Standards of proficiency
Practitioner psychologists
Contents

Contents 2
Foreword 3
Introduction 5
Standards of proficiency 12
Foreword

We are pleased to present the Health and Care Professions Council’s standards of proficiency for practitioner psychologists.

We first published standards of proficiency for practitioner psychologists in July 2009. We review the standards regularly to look at how they are working and to check they continue to reflect current practice in the professions we regulate.

These new revised standards are a result of our most recent review of the standards of proficiency. The revised standards reflect the extent of developments in practice within each profession, in line with feedback from our public consultation exercise. The consultation and engagement work identified key themes, which the new standards of proficiency embed. These focus on technology and digital skills, leadership, service user engagement, and health, wellbeing and maintaining fitness to practise. Equality, diversity and inclusion (EDI) is another key focus of the standards, with an expectation of registrants to be proactive in thinking about the care they can offer with specific importance on
making sure practice is inclusive for all service users. We have also made changes to the wording of the standards to move registrants away from a passive understanding of the standards and towards active implementation of them.

The profession-specific standards for practitioner psychologists included in this document were developed with the input of the relevant professional bodies and the views of all stakeholders during our consultation work. The review process and consultation produced valuable feedback and we are grateful to all those who gave their time to help us in shaping the new standards.

We are confident that the standards are fit for purpose and reflect safe and effective professional practice for practitioner psychologists.

These standards are effective from 1 September 2023.
Introduction

This document sets out the standards of proficiency for practitioner psychologists. These standards set out safe and effective practice in the professions we regulate. They are the threshold standards we consider necessary to protect members of the public. They set out what any applicant to our Register must know, understand and be able to do by the time they have applied for registration. Once on the Register, professionals must meet those standards of proficiency which relate to the areas in which they work.

We also expect registrants to keep to the HCPC standards of conduct, performance and ethics and standards for continuing professional development. We publish these in separate documents, which you can find on our website.

The standards of proficiency in this document include both generic elements, which apply to all our registrants, and profession-specific elements, which are relevant to registrants belonging to one of the professions we currently regulate.
The standards that apply to all professions are written in bold text.

The profession-specific standards are written in plain text.

The domain-specific standards have their own headings, and are written in plain text.

We have numbered the standards so that you can refer to them more easily. The standards are not hierarchical and are all equally important for practice.

A note about our expectations of you

You must meet all the standards of proficiency to register with us and meet the standards relevant to your scope of practice to stay registered with us.

It is important that you read and understand this document. If your practice is called into question, we will consider these standards (and the standards of conduct, performance and ethics) in deciding what action, if any, we need to take.
The standards set out in this document complement information and guidance issued by other organisations, such as your professional body or your employer. We recognise the valuable role played by professional bodies in providing guidance and advice about good practice which can help you to meet the standards in this document.

Your scope of practice

Your scope of practice is the area or areas of your profession in which you have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets the standards and does not pose any danger to the public or to yourself.

We recognise that a registrant’s scope of practice will change over time and that the practice of experienced registrants often becomes more focused and specialised than that of newly registered colleagues. This might be because of specialisation in a certain area or with a particular client group, or a movement into roles in management, education or research. Every time you renew your registration, you will be asked to sign a
declaration that you continue to meet the standards of proficiency that apply to your scope of practice.

**Your particular scope of practice may mean that you are unable to continue to demonstrate that you meet all of the standards that apply for the whole of your profession.**

As long as you make sure that you are practising safely and effectively within your given scope of practice and do not practise in the areas where you are not proficient to do so, this will not be a problem. If you want to move outside of your scope of practice, you should be certain that you are capable of working lawfully, safely and effectively. This means that you need to exercise personal judgement by undertaking any necessary training or gaining experience, before moving into a new area of practice.

**Meeting the standards**

It is important that you meet these standards and are able to practise lawfully, safely and effectively. However, we do not dictate how you should meet the standards.
There is normally more than one way in which each standard can be met and the way in which you meet the standards might change over time because of improvements in technology or changes in your practice.

We often receive questions from registrants who are concerned that something they have been asked to do, a policy, or the way in which they work might mean they cannot meet the standards. They are often worried that this might have an effect on their registration.

As an autonomous professional, you need to make informed, reasoned decisions about your practice to ensure that you meet the standards that apply to you. This includes seeking advice and support from education providers, employers, colleagues, professional bodies, unions and others to ensure that the wellbeing of service users is safeguarded at all times. So long as you do this and can justify your decisions if asked to, it is very unlikely that you will not meet the standards.

Language
We recognise that our registrants work in a range of different settings, which include direct practice, management, education, research and roles in industry. We also recognise that the use of terminology can be an emotive issue.

Our registrants work with very different people and use different terms to describe the groups that use, or are affected by, their services. Some of our registrants work with patients, others with clients and others with service users. The terms that you use will depend on how and where you work. We have used terms in these standards which we believe best reflect the groups that you work with.

In the standards of proficiency, we use phrases such as ‘understand’ and ‘know’. This is so the standards remain applicable to current registrants in maintaining their fitness to practise, as well as prospective registrants who have not yet started practising and are applying for registration for the first time.

These standards may change in the future.
We have produced these standards after speaking to our stakeholders and holding a formal public consultation.

We will continue to listen to our stakeholders and will keep our standards under continual review. Therefore, we may make further changes in the future to take into account changes in practice.

We will always publicise any changes to the standards that we make by, for instance, publishing notices on our website and informing professional bodies.
Standards of proficiency

At the point of registration, practitioner psychologists must be able to:

1: practise safely and effectively within their scope of practice

1.1: identify the limits of their practice and when to seek advice or refer to another professional or service

1.2: recognise the need to manage their own workload and resources safely and effectively, including managing the emotional burden that comes with working in a pressured environment

1.3: keep their skills and knowledge up to date and understand the importance of continuing professional development throughout their career
2: practise within the legal and ethical boundaries of their profession

2.1: maintain high standards of personal and professional conduct

2.2: promote and protect the service user’s interests at all times

2.3: understand the importance of safeguarding by actively looking for signs of abuse, demonstrating understanding of relevant safeguarding processes and engaging in these processes where necessary

2.4: understand what is required of them by the Health and Care Professions Council, including, but not limited to, the standards of conduct, performance and ethics

2.5: respect and uphold the rights, dignity, values and autonomy of service users, including their role
in the assessment, diagnostic, treatment and/or therapeutic process

2.6: recognise that relationships with service users, carers and others should be based on mutual respect and trust, maintaining high standards of care in all circumstances

2.7: understand the importance of and be able to obtain valid consent, which is voluntary and informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented

2.8: understand the importance of capacity in the context of delivering care and treatment

2.9: understand the scope of a professional duty of care, and exercise that duty

2.10: understand and apply legislation, policies and guidance relevant to their profession and scope of practice
2.11: recognise the power imbalance that comes with being a healthcare professional, and ensure they do not abuse this for personal gain

2.12: understand the complex ethical and legal issues of any form of dual relationship and the impact these may have on service users

2.13: recognise appropriate boundaries and understand the dynamics of power relationships

2.14: understand the organisational context for their practice as a practitioner psychologist

3: look after their health and wellbeing, seeking appropriate support where necessary

3.1: identify anxiety and stress in themselves and recognise the potential impact on their practice
3.2: understand the importance of their own mental and physical health and wellbeing strategies in maintaining fitness to practise

3.3: understand how to take appropriate action if their health may affect their ability to practise safely and effectively, including seeking help and support when necessary

3.4: develop and adopt clear strategies for physical and mental self-care and self-awareness, to maintain a high standard of professional effectiveness and a safe working environment

3.5: manage the physical, psychological and emotional impact of their practice

4: practise as an autonomous professional, exercising their own professional judgement
4.1: recognise that they are personally responsible for, and must be able to justify, their decisions and actions

4.2: use their skills, knowledge and experience, and the information available to them, to make informed decisions and/or take action where necessary

4.3: make reasoned decisions to initiate, continue, modify or cease treatment, or the use of techniques or procedures, and record the decisions and reasoning appropriately

4.4: make and receive appropriate referrals, where necessary

4.5: exercise personal initiative

4.6: demonstrate a logical and systematic approach to problem-solving

4.7: use research, reasoning and problem-solving skills when determining appropriate actions

4.8: understand the need for active participation in training, supervision and mentoring in supporting
high standards of practice, and personal and professional conduct, and the importance of demonstrating this in practice

5: recognise the impact of culture, equality and diversity on practice and practise in a non-discriminatory and inclusive manner

5.1: respond appropriately to the needs of all groups and individuals in practice, recognising that this can be affected by difference of any kind including, but not limited to, protected characteristics,¹ intersectional experiences and cultural differences

¹ The Equality Act 2010 defines the protected characteristics as age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity. Equivalent equality legislation in Northern Ireland protects age, disability, gender, race, religion or belief and sexual orientation.
5.2: understand equality legislation and apply it to their practice

5.3: recognise the potential impact of their own values, beliefs and personal biases (which may be unconscious) on practice and take personal action to ensure all service users and carers are treated appropriately with respect and dignity

5.4: understand the duty to make reasonable adjustments in practice and be able to make and support reasonable adjustments in their and others’ practice

5.5: recognise the characteristics and consequences of barriers to inclusion, including for socially isolated groups

5.6: actively challenge these barriers, supporting the implementation of change wherever possible

5.7: recognise that regard to equality, diversity and inclusion needs to be embedded in the application of all HCPC standards, across all areas of practice
5.8: understand the impact of differences of any kind, including, but not limited to, the protected characteristics,\(^2\) intersectional experiences and cultural differences, on psychological wellbeing or behaviour including how these differences may result in experiences of marginalisation.

5.9: understand the requirement to adapt practice to meet the needs of different groups and individuals.

6: understand the importance of and maintain confidentiality.

\(^2\) The Equality Act 2010 defines the protected characteristics as age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity. Equivalent equality legislation in Northern Ireland protects age, disability, gender, race, religion or belief and sexual orientation.
6.1: adhere to the professional duty of confidentiality and understand when disclosure may be required

6.2: understand the principles of information and data governance and be aware of the safe and effective use of health, social care and other relevant information

6.3: recognise and respond in a timely manner to situations where it is necessary to share information to safeguard service users, carers and/or the wider public

6.4: understand the need to ensure that confidentiality is maintained in all situations in which service users rely on additional communication support (such as interpreters or translators)

6.5: recognise that the concepts of confidentiality and informed consent extend to all mediums, including illustrative clinical records such as photography, video and audio recordings and digital platforms
7: communicate effectively

7.1: use effective and appropriate verbal and non-verbal skills to communicate with service users, carers, colleagues and others

7.2: communicate in English to the required standard for their profession (equivalent to level 7 of the International English Language Testing System, with no element below 6.5³)

7.3: understand the characteristics and consequences of verbal and non-verbal communication and recognise how these can be

³ The International English Language Testing System (IELTS) tests competence in the English language. Applicants who have qualified outside of the UK, whose first language is not English and who are not applying through the Swiss Mutual Recognition Route (SMR) must provide evidence that they have reached the necessary standard. More information is available here: Statement on English language proficiency requirements for internationally trained health and care professionals.
affected by difference of any kind, including, but not limited to, protected characteristics,\(^4\) intersectional experiences and cultural differences

7.4: work with service users and/or their carers to facilitate the service user’s preferred role in decision-making, and provide service users and carers with the information they may need where appropriate

7.5: modify their own means of communication to address the individual communication needs and preferences of service users and carers, and remove any barriers to communication where possible

7.6: understand the need to support the communication needs of service users and carers, such as through the use of an appropriate interpreter

\(^4\) The Equality Act 2010 defines the protected characteristics as age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity. Equivalent equality legislation in Northern Ireland protects age, disability, gender, race, religion or belief and sexual orientation.
7.7: use information, communication and digital technologies appropriate to their practice

7.8: understand the need to provide service users or people acting on their behalf with the information necessary, in accessible formats, to enable them to make informed decisions

7.9: select the appropriate means for communicating feedback to service users

7.10: provide psychological opinion and advice in formal settings, as appropriate

7.11: communicate ideas and conclusions clearly and effectively to specialist and non-specialist audiences

7.12: explain the nature and purpose of specific psychological techniques to service users

7.13: summarise and present complex ideas in an appropriate form

7.14: use formulations to assist multi-professional communication and understanding
7.15: understand explicit and implicit communications in a practitioner–service user relationship

7.16: appropriately define and contract work with commissioning service users or their representatives

Counselling psychologists only

7.17: understand how empathic understanding can be helped by creativity and artistry in the use of language and metaphor

8: work appropriately with others

8.1: work in partnership with service users, carers, colleagues and others

8.2: recognise the principles and practices of other health and care professionals and systems and how they interact with their profession
8.3: understand the need to build and sustain professional relationships as both an autonomous practitioner and collaboratively as a member of a team

8.4: contribute effectively to work undertaken as part of a multi-disciplinary team

8.5: identify anxiety and stress in service users, carers and colleagues, adapting their practice and providing support where appropriate

8.6: understand the qualities, behaviours and benefits of leadership

8.7: recognise that leadership is a skill all professionals can demonstrate

8.8: identify their own leadership qualities, behaviours and approaches, taking into account the importance of equality, diversity and inclusion

8.9: demonstrate leadership behaviours appropriate to their practice

8.10: act as a role model for others
8.11: promote and engage in the learning of others

8.12: understand the need to engage service users and carers in planning and evaluating assessments, treatments and interventions to meet their needs and goals

8.13: understand the need to implement interventions, care plans or management plans in partnership with service users, other professionals and carers

8.14: initiate, develop and end a practitioner–service user relationship

8.15: understand the dynamics present in relationships between service users and practitioners

8.16: plan, design and deliver teaching and training which takes into account the needs and goals of participants

8.17: support the learning of others in the application of psychological skills, knowledge, practices and procedures
8.18: determine and use appropriate psychological formulations in partnership with service users to facilitate their understanding of their experience or situation

9: maintain records appropriately

9.1: keep full, clear and accurate records in accordance with applicable legislation, protocols and guidelines

9.2: manage records and all other information in accordance with applicable legislation, protocols and guidelines

9.3: use digital record keeping tools, where required

10: reflect on and review practice
10.1: understand the value of reflective practice and the need to record the outcome of such reflection to support continuous improvement

10.2: recognise the value of multi-disciplinary reviews, case conferences and other methods of review

10.3: reflect critically on their practice and consider alternative ways of working

10.4: understand models of supervision and their contribution to practice

Clinical psychologists and counselling psychologists only

10.5: critically reflect on the use of self in the therapeutic process

11: assure the quality of their practice
11.1: engage in evidence-based practice

11.2: gather and use feedback and information, including qualitative and quantitative data, to evaluate the response of service users to their care

11.3: monitor and systematically evaluate the quality of practice, and maintain an effective quality management and quality assurance process working towards continual improvement

11.4: participate in quality management, including quality control, quality assurance, clinical governance and the use of appropriate outcome measures

11.5: evaluate care plans or intervention plans using recognised and appropriate outcome measures, in conjunction with the service user where possible, and revise the plans as necessary

11.6: recognise the value of gathering and using data for quality assurance and improvement programmes
11.7: revise formulations in the light of ongoing intervention and, when necessary, reformulate the situation

11.8: monitor agreements and practices with service users, groups and organisations

12: understand and apply the key concepts of the knowledge base relevant to their profession

12.1: understand the structure and function of the human body, together with knowledge of physical and mental health, disease, disorder and dysfunction relevant to their profession

12.2: demonstrate awareness of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process

12.3: recognise the role(s) of other professions and stakeholders relevant to the work of their domain,
and understand how they may relate to the role of practitioner psychologist

12.4: understand the structures and functions of health and social care systems and services in the UK, plus other services relevant to the work of their domain

12.5: understand the theoretical basis of, and the variety of approaches to, assessment and intervention

12.6: understand the role of the practitioner psychologist across a range of settings and services

12.7: understand the application of consultation models to service delivery and practice, including the role of leadership and group processes

**Clinical psychologists only**

12.8: understand theories and evidence concerning psychological development and psychological difficulties across the lifespan and their assessment and remediation
12.9: understand more than one evidence-based model of formal psychological therapy

12.10: understand psychological models related to how biological, sociological and circumstantial or life-event-related factors impinge on psychological processes to affect psychological wellbeing

12.11: understand psychological models related to a range of presentations including:

- service users with presentations from acute to enduring and mild to severe;
- problems with biological or neuropsychological aspects; and
- problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions

12.12: understand psychological models related to service users:
- from a range of social and cultural backgrounds;
- of all ages;
- across a range of intellectual functioning;
- with significant levels of challenging behaviour;
- with developmental learning disabilities and cognitive impairment;
- with communication difficulties;
- with substance misuse problems; and
- with physical health problems

12.13: understand psychological models related to working:

- with service users, couples, families, carers, groups and at the organisational and community level; and
- in a variety of settings including in-patient or other residential facilities with high-dependency needs, secondary health care and community or primary care

12.14: understand change and transition processes at the individual, group and organisational level
12.15: understand social approaches such as those informed by community, critical and social constructivist perspectives

12.16: understand the impact of psychopharmacological and other clinical interventions on psychological work with service users

**Counselling psychologists only**

12.17: understand the philosophical bases which underpin those psychological theories

12.18: understand the philosophy, theory and practice of more than one evidence-based model of formal psychological therapy

12.19: understand psychological models related to a range of presentations including:

- service users with presentations from acute to enduring and mild to severe;
- problems with biological or neuropsychological aspects; and
- problems with mainly psychosocial factors including problems of coping, adaptation and resilience to
adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions

12.20: understand the therapeutic relationship and alliance as conceptualised by each model

12.21: understand the spiritual and cultural traditions and practices relevant to counselling psychology and their application to service users and carers, as well as its variation at organisational and community levels

12.22: understand the primary philosophical paradigms that inform psychological theory with particular regard to their relevance to, and impact upon, the understanding of the subjectivity and inter subjectivity of experience throughout human development

12.23: understand theories of human cognitive, emotional, behavioural, social and physiological functioning relevant to counselling psychology including people of all ages and culture;

- across a range of intellectual functioning;
- with significant levels of challenging behaviour;
- with developmental learning disabilities and cognitive impairment;
- with communication difficulties;
- with substance misuse problems; and
- with physical health problems

12.24: understand different theories of lifespan development and their assessment and remediation

12.25: understand social and cultural contexts in a manner informed by community, critical and social constructivist perspectives

12.26: understand theories of psychopathology and of change including transition processes at the individual, group and organisational level

12.27: understand the impact of psychopharmacology and other interventions on psychological work with service users

Educational psychologists only
12.28: understand the role of the educational psychologist across a range of school and community settings and services

12.29: understand the educational and emotional factors that facilitate or impede the provision of effective teaching and learning

12.30: understand psychological theories of, and research evidence in, child, adolescent and young adult development relevant to educational psychology

12.31: understand the structures and systems of a wide range of settings in which education, health and care are delivered for children, adolescents and young adults, including child protection procedures

12.32: understand psychological models related to the influence of school ethos and culture, educational curricula, communication systems, management and leadership styles on the cognitive, behavioural, emotional and social development of children, adolescents and young adults
12.33: understand psychological models of the factors that lead to underachievement, disaffection and social exclusion amongst vulnerable groups

12.34: understand theories and evidence underlying psychological intervention with children, adolescents, young adults, their parents or carers, and education and other professionals

12.35: understand psychological models related to the influence on development of children, adolescents and young adults from:

- family structures and processes;
- cultural and community contexts; and
- organisations and systems

12.36: understand change and transition processes at the individual, group and organisational level

12.37: understand the theoretical basis of, and the variety of approaches to, consultation and assessment in educational psychology
12.38: understands the impact of school systems and the educational curriculum, including the legal framework relating to support and funding in schools, on children and young people.

12.39: understand psychological models related to a range of presentations including:

- service users with presentations from acute to enduring and mild to severe;
- problems with biological or neuropsychological aspects; and
- problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions.

12.40: understand psychological models related to service users:

- from a range of social and cultural backgrounds;
- of all ages;
- across a range of intellectual functioning;
- with significant levels of challenging behaviour;
- with developmental learning disabilities and cognitive impairment;
- with communication difficulties;
- with substance misuse problems; and
- with physical health problems

Forensic psychologists only

12.41: understand the application of psychology in the legal system

12.42: understand the application and integration of a range of theoretical perspectives on socially and individually damaging behaviours, including psychological, social and biological perspectives

12.43: understand psychological models related to a range of presentations including:

- service users with presentations from acute to enduring and mild to severe;
- problems with biological or neuropsychological aspects; and
- problems with mainly psychosocial factors including problems of coping, adaptation and resilience to adverse circumstances and life events, including bereavement and other chronic physical and mental health conditions

12.44: understand psychological theories and their application to the provision of psychological therapies that focus on offenders and victims of offences

12.45: understand effective assessment approaches with service users presenting with individually or socially damaging behaviour

12.46: understand the development of criminal and antisocial behaviour

12.47: understand the psychological interventions related to different service user groups including victims of offences, offenders, litigants, appellants and individuals seeking arbitration and mediation

Health psychologists only
12.48: understand context and perspectives in health psychology

12.49: understand the epidemiology of health and illness

12.50: understand:

- biological mechanisms of health and disease;
- health-related cognitions and behaviour;
- stress, health and illness;
- individual differences in health and illness;
- lifespan, gender and cross-cultural perspectives; and
- long-term conditions and disability

12.51: understand applications of health psychology and professional issues

12.52: understand healthcare in professional settings

12.53: understand psychological models related to how biological, sociological, and circumstantial or life-event-related factors impinge on psychological processes
Occupational psychologists only

12.54: understand the following in occupational psychology:

- psychological assessment at work;
- learning, training and development;
- leadership, engagement and motivation;
- wellbeing and work; and
- work design, organisational change and development

Sports and exercise psychologists only

12.55: understand cognitive processes, including motor skills, practice skills, learning and perception; and self-regulation

12.56: understand psychological skills such as:

- goal setting;
- self-talk;
- imagery;
- pre-performance routines;
- arousal control, such as relaxation and activation; and
- strategies for stress and emotion management

12.57: understand exercise and physical activity including:
- determinants, such as motives, barriers and adherence;
- outcomes in relation to affect, such as mood and emotion;
- cognition and mental health issues, such as self-esteem, eating disorders, depression and exercise dependence;
- lifestyle and quality of life; and
- injury

12.58: understand individual differences including:
- mental toughness, hardiness and resilience;
- personality;
- confidence;
- motivation;
- self-concept and self-esteem; and
- stress and coping

12.59: understand social processes within sport and exercise psychology including:

- interpersonal skills and relationships;
- group dynamics and functioning;
- organisational issues; and
- leadership

12.60: understand the impact of developmental processes, including lifespan issues and processes related to career transitions and termination

13: draw on appropriate knowledge and skills to inform practice
13.1: change their practice as needed to take account of new developments, technologies and changing contexts

13.2: gather appropriate information

13.3: analyse and critically evaluate the information collected

13.4: select and use appropriate assessment techniques and equipment

13.5: undertake and record a thorough, sensitive and detailed assessment

13.6: undertake or arrange investigations as appropriate

13.7: conduct appropriate assessment or monitoring procedures, treatment, therapy or other actions safely and effectively

13.8: recognise a range of research methodologies relevant to their role
13.9: recognise the value of research to the critical evaluation of practice

13.10: critically evaluate research and other evidence to inform their own practice

13.11: engage service users in research as appropriate

13.12: apply psychology across a variety of different contexts using a range of evidence-based and theoretical models, frameworks and psychological paradigms

13.13: conduct consultancy

13.14: formulate specific and appropriate management plans including the setting of timescales

13.15: manage resources to meet timescales and agreed project objectives

13.16: use psychological formulations to plan appropriate interventions that take the service user’s perspective into account
13.17: direct the implementation of applications and interventions carried out by others

13.18: make informed judgements on complex issues in the absence of complete information

13.19: work effectively whilst holding alternative competing explanations in mind

13.20: generalise and synthesise prior knowledge and experience in order to apply them critically and creatively in different settings and novel situations

13.21: choose and use a broad range of psychological assessment methods, appropriate to the service user, environment and the type of intervention likely to be required

13.22: decide how to assess, formulate and intervene psychologically from a range of possible models and modes of intervention with service users or service systems

13.23: use formal assessment procedures, systematic interviewing procedures and other structured methods of assessment relevant to their domain
13.24: critically evaluate risks and their implications

13.25: recognise when further intervention is inappropriate, or unlikely to be helpful

13.26: initiate, design, develop, conduct and critically evaluate psychological research

13.27: understand and use applicable techniques for research and academic enquiry, including qualitative and quantitative approaches

13.28: use professional and research skills in work with service users based on a scientist-practitioner and reflective practitioner model that incorporates a cycle of assessment, formulation, intervention and evaluation

13.29: understand and apply research ethics

13.30: conduct service and large scale evaluations

Clinical psychologists only

13.31: assess social context and organisational characteristics
13.32: develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models

13.33: draw on knowledge of developmental, social and neuropsychological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities

13.34: understand therapeutic techniques and processes as applied when working with a range of individuals in distress including:

- those who experience difficulties related to anxiety, mood, adjustment to adverse circumstances or life-events, eating, psychosis, use of substances; and
- those with somatoform, psychosexual, developmental, personality, cognitive and neurological presentations

13.35: deliver appropriate psychological therapies acquired through study and supervised practice and maintained with regular, ongoing supervision
13.36: implement, on the basis of psychological formulation, psychological therapy or other interventions appropriate to the presenting problem and to the psychological and social circumstances of the service user.

13.37: implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy to defined levels of competence, including the use of cognitive behavioural therapy.

13.38: promote awareness of the actual and potential contribution of psychological services.

13.39: evaluate and respond to organisational and service delivery changes, including the provision of consultation.

13.40: understand and be able to act on and provide advice on policy concerning health and care.

**Counselling psychologists only**

13.41: contrast, compare and critically evaluate a range of models of therapy.
13.42: draw on knowledge of developmental, social and neuropsychological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities

13.43: critically evaluate theories of mind and personality

13.44: understand therapy through their own life-experience

13.45: adapt practice to take account of the nature of relationships throughout the lifespan

13.46: formulate service users’ concerns within the chosen therapeutic models

13.47: critically evaluate psychopharmacology and its effects from research and practice

13.48: critically evaluate theories of psychopathology and change

13.49: implement, on the basis of psychological formulation, psychological therapy or other interventions appropriate to the presenting problem and to the
psychological and social circumstances of the service user

13.50: implement therapeutic interventions based on a range of evidence-based models of formal psychological therapy

13.51: promote awareness of the actual and potential contribution of psychological services

13.52: evaluate and respond to organisational and service delivery changes, including the provision of consultation

Educational psychologists only

13.53: develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models

13.54: carry out and analyse large-scale data gathering, including questionnaire surveys

13.55: work with key partners to support the design, implementation, conduct, evaluation and dissemination
of research activities and to support evidence-based research

13.56: formulate evidence-based interventions that focus on applying knowledge, skills and expertise to support local and national initiatives

13.57: develop and apply effective interventions to promote psychological wellbeing, social, emotional and behavioural development and to raise educational standards

13.58: implement evidenced-based interventions and plans through and with other professions and with children and young people, parents and/or carers

13.59: adopt a proactive and preventative approach in order to promote the psychological wellbeing of service users

13.60: choose and use a broad range of psychological interventions, appropriate to the service user’s needs and setting
13.61: integrate and implement therapeutic approaches based on a range of evidence-based psychological interventions

13.62: promote awareness of the actual and potential contribution of psychological services

**Forensic psychologists only**

13.63: plan and design training and development programmes

13.64: plan and implement assessment procedures for training programmes

13.65: promote awareness of the actual and potential contribution of psychological services

13.66: assess social context and organisational characteristics

13.67: research and develop psychological methods, concepts, models, theories and instruments in forensic psychology
13.68: evaluate and respond to organisational and service delivery changes, including the provision of consultation

13.69: draw on knowledge of developmental and social changes and constraints across an individual’s lifespan to facilitate adaptability and change

13.70: implement interventions and care-plans through and with other professionals who form part of the service user careteam

13.71: implement, on the basis of empirically derived psychological formulation, psychological therapy or other interventions appropriate to the presenting maladaptive or socially damaging behaviour of the service user

13.72: integrate and implement evidence-based psychological therapy at either an individual or group level

**Health psychologists only**

13.73: plan and implement assessment procedures for training programmes
13.74: develop appropriate psychological assessments based on appraisal of the influence of the biological, social and environmental context

13.75: develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models

13.76: carry out and analyse large-scale data gathering, including questionnaire surveys

13.77: draw on knowledge of developmental, social and biological processes across the lifespan to facilitate adaptability and change in individuals, groups, families, organisations and communities

13.78: contrast, compare and critically evaluate a range of models of behaviour change

13.79: understand techniques and processes as applied when working with different individuals who experience difficulties

13.80: develop and apply effective interventions to promote psychological wellbeing, social, emotional and
behavioural development and to raise educational standards

13.81: evaluate and respond to change in health psychology and in consultancy and service-delivery contexts

13.82: to implement, on the basis of psychological formulation, psychological therapy or other interventions appropriate to the presenting problem, and to the psychological and social circumstances of the service user

13.83: integrate and implement therapeutic approaches based on a range of evidence-based psychological interventions

13.84: choose and use a broad range of psychological interventions, appropriate to the service user’s needs and setting

**Occupational psychologists only**

13.85: assess individuals, groups and organisations in detail
13.86: use the consultancy cycle

13.87: research and develop psychological methods, concepts, models, theories and instruments in occupational psychology

13.88: use psychological theory to guide research solutions for the benefit of organisations and individuals

13.89: understand and act and provide advice on policy development concerning employees’ and job seekers’ rights

13.90: run, direct, train and monitor others in the effective implementation of an application

Sport and exercise psychologists only

13.91: assess social context and organisational characteristics

13.92: develop psychological formulations using the outcomes of assessment, drawing on theory, research and explanatory models
13.93: formulate service users’ concerns within the chosen intervention models

14: establish and maintain a safe practice environment

14.1: understand the need to maintain the safety of themself and others, including service users, carers and colleagues

14.2: demonstrate awareness of relevant health and safety legislation and comply with all local operational procedures and policies

14.3: work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques, in a safe manner and in accordance with health and safety legislation

14.4: select appropriate personal protective equipment and use it correctly
14.5: establish safe environments for practice, which appropriately manage risk

Sports and exercise psychologists only

14.6: demonstrate awareness of the possible physical risks associated with certain sport and exercise contexts

15: promote health and prevent ill health

15.1: understand the role of their profession in health promotion, health education and preventing ill health

15.2: understand how social, economic and environmental factors (wider determinants of health) can influence a person’s health and wellbeing

15.3: empower and enable individuals (including service users and colleagues) to play a part in managing their own health
15.4: engage in occupational health, including being aware of immunisation requirements