

Cumann Síceolaithe Éireann

# THE PSYCHOLOGICAL SOCIETY OF IRELAND

Standards for the Accreditation of Postgraduate Academic Courses (Masters Programmes) in Health Psychology

Ratified by PSI Council on 18 October 2018

# **Table of Contents**

1. Introduction	1
1.1. Definition of Health Psychology	1
2. General Principles	1
3. Professional Principles and Values	2
4. Course Objectives	2
5. Course Content	3
5.1. Academic Content	3
5.2. Research	4
5.3. Core Skills	4
6. Administration and Governance of the Course	5
7. Staffing Resources	5
8. Course Resources	6
9. Admission Requirements and Procedures	6
10. Assessment	6
11. Quality Assurance Procedures	6
Appendix A - Academic Postgraduate Courses in Health Psychology	
Academic Knowledge Base	7
Appendix B – Academic Postgraduate Courses in Health Psychology Accreditation Panel Checklist	10
Acknowledgements	11

## 1. Introduction

What follows sets out the Society's standards for the accreditation of academic postgraduate courses in Health Psychology. Its objectives are to specify minimum standards and good practice in this area

## **1.1 Definition of Health Psychology**

Health psychology involves an examination of the way in which biological, psychological, and social factors affect health, illness and wellbeing. Health psychologists are concerned with studying the relationship between psychological factors (e.g. personality), social/psychological factors (e.g., psychological stress) and illness (e.g., heart disease). Areas of practice include management of health relevant behaviours and developing better ways of helping people to change their behaviours. This includes the behaviour of both healthcare recipients and healthcare providers. Health psychologists are also involved in helping individuals to improve their health and to cope with acute or chronic illness and medical treatment or procedures.

# 2. General Principles

The following general principles should govern any course established in this country to provide postgraduate training of health psychologists.

- 2.1 The primary aim of each course should be to provide postgraduate training which will
  - 2.1.1 Enhance the individual's knowledge of health psychology;
  - 2.1.2 Train individuals in health psychology research;
  - 2.1.3 Prepare individuals to undertake future professional training in health psychology e.g. doctoral training in health psychology or related professional disciplines.
  - 2.1.4 Provide the individual with a core set of foundational skills for health psychology practice and other contexts.
  - 2.1.5 Support the continuous personal and professional development of individuals completing the course.
- 2.2 Each course should provide fundamental academic training in health psychology.
- 2.3 Each course should be based on the basic scientist/practitioner model.
- 2.5 Courses should define their particular values, objectives and philosophy which are communicated to applicants. At a modular level courses should clearly specify learning outcomes.
- 2.6 Courses should have inbuilt flexibility to enable them to adapt to new developments in health psychology and related disciplines.
- 2.7 Courses should lead to the award of at least Master's level (HETAC level 8-9) or an equivalent qualification. A post-graduate diploma in Health Psychology can be awarded to those who complete the taught component without completion of a research project. Full-time study should comprise a 1 year course and part-time study should normally be completed within 2 years.
- 2.8 There should not be an expectation of applied and supervised health psychology practice for Master's level (HETAC level 8-9) training in Health Psychology.

# 3. Professional Principles and Values

#### 3.1 Standards of Professional Conduct

- 3.1.1 The PSI Code of Professional Ethics must be central to the ethos of the course.
- 3.1.2 The PSI's Code of Professional Ethics should be used as a reference in all cases where judgments regarding professional ethics are being made. Due regard should be given to parallel university procedures.
- 3.1.3 All stakeholders in the course should be made aware of psychologists' professional responsibilities under the Code.
- 3.1.4 The necessary formal procedures must be in place to ensure that individuals selected for the course that display unacceptable ethical standards in their course-related work e.g. during the research project or any activities that are associated with the course, are not allowed to continue on the course.
- 3.1.5 Formal appeals procedures should be available to students who are judged unsuitable to continue on the course.

#### 3.5 Diversity and Cultural Competence

- 3.2.1 Courses should assist post-graduate students to value human diversity and understand the impact of social exclusion, discrimination and inequality on health and psychological wellbeing.
- 3.2.2 Courses should make students aware of relevant contemporary equality and diversity legislation in Ireland or other jurisdictions in the context of health and psychological wellbeing.

#### 4. Course Objectives

Each course should enable graduates to:

- 4.1 Understand different theoretical frameworks and their applications;
- 4.2 Develop a broad range of psychological expertise based on academic knowledge, research and transferable generic skills;
- 4.3 Develop an ethical approach to their work which includes a strong sense of scientific integrity and professional responsibility;
- 4.4 Understand the social, political and organisational context in which health psychologists work;
- 4.5 Develop appropriate communication skills, both oral and written.

# 5. Course Content

#### **5.1 Academic Course Content**

- 5.1.1 Courses should have a comprehensive academic syllabus covering both psychological theory and its application.
- 5.1.2 The academic component should be designed especially for postgraduate students and a range of teaching and learning methods should be employed in the teaching process.
- 5.1.3 A substantial part of the academic content should be taught by the health psychology staff of the course, although some teaching by other psychologists and professions is desirable.
- 5.1.4 The breadth of content on the course must be consistent with the academic knowledge outlined in Appendix A. Over all the academic coverage should clearly reflect the course content and the majority of topics will be covered in- depth, however local expertise may influence the emphasis on particular areas of health psychology. Courses can draw on various parts of the course to cover the content as specified in Appendix A and are not required to structure their courses in this exact format.

The course must provide substantial knowledge and understanding of the following areas:

- 5.1.4.1 In-depth academic knowledge base (psychology);
- 5.1.4.2 Academic knowledge base (other allied health and related disciplines);
- 5.1.4.3 Application of psychological skills to healthcare;
- 5.1.4.4 Research skills
- 5.1.4.5 Professional and ethical issues
- 5.1.5 The course should be conducted within a research focused community of health psychologists. This can be demonstrated by the research activity of members of the programme team. The learning experience should be underpinned by research-led teaching.
- 5.1.6 The course should have a strategy for supporting students' further personal and professional development. For example, content on health psychology related career options and support for students pursuing PhD or doctoral level training in health psychology or related areas of professional psychology should be provided. Providing the opportunity for students to meet with graduates of post-graduate training in Health Psychology who have pursued a range of career options is considered good practice in this regard.

Note: an expanded list of each academic knowledge base is included in Appendix A

#### 5.2 Research

- 5.2.1 There should be a formal teaching programme, which includes student assessment, on research methods that includes both qualitative and quantitative and mixed methods.
- 5.2.2 During the course students should undertake at least one piece of research and report it formally. All research projects must be guided by theory.
- 5.2.3 A designated supervisor should be provided to the student. The supervision should be provided by a member of the course staff or the department/school of psychology.
- 5.2.4 Courses should identify a person who can act as a research co-coordinator with the responsibility for organising and monitoring the research project process.
- 5.2.5 The research project should be assessed separately.
- 5.2.6 Students should understand the principles of evidence synthesis and learn how to conduct a systematic review of the literature.

#### 5.3 Core Skills and the Development of Graduate Attributes

- 5.3.1 There should be a formal programme to develop a range of core and transferable skills and graduate attributes that are relevant to health psychology practice and other employment contexts. It is expected that this will be embedded throughout the programme. This should include but is not confined to the following:
  - Critical evaluation of current knowledge, theory and evidence base relevant to the discipline
  - Foundational skills in health psychology practice. For example, introduction to the principles of motivational interviewing, interviewing skills or similar practice based skills could be provided.
  - Critical self-reflection skills to support the development of an identity as a professional psychologist
  - Using a range of research methodologies applicable to the discipline
  - Applying relevant ethical, legal and professional frameworks e.g. PSI ethical and professional codes of conduct and meeting data protection requirements, in attaining ethical approval to conduct research.
  - Communicating effectively (verbally and non-verbally) with colleagues, research supervisors and the wider public.
  - Effectively and appropriately disseminating work in written and oral formats.
  - Digital and technical literacy to conduct and produce high quality research e.g. the appropriate use of electronic databases and computer software to efficiently conduct research.

# 6. Administration and Governance of the Course

#### 6.1 Course Committee

- 6.1.1 The course should have a course committee on which the course director, course teaching staff, a current course student rep and academic supervisors are represented and where the interests of each group are fully respected. Depending on the functions of the committee, other appropriate officers from the university e.g. Head of School, representatives from health agencies or other individuals, for example, service users or carers, may also be represented.
- 6.1.2 The course committee should seek to ensure good practice on the course and the smooth operation of the course.
- 6.1.3 Another major function of the committee should be to facilitate communications among all those involved in the course. The committee should be involved both in considering the long-term objectives of the course and in reviewing its selection assessment and examination process. Other functions could be specific to the individual course.
- 6.1.4 In all cases it is essential that the roles and functions of the course committee be clearly specified and there should therefore be a written terms of reference for the committee.

# 7. Staffing Resources

- 7.1 Courses should have adequate staffing to provide effective academic input. This means sufficient staff with enough time allocated to carry out the required tasks: management; teaching; organising; research supervision and assessment and monitoring of students. The student-staff ratio should not fall below 9:1.
- 7.2 The Course should have adequate administrative and clerical support.

#### 7.3 Course Director

- 7.3.1 The Course Director should be an academic psychologist with at least five years full time (or equivalent) experience in the post of lecturer (or equivalent) in Psychology, and eligible for promotion beyond the career entry-grade for that post and hold or be eligible to hold full membership of the PSI Division of Health Psychology.
- 7.3.2 The Course Director should have the course make up 75% of their teaching duties. (In the case of two or more people who share organisational responsibility for the course, they should devote together a substantial amount of time to the course).

## 8. Course Resources

The course should have appropriate facilities and resources including:

- 8.1 Teaching space of adequate size and quality for each cohort of students;
- 8.2 Access to appropriate and adequate computer facilities;
- 8.3 Adequate space to enable the course to be administered effectively, including office space for administrative staff;
- 8.4 Individual office space for full-time academic staff;
- 8.5 Access to library facilities;
- 8.6 Access to a range of psychometric tests;
- 8.7 Adequate storage space for efficient operation of the course e.g. archiving course assessments and research project data;
- 8.8 Access to common room or similar facility for students.

# 9. Admission Requirements and Procedures

- 9.1 Only those graduates who hold academic awards which are recognised as satisfying at least the minimum qualifications for Graduate Membership of the PSI are eligible for the inclusion on the Postgraduate Academic Course. University authorities may set their own standards for entry to the course over and above this.
- 9.2 Vacancies on the course should be nationally advertised and the selection of candidates should follow the principle of "open competition". This should enable equality of opportunity and access to postgraduate training in psychology to as diverse a range of applicants as possible.

## **10. Assessment**

While the actual procedures of assessment will be at the discretion of each psychology department concerned (necessarily adhering to the requirements of the relevant degree conferring institution), the following principles should govern the procedures.

- 10.1 Courses should ensure that no compensation is allowed across modules. All modules plus the dissertation must be passed to be awarded an MSc in Health Psychology.
- 10.2 An external examiner(s) of high professional and academic standing should be involved in all areas of assessment.
- 10.3 There should be a formal appeals procedure considering formal complaints from trainees regarding the decisions of Boards of Examiners. Students should be made aware of these at the beginning of the course.

# **11. Quality Assurance Procedures**

11.1 The course should engage in a quality assurance process, possibly as part of the host institutions existing structure, to ensure that the views of all stakeholders are sought and contribute to the development of the course.

# Academic Postgraduate Courses in Health Psychology Academic Knowledge Base

#### 1. Contexts and Perspectives in Health Psychology

#### 1.1 Contexts and perspectives in health psychology

- 1.1.1 Historical overview of health psychology
- 1.1.2 Current theories and approaches in health psychology
- 1.1.3 Overview of related disciplines (such as medical sociology, behavioural economics, health policy, and health economics)
- 1.1.4 Socio-cultural perspectives on health
- 1.1.5 Epidemiology (including mortality/morbidity; bio-statistics; health inequalities)
- 1.1.6 Lifespan changes in health and illness
- 1.1.7 The role of national policy documents or health service policy documents in shaping public health and the delivery of health care

#### 2. Biobehavioural Influences on Health

#### 2.1 Biobehavioural influences on health

- 2.1.1 Biological mechanisms of health and disease
- 2.1.2 Biobehavioural pathways to disease e.g. psychoneuroimmunology
- 2.1.3 Stress, health, and illness (models, moderators, and management of stress)
- 2.1.4 Social support and coping
- 2.1.5 Placebo effects

#### 2.2 Individual differences in health and illness

- 2.2.1 Personality and health and illness (including optimism, neuroticism, health- relevant typologies)
- 2.2.2 Dispositions and health (including locus of control, self-efficacy)
- 2.2.3 Affectivity and health (including emotional expression, negative affectivity)

#### 3. Behaviour and Cognition

#### 3.1 Health-related behaviour

- 3.1.1 Theoretical models of behaviour and behaviour change applied to health
- 3.1.2 Health protective behaviour
- 3.1.3 Screening
- 3.1.4 Adherence
- 3.1.5 Behavioural change techniques

#### 3.2 Health-related cognitions:

- 3.2.1 Perceiving symptoms
- 3.2.2 Perceiving risk
- 3.2.3 Illness and treatment perceptions
- 3.2.4 Efficacy and control, attributions
- 3.2.5 Health beliefs
- 3.2.6 Healthcare decision making

#### 4. Applied Contexts

#### 4.1 Chronic illness and disability

- 4.1.1 Coping with chronic illness/disability
- 4.1.2 Pain (including theories of pain, management of pain)
- 4.1.3 Interventions in chronic illness/disability
- 4.1.4 Care-giving in chronic illness/disability contexts

#### 4.2 Health care contexts

- 4.2.1 Communication in health care contexts
- 4.2.2 Hospitalisation
- 4.2.3 Preparation for stressful medical procedures
- 4.2.4 Working with a diverse range of client groups and stakeholders

#### 4.3 Applications of health psychology

- 4.3.1 Designing interventions using systematic and standardised approaches
- 4.3.2 Outcome evaluation
- 4.3.3 Health education and health promotion (including in occupational, community, and media contexts)
- 4.3.4 Targeted interventions (e.g., for cardiovascular disease, cancer, HIV)
- 4.3.5 Working within interdisciplinary/multidisciplinary teams

#### 5. Professional Issues

#### 5.1 **Professional issues**

- 5.1.1. Professional ethics (theory and regulation), legal and statutory context
- 5.1.2. Inter-professional relations
- 5.1.3. International perspectives
- 5.1.4 The value of a personal development plan
- 5.1.5 Professional self-reflection

#### 6. Research

#### 6.1 Research methods

- 6.1.1 Experimental and quasi-experimental designs
- 6.1.2 Cross sectional and longitudinal designs
- 6.1.3 Case studies
- 6.1.4 Qualitative methodology and mixed methods
- 6.1.5 Data analysis (quantitative and qualitative)
- 6.1.6 Contexts of research (laboratory, epidemiological, public health, and clinical)
- 6.1.7 Threats to validity
- 6.1.8 Systematic review, meta-analysis and meta-synthesis

#### 6.2 Measurement in health psychology

- 6.2.1 Measurement of process
- 6.2.2 Outcomes measurement
- 6.2.3 Measurement of individual differences
- 6.2.4 Health-related quality of life
- 6.2.5 Administration of psychometric tests
- 6.2.6 The process of scale development

#### 6.3 Empirical Research Project

- 6.3.1 Preparation, execution, and reporting of empirical research
- 6.3.2 Writing for publication in peer-reviewed journals
- 6.3.3 Students should get the opportunity to give an oral presentation describing their research
- 6.3.4 Other dissemination formats e.g. reports, blogs, and policy briefs

# Academic Postgraduate Courses in Health Psychology

# Accreditation Panel Checklist

Standards	Yes	No	Notes
<ol> <li>Does the course meet the general principles of a postgraduate course in Health Psychology as set out in the standards?</li> </ol>			
2. Does the course uphold the professional principles and values as set out in the standards?			
<ol> <li>Does the course specify and enable students to achieve the course objectives as set out in the standards?</li> </ol>			
4. Does the course adequately cover the course content as set out in the standards?			
5. Is there adequate administration and governance of the course in place as set out in the standards?			
6. Is there adequate staffing resources in place to effectively deliver the course as set out in the standards?			
7. Is there adequate course resources in place to effectively deliver the course as set out in the standards?			
8. Are there adequate admissions and procedures in place as set out in the standards?			
9. Are there adequate assessment procedures in place as set out in the standards?			
10. Are there adequate quality assurance procedures in place as set out in the standards?			

### Acknowledgements

The revisions to this document were carried out by a working group led by the Division of Health Psychology in the Psychological Society of Ireland (PSI), which carried out this work between November 2017 and March 2018.

The working group consisted of the following people:

- 1. Dr Gerry Molloy (NUIG) Chair and co-ordinator of working group
- 2. Dr Stephen Gallagher (University of Limerick) Irish university representative
- 3. Dr David Hevey (Trinity College Dublin) Past chair and co-ordinator of the 2009 standards; Irish university representative
- 4. Dr Jenny McSharry (NUIG) Irish university representative; Graduate of MSc in Health Psychology at NUI Galway
- 5. Dr Lisa Mellon (RCSI) Irish university representative; Graduate of MSc in Health Psychology at NUI Galway
- 6. Ms Terri Morrissey Chief Executive Officer Psychological Society of Ireland & Ms. Marie Loughman (Psychological Society of Ireland)
- 7. Dr Vivien Swanson (University of Stirling) UK and international representative and advisor
- 8. Mark O'Callaghan (Principal Psychologist Manager, HSE) HSE representative and advisor

The Chair of the PSI Division of Health Psychology, Dr Frank Doyle reviewed the final document and provided input. We also received input from the Office of the National Director, Strategic Planning and Transformation in the Health Service Executive. This was provided by Mary Morrissey on behalf of Dr Stephanie O'Keeffe. As part of the process the Chair also consulted with the staff from two leading MSc in Health Psychology courses in the UK namely Dr Jo Chilcot who leads the MSc at King's College London and Madiha Sajid who is a course co-ordinator of the MSc at University College London.

Our sincerest thanks to all of those contributed to these revised standards.