca/dols/at-a-glance

Bucci, S., Berry, K., Danquah. A.N., Johnstone, L. (2020) 'How can attachment theory inform the design and delivery of mental health services' in 'Attachment Therapy and Psychosis' London: Routledge

Cockersell, P. (2018) 'Compound Trauma and Complex Needs' in 'Social Exclusion, Compound Trauma and Recovery' London: Jessica Kingsley Publishers

Halton, W. (1999) 'Some unconscious aspects of organizational life. Contributions from psychoanalysis' in The Unconscious at Work. Individual and organisational stress in the Human Services' London: Routledge

Motz, A. (2009) 'Self-harm as a sign of hope' in 'Managing Self-Harm. Psychological Perspectives' London: Routledge

Van Der Kolk, B. (2015) Brain, Mind and Body in the Healing of Trauma' in 'The Body Keeps the Score. New York: Penguin

# Unit RPMH703: Presenting Issues and Diagnoses in Mental Health

Unit code: T/650/7502

RQF level: 7

# **Unit Aims**

This unit aims to provide learners with the knowledge and skills needed to understand three major sets of diagnoses (psychosis, personality disorders, dual diagnosis) and two common presenting issues (substance dependency, self-harm), their history, social and cultural contexts, major treatment models, and theory and practice of psychodynamic approaches to working with people experiencing them.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve this unit, the learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
Understand the role of dual diagnosis in the treatment of drug users.	1.1 Assess the cultural fabric of current policies in the treatment of drug users in accordance with relevant theory and practice.  1.2 Evaluate the influence of culture on countertransference toward drug users in accordance with relevant theory and practice.  1.3 Analyse the object relations and attachment disturbances in addiction in accordance with relevant theory and practice.  1.4 Evaluate the role of relationships in recovery from drugs use in accordance with relevant theory and practice.  1.5 Assess when actions towards abstinence are possible in accordance with relevant theory and practice.
2. Understand the drivers to self-harm and its treatment.	<ul> <li>2.1 Evaluate self-harm as a meaningful behaviour in accordance with relevant theory and practice.</li> <li>2.2 Evaluate the features and implications of risk-averse approaches possible in accordance with relevant theory and practice.</li> <li>2.3 Analyse the requirements of holding an</li> </ul>

	interpretation that enables the ability to work with self-harm and which protects from projective identification.
	2.4 Evaluate the need to treat others as
	adults even when faced with risky behaviour
	in accordance with relevant theory and practice.
3. Understand the nature of psychosis and	3.1 Analyse the history and social, cultural
its effects.	and power dynamics of diagnoses of
	psychosis in accordance with relevant theory and practice.
	3.2 Analyse psychosis as part of development
	in accordance with relevant theory and
	practice.
	3.3 Evaluate the nature of psychotic
	behaviours and thinking as a communicative
	process.
	3.4 Analyse the concept of splitting and how
	it is enacted in accordance with relevant
	theory and practice.
	3.5 Assess the requirements of recovery and
	their implications in accordance with relevant
	theory and practice.
4. Understand personality disorders and	4.1 Analyse the social therapy perspective of
their implications.	working with personality disorders in
·	accordance with relevant theory and
	practice.
	4.2 Evaluate the object relations perspective
	on personality disorders in accordance with
	relevant theory and practice.
	4.3 Evaluate mentalization perspectives on
	working with personality disorders in
	accordance with relevant theory and
	practice.
	practice.

# **Indicative Content**

- War on drugs history
- Drugs as the predictable object and claiming back of control
- Addiction as self-medication
- Drugs use as re-enactment of love-hate relationship with the primary object
- Cycle of change
- Self-harm as communication
- Self-harm as re-enactment of trauma

- Transitional analysis & drama triangle
- History of diagnoses of psychosis
- Psychiatric classifications of psychosis
- Psychoanalytic concepts of psychosis
- The recovery movement and psychosis
- Trauma and psychosis
- Understanding the history of the diagnosis
- Understanding the relationship between trauma, development, attachment, and personality disorder characteristics

# Assessment and Delivery Guidance

# **Delivery**

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

# Assessment

Learners' work will be presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as therapeutic community practitioners.

A variety of forms of assessment are used to incorporate breadth and depth of relevant knowledge, the ability to connect theory with practice and to grasp the inter-relationship between key concepts and their application. Assessment required for each module is specifically linked to that module and the pieces of submitted work vary according to the progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, supervised practice report and training manager report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the therapeutic community and the underlying philosophy of the therapeutic community approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements are considered through the lens of the modules focus.

# **Recommended Text**

Book: Martin Weegman ed., The Psychodynamics of Addiction

Book: J. Bentall, Models of Madness

Book: Anatomy of an Epidemic

Article: Geoff Shepherd, The Evidence for Recovery

Article: Mind etc Consensus Statement on Personality DisorderBriggs, S Lemma, A and

Crouch, W, (2008) Relating to Self-harm and Suicide, Hove: Routledge

Motz, Anna, (2009) Managing Self harm: Psychological Perspectives,

London: Routledge. Specifically chapters:

Chapter 1: Self harm as a sign of hope by Anna Motz

Chapter 2: The paradox of self-harm by Anna Motz and Heather Jones

Chapter 5: Self harm and attachment by Elizabeth Grocutt

Adshead, G, (June 2019) 'Attachment Theory, affect regulation and psychopathology' conference

Joiner, T (June 2009), The Interpersonal-Psychological Theory of Suicidal Behavior: Current Empirical Status, (https://www.apa.org/science/about/psa/2009/06/sci-brief)

Campbell, D, and Hale, R (1991) 'Suicidal acts' in Textbook of Psychotherapy in Psychiatric Practice by Holmes, J, Churchill Livingstone

<u>Formulation in Psychology and Psychotherapy: Making sense of people's problems:</u>
<u>Amazon.co.uk: Johnstone, Lucy, Dallos, Rudi: 8601404259180: Books</u>

# **Unit RPMH704: Enabling Recovery in Mental Health**

Unit code: Y/650/7503

RQF level: 7

# **Unit Aims**

This unit aims to provide learners with the knowledge and skills needed to understand the theory and practice of group approaches to psychotherapeutic work within the frame of the therapeutic community. The main focus is on psychoanalytic understandings and interpretations of the relation between the group and the individual.

The basic concepts of group dynamics will be elaborated and how the understanding of these informs therapeutic practice. The place of different forms of group approach within the frame of the therapeutic community are addressed as well as the issues which arise when working with psychotic presentations in groups.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve t the learner must be able to:	chis unit, Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
Evaluate the role of social the (key-working).	1.1 Assess the key-worker therapeutic function. 1.2 Evaluate the role and importance of mirroring and role-modelling. 1.3 Evaluate the role and importance of reiterating realistic expectations. 1.4 Analyse the containing role of 'being with' sharing the same anxieties. 1.5 Analyse ways of working with and managing anxiety.
2. Evaluate the role of transactic analysis and the cycle of chan challenging and motivating.	adult-to-adult interaction

- 3. Evaluate the characteristic of wellbeing and interdependency and social networks.
- 3.1 Evaluate wellbeing as an alternative to the dichotomy of mental and physical health.
- 3.2 Evaluate the role and importance of wellbeing within a recovery plan.
- 3.3 Analyse ways of improving clients' wellbeing.
- 3.4 Analyse the factors that enhance or damage wellbeing.
- 3.5 Evaluate the concept of interdependency and the psychological conflicts that can lie beneath the difficulties in networking.
- 3.6 Analyse the fear system and the need for a social network.
- 3.7 Evaluate the role and importance of promoting community integration, participation and contribution.

# **Indicative Content**

- The importance of care-seeking and care-giving in attachment
- Being with the reparative emotional experience
- Listening skills
- Doing with containing anxiety
- Professional and therapeutic boundaries
- Transactional analysis
- Drama triangle
- Cycle of change
- The impact of nutrition and sleep on wellbeing
- The 5 areas of wellbeing
- The Mind-Body-Brain system
- The impact of psychopharmacology
- Care-giving and care-seeking dynamics
- The dependent child and the interdependent adult
- Attachment and fear of dependency

# **Assessment and Delivery Guidance**

# **Delivery**

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

#### **Assessment**

Learners' work will be presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as therapeutic community practitioners.

A variety of forms of assessment are used to incorporate breadth and depth of relevant knowledge, the ability to connect theory with practice and to grasp the inter-relationship between key concepts and their application. Assessment required for each module is specifically linked to that module and the pieces of submitted work vary according to the progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, supervised practice report and training manager report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the therapeutic community and the underlying philosophy of the therapeutic community approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements are considered through the lens of the modules focus.

#### **Recommended Text**

Keyworking policy and tool

CHT clinical model

Book: The Problem of Attachment for Caregiving, Heard and Lake

Article: Friedli on resilience, social inclusion and mental health

Chapters: Emma Williamson on Dependence in Cockersell, ed., Social Exclusion, Compound

Trauma and Recovery

Chapter: on Belonging, from Haigh and Pearce in Therapeutic Communities,

Shen W, Yuan Y, Liu C and Luo J (2016) Uncovering the Framework of Brain-Mind-Body in Creative Insight. Front. Psychol. 7:1327. doi: 10.3389/fpsyg.2016.01327

Aked J and Thompson S, Five Ways to Wellbeing, London: New Economics FoundationMintzer J, Donovan KA, Kindy AZ, Lock SL, Chura LR and Barracca N (2019) Lifestyle Choices and Brain, Health. Front. Med. 6:204. doi: 10.3389/fmed.2019.00204

Renoir T, Hasebe K and Gray L (2013) Mind and body: how the health of the body impacts on neuropsychiatry. Front.Pharmacol. 4:158. doi:10.3389/fphar. 2013.00158

Panter-Brick C and Leckman J F, Resilience in child development – interconnected pathways to wellbeing, Journal of Child Psychology and Psychiatry 54:4 (2013), pp 333–336

Mandolesi L, Polverino A, Montuori S, Foti F, Ferraioli G, Sorrentino P and Sorrentino G (2018) Effects of Physical Exercise on Cognitive Functioning and Wellbeing: Biological and

Berne, Eric. (1964) Games People Play: The Psychology of Human Relationships. New York: Grove Press,.

Leamy et al, (2011), Conceptual Framework for Recovery in Mental Health, BJ Psych, 199:445-452

Psychological Benefits. Front. Psychol. 9:509. doi: 10.3389/fpsyg.2018.00509

Stewart & Joines, (2012) TA Today

Karpman, S. (1971) Options. Transactional Analysis Journal 1:1

Karpman, S. (1968) Fairytales and Script Drama Analysis.

# Unit RPMH705: Social Dynamics in Mental Health

Unit code: A/650/7504

RQF level: 7

# **Unit Aims**

This unit aims to provide learners with the knowledge and skills needed to understand mental illness and mental distress beyond the bounds of the individual and as part of various social processes including the family, groups and culture; to be able to facilitate formal and informal groups; to understand the concepts of and appreciate different cultural perspectives on 'madness' and 'recovery'; to understand the social nature of suicide, social and cultural attitudes to suicide, the psychodynamics of suicide and relational practice as a risk-management tool to mitigate the risk of suicide.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve this unit, the learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
Evaluate the role of the family and carers in mental health.	<ul><li>1.1 Evaluate the impact of family contact.</li><li>1.2 Analyse an organizational model and the family's role in it.</li><li>1.3 Assess risks from a family and ways of mitigating its impact.</li></ul>
2. Facilitate groups in mental health.	<ul><li>2.1 Analyse the basic group of dynamics.</li><li>2.2 Evaluate ways of keeping a group therapeutic.</li><li>2.3 Analyse anti-therapeutic group dynamics.</li><li>2.4 Evaluate the role of creative activities and their therapeutic power.</li></ul>
3. Evaluate the role and culture in the concepts of madness and recovery in mental health.	3.1 Analyse the impact of society and culture on individuals' emotional health. 3.2 Analyse the impact of intracultural struggles on stigma and prejudice. 3.3 Evaluate the need to avoid assumptions in a therapeutic relationship.
4. Understand the social and psychodynamic aspects of suicide and be able to formulate relational risk assessment and mitigation plans.	<ul> <li>4.1 Explain the social dynamics of suicide.</li> <li>4.2 Explain the psychological and emotional processes contributing to the feeling of wanting to kill oneself.</li> <li>4.3 Formulate a relational risk assessment and mitigation plan.</li> </ul>

#### **Indicative Content**

- Systemic and family dynamics
- Development of self and relationships to primary carers and siblings
- Effect of splitting and other defences against early infantile and childhood anxieties
- CHT model
- Bion, Foulkes history of the work with groups
- Winnicott Playing & Reality?
- Being with & doing with therapeutic action
- The role of group facilitator
- The interface between the social and the individual
- Psychodynamic perspectives on suicide
- Suicide and society
- Risk assessment in suicide
- Keeping safe plans

# **Assessment and Delivery Guidance**

# **Delivery**

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

# **Assessment**

Learners' work will be presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as therapeutic community practitioners.

A variety of forms of assessment are used to incorporate breadth and depth of relevant knowledge, the ability to connect theory with practice and to grasp the inter-relationship between key concepts and their application. Assessment required for each module is specifically linked to that module and the pieces of submitted work vary according to the progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, supervised practice report and training manager report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the therapeutic community and the underlying philosophy of the therapeutic community approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements are considered through the lens of the modules focus.

# **Recommended Text**

CHT (2021) Working With Families Policy

Byng-Hall, J. (1985) 'The family script: a useful bridge between theory and practice' in *Journal of Family Therapy* 7(3) pp: 301-305

Burnham, J. (1986) Family Therapy; first steps towards a Systemic Approach, pp: 62-74, London, Routledge

Carr, A. (2000) Family Therapy; Concepts, Process and Practice, pp. 48-75, Chichester, Wiley

Gerhardt, S. (2014) Why Love Matters: How affection shapes a baby's brain, London, Routledge

Krause, I,B. (1998) Therapy across culture, pp: 139-163, London, Sage

Minuchin, S. (1974) Families and Family Therapy, pp: 44-56, London, Routledge

Swainson, M., & Tasker, F. (2005) 'Genograms redrawn: lesbian couples define their families' in *Journal of GLBT Family Studies*, 1(2) pp: 3-27

Barwick, N. (2018) 'Core Concepts: What goes on in groups?' (part one and two) in 'Group Therapy. A Group-Analytic Approach' London: Routledge, pp. 18-50

Behr, H., Hearst, L. (2005) 'Challenging Scenarios' in 'Group-Analytic Psychotherapy. A meeting of Minds' London: Whurr Publishers Ltd., pp. 150-163

Thompson, S. (1999) 'A Group and its Processes' in 'The Group Context" London: Jessica Kingsley Publishers, pp. 15-30

# Unit RPMH706: Professional Skills in Mental Health

Unit code: D/650/7505

RQF level: 7

# **Unit Aims**

This unit aims to provide learners with the knowledge and skills needed to take a professional approach to working in the field of mental health, displaying a critical understanding of evidence and research in theory and practice, an ethical approach to conducting themselves in work relationships, a commitment to continuous professional development, and practise the key attitudes behind good relational practice.

# **Learning Outcomes and Assessment Criteria**

Learning Outcomes: To achieve this unit, the learner must be able to:		Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
1.	Evaluate the role of research, evidence and critical thinking in mental health.	<ul><li>1.1 Analyse the politics of evidence.</li><li>1.2 Evaluate the principles of critical thinking.</li><li>1.3 Analyse the methodologies of evidence.</li></ul>
2.	Understand the requirements of professional conduct and ethics in mental health.	<ul><li>2.1 Evaluate the role of professional conduct within an ethical code.</li><li>2.2 Analyse the role and importance of whistleblowing and challenge.</li><li>2.3 Assess the way that codes of conduct are applied.</li></ul>
3. Understand self-development as a practitioner in mental health.		<ul><li>3.1 Analyse the role and importance of using every learning and development opportunity.</li><li>3.2 Assess the role and importance of a self-evaluating, reflective stance.</li></ul>
3.	Apply the fundamental skills required by any mental health professional.	<ul> <li>4.1 Explain the concept of and be able to practise active listening.</li> <li>4.2 Analyse the difference between responding and reacting.</li> <li>4.3 Evaluate the role and importance of writing clear, honest notes.</li> <li>4.4 Analyse the role and the importance of curiosity and thinking, their benefits and how they have an impact on clients/patients/residents.</li> </ul>

#### **Indicative Content**

- Evidence as subjective, political and philosophical
- Thesis, antithesis, synthesis
- The Hermeneutic Circle
- The Hypothetico-Deductive Model
- Randomised Control Trials
- Concept of a 'code of conduct'
- Local codes of conduct and values
- UK Council for Psychotherapy (UKCP) code of conduct and values
- Law Society code of conduct
- Applied ethics
- Challenge and Whistleblowing
- The importance of CPD
- Self-evaluation and reflective practice
- Pride, humility and skill
- Learning from the patient/client/colleague
- Learning from mistakes
- Active listening
- Non-reactive interactions
- Note writing

# Assessment and Delivery Guidance

# Delivery

This unit will be delivered via a range of learning and teaching methods combining theoretical lectures, trainee presentations on practice and clinical discussions and a reflective group.

# Assessment

Learners' work will be presented for assessment will be marked according to a range of criteria representing professional work-based knowledge, reflective practice and practical capability as therapeutic community practitioners.

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progress of the trainee through the six terms of the course. Assessment of learners' knowledge and skills of critical and clinical analysis is achieved through essay writing, case study presentations and assessment of other written pieces, supervised practice report and training manager report.

As a work-based learning programme, learners' submissions are expected to demonstrate awareness of critical thinking ability. They achieve this by exploring the links between a) theory and practice, b) personal process and the dynamic impact of the work on self, c) the diverse therapeutic spaces within the therapeutic community and the underlying philosophy of the therapeutic community approach and d) therapeutic practice and ethical reflection. While the theory essay provides the key reference point for each module's content all other assessment elements are considered through the lens of the modules focus.

# **Recommended Text**

Article: F. Cartwright, on the 'gold standard' of research

Articles: Shedler on evidence for psychodynamic psychotherapy, Solms on evidence for psychoanalytic approaches

Local codes of conduct and values

UKCP code of conduct and values

Law Society code of conduct

Whistleblowing procedure

Article: on Schon, reflective practice and a learning culture

# **Contact Details**

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