THE UNIVERSITY of EDINBURGH

NHS SCOTLAND

UNIVERSITY OF EDINBURGH / NHS SCOTLAND
CLINICAL PSYCHOLOGY TRAINING PROGRAMME

Doctorate in Clinical Psychology

Research and Thesis Handbook

2024 / 2025

This handbook is for the academic session 2024/25.

The date of publication for this handbook is October 2024.

If you require this document or any of the internal University of Edinburgh online resources mentioned in this document in an alternative format, please contact Tim Abbot on tim.abbot@ed.ac.uk or 0131 650 3889.

Contents

SECTION 1 - Overview of DClinPsychol Research

1.1 Research Training

A key aim of research training on the DClinPsychol is to facilitate the development of transferable research competencies which trainees will be able to use in practice beyond the programme. Research competencies sit alongside clinical competencies as core elements of Doctoral training. These competencies include systematically searching and synthesising research literature, report writing, project management, collaboration, critical appraisal skills and presentation skills. Research training is provided throughout the programme, with the majority of class/group teaching occurring in years 1 and 2. Throughout the programme, trainees receive project supervision from an academic and a clinical thesis supervisor, who provide assistance with the particular requirements of each thesis. Trainees are encouraged to think about their thesis from the start of training. The 1st year research assignment, is designed to facilitate this process.

1.2 Research - Who to Contact

The following DClinPsychol team members have responsibility for specific areas of research training. To avoid delays, please direct any queries about research matters to the relevant person.

Query About	Role	In Role in Sept 2023
General Research Queries	Research Director	Tim Bird
Research related admin (e.g., forms, expenses)	Programme Administrator	Tim Abbot
Research Resources	Research Lab Tech	Paul Gordon
Research 1 and Thesis Proposal	R1 Course Organiser	Paul Morris
Research 2 and Small-Scale Research Project	R2 Course Organiser	Maria Gardani
Research Ethics	Subject Area Ethics Leads	ethics.hiss@ed.ac.uk.
Non-R1 Thesis Proposals	Research Director	Tim Bird
Research Data Archiving and Storage	Supervisors; Research Director	Thesis Supervisor; Tim Bird
Thesis Assessment	Thesis Coordinator	Maria Gardani

1.3 Research Culture

The University of Edinburgh has a strong long-standing research culture, with many departments holding regular research seminars. Seminars which may be of interest to trainees are held within our own School of Health in Social Science and within the departments of Psychology and Population Health Sciences. There may be opportunities to access seminars organised by the School's Postgraduate Research Student group.

The academic team within Clinical and Health Psychology specialises in particular programmes of research, which facilitate and benefit from research projects undertaken by trainees. These programmes involve collaborations between different NHS regions and members of the academic team. Our three research groups are: Health and Behaviour, Forensic Psychology and Applied Developmental Psychology.

Further information about our research groups and associated programmes of research can be found on our website.

Many clinical psychology staff are part of the School's research Child and Adolescent Mental Health Research Centre

There is also an online database of downloadable theses arising from our DClinPsychol programme, held by the University Library. Publications from trainees are logged on the supervising academics Edinburgh Research Explorer page.

1.4 Research Assignments

There are three summative assessed research assignments on the DClinPsychol training programme. The first of these is a detailed research proposal (R1 proposal) for their intended thesis project. The requirements for this assignment are outlined in the Research 1 course Learn Space. All trainees complete this assignment.

The second assignment is a small-scale research project (SSRP). The SSRP may involve service relevant research, a service evaluation or an audit and is outlined in the Research 2 Learn Space. Trainees on the RPL route do not have to complete the SSRP.

The third, and main, assignment is the doctoral thesis project, which is outlined in Section 4 of this handbook. The thesis consists of a systematic review/meta-analysis and an empirical project. At completion, the thesis is examined under viva conditions. All trainees complete this assignment.

SECTION 2 - DClinPsychol Ethics Process

2.1 Introduction to Applying for Ethical Approval

It is a requirement of the University and the NHS that all empirical research projects seek and acquire appropriate ethical approval. This applies to your thesis project and your Research 2 assignment (SSRP). You must not start data collection until ethical approval has been granted. There is specific guidance for projects taking place in the NHS via the IRAS process. Please note that ethics and governance guidance can be subject to rapid

change. Substantial changes in practice will be communicated to staff and students via the Section and/or Programme.

All projects must also receive ethical approval through the University. Guidance on the Ethics process can be found on the School's Research Ethics and Integrity website. Note that all projects are reviewed by the School with the level of review dependent on the complexity of the ethical issues raised. Projects with NHS approvals also require completion of the University online form, although in practice, having the existing NHS approval will usually mean that the University application can be promptly ratified. Empirical projects without any NHS involvement (e.g., online samples) will usually receive their full review and approval from the University. Some external organisations e.g., social work might have their own processes for obtaining ethical approval.

The University provides sponsorship and governance oversight for projects conducted by trainees. The majority of Clinical Psychology projects require sponsorship. During preparation of your ethics forms you should contact the College Research Governance team (cahss.res.ethics@ed.ac.uk) for support. Sponsor approval, or confirmation from the Research and Governance team that this is not needed, is required prior to ethical review.

Research 2 assignments (small scale research projects) typically involve less complex ethical issues but may require NHS governance processes (eg. Caldicott approval and Quality Improvement - see section 2.3 below). Proposals for SSRPs that require more complex ethical approvals should be considered carefully with your supervisor.

All projects are logged electronically. Queries about University ethics submissions can be sent to the Section Ethics and Integrity leads at: ethics.hiss@ed.ac.uk.

You should also be aware that for all projects there may be implications of the General Data Protection Regulations (GDPR) for the use of potentially identifiable data. Please refer to the Data Protection website for more detail. University ethics also requires you to confirm that you have completed appropriate Data Protection Training.

All ethical approval processes take time. The target return time for university ethics reviews is within 6 weeks. For NHS RECs (Research Ethics Committees) you will usually be asked to submit paperwork 3 weeks prior to the REC meeting. It is sensible to allocate at least 2-3 months of your research timeline (from the point of submitting for review) for your ethics permissions to be processed to approval. Ethical review can take much longer than this, so trainees are encouraged to begin the process of applying for approvals as early as possible.

2.2 Projects Taking Place in the NHS

In the first instance, consideration should be given to whether NHS ethical approval is required. There is a single system for applying for the permissions and approvals required

for health and social care / community care research in the UK. Information to guide you through the process is available online. In Scotland, projects involving collection of data from participants identified as eligible for a study due to their status as an NHS patient always require NHS ethical approval. For projects in Scotland where data collection is from NHS staff only, ethical approval may not be required from NHS, and can be sought from the University, although NHS Research and Development approval will still be required.

The process requires that supervisors have seen and agreed to the proposal prior to its submission and that any necessary formal signing off for indemnity purposes has been sought from the University. In the case of your thesis, this will be your Academic Supervisor. For the SSRP, this is likely to be an NHS supervisor. It is important that you allow sufficient time for this process and take into consideration that your supervisors may work part time.

Projects may also need ethical approval from other local bodies' panels or organisations and students should seek advice from their supervisors on this matter. It is the student's responsibility to ensure that any relevant ethical approvals are obtained prior to commencing the project and that ethical approval is maintained throughout the course of the research.

If there is any uncertainty as to whether the project requires full NHS ethical approval, the student should contact the local NHS ethics committee for clarification. If the local ethics committee indicates that the study does not require ethical approval, written confirmation should be obtained by the student (in the form of a letter or email from the committee). This confirmation can accompany your application for university ethical approval and should be included as an appendix to the final thesis write-up.

As noted above, where a full IRAS application has been completed and approved, the University still requires you to complete the University Level 1 ethics form.

2.3 Caldicott Approval

Where patient records or patient identifiable information is accessed for the purpose of audit, service evaluation, research or any reason other than normal clinical care, this requires approval from the Caldicott Guardian. This applies to both the Thesis project and the Small-Scale Research Project in Research 2. The exact procedures vary between health boards and in some cases Caldicott approval can be granted by an NHS Board's R&D Office. The board you work in may also require you to register the project with their local Quality Improvement Team (or equivalent). **Please check what arrangements are in place in your NHS Board.** Your NHS Board's Caldicott Guardian can normally be contacted by email or via the NHS Board R&D Department. An email or equivalent detailing their approval, or confirming that it is not required, must be logged along with your ethics application to ethics.hiss@ed.ac.uk.

2.4 Applying for University Ethical Review

Where thesis proposals do not require ethical approval from an external organisation, such as Social Work or IRAS, students must complete the School of Health in Social Science's research ethics form. The form will guide you as to which sections you are required to complete. It is a requirement that you first contact the sponsorship team to confirm whether your project requires sponsorship. Sponsorship review takes place before you can apply for ethics.

Ethical review by the University involves increasing levels of scrutiny depending on the ethical complexities of the proposed project – use of personal identifiable data, sensitivity of procedures/questions, risk of harm to participants or researchers, likelihood of bringing the University into disrepute, and conflicts of interest will all increase the level of risk attached to a project and increase the level of review required. These will be reviewed using trigger questions on the ethics application (see flowchart above). More complex ethical issues will require a greater degree of scrutiny, including independent review, and will take longer for an ethical opinion, and ultimately approval to be issued. You should factor this into the timeframe for seeking ethics approval. Further information and up-to-date guidance is available on the School Ethics Pages and via email to ethics.hiss@ed.ac.uk if you have additional queries.

2.4.1 Amendments

Ethical review is a time-consuming process and it is recommended that you confirm your methodology prior to submitting your application. If you need to make changes to an IRAS NHS approval changes can be submitted via IRAS. It is recommended that you contact the College Research governance office for advice as to the level of amendment (minor or substantial) and for the most-up to date guidance. Requests for amendments to School of Health in Social Science approvals should follow the guidance on the School Ethics pages.

2.4.2 Submitting Applications for Ethical Approval

All applications should be submitted using the ethics form available from the school ethics and integrity website. Correspondence regarding ethics applications should be sent to the Section Ethics and Integrity leads at ethics.hiss@ed.ac.uk

2.4.3 Feedback and approval of your application

Initial feedback will be provided via email and an electronic copy of your letter of approval will be forwarded soon afterwards. Please keep a copy of this for inclusion in your research submissions.

SECTION 3 - Research Data & Storage

3.1 Data protection and Storage of Anonymised Research Data

Throughout this section on storage of anonymised data, the term ‘partially anonymised’ is used to refer to data where all personal information has been removed, but where information that would enable such data to be associated with personal data is still available. The term ‘anonymised’ is used to refer to data in which it would no longer be possible to identify individuals.

Active and responsible management of data is fundamental to contemporary research and is required by most funders and journals. There is also a substantial legal and policy framework underpinning Research Data Management (RDM). Applying robust RDM principles ensures that the rights of data subjects/owners are protected. In addition, archiving of research data at the end of a study increases transparency (open science) and enables both validation of results, and potential future re-use (given appropriate permissions). ‘Data’ can refer to qualitative, quantitative, numeric, text, or audio-visual information and materials.

Personal data and associated partially anonymised research data should be kept separately at all stages of a study. Once personal data is no longer needed for the purpose for which it was collected, it should normally be destroyed as outlined within the associated ethics application. The remaining partially anonymised data should then become anonymous. This document outlines proposals for storage of such anonymous research data once the associated personal data has been destroyed. Further advice is available from the University Research Data Management pages.

3.3 Data Protection Act and General Data Protection Regulation (GDPR)

When storing or processing data, trainees are required to abide by the requirements and principles of General Data Protection Regulation (GDPR) and its predecessor the Data Protection Act (1998). University data protection information is available here. Students should familiarise themselves with the differences between issues relevant to personal data and those relevant to research data which is no longer identifiable. The GDPR applies to personal data. It still has some applications to anonymised data if the materials needed to re-identify that material are still accessible by anyone (i.e., partially anonymised data). However, it does not apply to data which could no longer be identified by anyone (i.e., anonymised data). Remember that it still may be possible to identify individuals through triangulation of individually anonymised elements of data.

Personal data includes all recorded information about a living, identifiable individual. Students using personal data as part of their studies must comply with the responsibilities as outlined in the linked guidance. Before using personal data as part of their studies, students must become familiar with the linked guidance, discuss implications with their

supervisor and seek appropriate written approval. Failure to comply with the responsibilities is an offence against university discipline, and could lead to a breach of GDPR, which leaves the Data Controller of that data liable for a significant fine. A data protection breach can cause distress to the people the information is about, and can harm relationships with research partners, stakeholders, and funding organisations. This applies to all aspects of the research process including information sheets, consent forms, management of your data; and to the storage, transfer and archiving of your data.

For further general guidance on data protection and GDPR, please visit the Records Management website.

3.4 Retention of Data

The movement towards greater retention of research data is reflected in requirements from funding bodies for retention. The Joint Training Committee has agreed the following actions. A data management plan should be discussed and agreed early in the project planning stage. This should include the clear separation of personal data and partially anonymised research data, a plan for deletion of the personal data and a plan for the retention and review of anonymised research data. Projects should normally retain anonymised research data for 10 years from the end of the project, with a review then and every subsequent 5 years to determine whether data should continue to be retained or whether it should be securely deleted. Data should be collected and stored in a well labelled and indexed manner which ensures that others could review the data. The Chief Investigator and another named member of the research team (e.g., Academic Supervisor) should check anonymised data to ensure that it has been fully anonymised and suitably indexed. Named custodians should be agreed for all anonymised research data, at least one being an employee of the NHS board in which the project was based and at least one being an employee of the University of Edinburgh. Arrangements should be agreed for the appropriate secure storage of this data within both the NHS board and the University of Edinburgh. All members of the immediate research team (i.e., trainee, Academic and Clinical Supervisors) should have access to the final dataset. The research team should agree early in the project a process for any subsequent requests to use the data. If the trainee wishes that the anonymous dataset be available for analysis by others in the future, the possible further use of data must be made clear in the information sheet and consent form.

Costs of Data Retention and Data Archiving at the University of Edinburgh

The University of Edinburgh has a repository for data that provides a suitable archiving facility for the majority of DClinPsychol research in which data sets contain anonymised data. The rights of data held within the repository remain with the original owners, such that this may enable a suitable mechanism for the secure storage of anonymised research data. The repository option simply involves a non-exclusive licence to hold, manage and preserve the data. Alternatively, for data sets that contain sensitive data, or for projects which have not obtained clearance for university repository storage, a secure sensitive

data sets folder is available on the shared drive of the Clinical Psychology section. Further details on how to prepare data for storage and how to archive it at the University are available through the Datashare website. Your supervisor can also store the data in his or her personal disk space (via OneDrive and DataVault).

3.5 References and Further Reading

Data Protection ACT (1998)
http://www.legislation.gov.uk/ukpga/1998/29/contents

Department of Health (2007) Research involving the NHS: retention of records
http://www.noclor.nhs.uk/sites/default/files/Retention%20of%20Records%20in%20NHS%20Research.pdf

University's Research Data Management Training online course (MANTRA)
http://mantra.edina.ac.uk/index.html

University of Edinburgh Research Data Service
http://www.ed.ac.uk/information-services/research-support/research-data-service

University of Edinburgh GDPR page
Data Protection | Data Protection (ed.ac.uk)

SECTION 4 - DClinPsychol Thesis

4.1 Learning Outcomes and Competencies Targeted

On completion of the thesis trainees should be able to:

1. Under supervision, exercise a high level of autonomy and initiative in developing, designing and conducting a clinically relevant research project leading to a systematic review and research article.
2. Demonstrate an ability to critically evaluate applied psychological research.
3. Recognise ethical issues and apply for and obtain appropriate ethical approval.
4. Demonstrate originality and creativity in the development and application of new knowledge, understanding and practices.
5. Be capable of communicating research findings in a journal at the standard expected of academic peer-reviewed work.

The thesis project targets the following competencies:

Academic Competence	Knowledge development, knowledge application, knowledge transfer
Clinical / Professional / Practitioner Competence	Theory-practice links, communication, evaluation and research, personal and professional development

Research Competence	Analytical thinking, ethical practice, organisational ability, data preparation and management, research reporting

4.2 Key Contacts

Maria Gardani	Thesis Course Organiser	maria.gardani@ed.ac.uk
Tim Bird	Research Director	timothy.bird@ed.ac.uk
Ethics	HiSS Ethics Tutors	ethics.hiss@ed.ac.uk
Tim Abbot	Programme Administrator	tim.abbot@ed.ac.uk

All members of the Clinical Psychology academic team provide thesis supervision. Their availability for supervision of DClinPsychol theses will be indicated in the research projects wiki. Contact details for all academic staff can be found on the Clinical Psychology website.

4.3 Thesis Supervisor Allocation

4.3.1 Thesis Allocation Forms

The thesis allocation form (D-R1) is designed to enable the Programme Team to allocate projects to a suitable Academic Supervisor who can help you to develop thesis ideas and evaluate their viability. Please note that you can choose to pursue an alternative project at any stage. The allocation form simply needs sufficient detail for us to be able to determine who would be well-placed to advise on the project. Most projects are allocated to the requested Academic Supervisor, but it may be the case that the supervisor is not available, or another member of academic staff has more experience in the proposed area.

The form asks for three project ideas, each with a different named academic supervisor, in order of preference. Please ensure that you complete the details for three broad ideas, to ensure that you can be allocated to a supervisor even if your main project is not viable. Your third idea may be less detailed than your first two. Allocation to thesis supervisor is by project, rather than individual. Although some level of amendments to a project can be expected, if the project changes substantially (e.g. to a new area, or completely different methodology), your supervisor may advise you to submit a D-R4: Thesis Research Proposal form.

Trainees are encouraged to discuss ideas for thesis projects with clinical and academic staff as early as possible during training. Information about potential supervisors' research interests are available from the research projects wiki and staff pages on the Clinical Psychology website. Time is available within the Research 1 teaching days to connect with staff and discuss project ideas before the allocation form is submitted. First year trainees will be provided with information on how to contact the research projects wiki during Semester 1 along with guidance on how and when to approach potential supervisors.

Thesis allocation forms can be submitted at any time, though for a date by which allocation forms must be submitted for an initial allocation process. All of the projects will be allocated to suitable Academic Supervisors who can meet with you regularly to discuss the project and help you to prepare the thesis proposal and ethics forms.

4.3.2 Research Supervisor Representatives

Research supervisor representatives (Research Reps) have now been established for most NHS Boards involved with the DClinPsychol programme. A key aim of the new Research Rep roles is to help enhance communication between Clinical Supervisors in our stakeholder NHS boards and Academic Supervisors. The Research Rep may be able to help you identify a Clinical Thesis Supervisor and address any difficulties with completing the thesis in the relevant health board. The current research reps are shown in the table below.

NHS Board	Research Rep
Borders	Sonya Campbell
Dumfries and Galloway	Fiona Beaton
Fife	Tara Graham
Forth Valley	Edel McGlanaghy
Grampian	Bruce Downey
Lanarkshire	Andy Siddaway
Lothian	David Gillespie
Tayside	Fhionna Moore

4.4 Thesis Proposals

In order for us to provide feedback on the viability and methods of your project, all trainees need to submit a research proposal form. For those completing a proposal for the first time as part of their Research 1 assessment, this will be the D-R3: Thesis Research Proposal (for Research 1 assessment). Please also refer to the assessment guidance in the Research 1 Learn space.

If you have already completed a Research 1 assignment but have since decided to do a new project and need to have this new project evaluated for viability, then complete the D-R4: Thesis Research Proposal (for methodological review only). The only difference between the D-R3 and D-R4 forms is that the Thesis Research Proposal (D-R3 Research 1) is a summative assessment and is blind marked, moderated and graded. The Non-R1 form is not an assignment but is given review by the Research Director, and where necessary the Programme Director, with feedback given on methodology and viability.

These forms are intended to enable the Programme Team and Thesis Supervisors to provide feedback on the viability of projects at a reasonably early stage and prevent projects from proceeding if they are likely to have significant difficulties. The forms are

designed to help you to structure your project and undertake a risk assessment. In some cases, this process may highlight changes that would be needed to make the project viable within the time and resources available. Arrange in advance to submit a draft of the proposal to your supervisors so that they can provide you with feedback on your proposal prior to you submitting it for assessment. **Please note for the R1 assignment that your supervisors can only provide one set of feedback before the proposal is submitted.**

Submit the forms in the format indicated at the top of the relevant form. The research proposal forms will then be processed as indicated.

At the same time as preparing the R1 Thesis Proposal, we also ask you to coordinate your academic and clinical thesis supervisors to complete and sign the D-R3.1 and DR3.2 feasibility assessment forms (these are available on the DClinPsychol website). These are submitted to separate Turnitin inboxes in the Research 1 Learn space (see the Research 1 Learn space for deadlines). Supervisor feasibility assessments are reviewed by the Research Director, Programme Director and R1 coordinator (reducing potential for conflicts of interest), alongside the thesis proposals and the feedback from markers. The review process happens after the R1 assignment mark is released, to ensure blind marking of the R1 proposal. You will then be emailed a formative opinion on the overall feasibility of the project described in the assignment. The possible outcomes are detailed in the Feasibility Review Outcomes Table. At this point, we also request that you submit your D-R2 Research Agreement form (see 4.5.2 below).

If there are no significant concerns about viability, you will be invited to proceed and will be provided with feedback / advice. In many cases it will be recommended that the project proceeds in broadly its current form subject to consideration with supervisors of outlined suggested revisions. In some cases, there may be concerns about the project's viability. In these situations, we will contact you for further information and revisions may be required to ensure that your project is viable.

If the Project Feasibility falls into either Opinion 3 or 4, you should submit a revised version of your thesis proposal with tracked changes noted and a cover note to clarify the changes you have made. This will need to be submitted to the Programme Administrator and will be reviewed by the Research Director. There is no timeframe for this resubmission, although it is in the trainee's interests to proceed this quickly. Once the revised form is received, a further opinion will be given. Opinion 4 is very rare, and in this case the Research Director will liaise with the trainee and supervision team to support the development of a new project.

The viability assessment does not alter the summative assessment of the R1 assignment.

Feasibility Review Outcomes Table

Opinion	Action
1. The project should proceed in broadly its current form**.**	No further action needed.
2. The project should proceed broadly in its current form subject to outlined revisions (these should be clear from feedback above and the trainee should discuss these suggestions with his/her supervisors, ensuring that these are implemented or that there are good reasons for not implementing these).	Take into account feedback, but no response required.
3. The project should not proceed in its current form and a revised version should be submitted, taking into account feedback provided (trainee should discuss with supervisors and submit a revised form to Tim).	Trainee should discuss with supervisors and submit a revised form to Tim for review by Research Director. In addition, you can contact the Research Director for further advice. There is no compulsory timeframe for resubmission of the work (see above).
4. The project should not proceed in its current form. A new project is required.	A new project should be proposed in collaboration with supervisors. Programme Research Director will advise trainee of next steps (see above).

In very rare circumstances, the Programme may decide that the project should not proceed. This option would only be taken if it seemed probable that the project could not be adapted to make it sufficiently viable within the time and resources available. A flow chart of the feasibility process and how it relates to the R1 assessment and research agreement is displayed in the following page of the handbook.

To reduce the potential for employment difficulties after training or lengthy extensions to training, thesis projects will not be supported by the Programme Team unless they have been invited to proceed following review of a thesis proposal form and are deemed viable by both thesis supervisors. Some NHS Boards also require that the proposal is agreed by the relevant Head of Service.

We recommend that you submit the thesis proposal form before submitting NHS IRAS, other ethics forms or sponsor review, so that our feedback can help inform your ethics submissions and reduce the potential of having to return to the ethics committee with

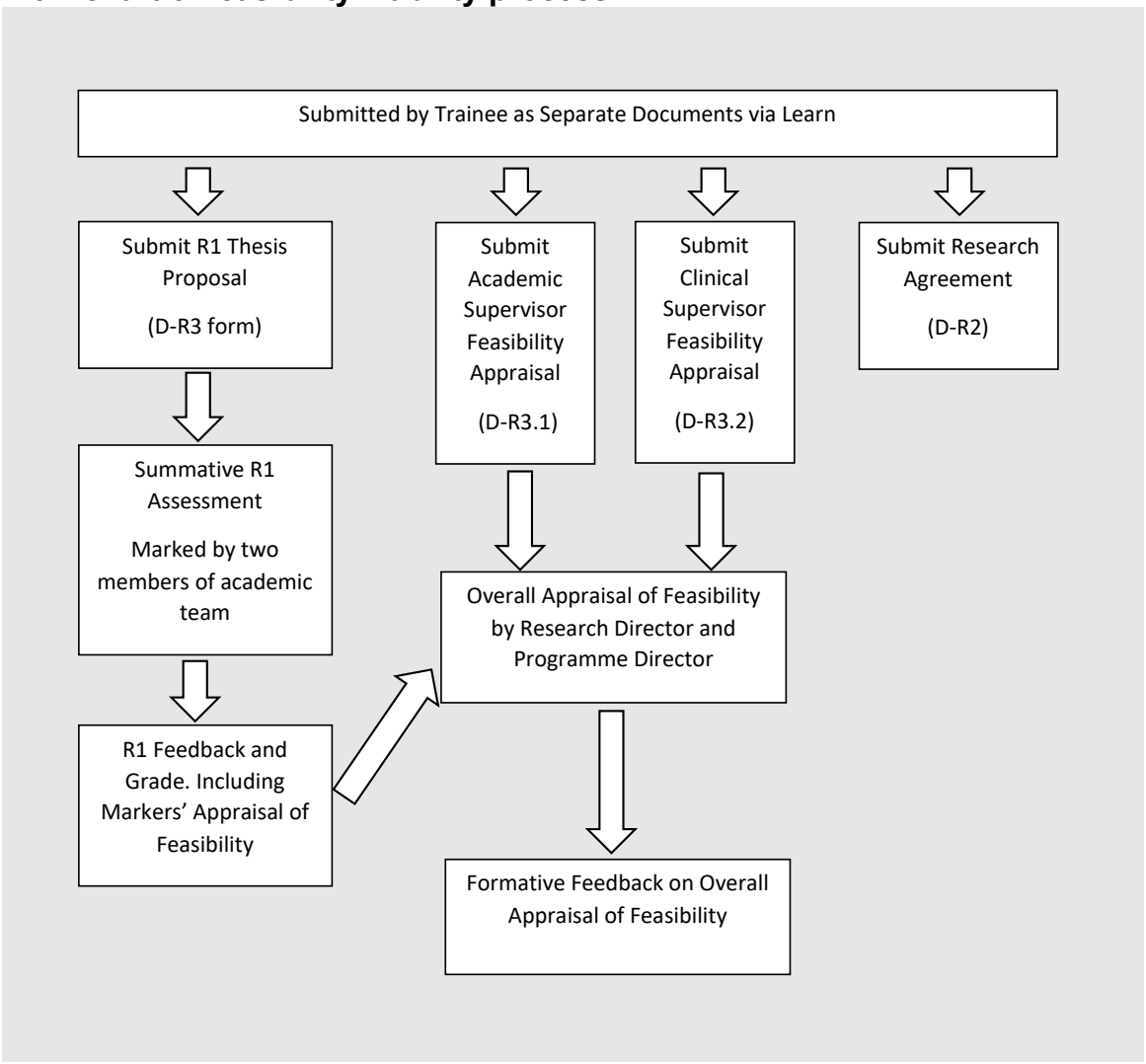
amendments. The thesis proposal pathway also provides an independent review of the proposal, which is directly requested in the IRAS form.

The above checks and balances are designed to reduce the risk of thesis projects encountering serious difficulties, although some difficulties are unforeseen. Most research projects involve an element of risk and even some low-risk projects will suffer difficulties. At doctoral level the trainee ultimately has the responsibility to explain and justify the project to examiners.

4.5 Thesis Supervision

To facilitate the process of designing, carrying out and writing up the research, trainees consult a Thesis Field Supervisor (usually practitioner psychologists who have an interest in the research area) and are allocated an Academic Thesis Supervisor from the Programme Team. Aligned trainees normally have to undertake their thesis project in the general area of their alignment, though they can choose any viable topic within this area. The aim of this section is to set out the types of help that Clinical and Academic Supervisors are expected to provide the trainee.

Flow chart of feasibility/viability process



Academic Supervisors should attend training and CPD events provided by the College or School. All Academic Supervisors should ensure that Clinical Supervisors and trainees are aware of the university's Code of Practice for supervisors and research students.

4.5.1 Supervision and Planning the Thesis Project (Pre-Project Allocation)
Many research ideas are generated from health board research events, informal discussions and teaching. Trainees will be given access to the research projects wiki which lists staff research interests and potential projects. The wiki space also includes some potential thesis ideas submitted by supervisors and Experts by Experience. Some Health Boards may also submit thesis project ideas or Research Strategy documents which will be included on the Wiki where available. Supervisors and Experts by Experience are invited to submit ideas for projects using the Thesis Ideas Form (D-R7), which is available to download from the website.

Once a trainee has an idea of a research area and a project to carry out or hypothesis to test, it is useful to discuss this with others working or researching in that area. Trainees can arrange to discuss thesis ideas with any of the academic team, subject to their availability. Trainees will be given guidance on how and when to approach academic supervisors during Semester 1 of first year. Potential thesis supervisors can suggest project ideas, though the final choice of thesis topic is made by the trainee. Thesis supervisors may suggest useful background reading and should warn the trainee if the chosen area seems either too vague or too ambitious in scope or seems too high risk for the limited time and resources available.

Supervisors are encouraged to develop research programmes and trainees' projects may contribute to such programmes. Research programmes enable one project to expand upon and potentially utilise findings from preceding projects. Importantly, they also facilitate the development of expertise in specific areas of research amongst Clinical and Academic Supervisors and help the development of collaborating teams, which can support projects. However, it is important that trainees have ownership and responsibility for their thesis projects.

4.5.2 Research Agreement/Contract (Post Project Allocation)
Thesis supervisors should liaise with the trainee at the start of the project to prepare a research contract that outlines the respective responsibilities of the trainee, clinical thesis supervisor and academic supervisor. A sample research agreement is provided as form D-R2 (available to download via website) which outlines some normal expectations of supervisors and trainees, though any amendments can be made which are mutually agreed by the trainee and supervisors. The Research Agreement should be amended to suit the parameters of each project, although it should be noted that expectations of students and supervisors are set out in the Code of Practice for Supervisors and Research Students as highlighted above. If a second member of academic staff has agreed to provide additional supervision, then the form should be used to agree each supervisor's

contributions. It is advisable for supervisors and the trainee to also agree dates on which drafts of proposals and chapters will be sent to supervisors for feedback and to agree which chapters Thesis Field Supervisors are willing to feedback on. We recommend that a copy of the Research Agreement is submitted directly to the programme administrator via email.

Each trainee will need to identify a field supervisor from within their health board who can support the project. For help identifying potential supervisors, trainees can contact their line managers, local area tutors and Research Champions. The field supervisor should be identified before submitting the Research 1 assignment, as they will complete a viability form which is required for the feasibility review of the proposal. They will therefore need sufficient time to review the proposal before submission. The role of field supervisors will vary depending on the project. Discussing the project and the field supervisor's contribution early in planning the proposal is recommended to ensure the project idea can be adequately supported. Meeting with both academic and field supervisor as early as possible in the process is recommended. The Research Agreement can be useful for agreeing each person's role and should be amended and added to if necessary.

4.5.3 Supervision and Data Collection

Access to Participants

The quality of a research project is often affected by sampling issues. Field Supervisors can be very helpful in suggesting a target population and ways in which the trainee might access this group, e.g., referral sources for the sample. Field Supervisors may be able to provide introductions to potential referrers and should offer help in case of difficulties in obtaining a sufficient number of participants. Consideration should be given to a realistic appraisal of the size of the sample that will be available during the recruitment period of the project, taking into account ALL inclusion and exclusion criteria and then determining whether sufficient numbers are likely to be available to meet the requirements of the project. All projects should consider at an early stage whether to recruit from more than one region.

Organisational Support

Some aspects of the data collection process may require organisational and/or technical support (for instance, working with particular populations or using particular technical apparatus or procedures). While trainees have access to technical support in the University, there may be other specialised sources of technical support that thesis supervisors can call on or refer the trainee to. By virtue of their experience in the research field, the thesis supervisors may be able to advise on other issues, such as dealing with administrative parts of a service or institution.

4.5.4 Supervision and Writing Up: Assessment and Publication

Reading the Thesis and Commenting on Draft Papers

It is expected that both thesis supervisors will read draft papers from the thesis and make comments or suggestions where appropriate. It is envisaged that most feedback will be provided by the Academic Supervisor, who is required to provide detailed feedback on a draft of each chapter and upon a second draft (which may be in the final draft version of the thesis) where given sufficient time. The Academic Supervisor will also advise on the presentation of statistical/qualitative analyses and other aspects of the thesis where appropriate. Trainees should agree in advance with Clinical Supervisors which papers or sections of papers they are willing to provide feedback on and when such feedback will be provided. Supervisors are encouraged to provide feedback via email and to copy in the other supervisor(s). Trainees should keep in mind that supervisors will require sufficient time to read material given to them in the context of other competing demands and will need advance notice of submission of chapters in order to set aside time to provide feedback. Consequently, immediate or short notice help is often not possible.

Assessment of the Thesis

The thesis is examined in a viva voce examination by an internal examiner and an External examiner. Thesis supervisors do not normally attend the viva, though supervisors may help trainees prepare for this final stage. Details on the assessment process for the thesis are provided in Section 8.

Publication of the Research

Dissemination of findings and submission of the systematic review/meta-analysis and key research findings to suitable journals for publication is **strongly encouraged** in order to generate real world impact for your research and inform improvements to services and patient care. Studies usually involve substantial investments of time and other resources from health care professionals, supervisors, and patients – most of whom participate on the understanding that the findings might benefit others. The portfolio model thesis is designed to facilitate this process and a teaching session focuses on the publication process. Additionally, trainees have two study days per week in August and September to give them time to edit and submit papers after the viva examination. Post-qualification, newly qualified staff can request time in their job plan from their new line-manager to assist with publication of their research. Please see the Memorandum of Understanding in Appendix 1.

Dissemination may take many forms, such as the presentation of results to local health care professionals, patient groups or other interested parties, talks or posters at relevant meetings or conferences or publication as journal articles. The trainee, all supervisors and any other relevant research collaborators should be recognised as authors in any publications or other outputs (e.g. posters / presentations) derived from the project where their involvement would meet criteria for authorship. The trainee should be first author and

should prepare the manuscript, receiving suitable advice, assistance and encouragement from supervisors and other collaborators as relevant. All such publications / presentations should be circulated to all authors for comment prior to being submitted / presented. It is suggested that if the trainee is unable to prepare work to a standard suitable for submission to relevant conference(s) or journal(s) within one year of completing the project (or another agreed time-frame), then with the agreement of the student / trainee and the other authors the Academic or Clinical Supervisor may endeavour to prepare and submit findings that would make a reasonable contribution to the literature. In these circumstances, particularly if substantial rewriting is required, the relevant supervisor may become the first author and the trainee would be an author on the paper. It is recommended that supervisors and trainees discuss dissemination and agree respective roles / expectations regarding dissemination of results early in the supervision process. This conversation should involve all others contributing to the project and aim to reach a clear agreement about authorship or acknowledgment.

* Note that the term collaborator is used here to refer to someone who has given substantial intellectual contribution to the project which would warrant recognition as co-author in relevant outputs. Others might contribute to the project in other ways that might be more appropriately recognised as an acknowledgement. Guidance on authorship and order of authors can be found on the thesis Learn space.

4.5.5 Frequency of Supervision Meetings

It is important that regular contact is maintained between the thesis supervisors and trainee, to maintain trainee morale and ensure that the trainee is making adequate progress. The University Code of Practice for supervisors and research students gives guidance on the process of supervision. Whilst this may vary across the course of the project, a general expectation would be for full time trainees to be in contact with their Academic Supervisor on average of **once per month** whilst undertaking their thesis project. This contact can be in person, by phone or via video call. Clinical Supervisors should provide supervision time for the thesis project, which is separate from any time allocated to the separate role of Placement Supervisor.

At any stage during the thesis project the trainee or either supervisor can request a three-way meeting in which all relevant parties meet together to discuss the progress of the thesis. Such meetings should be held in the most appropriate way for all three parties, either fully or partially by Microsoft Teams or in person at the academic base in Edinburgh. We recommend that a three-way meeting should be held in first year with trainee, academic and clinical thesis supervisors, around the time of submission of the Research 1 assignment. It is important to keep all supervisors up to date with how the project is progressing and any decisions made or discussions held with one supervisor where the other is not present.

The trainee is required to record all meetings with the Academic Supervisor on EUCLID (accessed through MyEd). These can be marked as confidential if the trainee would prefer. In addition, trainees should email all meeting notes (i.e., with either the clinical or academic supervisor) to the full supervision team.

Any substantial issues in the academic supervisor-trainee relationship should be flagged to the Research Director or Programme Director. This can be by email or requesting a meeting.

4.5.6 Supervision and Thesis Project Ethics

All research projects need to obtain appropriate ethical and governance approvals before any data can be collected. Guidance on ethics is provided in Section 2. Both Clinical and Academic Supervisors should provide guidance on ethics and feedback on drafts of ethics submissions.

4.5.7 Drafts and Feedback

Supervisors and trainees should review workload and agree dates on which drafts of the individual thesis chapters will be submitted to supervisors for comment. Suitable notice of submission dates for chapters should be provided to enable supervisors to set aside time to provide feedback. It is important to adhere to this plan for submission. This allows you to receive detailed feedback on chapters and make amendments prior to submitting the whole thesis for review.

A full draft of the thesis must be submitted to the Academic Supervisor at least one month prior to the final submission date.

4.6 Study Time and the Thesis

In general terms, trainees have one day a week dedicated to study time in first year. For full time trainees this continues as one day a week in second year and increases to two days a week for most of third year. This is sometimes reduced during full teaching weeks or when attending APS seminars, however it still amounts to a substantial amount of study time.

Trainees on the 2.5 years training route do not complete a small-scale research project in second year, as this is already credited as part of prior learning. It has been agreed that this time (0.5 days per week for one placement in second year) are still granted to the 2.5-year trainees and the days are to be used as thesis study time, to support the shorter timeframe of thesis completion.

Full details of study time are outlined in the NHS and Clinical Practice Placements Handbook. A significant proportion of the study time available earlier in training should be dedicated to the thesis, with the programme having made substantial reductions to other assessments during the earlier years partially to enable this time to be dedicated to the thesis.

4.7 Thesis Progress Monitoring

Thesis progress will be monitored using the Thesis Progress Monitoring form. Trainees complete a Thesis Progress Form twice each year: at the Joint Annual Review (typically held in October at the end of year 1 and year 2), at which point forms will also be copied to the Research Director; and in April/May of 2nd year when forms will be submitted directly to be reviewed by the Research Director to keep an overview of trainees' progress. This will not be formally assessed but will form part of the paperwork for Joint Annual Review meetings and this offers an opportunity to identify any potential difficulties prior to the third year and to set suitable Learning Objectives, if required. If concerns are identified, then a follow up meeting may be arranged to review progress.

4.8 Research Resources and Funding

4.8.1 Clinical Psychology Lab

The department has a number of audio recorders, tablets, iPads, video cameras, etc. which can be used for research purposes. Research resources that can be borrowed from the department are currently managed by the Clinical Psychology Lab Technician, Paul Gordon (paul.gordon@ed.ac.uk).

If there is a particular resource that you require for your study that is not available from the current departmental resources you can submit an application for research funding, as outlined in the following section.

4.8.2 Applying for Research Funds

Some limited funds are available to support DClinPsychol thesis projects each year.

Applications for funding should be made using downloadable form D-R6 (Application for Research Funds for Thesis), which is available on the Handbooks website, and emailed to the Programme Administrator. Guidance on what the funds can be used for is available on the form.

Information on the expense claim process can be found in the Doctorate in Clinical Psychology Programme Learn space: > Research Resources > Applying for Research Funding /Expenses process

4.9 Guidance for Writing Thesis

It is natural for trainees to seek a step-by-step guide to completing the thesis and this section and associated teaching endeavours to provide guidance on typical sections and chapters of doctoral thesis projects. However, this is presented as guidance rather than as prescriptive instructions for preparing the thesis. Each thesis is different and it is for the trainee ultimately to decide upon a format which provides a cohesive and suitably structured presentation of their systematic review and empirical project(s). Submission dates for papers or sections of papers should be agreed with Academic Supervisors early in the thesis process. Academic Supervisors will then monitor adherence with these

agreed dates and provide guidance and feedback tailored to your project. However ultimately it is the trainee's doctoral project and he or she is responsible for its management. The portfolio represents a whole body of work and is assessed as such. While in most cases the original research paper is the larger piece of work, for some projects, the systematic review may be the larger piece of work associated with a smaller original research project paper.

Portfolio Thesis initial pages
The thesis must contain the following pages prior to the main chapters of the thesis.

Title Page
The thesis should have a title page which includes the thesis title, author's name, the name of degree (i.e., Doctorate in Clinical Psychology), The University of Edinburgh, and the month and year of presentation (e.g., May 2016).

Dedication / Acknowledgements
The thesis may contain a dedication and/or an acknowledgements page. These are optional.

Table of Contents
An accurate Table of Contents will assist readers when navigating the thesis. MS Word can prepare a Table of Contents which will update itself when page numbers change.

Lay Summary
A lay summary is intended to facilitate knowledge exchange, public engagement and outreach. It should be written in simple, non-technical terms that are easily understandable by a lay audience, who may be non-professional, non-scientific and outside the research area. The lay summary should be incorporated at the beginning of each copy of the thesis submitted for assessment and must be included in the final version of the submitted thesis. Students should use the University lay summary form. The lay summary is not included in the word-count. Lay summaries should conform to the requirements of the Standards for the Format of a Thesis.

Abstract
Although placed at the start, abstracts are invariably written at the end and are essentially a brief summary of your study and its findings. Portfolio format thesis projects will have three separate abstracts in total. The main one provides an abstract for the entire thesis (i.e., for the systematic review and any empirical projects). There will then be an abstract for the systematic review at the start of the systematic review chapter and an abstract for the journal article at the start of the journal article chapter. Abstracts should be self-contained, such that they can be understood fully without the need to refer to the rest of the report. These abstracts will be indexed by the library and are generally read by a considerably larger audience than the main report, thus it is important to ensure that the abstract conveys key elements of your study.

Systematic Review or meta-analysis

A systematic review or meta-analysis enables a literature to be carefully reviewed and critically evaluated, using criteria which reduce the potential for bias and thus increase confidence in the review's conclusions and recommendations. Such systematic reviews bring the same level of scientific rigour to reviewing research evidence as should be employed in generating research evidence. There is a growing literature of published systematic reviews and it is recommended that you read through a few reviews to get an overview of the typical formats and styles. There is no single standard template for systematic reviews, though there are general guidelines and factors that can increase the strength of such reviews.

It is recommended that you discuss the review question(s), search criteria and potential quality criteria with your Academic Supervisor. The systematic review will be in the anticipated area of the thesis project and should be publishable once completed, so that the work undertaken can inform others. It is recognised that some trainees may need to change their thesis topic at a late stage due to reasons beyond their control. In these circumstances the systematic review chapter will remain valid even if the subject area of the thesis subsequently changes.

The systematic review should be written in the format of an appropriate peer reviewed journal (i.e., one that accepts systematic reviews), adhering to the journal's author guidelines, paying due attention to formatting, referencing style, and word length and including the guidelines in the appendix. The only exception is that we recommend that tables, figures etc. be inserted alongside corresponding text for the thesis, whereas journals often ask that they be appended or submitted separately. There will be some variation depending on the topic of the review and the guidelines for the selected journal. However, guidelines for peer reviewed journals or other means of dissemination usually enable the review to cover the following areas: An appropriate, clear and focused area or question/objective for the review; a clear description of the search strategy (this will include searches of databases, including clear descriptions of search terms used and the time-frame); clear and appropriate inclusion and exclusion criterion for identified studies; critical appraisal of the studies included in the review; a synthesis of the findings from the individual studies, taking into account 'weighting' of their value based on the stated quality criteria; conclusions and recommendations based upon the evidence reviewed.

Bridging Chapter

If the systematic review does not cover all of the literature or concepts that are essential in order to provide a suitable rationale and background to your empirical project, then an option is to include a brief second chapter, which outlines this material. This is not usually required.

Original Research Article(s)

The original research project should be presented in the format required for submission to one or more peer reviewed journal article(s). The only exception is that we recommend that tables and figures be inserted in the text for the thesis, whereas journals often ask that

they be appended or submitted separately. Trainees are advised to seek advice from their supervisors regarding the results that would be most suitable for publication and the journals that might be considered. The most relevant journals may be those in which related articles have been published.

The journal's own guidelines for authors will usually be available via the journal's website. These should be followed carefully, paying due attention to formatting, referencing style, and word length. The author guidelines for the selected journal should be included in the appendix of the thesis. Subject to the approval of supervisors, work can be submitted for publication prior to submission of the thesis or the viva. Whilst most theses are anticipated to involve one such journal article, where appropriate a trainee may opt to have two or more separate journal article chapters, which focus on separate publishable findings from the project.

A typical quantitative methods section would include sections on participants, measures, procedure, ethics and statistical analysis, including power analysis. The section on measures should provide evidence that the measures are valid and reliable tools suitable for use with the type of population that your study is based upon. If your analyses involve subscales, then the psychometrics for these subscales should be outlined. A qualitative methods section should include detailed information on the interviews, the selection of participants, the qualitative method adopted (e.g., grounded theory), the transcribing process, and the steps taken to enhance the quality of the analysis. Where relevant, it is recommended that a software package is used to assist with the process and to provide an audit trail for this analysis. If an interview schedule is used, this should be outlined and a copy included in the appendix. A page or two of unidentifiable transcript should be included in the appendix to demonstrate the style and steps of analysis undertaken. The methods section should include a statement about ethical approval.

The discussion section is where you interpret your findings in the light of your hypotheses and the previous literature, explaining possible meanings and implications e.g., for clinical application and future research. Highlight strengths of your study whilst also discussing the methodological constraints and limitations of your study, with appropriate conclusions.

Other Chapters

In previous years we outlined the option to present further results or discussion which could not be included in the journal article within 'Additional Results' and / or 'Additional Discussion' chapters. However, the experience of examiners was that these chapters all-too-often included undue repetition of materials contained within the journal article or included unnecessary content which risked diluting the overall quality of the thesis. Consequently, we now advise against such chapters, though trainees are at liberty to present any chapters which they consider would enable an optimal presentation of the thesis. All chapters, and the purpose they serve, should be discussed fully with supervisors.

References and Appendices for the Thesis

Correct use of referencing allows you to credit your sources and facilitates those reading your work to consult them. Appropriate referencing also allows you to illustrate awareness of the key texts in your field and your ability to use these to further advance your arguments. References for the systematic review and the journal article should follow the format of the selected peer reviewed journal(s) and be placed immediately following the systematic review / journal article. A separate, full reference list should be provided at the end of the thesis (i.e., this includes all references within the thesis). The referencing style for this final list should be consistent (e.g., using APA style). Whichever method you use to 'store' references, keep it up-to-date throughout the project to avoid difficulties at the end.

If there are several appendices, label each appendix separately and include a Table of Appendices. Ensure that appendices are easy to navigate and contain only clearly relevant material. It is inadvisable to present large amounts of data or SPSS output. If you include any measures, please ensure that you have suitable consent from the copyright holder. In most cases such measures will not be included in the final published thesis, though it may be possible to include them in the version submitted for examination. Please note that consent to include the measure in the final published thesis is separate from consent to use the measure for data collection. Any measure should be assumed to be protected by copyright unless there is clear evidence to the contrary. If you are unable to include measures in the thesis submitted for examination, ensure that they are suitably described with references provided and bring copies to your viva.

The appendix must contain evidence of ethical approval, and the most up to date protocol for the study, either the version submitted to the relevant ethics committee or the original thesis proposal form.

Presentation of the Thesis

In order to have a genuine impact, others need to understand and be convinced of your findings. Successful and influential pieces of research achieve this status not only by (usually) having excellent content, but by thoughtful presentation and communication of this material. Consequently, a reasonable well-presented study may produce a better thesis than an excellent study which is poorly presented. Although you should be thinking of the presentation (not just the content) throughout the thesis, it is essential to allow time to polish up the presentation at the end. Keep paragraphs in reader-friendly 'bite-sized' chunks. Try to avoid 'list-like' paragraphs, in which sentences have an 'and another thing is' feel about them. Whilst this might be present initially whilst gathering all of the relevant pieces of information together, once you've done this ensure that you integrate the information to form cohesive paragraphs. Remove any superfluous text (e.g., any excessive repetition, information that is not required). Ask others to read through sections of your thesis, asking for constructive feedback rather than reassurance.

Word Count

The thesis should be no longer than 30,000 words. The word count includes everything in the main body of the text: quotations, citations, tables, formulae, etc. The references

sections are part of the appendix and are not included in the word count. Likewise, any other material included in the appendices is not counted towards the word count. Given that the thesis is written in the format of research articles, many theses will be shorter than 30,000 words. It is acceptable to exceed stated journal word limits in the thesis only if this is deemed necessary in order to provide evidence of research competence for assessment purposes.
An exception to the stated word count may be considered if the Academic Supervisor agrees that the word limit needs to be exceeded in order to adequately communicate the material. In such circumstances, the supervisor should request a concession to exceed the word count from the College Postgraduate Research Student Office well in advance of submission. However, please note that these are only granted in extremely rare circumstances and the requests are actively discouraged. Should a trainee submit a project that exceeds the specified word count that has not been subject to a previously agreed exemption, the examiners may ask that the thesis be shortened as a 'required change'.

4.10 Thesis submission and Viva Processes

Step-by-step guidance on submitting your thesis and viva processes can be found in the Assessment Page in the DClinPsychol Thesis Learn Space available to 3rd Year trainees.

4.11 Clinical Psychology Thesis Prizes

Two thesis prizes are available. For information, please see the Programme Handbook.

4.12 Recommended Reading

The thesis is linked to the Research 1 and Research 2 courses and much of the recommended reading for those courses are also applicable to the thesis. Prioritised reading lists for Research 1 and Research 2 can be found in their respective course Learn spaces.

Details of sources for recommended reading are also provided alongside materials provided for individual teaching sessions on Learn. Your thesis supervisors will be able to recommend specific materials that are tailored to your thesis project.

SECTION 5 - Guidance for the Involvement of Experts by Experience in Thesis Projects

The Advisory Panel of Experts by Experience and Research Director have created a document to encourage the use of experts by experience (e.g., service users, carers, patients and survivors) in trainee research, particularly the thesis. Please refer to the separate guidance document available online. This document will help you at the research proposal stage.

Appendix 1 - Memorandum of Understanding – Promoting DClinPsychol Trainee Research Dissemination

Scope, Vision, and Goals

This MOU has been developed to support the dissemination pipeline for DClinPsy research completed by early career DClinPsy graduates employed in Scottish Health Boards. The goals are to increase the conversion rate of DClinPsy research projects into scholarly publications as well as nurturing clinical psychology research productivity capacity within the Scottish NHS. This will help generate data that can inform the development of applied clinical psychology in Scotland. Over time the supply of research field supervisors who have experience of the full lifecycle of research conduct should be increased. The outputs will help to raise the profile of the competencies that Clinical Psychologists bring to the NHS.

Investments

The main resource being invested is time (e.g. .1-.2 WTE sessions per week). The employer will agree that time during the working week can be allocated to preparing research for publication. The university supervisor will agree to allocate time to meetings and reviewing of draft publications. Local area arrangements for providing financial support for research dissemination (e.g. conference fees) are outside of the scope of this MOU. Coverage of research costs arising from the extension of research activity (e.g. test materials used in collecting additional data) will need to be costed and agreed at the outset.

Objective Setting and Agreeing Deliverables

Both the university supervisor and NHS line manager need to agree the deliverables and timescales. This should include key milestones that, if unmet, can result in the revocation of protected research time. A staged project timeline (e.g. GANTT chart) specifying short term deliverables (e.g. 3 months) should be used to regulate progress and make decisions about continuing. Suggested key deliverables include: amendments to HREC approvals, collection of a specified number of new participants/data points, completion of a draft paper, achievement of submission to a scholarly journal. It is expected that the recruitment and assessment of new participants will be much less common than spending time on adapting existing written work to enhance the chances of publication.

Caveats and Rights

All parties need to agree at the outset that the proposed research work is feasible and deliverable within the available resources. All parties have the right to opt out of supporting the research activity at the planning stage. But, once a plan has been agreed, the expectation is that all parties will make a reasonable effort to deliver the project objectives. A new research supervision agreement or extension of the pre-qualification research supervision contract could be drafted so that all parties understand their responsibilities.

Governance

The employing board will assume responsibility for the governance of the research activity. University collaborators will agree to only support projects where there is a reasonable basis for expecting that the work is publishable and that the return on investment will be reasonable. Normally Principal Investigator responsibilities will rest with the employee who is leading the project.

Review Processes

Publication timescales mean that evaluation of the impact on deliverables should be reviewed in 1 to 2 years. Short term milestones such as the numbers of new hires who negotiate publication time as part of their agreed duties could be collated and reported on a yearly basis. The universities should collect information on the number of ex-Trainees who seek ongoing support with publication following programme graduation. It is proposed that the uptake, perceived utility, and impact of this initiative should be completed on an annual basis as part of the revolving HOPS meeting agenda (e.g. for the January meeting).