'What are EPs'/TEPs' Views and Experiences of Using the Power Threat Meaning Framework During Formulation?': A Reflexive Thematic Analysis Study

Demi Stroud

A thesis submitted to the University of East Anglia for the degree of Doctorate in Educational Psychology (DEdPsyD) in the School of Education and Lifelong Learning University of East Anglia

December

2024

Word Count (Including titles, figures and tables and excluding contents page, acknowledgements, the glossary of terms, the bibliography and appendices): 42,483 words

Acknowledgements

Summary

This thesis consists of three chapters:

Chapter One: A thematic literature review. This chapter examines the available literature regarding Educational Psychology engagement and approaches to formulation, identifying several factors that contribute to a good formulation, frameworks which EPs may draw upon to complete assessments, and the overlap in literature distinguishing between assessment and formulation. The second part of the literature review explores how the Power Threat Meaning Framework (PTMF) is being applied to formulation, and more broadly within different professional domains.

Chapter Two: Empirical Paper. This chapter discusses an exploratory qualitative study investigating EPs' views on what EP formulation is and how they approach it. Additionally, the study explores how the PTMF can be applied to enhance EP formulation. Data was collected through online semi-structured interviews with six EPs and one Trainee EP. Data was analysed using Reflective Thematic Analysis (RTA) to develop themes across the data set. This chapter concludes by considering implications for EP practice, contributions to EP practice, and future research recommendations.

Chapter Three: A reflective account of the research journey. This chapter provides a reflective account of the researcher's journey in developing, conducting, and writing the research study. This account reflects on the researcher's positionality situated within professional and personal experiences. The researcher's decision-making throughout different stages of the research has been documented. This chapter also considers ethical decision-making and dissemination of the research.

Access Condition and Agreement

Each deposit in UEA Digital Repository is protected by copyright and other intellectual property rights, and duplication or sale of all or part of any of the Data Collections is not permitted, except that material may be duplicated by you for your research use or for educational purposes in electronic or print form. You must obtain permission from the copyright holder, usually the author, for any other use. Exceptions only apply where a deposit may be explicitly provided under a stated licence, such as a Creative Commons licence or Open Government licence.

Electronic or print copies may not be offered, whether for sale or otherwise to anyone, unless explicitly stated under a Creative Commons or Open Government license. Unauthorised reproduction, editing or reformatting for resale purposes is explicitly prohibited (except were approved by the copyright holder themselves) and UEA reserves the right to take immediate 'take down' action on behalf of the copyright and/or rights holder if this Access condition of the UEA Digital Repository is breached. Any material in this database has been supplied on the understanding that it is copyright material and that no quotation from the material may be published without proper acknowledgement.

Contents

List of Tables

Table 1. Six Phases of Reflective Thematic Analysis (Braun & Clarke, 2022)

Table 2. Examples of how the QA (Braun & Clarke, 2020) tool was considered throughout the research

Table 3. Theme Breakdown

Table 4. Mapping the Overarching Themes onto the Research Questions

Table 5. Researcher's Social Graces

List of Figures

Figure 1. DECP Framework for Psychological Assessment and Intervention

Figure 2. The Six Phases of the Problem-Analysis Framework

Figure 3. A Constructionist Model of Informed, Reasoned Action (COMOIRA)

Figure 4. The Five-Phase Integrated Framework

Figure 5. The Social Graces Framework (Burnham, 2012

Figure 6. The Power Threat Meaning Framework illustration by Julliet Young.

Key Abbreviations

ACEs- Adverse Childhood Experience(s)

BPS- British Psychological Society

COP- Code of Practice

CYP- Children and Young People

DfE- Department for Education

DoH- Department of Health

EP- Educational Psychologist

EHCNa- Education Health and Care Needs assessment

EHCP- Education Health and Care Plan

LA- Local Authority

HCPC- Health and Care Professionals Council

MH- Mental Health

PTMF- Power Threat Meaning Framework

RTA- Reflective Thematic Analysis

SEMH- Social, Emotional, Mental Health

SEND- Special Educational Needs and Disabilities

TA- Thematic Analysis

RTA- Reflective Thematic Analysis

TEP- Trainee Educational Psychologist

UK- United Kingdom

<center>**Chapter One: Literature Review**</center>

Introduction

Educational Psychologists (EPs) work mainly within educational settings, but can also be seen working across various settings such as; hospitals, and forensic environments and privately, supporting various needs for Children and Young People (CYP) such as Special Educational Needs and Disabilities (SEND) and emotional well-being. The first part of this chapter will provide an exploration of the current landscape of CYP mental health in the UK. Exploring the current context of CYP mental health and its associated barriers helps to situate the role of EPs and their relevance to the Power Threat Meaning Framework (PTMF).

A crucial aspect of an EP's role is to provide evidence-based psychological explanations, known as formulations. The second part of this chapter examines how EPs approach formulation and the frameworks they employ to support this process. The third part of this chapter explores the current use of the PTMF in formulation across different professions, with a particular focus on its application by EPs in their practice. The PTMF, developed by Clinical Psychologists, offers an alternative approach to understanding mental health needs. This literature review will investigate potential gaps in how EPs are applying the PTMF. Examining these areas will provide insights into how EPs engage with formulation to understand CYP presentations and how the PTMF can be applied in practice to inform formulation.

Current Context of Young People Mental Health in England

The mental health landscape for CYP in the UK is increasingly complex, with a recent NHS Digital survey (2023, 2022) revealing that approximately one in five CYP aged eight to 25 have a probable mental health need. Risk factors include financial constraints, limited access to activities, bullying, negative household changes, and concerns about climate change and the future. These challenges significantly impact education, with affected CYP more likely to miss school and report negative experiences. Socioeconomic factors play a crucial role, as households with CYP experiencing mental health issues are more prone to income reduction and food insecurity. A 2021 Mind survey further highlighted the interplay between mental health and education, with a vast majority of CYP reporting that their mental

health affected their schoolwork, and that school worsened their mental health (Mind, 2021). Additionally, the prevalence of childhood trauma, experienced by about half of UK youth, doubles the risk of mental health problems (Torjesen, 2019). These findings highlight the critical need for comprehensive support systems, including the vital role of EPs in understanding CYP's contexts and supporting their emotional wellbeing.

In terms of understanding mental health needs, the literature highlights that there needs to be a change from pathologising people's experiences and emotional distress into a mental health disorder (Watson, 2019). Many people in the UK who have been exposed to the mental health system report feeling like they are just a label and that the process provides them with little understanding of their experiences of emotional distress (Johnstone et al., 2018a). Research conducted by Seerey et al., (2021) highlights how the way in which a person's emotional distress is labelled then influences how people view, interact with, and support them. In addition to this, the literature produces contentious debates; one debate surrounds the use of the DSM-5 diagnostic manual and American Psychiatric Association Diagnostic and Statistical Manual in categorising mental health disorders (Pickersgill, 2024; Watson, 2019).

A second important debate concerns the research that supports the use of intense mental health treatments for people who have experienced trauma. For example, women who have been subjected to abuse from males are given a range of intense medical treatments such as electroconvulsive therapy to reduce their mental health symptoms which are presented as a result of their traumatic experiences (Taylor, 2022). Thirdly, the literature critically explores the use of medication to treat depression and anxiety disorders (Lozupone et al., 2019; Watson, 2019). External stressors and trauma are rarely considered (trauma-inducing experiences, living in poverty, homelessness, and lacking in power), meaning the individual's 'symptoms' are treated but the environmental factors are not addressed, and the correct social and contextual support is often missed (Johnstone et al., 2018a). Current literature places a spotlight on the UK's health services in terms of mental health support, suggesting a lack of compassionate and empathic care (The Lancet, 2024). Furthermore, the literature suggests wider systems incentivises indifference and labels, and that the Mental Health Act (2007) and reforming White Paper (2021) do not include up-to-date evidence (The Lancet, 2024). The PTMF was developed by Johnstone et al., 2018 to provide an alternative way to explore and understand emotional distress, moving away from the dominant psychiatric medical model of

understanding mental health. The PTMF is underpinned by trauma-informed research and systemic approaches (Johnstone et al., 2018a).

Context of the PTMF

Understanding the context in which the PTMF was developed is essential for appreciating the political debates surrounding it and its relevance to Educational Psychology. The PTMF was created by Clinical Psychologists as an alternative perspective on mental health and illness. In 2013, the Division of Clinical Psychology (DCP) of the British Psychological Society (BPS) published a position statement titled *Classification of Behaviour and Experience in Relation to Functional Psychiatric Diagnoses: Time for a Paradigm Shift*. One of its key recommendations (Recommendation 3) stated: *"To support work, in conjunction with service users, on developing a multi-factorial and contextual approach, incorporating social, psychological, and biological factors" (p.9)*. This recommendation laid the groundwork for the development of the PTMF, which was created by colleagues to explore emotional distress by identifying patterns across emotional suffering, unusual experiences, and troubling behaviours. The framework aims to integrate a variety of psychological theories, evidence, and perspectives (Johnstone, Boyle et al., 2018).

As noted above, several key debates have shaped the shift toward a more culturally, socially, and individually meaningful understanding of emotional distress. One of these debates relates to the medical/psychiatric model of mental health which attempts to understand mental health through the lens of symptoms, theories about the human body, and corresponding medical treatments through the use of the DSM-5 and APA. This approach is often referred to as the 'DSM mindset'.

The DSM Mindset

As highlighted by Bodfield & Culshaw in their 2024 paper, the psychiatric model of understanding and labelling conditions has faced criticism for its inaccuracy, with many conditions overlapping and resulting in comorbidity (Joshi et al., 2017; Van der Meer et al., 2012; Van Loo et al., 2013). One of the central issues in this debate is the lack of biological markers to identify mental health conditions (Lozupone et al., 2019). As a result, diagnosis often relies on professional judgment, with symptoms that are frequently self-reported or subjective (Lewis-Fernández & Kirmayer, 2019). Researchers and professionals argue that

scientific evidence supporting the psychodiagnostic systems outlines in the DSM-5 and the International classification of diseased (WHO, 2018) is lacking, 'flawed', 'unscientific', 'invalid' and 'unreliable' (Sanders, Cited in Watson, 2019 p.26). The PTMF, in contrast, suggests that emotional distress should be understood within the context of an individual's social, cultural, and relational environments, experiences, and interactions with the systems in which they live and embed a trauma-informed approach.

The PTMF challenges the DSM mindset, which is seen as being embedded in Western philosophical assumptions, such as the separation of mind from body, thought from feeling, and the individual from the social group. It also critiques the prioritisation of rationality over emotion and the belief in objectivity—the idea that values, ethics, and power interests can be separated from theory and practice in human systems (Johnson, Boyle et al., 2018).

As a result, offering an alternative way to understand emotional distress through the PTMF has faced significant criticism and backlash, which will be discussed below. The medical model, rooted in a positivist paradigm, often treats social and relational factors as secondary to biological causes. This model does not fully conceptualise distress as a meaningful, functional, or understandable response to life circumstances (Johnson, Boyle et al., 2018).

Response to the PTMF

The majority of criticisms of the PTMF come from professionals who strongly support the medical model. Some have expressed concerns that the PTMF lacks clarity and practicality, which could hinder its application in supporting individuals with emotional distress, particularly when focusing on broader systemic and political inequalities—issues that are difficult to address within the framework of individual therapy.

Critics argue that models reliant on diagnosis may struggle to integrate the PTMF, as some see it as too abstract and theoretical, with an over-emphasis on social factors. Additionally, some argue that the PTMF places social, political, and environmental factors over genetic and biological factors, downplaying the role of neurobiological and genetic influences in mental illnesses, and neglecting the importance of medical treatments that are effective for significant conditions like schizophrenia, and psychosis, bipolar disorder, and severe depression (Szmukler & Appelbaum, 2021).

A common misconception about the PTMF is that its authors ignore the importance of mental health diagnoses. However, the authors argue that the PTMF is not intended as a standalone framework, and it can be used flexibly, with service users actively participating in deciding how they want to understand their emotional distress (Johnstone & Boyle, 2018; Johnstone et al., 2019). However, it is important to note that critics have argued that in its current presentation, the framework is inaccessible to those it is aimed at (Salkovskis & Edge, 2018).

The PTMF presents a set of General Patterns that describe a range of behaviours, feelings, and experiences linked to common contributory factors. Individuals can choose to identify with these patterns, with or without professional support, and decide whether they relate to any of the behaviours described. However, these general patterns have also been criticised for resembling diagnostic categories, with some critics arguing that they still attempt to categorise people into groups (Salkovskis & Edge, 2018). The authors of the PTMF, however, contend that the General Patterns are not intended as diagnostic criteria. Unlike the strict lists of symptoms used in the DSM-5 to diagnose mental illnesses, The General Patterns have no set criteria or requirements like diagnostic labels. The authors clarify that The General Patterns are primarily designed to aid in service management, administrative decisions, organising interventions, and guiding research (Johnson, Boyle et al., 2018).

The PTMF remains a controversial framework and perspective amongst professionals, and people accessing mental health support services. The PTMF framework sits within a wider political movement around challenging psychiatry, its construction, organisation and practice and forms part of how professionals and individuals can understand emotional distress with a different lens. Therefore, as argued by the authors, the PTMF tool can enhance our understanding of emotional distress using a person-centred framework underpinned by psychology.

Relevance to EP Practice

How then do these debates relate to the role of EPs? EPs often work within the social model of disability. It is the EP's role to understand the CYP needs and provide recommendations for support, this is more commonly done using a holistic and systemic approach to assessment (Rees, 2024). Following government initiatives and research into the

impact of trauma and adversity on CYP mental health, and the legacy of Adverse Childhood Experiences (ACEs). Trauma-informed practice emerged as a systemic approach for EPs supporting CYP who may have experienced trauma and adversity (Hopkins, 2021). Furthermore, similar to above with the current debates regarding mental health labels, the EP literature highlights debates regarding SEN labels, such as the ongoing Big Dyslexia debate (Elliot & Nicholson, 2016; Elliot & Grigorenko, 2014). This debate explored a range of implications related to and because of labelling learning behaviours. Some of the things this debate has highlighted include the negative and incorrect allocation of resources, social justice issues, misunderstanding and misidentification of actual needs.

Regarding CYP mental health, the literature suggests that medication for low mood and anxiety disorders is being more commonly prescribed to CYP under 18 as primary care. One study found that 24.7% of CYP being prescribed SSRIs before being seen by a child and adolescent psychiatrist, which is contrary to national guidelines (Jack et al., 2019). NICE guidelines recommend community-based, therapeutic interventions as first-line treatments (NICE, 2019; NICE, 2018; NICE, 2021). However, additional research also suggests that the study by Jack et al., 2019 does not represent an accurate analysis of CYP mental health population, misses a large proportion of specialist mental health contacts and argues that more CYP do have access to and support from mental health professionals than the number reported in that study (Taxiarchi et al., 2023). Despite this, the UK currently faces long waiting times and high thresholds for psychological treatments and therapies. CYP and public services are still recovering from the COVID-19 pandemic, which saw a 41% increase in antidepressant prescriptions for those aged 5-12 between 2015-2021 (Robinson, 2021). Interestingly, NHS consultants report that many parents/carers and CYP request medication due to the misconception that mental health issues result from a 'chemical imbalance'. This occurs without considering the difficulties in withdrawing from medication or exploring the range of factors that could be contributing to their emotional distress (Robinson, 2021). Suggesting a wider change is required around understanding emotional distress, possibly surrounding the education and information that is being shared with the public around understanding emotional distress.

EPs working within the UK education system are encountering an increasing number of CYP experiencing Emotionally Based School Non-Attendance (EBSNA), which is thought to be underpinned by heightened anxiety regarding the school environment (Morgan &

Costello, 2023). Furthermore, EPs are currently working within a context where there appears to be a societal focus on the notion that if a label is not given, professionals are failing to provide appropriate care, alongside a narrative of resource scarcity and lack of trust in support systems (Smith, 2023). Currently, a diagnosis often serves as a gateway to accessing support and services, highlighting a high level of need (Downs & Smith, 2022). Since the COVID-19 pandemic in the UK, mental health and NHS-funded services have become saturated and stretched (NHS Digital, 2022), as a result, parents/carers and professionals report that those with the highest need (usually with a diagnosis) are being supported, while those with lower-level needs struggle to access support. A similar impact within the education system can be seen. The SEND Code of Practice (2015) states that a diagnosis or EHCP is not required for a CYP to access specialist support and provision; support and intervention should be offered based on need. However, there is an increase in the number of CYP requiring support and EHCPs. As of January 2023, the number of CYP with EHCPs increased to 517,000, up by 9% from 2022 (GOV NOS, 2023). This has increased each year since 2010 (GOV NOS, 2023), leading to a 'golden ticket' narrative debate between parents/carers and professionals, suggesting those without labels and diagnoses are not getting the support they need due to limited resources (Smith, 2023).This situation has had a knock-on effect, with parents/carers and professionals referring to specialist services for exploration of diagnoses such as Autism Spectrum Disorder and Attention Deficit Hyperactivity Disorder (ADHD), which in turn is contributing to long waiting lists and a culture of labels. Part of the change in the narrative around the medical model (psychiatric model) of mental health was proposed by the introduction of the PTMF in 2018 (Johnstone & Boyle 2018a). This chapter will explore the literature available regarding how the PTMF is being applied within practice in further detail below.

Despite the criticisms reported regarding the PTMF, there has also been a considerable amount of positive practice-based evidence that highlights the appropriateness and usefulness of applying the PTMF within formulations and understanding emotional distress using a different lens and approach. This will be shown in the review of the literature of this research. As identified above, the PTMF is a helpful framework to situate a person as an interaction within their environment and provides an opportunity to consider cultural, societal and individual assessment of needs. Furthermore, it provides an appropriate lens to consider CYP within their environment, suitable for exploring the impact of ACES, and working within diverse communities.

The key underlying principle of the PTMF relates to the impact and influence of power on a person's life and how this has shaped or impacted their emotional well-being and presentation. In terms of education, the impact of power has been outlined by various philosophers such as Michel Foucault. However, as identified by Bodfield & Culshaw (2024), the PTMF elaborates further on how this can impact emotional well-being. CYP mental health and emotional well-being have been identified as a cause for concern, with government funding increasing to support CYP mental health needs. Placing the PTMF as a potential framework to guide thinking about the influences of power within the educational systems and thinking systemically about different levels of the UK education system.

The remainder of the chapter summarises the current research and literature regarding how EPs view and understand CYPs presenting needs through their use and approach to psychological formulation. Formulation is a key competence skill required to provide an ethical understanding of a CYP's needs (HCPC, 2023; BPS, 2021). Therefore, this literature review will explore how EPs are currently engaging in formulation such as their use of frameworks. The PTMF is a relatively new framework.

The second half of this literature review will summarise how the PTMF has been applied within Educational Psychology and other professions. Since its publication, the PTMF has been employed by a range of professionals (clinical, social workers, forensic settings, counselling). However, this chapter highlights the gap in the literature surrounding the use of the framework within Educational Psychology specifically.

Thematic Literature Review

A narrative thematic literature review is an approach that structures the literature review by organising relevant research into themes or categories that best help to answer the review questions and provide an organised insight into the topics of interest (Aveyard, 2023. A thematic narrative literature review approach was deemed appropriate to explore and present the different ways in which EPs engage in formulation and identify gaps in where the PTMF is being applied in practice currently. Additionally, a thematic review will allow for further discussion on themes that are relevant to the topic due to a lack of research within this area (Synder, 2019). This was chosen as it answers the research question, identifies a gap in EPs' use of the PTMF and rationalises future areas of research. A systematic review was not considered appropriate due to the limited research available and the need to consider several

different bodies of literature such as articles submitted to professional journals, unpublished blogs and other potential grey literature, which may have been excluded if using a systematic approach to the review.

Search Strategy

Access to the literature reviewed within this section and which pertains to the formulation and the PTMF was achieved by online search databases. These included Google Scholar, the Elton B. Stephens Company (EBSCO) database and the British Library E-Theses Online Service (EThOS). Databases were accessed through the University of East Anglia (UEA) library facility. Through these databases, a range of journal articles and e-books were reviewed.

Further literature was obtained through generic internet search engines. Websites and Twitter accounts of relevant organisations, such as the DECP (Division of Educational and Child Psychology), AEP (Association of Educational Psychologists), BPS (British Psychological Society) and PTMF BPS webpages, were reviewed for current information pertaining to the role of the EP and the PTMF framework. The identification of other relevant research and literature was achieved by reviewing the reference lists of articles obtained through database searches. An initial literature search was conducted in June 2022 – September 2022 with follow-up searches completed in August 2023 – May 2024.

There were no search restrictions regarding publication dates as it was deemed important to understand the social, political, and historical context of this topic area. It is important to note that this review was primarily concerned with exploring the literature pertaining to the PTMF and its use within formulation. Therefore, this review excluded literature like the authors' initial response papers, as these primarily clarify and describe the PTMF and concepts, rather than demonstrating its practical application across various professions and practitioners' experiences of applying to their field. Furthermore, studies which did not focus on the use of the PTMF within the formulation and applied within practice were excluded. The inclusion of the literature research was thus caveated by considering research literature that uses the PTMF within practice formulation and if applied to research. Although the review focuses on the use of the PTMF in terms of formulation, it is recognised that an exhaustive study of formulation could not be achieved within the

parameters of this literature review. Therefore, the literature explored within this chapter has thus been deemed within the scope of this review.

Part One: 'What frameworks are EPs currently using for case formulation and assessment?'

Definition of Formulation

The literature on this topic is broad, complex, and influenced by many factors such as the domain of psychology that 'formulation' is being discussed within, the role of EPs, individual differences in understanding the term 'formulation,' and the different terminology being used.

Different terms used for the process of 'formulation' in the literature include:

- Assessment process (Pameijer, 2017; Farrell et al., 2006; Scottish Executive, 2002; Frederickson & Cameron, 1999).
- Psychological formulation (Johnstone, 2018).
- Hypothesis testing (Frederickson et al., 1991).
- Psychological summary (BPS, 2015).
- Psychological assessment (DECP,1999/integrated assessment (BPS, 2017).

There appears to be lots of confusion and overlap in the literature regarding how to define 'formulation', especially within Educational Psychology. For this review, the term 'psychological formulation' will be used in this chapter and refers to a process of co-constructing a hypothesis or 'best guess about a person's needs and current presenting difficulties (Johnstone, 2018). A good formulation will consider a person within their context, social world and circumstances, life experiences, relationships, and the sense that they make of them (Johnstone, 2018). This definition focuses on the key components of a good formulation rather than formulation as part of the assessment process. Furthermore, this definition of formulation aligns with the PTMF view of formulation (Johnstone et al., 2018a). Other definitions such as psychological summary (BPS, 2015) and psychological assessment (DECP, 1999/integrated assessment (BPS, 2017) incorporate formulation as part of the process assessment process, as does not define formulation as a separate action within that process.

Professional Practice and Guidance on Formulation

In this section, the guidance and policies relevant to EP formulation will be explored to provide an understanding of how EPs are advised to approach formulation. It is also important to consider the guidance to EP practice as it provides an understanding of how EPs are advised to approach formulation.

It is noted that it was difficult to identify literature on formulation within EP practice due to the lack of clarity within the literature about what 'EP formulation' is. EPs are obliged to be aware of the psychological theory and evidence in supporting their thinking and hypothesis, which has led them to their recommendations of support, and this can be called into question e.g. during statutory tribunal processes. EPs must ensure their theories and frameworks used to inform their thinking are evidence-based, effective and ethical, as stated by the BPS and HCPC practice guidelines (HCPC, 2023). There is a range of dated guidance that EPs can draw upon. In 1999, the Division of Educational and Child Psychology (DECP) published professional guidelines for psychological assessment and intervention "which emphasised hypothesis-testing over time, collaboration on major concerns with key stakeholders and the recommendation of the creative application of psychological theories and research" (Kennedy, 2006, p. 519). A review of the guidance found that there are suggestions for EPs to consider when preparing reports (BPS, 2015), this was implemented following the Children and Families Act (2014) and the professional practice guidelines (BPS, 2002), however, this is outdated, and the role has changed and developed since these guidelines were written.

A central aspect of the EP role involves the completion of statutory assessments. The percentage of CYP aged 0-25 in the UK with EHCPs has risen from approximately 2.8% in 2015 to 4.3% in 2023. This increase has coincided with a 250% rise in the number of appeals to the tribunal between 2015 and 2022, necessitating greater involvement of EPs in assessments and their engagement as expert witnesses providing independent views on behalf of Local Authorities (LAs) (DECP, 2024). As part of the Education, Health and Care Needs Assessment (EHCNa), EPs are required to articulate the rationale behind their understanding of the CYP's profile of needs, identify possible reasons behind the CYP's specific presentations, and outline necessary support measures (SEND COP, 2015). The designation of this section within the EHCNa varies according to the LA's template.

The "Guidance to EPs in Preparing Statutory Advice to Children Service Authorities" by the Association of Educational Psychologists (AEP) was updated in 2020 from its 2009

version. However, none of these documents provide explicit directives on how EPs should formulate CYP needs other than to refer to psychological models to inform thinking. EPs also engage in casework and interventions beyond statutory assessments. Notably, the British Psychological Society (BPS) in 2015 indicated there is no statutory mandate for a specific format for psychological advice, offering only broad guidance on the content of such advice (BPS, 2015). The BPS 2017 practice guidelines recognise formulation as a critical responsibility in the assessment process for understanding CYP needs, yet there is limited instruction on executing this task (BPS, 2017). This absence of detailed guidelines grants EPs considerable discretion, resulting in variability in practice among professionals. Furthermore, EP services have independently developed quality assurance processes, which also vary in their terminology and approach to formulation.

The complexity of understanding EP formulation is further compounded by historical perspectives which are still widely referred to within the literature. A report on Educational Psychology services in Scotland (Scottish Executive, 2002) aimed to review EP services and their future supply. This report highlighted several concerns regarding the EP profession. The report identified the core functions of the EP role as consultation, assessment, intervention, training, and research, but did not recognise formulation as a separate function or as an integral part of the role. This contributes to the ambiguity surrounding the incorporation of formulation within the assessment process and how professionals and EPs perceive their roles (Atkinson, Barrow & Norris, 2022).

In contrast, recent professional practice guidelines emphasise the importance of formulation. The BPS standards for accreditation (BPS, 2021) and the Health and Care Professions Council (HCPC) Standards of Proficiency (HCPC, 2023) integrate the core functions identified in the Currie (2002) report. These guidelines stipulate the need to "integrate assessment information from a range of sources into a concise formulation that informs decision-making and any subsequent action/interventions" and to "develop psychological formulations using the outcomes of assessment, drawing on theory, research, and explanatory models. Notably, this guidance suggests that EPs formulation of needs should be evidence-based and underpinned by psychological theory and research. Suggesting that EPs have the flexibility and autonomy to draw what they feel best fits within their practice and supports them to produce ethical formulations.

As identified in the above section, currently, methods within Educational Psychology vary widely, influenced by legislation and the political landscape, such as the SEND COP (2015/2022) and the Children and Families Act (2014). EPs practice is also influenced by the

professional guiding bodies that set standards for EPs, such as being evidence-based practitioners (HCPC, 2023; BPS, 2021). Furthermore, EPs often engage in a one-off assessment approach rather than ongoing work with a CYP, such as engaging in statutory responsibilities and assessments (Wood, 2015). This practice dynamic further complicates the standardisation and application of psychological formulation within the field, impacting on how EPs complete assessments.

Historical Context of the EP Role

The evolution of the EP role has significantly influenced how EPs assess the needs of CYP, the psychological frameworks they utilise, and their approaches to case conceptualisation (Wicks, 2013). Since 1968, various government-commissioned reports have scrutinised the EP role, including the Summerfield Report (DfE, 1968), the Educational Psychology Services in England report (DES, 1990), the Role and Training of EPs report (DfEE, 2000), the EP Workforce Survey (DfE, 2014), Research on the EP Workforce (DfE, 2019), and the EPS Workforce Insights and School Perspectives on Impact report (DfE, 2023).

Over recent decades in the UK, there has been a pronounced theoretical shift from a positivist, reductionist paradigm to a more constructivist, holistic, and systemic approach (Kelly, 2008). This shift has reshaped the understanding of the EP role, promoting a vision of EPs as systemic and holistic practitioners. This re-conceptualisation has been notably influenced by Bronfenbrenner's Ecological Model (1979, 2005) and social constructionism (Burr, 2015). The DECP Framework for Assessment and Intervention (1999) reflected this attitudinal shift towards the causation of children's difficulties, emphasising the interplay between various systems affecting CYP and broadening the scope of the EP role.

The reconstruction of the EP role is an ongoing process (DfE, 2023). The literature highlights the ambiguous guidance and lack of clarity regarding certain aspects of the EP role, such as assessment, which appears to contribute to confusion about the distinctive contributions of EPs in this domain (Atkinson, Barrow & Norris, 2022).

Formulation within Educational Psychology Frameworks

In terms of EP practice, the key role of an EP is to share their psychological knowledge regarding child development and their interaction with the school system and context. In 2001, the DfES Code of Practice, in section 10.8 notes that part of the EP role is

to work with adults (school staff, parents and other professionals) to problem-solve and suggest strategies to move CYP forward with their progress and become scientific-practitioner. This thinking led to the division of frameworks for practice that aim to support the EP to problem solve and use their formulation skills to understand CYP needs and these frameworks are currently being used on training programmes to train TEPs and then being taken into practice and applied within the EP role.

Frameworks for Practice

The subsequent section will outline the various frameworks for practice referenced in the literature concerning EP practice. These frameworks are analysed as they situate assessment within the broader contexts of formulation, hypothesis testing, and intervention (Annan et al., 2013; DECP, 1999; Monsen et al., 1998; Woolfson et al., 2003). This section will discuss how the formulation is integrated within the framework and explore specific ways that this is applied in practice. The following executive frameworks frequently cited in the EP literature include:

The Division of Educational Psychology's "Framework for Assessment and Intervention" (DECP, 1999)
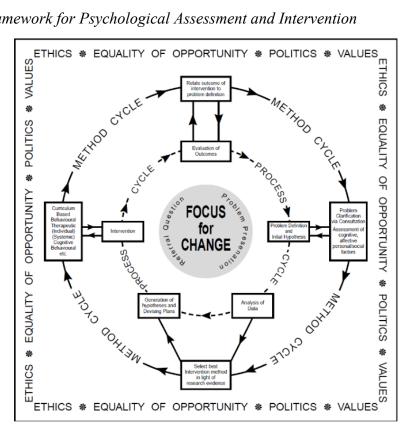
This framework in practice appears to be a framework which is rarely used and applied by EPs in recent years. In terms of exposure to training courses, this is not a prominent framework promoted. One criticism of the framework is that it does not prescribe the methodology or theory that should be employed (Sedgwich, 2019; Wicks, 2013). However, the framework can help to understand initial thinking around frameworks for practice for EPs in the 2000's. The framework was designed to encourage a systematic and structured approach to the assessment and intervention of CYP and can help EPs explore CYP needs using a structured approach and through encouraging formulation of need. One core value of the framework is that it aligns with an ecological and systemic perspective that CYP and their challenges cannot be understood in isolation and their context plays an important role when understanding their presentation. The framework has specific steps which include:

-Focus on change, problem presentation and referral question

-Process cycle – problem definition and initial hypothesis, analysis of data, generation of hypothesis and devising plans, intervention and evaluation of outcomes

-Method cycle- problem clarification via consultation, assessment of cognitive effect, personal and social factors, selecting best intervention method in light of research evidence, curriculum-based behavioural therapeutic etc and relating the outcome of intervention to problem definition.

Figure 1.

DECP Framework for Psychological Assessment and Intervention

The model is underpinned by ethics, equality of opportunity, politics and values. However, it is not clear how to apply the model in practice, which steps to focus on as a priority or the order of the steps outlined, see Figure 1 for a visual representation of the model. The DECP model supports a pragmatic and flexible approach to formulation, where formulation is encouraged to change over time as information is gathered, promoting formulation to be a dynamic approach.

This model encourages the EP to develop a hypothesis based on the information gathered to inform the EPs formulation. Another important principle of the model is that it promotes a collaborative nature of formulation, suggesting formulation is a collaborative process involving all stakeholders and is informed by a wide range of perspectives to understand the CYP. Furthermore, the model recognises that the CYP context and environment influence their presentation and promotes EPs to think systemically.
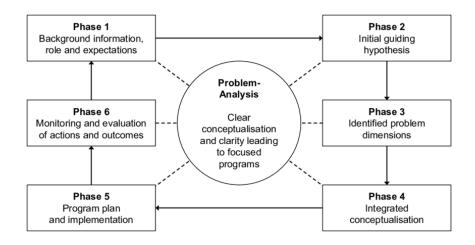
The Problem-Analysis Framework (Monsen et al., 1998; Monsen & Frederickson, 2008)

The Monsen Model is a structured approach used in practice to assess and address learning and behavioural needs in CYP and aims to guide EPs and other practitioners through a staged process to identify, understand and address issues that may affect a student's learning and development, see Figure 2 for a visual representation of the model. This model is focused on trying to understand the problem that is being presented by exploring the evidence, and to develop solutions to overcome that problem supported by evidence and theory. The Model has 6 phases which are:

1) Background information, role and expectations
2) Initial guiding hypothesis
3) Identified problem dimensions
4) Integrated conceptualising/formulation
5) Intervention plan and implementation
6) Monitoring and evaluating outcomes

Figure 2.

The Six Phases of the Problem-Analysis Framework

It is important to note that the original model comprised of nine phases and was later revised to this six phase model. This model emphasises the importance of hypothesis formulation to inform decision-making, next steps and individual support plans. Most importantly model phase six promotes the importance of monitoring and evaluation of the CYP needs to review the progress that they are making. Furthermore, the model encourages the EP/practitioner to search for an explanation to understand the CYP problem and to explore evidence-based ways to support that problem.

One paper explored the usefulness of the framework for practitioners in practice. The study is made up of 10 practising EPs who responded to a semi-structured questionnaire with encouragement to provide fuller feedback. The EPs that made up the population of responses were nine main grade EPs and one deputy principal, all with experience in using the framework during training.

Linking the Monsen model to formulation and hypothesis development, some respondents suggest adaptations that relate to the management of the psychological analysis and integration of the problem dynamic. Furthermore, the use of the framework by the EPs is inconsistent, although the EPs felt some aspects were relevant, only half of the respondents claim to apply all the steps in their practice with adaptations. The study concludes that the framework is not prescriptive, meaning it does not direct the EP to use a certain approach or theory, however, does state a hypothesis will be formed by the psychologist, and this is done

based on the individual EPs interpretation of the ecology of the problem and its dynamics (Kelly, 2006). Furthermore, it guides the EP to make choices by evidencing their thinking and actions to ensure their hypothesis is transparent and collaborative. This suggests room for flexibility, influenced by a person's professional practice preferences, such as working in a solution-focused way.

The Constructionist Model of Informed and Reasoned Action (COMOIRA) (Gameson et al.,, 2003)

The COMOIRA model (see Figure 3) is underpinned by the following core principles; social constructionism, systemic thinking, enabling dialogue and informed and reasoned action. Practitioners can use the framework flexibly and move through the different decision points to inform their approach to their assessment, develop their understanding and work with stakeholders to develop a shared understanding and narrative about the CYP needs. This helps the idea that the core principles underpin and reinforce each part of the process (Gameson et al., 2003).

Reflexivity and reflection are encouraged throughout the application of the model for both the practitioner and stakeholders. This is shown through the question prompts in the model. COMOIRA appears to have a slightly different purpose when applied by EPs/practitioners in practice, in that the values that underpin COMOIRA help to develop a shared narrative and understanding of a situation which can be helpful to shift perspectives in the moment and feel more collaborative. The COMIRA model is intended to be a model that brings about change through making sense of the meaning stakeholders have developed. Compared with the Monsen model which appears to be more helpful when applied to understanding and formulating complex cases, on an assess-plan-do-review basis and problem-solving, and is underpinned by different philosophical approaches which guide how this is done. Although the COMOIRA does have a step for reviewing and evaluating change, this appears to be a more empowering way, in terms of identifying which stakeholder is going to take responsibility.
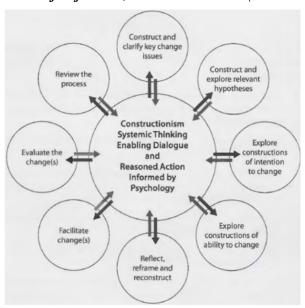
The COMOIRA model has more of an emphasis on constructing knowledge, views and narratives collaboratively compared to some of the other models. For example, the DECP model in which an EP/practitioner is using their knowledge based on the evidence provided to suggest an explanation or plan moving forward. The model has been used in various ways

at different levels including working with the CYP and family, and more systemically with schools and organisationally, such as to understand, facilitate and manage change within the context of supervision, elicit and evaluate structured feedback during training and development, planning professional development, and feedback to enhance reflection and professional development within teams and organisations (Kelly et al., 2008; Gameson & Rhydderch, 2017).

In terms of formulation, the COMOIRA model refers to constructing and exploring relevant hypotheses by enabling the dialogues for stakeholders to explore together the belief systems that are prevalent (Kelly et al., 2008). This stage allows for assumptions and expectations to be explored, placing value on how individual people involved in the process view what is happening, what maintains the concerns and how best to manage and support those issues that have been raised. At times, stakeholders may have different hypotheses and views about what is happening for a CYP and therefore the model allows for an opportunity to reconstruct those hypotheses together.

Figure 3.

A Constructionist Model of Informed, Reasoned Action (COMOIRA)

The Integrated Framework (Woolfson et al., 2003)

This framework was proposed and developed by Woolfson and colleagues (2003) as an adaption from the Monsen Model Problem Analysis framework (Monsen et al., 1998) which was originally nine phases. Woolfson and colleagues reflected that the Monsen Model presented key components that trainees' value in their practice and which helped them when concluding casework but reflected on the complexity of the nine phases and difficulties applying it in practice. It was suggested that some of these phases were internalised when the trainees became more competent and therefore not needed explicitly as steps, and resulted in the five-phase Integrated Framework (see Figure for a visual representation) (Kelly et al., 2008).

There were two key influences that were added and emphasised in this version of the framework, and this was to make explicit ecological systems approach and interdisciplinary collaboration (Woolfson et al., 2003 cited in Kelly et al., 2008). At the time of the development, there were discussions regarding working more systemically rather than individually and the Monsen Model was thought to focus on individual casework examples (Stoobie, 2002). There was discussion around EPs working at different levels and this was a key part of the EP role when working within the education system and understanding CYP needs (Cameron, 2006). Therefore, this framework is underpinned by Bronfenbrenner's social ecology model to ensure a holistic picture of the CYP is considered (Bronfenbrenner, 1979).

Figure 4.

The Five-Phase Integrated Framework

Phase 1 Establishing roles and expectations
Phase 2 Guiding hypotheses and information gathering
Phase 3 Joint problem analysis
Phase 4 Joint action plan and implementation
Phase 5 Evaluate, reflect and monitor

This framework emphasises that EPs/practitioners have autonomy over what psychological knowledge they bring to each phase, in particular phase 2 which relates to the formulation of key issues to be addressed. In this framework, a space is provided for

information to be gathered from a range of stakeholders to share their ideas provide background information and explain their thinking about what is happening. In this stage, it is highlighted to be the EPs role to explore and reframe stakeholders' views about their causes for concern into a 'hypothesis' that evidence will be gathered to support or disregard. Suggesting that the EPs role at this moment is to highlight that stakeholders' views could be right or wrong. Whereas the COMOIRA model's focus at this point is to develop a shared understanding and explore reasons behind the difference in views. The integrated framework places the EP as the expert with the psychological knowledge and 'valid hypothesis' whereas the COMOIRA model values stakeholders' social constructs and places stakeholders as the agents of change. However, the idea around the EP to present their hypothesis underpinned by psychological knowledge is to help reframe from individualised within child hypothesis and focus on wider systemic influences.

What is noticeable about the frameworks for practice that EPs often draw upon is how they all position the CYP in the centre of systems that are interacting with and potentially influencing the CYP presentation. This aligns with Cameron and Monsen's (2005) argument that EPs should address a wide range of factors that may affect a CYP functioning including environmental dimensions of the problem situation that may be causally involved in provoking, maintaining or increasing difficulties and should be considered (especially curriculum and management issues, organisational and systemic factors in school, and home and family elements).

A common feature of these frameworks is their characterisation of hypothesis construction, formulation, and assessment as iterative processes comprising multiple steps necessary to arrive at a comprehensive psychological formulation of the CYP's needs. These steps typically include the development of an initial guiding hypothesis, systematic information gathering, assessment, and subsequent review of the collected information to formulate a psychological summary or formulation that describes the CYP's needs and recommendations (Kelly et al., 2017). Another common thread that runs through the frameworks is that formulation and hypothesis are not fixed, they develop over time, and the EP/practitioner is encouraged to review information, collaborate with stakeholders, and evaluate change at different stages, promoting the idea that formulation is not fixed and based on evidence that is gathered hypothesis change throughout the assessment process.

In the existing research literature, a singular article investigates the problem-solving frameworks employed by EP and Trainee Educational Psychologists (TEPs) in their practice with CYP (Sedgwick, 2019). This article offers a critical synthesis of several frameworks: DECP's Framework for Psychological Assessment and Intervention (DECP, 1999); Interactive Factors Framework (IFF) (Frederickson & Cline, 2002); the Constructionist Model of Informed and Reasoned Action (COMOIRA) (Gameson et al., 2003); the Monsen Model (Monsen & Frederickson, 2008); and Activity Theory (Engeström, 1987). The paper systematically evaluates each framework across three dimensions: a critique of the model, its most beneficial aspects, and its limitations. While acknowledging the subjective nature of the author's practical experiences with these frameworks in varied casework contexts, the paper substantiates these insights with relevant theoretical underpinnings and empirical evidence. Sedgwick (2019) contends that the DECP model primarily emphasises hypothesis generation and formulation, contrasting it with the COMOIRA model's focus on facilitating effective change management. Additionally, Sedgwick reflects on the Monsen Model, noting its emphasis on initial guiding hypotheses in its second phase but critiquing its clarity.

Furthermore, Sedgwick finds that Activity Theory offers limited guidance on its practical application and processes. Ultimately, Sedgwick (2019) argues that the adoption of structured frameworks enhances TEPs' roles as scientist-practitioners by facilitating the systematic application of psychological principles (Sedgwick, 2019). This viewpoint is further supported by Kelly et al., (2017), who posits that a systematic approach enables effective needs assessment, objective clarification, and outcome evaluation.

Moreover, several frameworks have been proposed to influence the cognition and decision-making processes of EPs (Kelly et al., 2017):

- Richards (2017) advocates for Organisational Psychology as a foundational framework for Educational Psychology practice.
- Leadbetter (2017) examines Activity Theory as a guiding framework.
- Wagner (2000) emphasizes Consultation as a pivotal approach.
- Seligman & Csikszentmihalyi (2000) posits Positive Psychology, challenging EPs to reassess their foundational assumptions about human nature.
- Joseph (2017) highlights the transformative potential of Positive Psychology in EP practice.
- Burden (2017) introduces Illuminative Evaluation as a reflective framework.

- Dunsmuir & Cobbald (2017) propose a framework for promoting mental health within school settings.
- Harker, Dean & Monsen (2017) advocate for a Solution-Oriented approach to Educational Psychology Practice.

These frameworks serve to inform EPs' cognitive processes and decision-making, thereby influencing the formulation and supporting EPs in becoming evidence-based practitioners (Stobie, 2002). However, it is notable that these frameworks do not explicitly formalise the concept of formulation nor directly identify their impact on EP formulation. Moreover, they are often applied flexibly and interpreted differently by individual EPs in practice.

Interestingly, another factor in what potentially influences EP's engagement with frameworks relates to EPs individual epistemological standpoint and position as a practitioner. For example, COMOIRA is understood to be underpinned by social constructionism. The COMOIRA model promotes the idea that each practitioner will approach practice differently, and therefore this is valued within their model (Gameson et al., 2003; 2017).

Assessment and the EP Role

There exists a notable convergence in the literature regarding the terminology used by EPs to describe assessment and formulation, therefore aspects of assessment become important to this literature review to help understand the overlap between EP assessment and formulation. Historically, assessment within EP practice has been closely associated with activities such as hypothesis testing and formulation, as indicated by previous research (Frederickson et al., 1991). This alignment is reinforced by various frameworks for practice outlined earlier. Additionally, the guidance emphasises the necessity for all assessment and intervention activities conducted by professional entities to adhere to a framework that ensures high accountability and robust integration (Fallon et al., 2010, p. 7). EP assessment practices encompass a multifaceted approach that incorporates criteria-referenced, dynamic, and standardised methods (Freeman & Miller, 2001). These methods span a wide spectrum and address diverse skill sets (Atkinson et al., 2022).

The literature indicates that EPs utilise a variety of evidence-based assessment materials and methods, such as dynamic and standardised approaches. These methods influence the outcomes of assessment, including the formulation and hypotheses that EPs

develop. For instance, some EPs adopt a holistic perspective that emphasises a CYPs social and emotional well-being, while others may focus more on academic or school-related aspects (Atkinson et al., 2022). This diversity aligns with the EP's role as a scientist-practitioner (Fallon et al., 2010; Lane & Corrie, 2007), where assessment is situated within a broader framework encompassing formulation, hypothesis testing, and intervention, as articulated in professional practice frameworks (Annan et al., 2013; DECP, 1999; Monsen et al., 1998; Woolfson et al., 2003).

This perspective is echoed in BPS guidance, which asserts that EPs, as practitioner psychologists, should base assessment practices on both theory and empirical evidence, contextualised within the practice environment (BPS, 2017). Formulation, according to this guidance, involves integrating and synthesising the knowledge acquired through the assessment process (BPS, 2017, p.10). Moreover, triangulated assessment facilitates the formulation of hypotheses regarding a CYP's challenges and strengths, which can then be tested through interventions aimed at observing their response (Farrell at al., 2006). However, as noted in the literature much of the research on the EP's role in assessment, formulation, and hypothesis testing is outdated and insufficiently comprehensive (Atkinson et al., 2022).

Summary of the Literature on EP Formulation

The literature concerning EP formulation practices is characterised by ambiguity and overlapping terminologies. There is a noted scarcity of specific professional guidance and emphasis for EPs on the application and methodologies of formulation compared to their counterparts in Clinical Psychology. Consequently, the adoption and implementation of formulation frameworks by EPs vary significantly depending on individual interpretations and utilisation within their professional contexts. Moreover, within the field of EP the term "formulation" is not universally embraced; alternatives such, as psychological assessment, or summary are commonly used by practitioners.

The self-conceptualisation of EPs as practitioners plays a crucial role in shaping their approach to formulation practices. Those who identify as applied psychologists may draw parallels with Clinical Psychologists in terms of their understanding and application of formulation techniques (Johnstone, 2018). Changes in the role of EPs have shifted away from traditional models of practice towards more diverse and complex forms of engagement. Consequently, the utilisation of formulation and various psychological frameworks has

evolved to accommodate these changes and enhance case conceptualisations among EPs (Wicks, 2013).

Existing literature highlights that EPs often employ executive frameworks that integrate formulation into the assessment process to facilitate case conceptualisation. However, research gaps persist regarding the specific methodology EPs employ in completing case formulations. This gap suggests a diversity of practice approaches among EPs and emphasises the availability of multiple psychological frameworks designed to support the formulation of CYPs' needs or complex problem-solving scenarios.

Furthermore, the literature highlights that EPs can draw upon a spectrum of frameworks and psychological theories originally developed in other domains, such as Clinical Psychology, to enrich their professional thinking. Examples include the 5Ps model, therapeutic approaches, and trauma-informed models, which are adapted to suit the unique context of educational settings.

The Power Threat Meaning Framework (PTMF)

The PTMF is an alternative way of formulating and understanding emotional distress (Johnstone et al., 2018a). The PTMF is a framework which is underpinned by a range of relevant psychological theories which EPs use within their practice currently such as the person-centred approach, solution-focused, narrative approach, systems and ecological theory and trauma-informed psychology. The literature above demonstrates that EPs can apply different psychological frameworks to inform their formulation, assessment and case conceptualisation, and therefore the PTMF is a relevant and possible framework which can be adopted by EPs.

The PTMF was published in 2018 by the British Psychological Society Division of Clinical Psychology (Johnstone et al., 2018b). This framework suggests a different approach to the traditional psychiatric diagnostic process and aims to better understand patterns within emotional distress. The framework offers an alternative viewpoint on emotional well-being that does not rely on psychological deficits or psychiatric diagnoses as the primary explanation for distress. Instead, it focuses on individuals' understanding of their lives and experiences. The central principle of the framework examines how power has shaped a person's life, the effects of power, the resulting threats, and how the individual has coped with those experiences (Johnstone & Boyle, 2020). The framework can be applied in various

ways, including systemic applications to understand organisations and social issues, as well as in therapy to comprehend individual experiences (Johnstone et al., 2018b).

The PTMF recognises that in instances of negative exercise of power such as situations where power is used in harmful or oppressive ways, threats can be experienced at different levels - individual, group, and community. These threats will lead to emotional distress, which is mediated by biology (Johnstone et al., 2018a). This means that underlying biological predispositions become activated by social and environmental factors that result in emotional distress and are expressed through biological factors within the brain and body. In essence, the PTMF suggests that mental health issues aren't simply the result of individual biological factors or personal weaknesses. Instead, they arise from how people respond to negative uses of power in their lives, with these responses being influenced by biological factors (Johnstone et al., 2018a). The concept of "meaning" in this framework pertains to the understanding that a person has derived from their experiences with power. This encompasses the beliefs, emotions, physical responses, and symbols that shape an individual's interpretation. This understanding evolves through the interplay of various factors such as situations, resources, physical capabilities, and societal conversations (Johnstone et al., 2018a). Threat responses are the behaviours that evolve from a person's potential experiences of threat and the meaning they have made from their experiences of power. These behaviours are typically developed to protect themselves and are influenced by early attachment relationships. The authors of the framework propose that when faced with a threat, an individual can draw on a range of responses to ensure physical and emotional safety (emotional, physical, and social survival) (Johnstone et al., 2018a). The PTMF has faced criticism in research for its proposed conceptual ideas (Morgan, 2023; Rashed, 2023) as well as for presenting an extremist and dismissive approach towards psychiatric diagnosis within the literature (Johnstone, et al., 2019). However, it is important to note that the framework is intended to be an alternative way to understand emotional distress, considering socio-economic, holistic, and systemic factors. This aims to empower individuals to understand their emotional distress and support professionals in using a trauma-informed approach.

The authors and their colleagues have developed and published numerous papers explaining the development, theoretical basis, evidence base, and implications of the framework. These can be accessed for further details and descriptions of the core components and principles of the framework. In addition to Johnstone et al. (2018a and 2020), other relevant sources include Cromby (2021), Harper (2020), Pilgrim (2020), and Boyle (2020).

The PTMF has strong links between personal, family, and community distress and its social context, injustice, and inequality. It normalises the idea that everyone, at some point in their lives, could experience different emotional distress, and there is no separate group of people who are 'mentally ill'. There are cultural differences in emotional distress, and how a person makes sense of and gives meaning to their lives shapes how they experience and express themselves (Johnstone & Boyle, 2020).

Part Two: 'How are Professionals/EPs Currently Applying the PTMF Within Their Formulation and Practice?'

The next part of this literature review will explore how the PTMF is currently being used in practice, focusing on its application within formulation. Since there is limited literature in this area, the next section will be divided into categories related to the professions to which the PTMF has been applied. This division into professional groupings aims to highlight the gap in the literature related to practice. Additionally, individual studies will be examined in greater detail due to the limited available literature in this area and the interest in understanding how the PTMF has been applied within these studies.

Clinical Psychology

The literature reviewed in this section shows that the PTMF has been applied in various ways during formulation within the Clinical Psychology domain. The literature shows that the PTMF has been applied to a module on a training course to teach critical and community psychology with reference to formulation (Griffiths & Baty, 2019). The PTMF has also been applied to the thinking within a national Autism Spectrum Disorder (ASD) service working with CYP, families and adults with a diagnosis of ASD (Flynn & Polak, 2019). This service uses the PTMF to formulate and position mental health diagnoses such as ASD being the secondary formulation of need. Additionally, the PTMF has been applied within research by Clinical Psychologists developing an intervention based on the PTMF (Sapsford, 2021) and with professionals who work in a service where the medical model is the dominant model for understanding distress (Cooke et al., 2019). Travers, (2022) doctoral thesis findings highlighted the potential utility of the PTMF as an approach to formulation. One of the themes is that the PTMF enhances sense-making for Clinical Psychologists working in adult mental health settings in the UK. Lastly, Leverington (2023), explored how the PTMF could be applied to services for people with learning disabilities.

Several trends within the Clinical Psychology literature were noted following the application of the PTMF. One trend is that the literature has a strong ethical focus on social justice issues relating to adults who have various psychiatric diagnoses and a desire to promote a more humane exploration of service users' needs through a trauma-informed lens such as the PTMF. It is noted that only one of the papers reviewed mentioned the application regarding CYP (Flynn & Polak, 2019, and therefore there is a strong focus on applying the PTMF to adult populations. Another trend noticed in the literature reviewed relates to professional development. Many studies focus on how the PTMF can be used to enhance professional practice and understanding among clinicians.

Psychiatry

The literature pertaining to the PTMF being applied within the Psychiatry profession has a particular focus on mental health disorders, compared with the research explored within the Clinical Psychology profession which focuses more on the processes of formulation (Johnstone et al., 2019), developing the professionals understanding of the persons needs and understanding distress (Travers, 2022; Cooke et al., 2019), and thinking systemically about how the PTMF can be applied to formulate differently (Griffiths & Baty, 2019; Flynn & Polak, 2019). Whereas the limited research in Psychiatry focuses on the public's attitudes towards mental health diagnosis (Seery et al., 2021) and to inform how services plan their response to people with a particular disorder (Downs & Smith, 2022).

One piece of research has used the PTMF to investigate if there is a difference in the general public's attitudes towards and treatment of a person depending on the label of their mental health need (Seery et al., 2021). While this study did not delve into the construction and comparative analysis of different formulations of needs, it highlighted the profound influence of diagnostic labels and contextual understandings on attitudes and treatment approaches towards individuals. Participants in the study demonstrated a greater inclination towards social distancing from individuals labelled with schizophrenia (Seery et al., 2021). The study suggested that formulation based on diagnostic labels might promote stronger adherence to medical treatments compared to formulations based on the PTMF, although evidence supporting this claim was limited due to the study's focus not including medication-related questions. Another article by Downs & Smith (2022) relates to the assessment and diagnosis of Personality Disorder (PD) in individuals with Intellectual Disabilities (ID). The study highlighted that while PD diagnosis can help in accessing specialised services, it can also pose obstacles. The authors emphasised the importance of carefully considering the

individual's needs and regularly reviewing them over time. Although the article didn't delve into how the PTMF can support this, it acknowledged the potential of PTMF in informing an individual's needs and providing an alternative to the medical model.

One trend noticed whilst reviewing the literature regarding the application of the PTMF in psychiatry relates to its limited application and integration of the PTMF into mainstream psychiatric practice compared to Clinical Psychology. Furthermore, the literature reviewed within Psychiatry shows a trend towards comparing the PTMF-based formulations with traditional diagnostic approaches, particularly in terms of their impact on treatment adherence and social attitudes. These trends indicate that while there is growing interest in PTMF within Psychiatry, its application and research in this field are still in early stages compared to Clinical Psychology, with a greater focus on how it might complement or challenge traditional diagnostic approaches.

NHS/Mental Health Wards/Medical

Several research studies have used the PTMF within their research and reported on topics related to mental health (Leeming, 2022; Newton, 2022; Paradiso & Quinlan, 2021). However, these studies did not apply the PTMF within the formulation, and instead applied the PTMF within their data collection and analysis so will not be explored in detail. For example, Paradiso & Quinlan, (2021) looked at mental health caregivers' experiences from the perspective of the PTMF. The research aimed to explore caregivers' experience of the context that they work within using the domains of the PTMF. Participants were recruited through an Australian organisation offering support services to carers. The study did not look at the process of formulating services users' needs, so the findings are not particularly relevant to this review. However, the study does explore how the PTMF can be applied to supporting caregivers to explore a certain topic using a different perspective and how the PTMF can be applied to the role of mental health caregivers (Paradiso & Quinlan, 2021).

One piece of literature used a retrospective service evaluation design to assess for differences in the number of incidents of self-harm, restraint and seclusion in the service following a model of Trauma-Informed Care (TIC) (Nikopaschos et al., 2023). This involved weekly PTMF team formulation and weekly psychological stabilisation staff training. Results found significant reductions were demonstrated in the monthly number of incidents of self-harm, seclusion, and restraint over the four-year period. The study shows that the team formulation was an effective tool in supporting staff to develop a shared understanding of the

service user and a new perspective on how to approach distress. However, this study does not report on how the PTMF was used to inform staff formulation, and the impact of the PTMF is measured alongside other interventions of TIC such as psychological stabilisation. Therefore, it is difficult to tell which method led to those improved outcomes.

Again, several trends were noticed within the literature exploring the application of the PTMF within mental health services and domains. These included the application of the PTMF is being used to explore the broader context in which mental health care occurs, aligning with its emphasis on understanding power dynamics and systemic factors. Another is that the PTMF is being used in team formulation contexts, indicating its potential for fostering shared understanding among multidisciplinary teams (Paradiso & Quinlan, 2021; Nikopaschos, et al., 2023). Another trend relates to when not directly applied to formulation, the use of PTMF in research and practice seems to yield benefits in terms of staff understanding and approach to distress (Leeming, 2022; Newton, 2022; Paradiso & Quinlan, 2021). These trends indicate that while PTMF is increasingly being used in mental health research and practice, its application is diverse and often indirect. There appears to be a need for more research directly examining its use in formulation processes and its specific impacts on service delivery and outcomes.

Social Work

There were no papers specifically mentioning the use of the PTMF to support social workers in formulating CYP needs, which could be a result of the type of work social workers typically engage in. However, one paper does discuss the application of the framework when training social workers and as a resource for social workers to draw upon in their practice (Fyson, Morley & Murphy, 2019). Again, although not discussing formulation especially, the article does reflect on the use of the PTMF when learning from service users, drawing on assessment and unpicking narratives. The author reflects on the principles of social work and the application of the PTMF and feels the values and ways of thinking align, especially when social workers are aiming to be trauma-informed and when adopting a social model. The author reflects on the benefit of applying the PTMF when considering the type of referrals and service users that social workers work with. One thing the author discusses is the use of the framework when working in multi-disciplinary teams and using different perspectives to the medical models to support the understanding of a person's distress. An important consideration refers to social workers not having an evidence-based framework to

draw upon before the PTMF was introduced. The article discusses the use of the PTMF being applied to a university BA and MA course training social workers (Fyson, et al., 2019). This is related to the research by Nikopaschos et al., (2023) and Collins (2019), which also highlights the benefits of the PTMF being an evidence-based framework for professionals and people to have confidence in challenging multidisciplinary thinking and medical model perspectives of understanding distress.

The literature explored within social work indicates that while the PTMF is not yet widely used for formulation in social work, particularly with CYP, there is growing interest in its potential applications. The framework appears to be valued for its alignment with social work principles and its potential to provide an evidence-based alternative to medical models. However, more research is needed to explore its direct application in social work practice, especially in formulating the needs of CYP.

Support Organisations

The support organisations section refers to charitable organisations assisting individuals for various reasons, such as domestic abuse, traumatic life experiences, and mental health support. The literature in this section includes reflective articles from professionals who have practical experience in supporting individuals with trauma. These articles emphasise the importance of allowing people to explore their experiences and understand themselves through a lens that is most helpful to them. The PTMF is used to achieve this, and it demonstrates how understanding of needs can vary when applying different frameworks (Ball et al., 2023; Collins, 2019; Griffiths, 2019; SHIFT, 2020). This literature highlights the increased emphasis on incorporating the perspectives of individuals with lived experiences of trauma into support services. Furthermore, the literature in this area has a strong person-centred focus, by allowing individuals to explore and understand themselves in a way they find most helpful. The literature reviewed in this area includes several reflective articles from professionals, indicating a trend towards ongoing learning and adaptation of practices based on real-world experiences.

Humanistic Psychology

Similarly to social work, the literature relating to humanistic psychology and the PTMF is limited, with only one published reflective report available. This scarcity of research could be attributed to several factors: The PTMF's alignment with existing humanistic

approaches: Humanistic psychology already emphasises personal experience, meaning-making, and holistic understanding of individuals. The PTMF may be seen as complementary rather than revolutionary in this field, potentially reducing the perceived need for extensive research. Despite the limited literature, reflective experiences of service users identified above indicate positive outcomes when applying the PTMF to better understand their needs (Ball et al., 2023; Collins, 2019; Griffiths, 2019; SHIFT, 2020). This suggests that the PTMF aligns well with humanistic psychology's client-centred approach and focus on personal growth and self-actualisation.

Amari (2023) published a reflective report critically evaluating their professional identity as a counselling psychologist using the PTMF. The author presents a self-formulation to make sense of experiences during the second stage of training to become a counselling psychologist. This reflective article focuses on the author's use of the PTMF for personal insight rather than exploring how it specifically informed their formulation process with clients or its outcomes in practice.

Forensic Psychology

The literature relating to the application of the PTMF within Forensic Psychology suggests an evolving landscape in Forensic Psychology and Psychiatry, with the PTMF offering a promising but still under-researched approach. The literature explored highlighted several trends relating to how the PTMF is being applied within Forensic settings, for example: The application of PTMF beyond traditional clinical settings. Recent studies have begun exploring the application of the PTMF in forensic settings. While some research has focused on prisoners' experiences (Gallagher, 2023) and prison officers' understanding of prisoner violence (Gallagher, 2024a). These studies primarily used the PTMF to inform data collection and analysis rather than as a tool for formulation in practice. Another trend in the literature within this area relates to the PTMF as a framework for therapeutic interventions. Reis et al., (2019) demonstrate an innovative use of the in a forensic setting, specifically in a unit for offenders with labels of "personality disorder." The study describes the implementation of an eight-session group called the Surviving Prisons Group at HMP Brixton's London Pathways Unit (LPU). This application showcases the PTMF's potential as a foundation for therapeutic interventions in challenging environments. Similarly to the above professionals, the last trend identified within this area of literature is that there is an emphasis

on personal narratives and meaning making. The PTMF was chosen for its ability to support individuals in making sense of their experiences and promoting personal meaning and agency. This approach aligns with a broader trend in mental health and criminal justice towards more person-centred, narrative-based interventions. Although not directly addressing formulation, the study suggests that the PTMF can elicit in-depth narratives that could inform co-produced formulations and enhance staff understanding of individuals' needs from a different perspective (Reis et al., 2019). While the Reis et al. study provides valuable insights, it lacks a formal evaluation of the PTMF's effectiveness and doesn't compare outcomes with alternative approaches. This highlights a need for more rigorous, comparative studies in the future.

Educational Psychology

The application of the PTMF within Educational Psychology and education remains limited, despite growing interest and the historical relevance of its core concepts, such as power, in educational philosophy (Ball, 2019). Recent interest within the field has begun to explore the PTMF's potential applications in educational contexts (Bodfield & Culshaw, 2024). O'Toole (2019) critiques the dominant medical model in understanding emotional distress within educational settings, advocating for alternative approaches like the PTMF to address social justice concerns and power dynamics. While not explicitly focusing on formulation, this work highlights the PTMF's potential to offer new perspectives on student needs and presentations. The literature explored reveals a paucity of research on the PTMF's application in EP practice. Farrell and Mahon's (2021) study in ethics and education explored CYP's experiences in higher education in Ireland, incorporating the PTMF in discussions about conceptualising and responding to distress. This work further exemplifies the growing interest in applying the PTMF across various educational contexts. Although relevant to education, the following studies have either used the PTMF to inform data analysis (Devenney, 2021a, Devenney, 2021b, Devenney, 2021c) or as a theoretical framework for research methodology (Cogen, 2020), rather than exploring its application in practice. Research by Sivers & Moran (2021) shows how the PTMF can be applied by researchers within Educational Psychology. These studies will not be discussed in detail in this review, as they do not directly relate to the research question of this literature review or evaluate the application of the PTMF in practice.

Milligan's (2022) doctoral thesis represents a significant contribution, exploring EPs views and experiences of using the PTMF. Employing a critical realist and contextualist approach with RTA, the study identified themes relating to systemic and individual factors. Notably, participants reported that the PTMF enhanced their ecological thinking and shifted formulations towards a broader social model. The study revealed that the PTMF influenced formulation practices, promoting storytelling approaches and anti-diagnostic language. However, it also highlighted potential tensions with co-production principles, as some EPs used the PTMF independently of service users. This study highlights the need for further research into the PTMF's role in formulation within EP practice. In conclusion, while the PTMF shows promise in educational contexts, there remains a significant gap in the literature regarding its practical application in Educational Psychology, particularly about formulation processes.

Application of the PTMF in practice (Case study examples)

The article published in the BPS Clinical Psychology Journal, 2019 by Griffiths & Baty, titled Bringing the outside in: Clinical psychology training in Socially Aware Assessment, formulation, intervention, and Service Structure describes the introduction of the PTMF within teaching on critical and Community psychology, with reference to formulation. This paper describes how the authors involved with the University of Edinburgh/NHS Scotland curriculum of clinical psychology introduced the PTMF as another theory-driven formulation framework that attempts to address critical psychology concerns about the neglect of social context.

The paper describes how the critical workshops are designed to be experiential tasks, small group, and whole cohort discussions to explore key concepts around critical psychology and social constructionism and then they are asked to discuss several topics and take the learning and apply to psychological distress. Beyond raising awareness, the aims of the workshops are designed to encourage exploration of how adopting a critical psychology stance may or may not require a different approach to responding and thinking about clinical scenarios. Therefore, the PTMF was introduced as a more socially aware perspective from which to formulate and create narratives- one that provides a comprehensive psychological understanding of distress can be held up as a theory-driven alternative system to diagnostic approaches. After the trainees understand the PTMF and time to think about their own

personal circumstances, they are given a case study to unpick using the core principles of the PTMF, and then asked to discuss how the outcomes of those discussions impact their intervention planning. Part of the process is to compare how their formulation from the framework compared to a more traditional standard practice they might have used previously has been impacted or changed (Griffiths & Baty, 2019).The authors of the paper reflected that the language and conceptual thinking of the PTMF embeds the agency of the person seeking help into any formulation (Griffiths & Baty, 2019). Although the paper mentioned a discussion with the trainees following the application of the framework to their formulation it does not go into detail of these discussions. Further exploration of how the trainees found using the PTMF within their formulation would have been helpful.

Support organisations include charitable organisations that support service users for a range of different reasons. Such as domestic abuse charities, support services led by people who have lived experiences of traumatic life experiences and mental health support services. Literature drawn upon in this section reports on several reflective articles written by professionals with practice-based experiences and experiences in supporting service users with lived experiences of trauma, through the use of the PTMF (Ball et al., 2023; Collins, 2019; Griffiths, 2019; SHIFT Recovery Community, 2020). These reflective articles highlight the importance of people/service users being able to explore their experiences and understand themselves through a lense that they find most helpful. This is done using the PTMF and informs how understanding of need can be different when applying a different framework.

Collins, (2019) wrote an article discussing the use of the PTMF with woman who have been subjected to abuse and the practitioners who support them. The article approaches the PTMF from a practitioner perspective and reflects on how the framework has been applied within training and its impact. The author discusses how the PTMF was used to help develop a programme to train practitioners to work with YP and to educate them about abuse and exploitation following working with woman who is experience of being abused has led their behaviours to being pathologised and resulting in lists of diagnoses.

The author discusses ways to re-formulate ways of working with women with the core value of 'depathologisation.' The author notes that this way of formulating women's needs led to the training course which later adopted the PTMF framework. This article was written before the training has become available for practitioners and therefore empirical evaluation

of the training and the impact of the PTMF have yet to be concluded. The author concludes and reflects on the value of the framework in helping to 'depathologising' people's lives.

Griffiths, (2019) describes the use of the PTMF to create personal narratives within a peer led environment, and the ways in which it can encourage reflection, self-advocacy, and healing. The article is written from a personal perspective of lived experience of trauma, and education in psychology and trauma-informed peer support. Griffiths describes the groups aimed to provide a supportive environment where self-education and self-advocacy promotes the creation of personal narratives. This peer support group is from a non-clinical perspective and environment, offering alternatives to the mental health model through using the PTMF to their thinking. The author reports on the group's reflections of the accessibility of the framework and hopes to develop a more user-friendly adapted version. Furthermore, the language used is overwhelming for those who have not thought about their experiences in that way. Although the research is concerned with professional (EP and TEPs) use of the PTMF to inform formulation of needs. EP practice and formulation is best described is being coproduced with people and empowering individuals to take back the control over the understanding of their needs (Johnstone, 2018) and therefore understanding experiences of individuals applying to themselves is beneficial.

Another peer-led self-help group like the work completed by Griffiths (2019), have also produced a journal article on the use of the PTMF with a community of people with direct experience of mental and emotional distress based in Portsmouth, UK (SHIFT (Self Help Inspiring Forward Thinking) Recovery Community, 2020). Participants in the group applied various aspects of the PTMF framework to their own lives as part of a workshop type activity over a few weeks. One of the participants discusses their Attention Deficit Hyperactivity Disorder (ADHD) diagnosis and through the process of applying the PTMF now understands that his condition stems from childhood trauma and unhealthy family dynamics. This process allowed him to opportunity to better understand himself using a different perspective, rather than let the ADHD label define him (SHIFT Recovery Community, 2020). One participant mentions how through applying the PTMF has been allowed to formulate their own life experiences and has helped them to let go of some of the shame they have been feeling.

The article by SHIFT Recovery Community (2020), uses personal experiences of how the PTMF has been applied by individuals with experience of emotional distress and various

diagnoses and highlights the importance of the individual being part of the formulation of their own needs (Johnstone, 2018). This article links with the above discussions shared by Griffiths, 2019 and empowering individuals to re-write their narratives. Whilst these articles do not add to the knowledge base around how professionals formulate individual needs using the PTMF, it does share the importance of adopting a non-medical model approach to understanding a person's needs. Furthermore, the authors discuss future uses for the PTMF and they reflect on the accessibility of the framework, in particular the language (SHIFT Recovery Community, 2020). This has also been identified by other articles used in this review such as (Sapsford, 2021; SHIFT 2020; Griffiths, 2019; Aherne, Moloney & O'Brien, 2019). This is important to the use of the PTMF when exploring the original origins of formulation (Johnstone and Dallos, 2013; Johnston et al, 2018).

To date the PTMF has had little application within the world of Educational Psychology and education. The relevance of the PTMF and interest within education is growing and concepts from the PTMF such as power are not new when exploring the literature. For example, the concept of power has been introduced into education and been applied to education by philosophers such as Micheal Foucault for centuries (Ball, 2019). Furthermore, research has sought to outline the ways in which the PTMF can apply to education (Bodfield & Culshaw, 2024).

Cogen, 2020 conducted a grounded theory study of the psychological and social processes apparent in the lives of contemporary 16–18-year-olds (Cogen 2020). The PTMF was applied as a theoretical framework, which helped to guide the researcher to develop their research question and methodology. This piece of research did not specifically use the PTMF for formulation, however, was used to support understanding in how CYP may behave or present, which could be classified as part of a formulation. The application of the PTMF in this study was direct, and the author does not revisit the PTMF when developing their theory.

Another study published in ethics and education focuses on experience of YP in higher education in Ireland (Farrell & Mahon, 2021). This paper explores the philosophical work of Cora Diamond to open new ways of conceptualising mental health. The PTMF is included in the discussion of ways in which the experience of distressed is captured, described, and responded to.

A journal article published discusses current terminology in relation to adversity, trauma and trauma-informed practice within education and schools (O'Toole, 2019). The

author discusses how the current approaches are entangled with a dominant medical model of understanding emotional distress and symptoms, rather than a reasonable and intelligible strategy for survival (O'Toole, 2019). This article highlights a need for an alternative approach to understanding CYP emotional wellbeing and behaviours and applied the PTMF to address social justice concerns and educate on issues of power and inequality. Although the author does not talk about formulation and the influence of the PTMF on the process of formulation, it does again highlight how the PTMF can be used to inform a different perspective on someone's presentation and need, especially within the school context. Despite a relevance for the PTMF to applied within education, little research has been undertaken regarding the role of the EP.

Relevance to EP Formulation

As noted by Milligan (2022), the application of the PTMF encompasses populations frequently encountered by EPs including care-experienced CYP (Enlander et al., 2021; Siverns & Morgan, 2020), school non-attenders (Devenney, 2021c), caregivers (Paradiso & Quinlan, 2021; Devenney, 2021b), CYP who have experienced domestic abuse (Collins, 2019), asylum seekers (Smith, 2018), individuals with ASC (Flynn & Polak, 2019), and CYP seeking mental health treatment (Aherne, Moloney & O'Brien, 2019). However, the extant literature predominantly focuses on emotional well-being and mental health diagnoses within clinical and therapeutic settings. This emphasis may present a barrier for EPs in applying the framework to formulations concerning CYP's educational needs, particularly in areas such as cognition and learning. The disproportionate focus on mental health in PTMF research potentially limits its perceived applicability across the full spectrum of EP practice.

An important consideration in the literature is the accessibility of the PTMF for service users, particularly CYP (Collins, 2019; Griffiths, 2019; SHIFT, 2020). The language employed in the PTMF, such as "what power have you experienced?" or "what did you have to do to survive?", may present challenges when using it as a collaborative formulation tool with CYP, especially younger CYP. However, to address this issue, researchers suggest developing child-friendly questions and adapting the framework based on information gathered from the CYP and their close associates (SHIFT, 2020). Some professionals have found the PTMF beneficial for collaborative formulations with CYP, empowering them to understand their responses to potential threats. However, it is noteworthy that these findings primarily stem from studies involving older CYP (12-15 years) in early intervention mental health services (Aherne et al., 2019). Michelson's (2022) study on CYPs agency and

narratives in making sense of family-related adversities provides promising evidence. CYP aged six-17 were able to engage in conversations about their experiences and position themselves within power discourses. This suggests that even younger CYP can share their stories and understandings when given appropriate support. However, it is crucial to acknowledge that the CYP in this study were already receiving support and had previous opportunities to process their experiences. Other CYP, without such prior exposure, may find it more challenging to engage with these concepts. This highlights the need for careful consideration and adaptation when applying the PTMF across diverse populations and contexts in Educational Psychology practice.

Gaps in the literature

The literature review reveals significant gaps in the understanding of EP formulation practices and the application of the PTMF within EP practice. These gaps are summarised as follows:

1. How EPs operationalise frameworks: The literature highlights the multi-faceted nature of EP formulation, characterised by confusion regarding terminology, a lack of practice-based guidance, and its positioning within broader assessment processes. While several frameworks exist (e.g., DECP, 1999; Monsen et al., 1998; Gameson et al., 2003), there is limited research on how EPs operationalise these frameworks in their formulation practices.

2. EP Perspectives on Formulation: There is a notable absence of research exploring EPs' views and reflections on formulation within their role. This gap is significant, given the importance of evidence-based frameworks in enhancing professional confidence (Fyson et al., 2019; Nikospachos et al., 2023; Collins, 2019; Stobie, 2002).

3. PTMF Application in EP Practice: The literature on PTMF application predominantly focuses on its use as a theoretical framework in research, data collection, and analysis, rather than its practical application in EP formulation. Most available literature lacks empirical findings on the PTMF's application in practice.

4. Quality and Relevance of PTMF Literature: Much of the literature on PTMF applications comes from professional journals, which, while informative, may lack rigorous peer review. Additionally, these articles often do not specifically address EP practice, highlighting a gap in EP-specific PTMF research.

5. Language and Conceptualisation: The review identifies a discrepancy in terminology between PTMF literature and traditional formulation research. PTMF-related literature often discusses alternative perspectives on understanding emotional distress rather than formal formulation processes as defined in established research (Johnston & Dallos, 2013).

6. Limited EP-Specific PTMF Research: While Milligan's (2022) doctoral study provides insights into EPs' views on the PTMF, it represents one of few studies directly addressing PTMF in EP practice. This highlights a significant gap in understanding how the PTMF can be specifically applied to EP formulation processes.

These gaps in the literature highlight the need for further research to:

- Explore how EPs integrate various frameworks, including the PTMF, into their formulation practices.
- Investigate EPs' perspectives on formulation and the potential role of the PTMF.
- Conduct empirical studies on the practical application of the PTMF in EP formulation.
- Develop EP-specific guidance on PTMF application in formulation.
- Examine the alignment between PTMF concepts and traditional formulation practices in EP work.

Addressing these gaps would significantly enhance the understanding of EP formulation practices and the potential role of the PTMF in educational psychology. This leads to the current study.

Current Study Aims and Research Question

The research therefore aims to explore and understand how EPs and TEPs engage with formulation in practice and explore views and experiences of applying the PTMF within EP formulation and assessment. As a result, the following research questions will be explored:

1) What are EPs/TEPs' views and experience of formulation within the EP role?
2) What are EPs/TEPs' views and experience of using the PTMF within EP formulation and practice?

Chapter Two: Empirical Paper

Abstract

Educational Psychologists (EPs) as a profession engage in assessment, consultation, training, intervention, and research, with assessment considered a primary role as noted in key legislation. However, EP approaches to formulating and understanding Children's and Young People's (CYPs) needs vary across the profession. This research explores how EPs and Trainee Educational Psychologists (TEPs) view and experience formulation within their role, an area rarely considered in existing literature. The study examines the application of the Power Threat Meaning Framework (PTMF), a 2018 alternative framework for understanding emotional distress, in EP formulation and practice. The PTMF framework has gained attention from various professionals and has been utilised in different ways across psychology professions, with minimal application in Educational Psychology. This study is underpinned by a social constructivist approach to exploring EPs' and TEPs' views and experiences. The study employed semi-structured interviews with six EPs and one TEP. The questions were constructed using principles from Appreciative Inquiry and analysed using Reflexive Thematic Analysis (RTA). RTA identified themes derived from the participants' experiences to tell a story. Three overarching themes were reported: 1) Formulation is embedded in EP assessment; 2) Formulation as a team effort; and 3) The PTMF adds an extra layer to EP formulation. The results showed that participants felt EP formulation varies, is informed by a range of psychological theories and frameworks, and is influenced by context, training, and professional experiences. The PTMF values and principles align with the participants' (EPs and TEPs) values and principles. Implications for EPs are considered, particularly regarding the accessibility of the PTMF within EP practices, such as the complex language and concepts for CYP, parents/carers, and other educational professionals. Future research directions are suggested including a focus on parents'/carers' and educational professionals' views and perspectives on the use of the PTMF to understand CYP needs, as well as exploring possible PTMF adaptations to make it more applicable to EP practice.

Introduction

The Power Threat Meaning Framework (PTMF) was created to understand emotional distress and well-being (Johnstone & Boyle, 2018a; 2018b). It offers an alternative explanation for emotional well-being, not relying on psychological deficits or psychiatric diagnoses, as explained by the dominant medical and psychiatric model. Instead, the framework focuses on individuals understanding their lives and experiences through a trauma-informed, systemic lens. The main principles of the framework examine how power has influenced a person's life, the impact of resulting threats, and how the person has coped (Johnstone & Boyle, 2020). The principles of this framework have evolved into a set of questions that can help individuals understand their experiences. This framework transforms the question "What is wrong with you?" into the following key questions:

- "What has happened to you? (How has Power operated in your life?)

- "How did it affect you?" (What kind of Threats does this pose?)

- "What sense did you make of it?" (What is the Meaning of these situations and experiences to you?)

- "What did you have to do to survive?" (What kinds of Threat Response are you using?)

- "What are your strengths?" (What access to Power Resources do you have?)

- "What is your story?" (to integrate all of the above)

(Johnstone & Boyle, 2020, p.47)

"What has happened to you?" is rarely asked in the mental health diagnostic process. Instead, there is a focus on symptoms and exploring "what is wrong with you" during assessment (Insel, 2013; Kotov et al., 2021). The literature emphasises the necessity to shift from pathologising people's experiences and emotional distress to understanding them as part of mental health disorders (Watson, 2019). Many individuals in the UK who have engaged with the mental health system express feeling reduced to a label, with little insight into their experiences of emotional distress (Johnstone et al., 2018c). Research by Seery et al., (2021)

highlights how labelling a person's emotional stress affects how they are perceived, interacted with, and supported.

Psychological formulation involves creating a hypothesis or best guess about a person's needs and current presenting difficulties (Johnstone & Dallos, 2013). There are several definitions of formulation, a key definition in the literature being that; a good formulation considers a person's context, social world, life experiences, relationships, and the meaning they give to them (Johnstone, 2018). This definition focuses on factors contributing to a good formulation rather than viewing formulation as part of the assessment process and aligns with the PTMF understanding of formulation. Other terms and definitions, such as 'psychological summary' (BPS, 2015) and 'psychological assessment' (DECP, 2002/integrated assessment (BPS, 2017), incorporate formulation as part of the process of assessment.

Current National Context

Findings from a 2023 study conducted by NHS Digital highlight a rise in mental health disorders among children and young people (CYP) in the UK. The research suggests that CYP who experience poverty, changes in their home environment, social interaction challenges within and outside of school, bullying, climate change worries, and heightened thoughts and emotions related to school are at a higher risk of facing mental health issues (NHS Digital, 2023).

Research has shown that childhood trauma doubles a CYP's risk of developing mental health problems (Torjesen, 2019). It is suggested that more than one in three CYP are exposed to at least one potentially traumatic event by the age of 18 (Lewis et al., 2019). 'A study conducted by Mind in 2021 highlighted the need for services to provide quick support for trauma, focusing on treating the individual as a whole person (Mind, 2021b).

EPs can play a supporting role in understanding CYP's emotional well-being and mental health by understanding the context in which CYP are living, acknowledging the impact of their life experiences, and assisting with their emotional well-being. Research indicates that EPs can have a preventative effect by indirectly supporting students with mental health needs through consultation and policy development efforts. For example, studies by Dunsmuir & Cobbald (2016) and Zafeiriou & Gulliford (2020) highlight the benefits of EPs' indirect support. The role of EPs in the UK has evolved due to changes in

government legislation, the political context, and the education system leading to EPs now being more involved in supporting CYP's mental health and emotional well-being needs (Grieg et al., 2019; Rutter & Atkinson, 2024; Sharpe et al., 2016; Simpson & Atkinson, 2021). In addition, EPs are well-positioned and qualified to collaborate with other professionals in educational settings.

Relevant background

EP formulation is not widely discussed or recognised as a distinct action or core role in the literature. Instead, it is viewed as a component of the assessment process, focused on understanding the underlying needs of CYP and is embedded within the broader assessment process (Atkinson et al., 2022). This distinction is important because the literature suggests that EP formulation is a complex aspect of the field.

The process of EP formulation can be intricate and may involve various assessment approaches, such as criteria-referenced, dynamic, and standardised methods (Freeman & Miller, 2001). It encompasses a wide range of EP skills (Atkinson et al., 2022). The British Psychological Society (BPS) emphasises that assessment practices for EPs should be informed by theory, evidence, and an understanding of the practice context (BPS, 2021) and that formulation is based on integrating the knowledge acquired through the assessment process (p. 10). EP assessment involves employing evidence-based psychological approaches and materials, which influence the outcomes of assessment, formulation, and hypothesis development (Atkinson et al., 2022). Additionally, the type of work EPs are engaged in affects their formulation process. For instance, when involved in therapeutic and intervention work, EPs may draw upon different frameworks and guidance, compared to when working on a statutory assessment, where formulation is included in the psychologist's report (AEP, 2020).

The PTMF can be applied to EP assessment and formulation and has already been applied to Clinical Psychologists' formulation, and more widely across intervention, and training, within research methodologies (Gallagher, 2024; Milligan, 2022). The PTMF appears particularly relevant within the educational context due to the multiple powers at play, influencing CYP presentation and engagement within education (Bodfield & Culshaw, 2024). The critical element of PTMF is the component of power, which includes embodied, legal, economic/material, relational, and ideological aspects. The authors of PTMF highlight

that negative experiences of power can underpin adversity and social inequality. This concept considers all forms of adversity, trauma, and negative operations of power and draws heavily on Foucault's (1980) conception of power and the influence of society (Johnstone et al., 2018c).

Review of the literature

While formulation is a key competency in the EP role, as outlined in the HCPC Standards of Proficiency (2023) and BPS Code of Ethics (2021), a noticeable gap exists in the literature regarding a contemporary understanding of how EPs engage in and complete formulation. This makes understanding the EPs' approach to formulation a complex and challenging area to explore. Factors contributing to this complexity include the terminology used by EPs, the embedding of formulation within assessment, the language associated with clinical or expert roles, and EPs' perceptions of their role and professionalism. The available literature on EPs' perspectives and understanding of formulation is also limited and outdated.

The literature available regarding EP formulation emphasises the use of executive frameworks in EP practice. These frameworks guide assessment and case conceptualisation. Various psychological frameworks are used in EP practice and influence decision-making, as suggested by Kelly et al., (2017). As stated by Wicks (2013), the most commonly mentioned executive frameworks in EP literature are the Constructionist Model of Informed and Reasoned Action (COMOIRA) (Gameson et al., 2003), Division of Educational Psychology's "Framework for Assessment and Intervention" (DECP, 1999), the Integrated Framework (Woolfson, Whaling, Stewart, & Monsen, 2003), Interactive Factors Framework (IFF) (Frederickson & Cline, 2009), and the Problem-analysis Framework (Monsen, et al., 1998; Monsen & Frederickson, 2008). Though commonly used in EP practice and taught to TEPs, it is important to consider that these frameworks were developed some time ago when the role of the EP could be argued to be quite different. They do not consider the changes in the EP role, such as increased involvement in therapeutic work (Atkinson & Kenneally, 2021) and EPs completing one of assessments with CYP, not having as many opportunities for ongoing review and work with CYP. Furthermore, in practice, the frameworks present some limitations, such as the Monsen Model being too prescriptive for qualified EPs with too many steps and the hypothesis construction presenting some confusion for TEPs (Kelly, 2006; Sedgwick, 2019). Other reflections include the DECP not having clear psychological

principles to guide TEPs, and the COPMOIRA model needing to be simplified (Sedgwick, 2019). Despite some limitations, they do offer clear processes and promote the need to develop hypotheses and construct formulations to inform intervention and support (Sedgwick, 2019).

The PTMF is a framework that could potentially mitigate some of those limitations, such as working more therapeutically with CYP (Johnstone et al., 2018a). Since the publication of the PTMF in 2018, there has been a growing interest in the available research and literature. Gallagher et al., 2024a summarised 17 empirical studies which involve the application of the PTMF within research methodology in the following four ways:

1. To inform data collection and analysis (Gallagher et al., 2023; Gallagher et al., 2024b; Leeming et al., 2022; Paradiso & Quinlan, 2021).
2. To inform data analysis (Devenney 2021a, 2021b, 2021c; Leeming et al., 2022; Devenney, 2021b, 2021c; Newton et al., 2022; Jagasia et al., 2022; Barnwell et al., 2020).
3. To explore experiences/views on the PTMF (Milligan; 2022; Travers 2022; Raskin et al., 2022).
4. To inform psychological practices (Seery et al., 2021; Nikospachos et al., 2023; Sapsford, 2021; Reis et al., 2019).

Milligan's 2020 doctoral research in their review of exploring EPs views and experiences of the PTMF identifies that several papers applied the PTMF to different areas in practice, such as:

- Formulation (Seery et al., 2021; Travers, 2022)
- Assessment (Cogen, 2020; Paradiso & Quinlan, 2021;
- Gathering views of the public regarding mental health narratives
- Within research methodology (Brown, 2019; Cantrell, 2021; Cogen, 2020; Enlander et al., 2021; Paradiso & Quinlan, 2021; Schnackenberg, 2019; Siverns & Morgan, 2020; Smith, 2018).
- Training (Collins, 2019; Fyson et al., 2019) and to enhance reflection during training (Sapsford, 2021).
- Therapeutic intervention (Collins, 2019; Griffiths, 2019; Reis et al., 2019; Sapsford, 2021; SHIFT, 2020).

Additionally, the current literature review highlighted that there has been a minimal focus on exploring professional views regarding applying the PTMF. Studies that have explored this area have been completed by two trainee Clinical Psychologists and one TEP (Leverington, 2023; Milligan, 2022; Travers, 2022). Furthermore, the literature shows that the PTMF has been applied within the following areas of professions in terms of application and relevance to formulation in practice:

- Clinical Psychology (Cooke et al., 2019; Flynn & Polak, 2019; Griffiths & Baty, 2019; Johnstone et al., 2019; Leverington, 2023; Sapsford, 2021; Travers, 2022).
- Forensic/Prison populations (Gallagher, 2024; Gallagher, 2023, Reis et al., 2019)
- Psychiatry (Downs & Smith, 2022; Seery et al., 2021).
- Mental Health services (Leeming, 2022; Newton, 2022; Paradiso & Quinlan, 2021; Nikopaschos et al., 2023).
- Social care (Fyson et al., 2019).
- Support organisations (Collins, 2019; Griffiths, 2019; SHIFT, 2020).
- Humanistic Psychology (Amari, 2023).
- Education (Cantell, 2021; Cogen, 2020; Farrel & Mahon, 2021; Enlander et al., 2021; Milligan, 2022, O'Toole, 2019; Schnackenberg, 2019; Sivers & Morgan, 2021; Smith, 2018; Travers, 2022).

It is important to note that out of the total number of studies reviewed, 18 are empirical research papers, while the rest are peer-reviewed articles and journal submissions. Although these articles are peer-reviewed journal articles rather than empirical papers, they still offer valuable insights into the PTMF in practice and provide evidence-based on practical experience. Additionally, despite a growing interest in using the PTMF across various professions, only two of the papers were written by EPs (Cogen, 2020; Snackenberg, 2019), and only one thesis has been completed that explores EPs' perspectives and experiences in applying the PTMF directly in practice (Milligan, 2022). There is little information available regarding EP formulation. Milligan's doctoral thesis in 2022 highlights the need for further research focusing on formulation for EPs and how they can apply the PTMF.

The PTMF accessibility has been debated (Griffiths, 2019; SHIFT, 2020), with some suggesting that the PTMF is readily applicable in practice (Reis, et al., 2019). In comparison, other research identifies that the PTMF requires further interpretation and development when

used with people with learning disabilities (Collins et al., 2022). Research is currently focused on adult populations with limited relevance to CYP. However, some parallels around the accessibility of the PTMF for CYP can be made. Prisoner populations typically also have learning difficulties, such as literacy difficulties and communication difficulties (Bryan, 2021), and typically have a young reading age, like that of an 11-year-old (Ofsted, 2023). Additionally, some literature highlights that it can be applied to CYP. For example, articles published by Jigsaw the National Centre for Youth Mental Health in Ireland, which is an organisational charity which provides therapeutic support for CYP aged 12-25 and has attempted to make the PTMF more accessible for this population of CYP by coproducing adaptions with the CYP (Aherne et al., 2019).

Lastly, in the literature and research publications, there is a clear emphasis on person-centred care (SHIFT, 2020); Griffiths, 2019; Adherne et al., 2019), understanding emotional distress, and social justice issues (Seery et al., 2021). These elements are valued by EPs when working with CYP (Milligan, 2022; Rees, 2024). Additionally, the literature discusses social justice issues within the SEN diagnostic process and care for CYP (Campbell, 2023). Although there is a limited amount of literature on the use within EP practice, Milligan (2022) noticed that the literature does include populations that EPs encounter, such as looked-after children (Enlander et al., 2021; Siverns & Morgan, 2020), caregivers (Paradiso & Quinlan, 2021), CYP who have experienced domestic abuse (Collins, 2019), and asylum seekers (Smith, 2018).

Overview of the Present Study

Literature about an EPs' approach and engagement with formulation is limited and often overlaps with how EPs relate to general assessment processes, highlighting a gap in the current understanding of EP's approach to formulation (Kelly et al., 2017). The available literature does, however, highlight that EPs typically adopt a framework to inform their assessments and formulations. One recent doctoral thesis explored how EPs can best apply the PTMF within their practice and found that EPs in that study used the PTMF within their formulations to develop their understanding of what was going on for the client (Milligan, 2022). However, the EPs in the study didn't explicitly communicate that they were using the PTMF with the clients to develop their formulations and thinking. This is contrary to how the PTMF is supposed to be used by the authors and in some of the guidance in 'good practice in

formulation' for Clinical Psychologists (Johnstone & Dallos, 2013). Nonetheless, the literature emphasises issues in EP formulation, such as EP-specific guidance on best practices, the role of EPs and their use of formulation and language. It also notes that the definition of formulation in EP practice is unclear, and various practice frameworks are being used (Wicks, 2013). Despite HCPC (2023) guidelines and BPS standards (2021) stating a clear need for EPs to have skills in formulating CYP needs, there is limited research within this area, and much of it is outdated. Therefore, the first part of this study will explore how the participants approach formulation to understand CYP needs during casework.

The second part of the study will focus on applying the PTMF. The above review of the literature highlights that the PTMF is being applied differently by different professionals. There appears to be greater application within the Clinical Psychology and Forensic professional domain, with a focus on adult emotional distress and limited application to CYP. Factors such as language accessibility and concepts have been noted. There is little known about applying the PTMF within the EP role currently. However, the literature explored shows that the PTMF fits with aspects of the EP role, such as consultation, assessment, intervention, training, and research (Farrell et al., 2006; Milligan, 2022). It has been applied and linked with areas where EPs typically work (e.g., MH and education) and people EPs work with (e.g., CYP, adults such as parents/carers, SEN and CYP with care experience and trauma), as well as supporting Clinical Psychologists, Counsellors, Mental Health Teams, and Social Workers (e.g., Collins, 2019; Paradiso & Quinlan, 2019; Sapsford, 2021.

The PTMF is underpinned by psychological theories and frameworks that EPs draw upon within their thinking and formulations, such as trauma-informed approaches, positive and strengths-based psychology, personal construct psychology, narrative psychology, ecological systems theory, and person-centred approaches (Johnstone & Boyle, 2018a). It has been argued that the EP role is integral to social change, justice, and equality (Mercieca & Mercieca, 2022; Pillay, 2020; Schulze, 2017). Many doctorate courses pride themselves on training programmes that provide TEPs with values that align with the PTMF, such as critical psychology, social justice, and person-centred psychology (Johnstone & Boyle, 2018a).

The PTMF is a new framework within the EP domain, so there is limited research on EP practice and use. The literature exploring using the PTMF to develop practitioner thinking and/or patient thinking is mostly comprised of peer-reviewed articles published in Clinical Psychology journals. Although they provide insight into how the PTMF can develop thinking

and be applied to practice, they are not empirical research papers. There is, therefore, a clear gap in the existing empirical research and exploratory research is needed to explore the application of the PTMF to guide EP formulation and understanding CYP needs.

Research Aims
- To understand how EPs/TEPs view and use formulation.
- To explore EPs/TEPs views and experiences of applying the PTMF to formulation.
- To understand how the PTMF can best be applied to enhance EP formulation.

Research Questions
- What are EPs/TEPs' views and experience of formulation within the EP role?
- What are EPs/TEPs' views and experience of using the PTMF within EP formulation and practice?

Methodology

This section will outline the researcher's epistemological and ontological positions. This section will then discuss and justify the research design employed and the analysis process used to address the research questions. Finally, this section will discuss the steps taken to ensure the quality of research and key ethical considerations.

Epistemological and Ontological Position

Ontology and epistemology are philosophical domains that profoundly influence the conceptual framework of research endeavours. Ontology, as a branch of metaphysics, examines the nature of reality and existence, posing questions about the essence of 'truth' and the mechanisms through which reality is perceived and interpreted (William et al., 2016). Epistemology is concerned with the theory of knowledge, investigating the origins, methods, and limitations of human understanding and the criteria for justifying beliefs and claims to knowledge (Steup & Neta, 2020).

Epistemology and ontology constructs are paramount to researchers, as they underpin and shape research objectives, the methodologies used to obtain data, and the analytical

frameworks by which we interpret data. Consideration of these frameworks helps researchers to ensure coherence, rigour and validity (Braun & Clarke, 2020; Byrne, 2022; Creswell & Creswell, 2017; Guba & Lincoln, 1994).

Research paradigms are broadly categorised as either failing within positivism or interpretivism (Adom et al., 2016). Positivism seeks objective knowledge through quantifiable observation (Mertens, 2015), while interpretivism views reality as subjective and socially constructed (Byrne, 2021). Interpretive approaches employ qualitative methods to generate a more nuanced comprehension. Those holding an interpretive position would assume that we can only understand someone's reality through their experience of that reality, which may be different from another person's reality and is shaped by the individual's historical or social perspective. Interpretive approaches rely therefore on questioning and observation to discover or generate a rich and deep understanding of the phenomenon being investigated. The PTMF aligns with an anti-positivist, constructivist approach, asserting that knowledge is individually constructed based on personal experiences and social interactions (Cottone, 2001).

This study adopts a social constructivist approach, rooted in Vygotsky's (1934, 1986) work, which posits that learning is inseparable from social context (Boyland, 2019). Social constructivism emphasises that knowledge is created through social interactions and cultural contexts. This approach was chosen for its relevance to the interactive nature of knowledge creation between researcher and participants, recognising that individuals construct meaning through their interactions with others and their environment (Creswell, 2013; Denzin & Lincoln, 2011; Mertens, 2015; Schwandt, 2003).

This aligns with the current study's research methodology, as participants are asked to reflect on their views and experiences of using the PTMF when working collaboratively with other professionals, parents/carers, and CYP to develop their formulation. Participants will have different views and experiences of using the PTMF with real CYP (House, 1991, cited in Robertson, 2002). They will also have a perspective that is influenced by their reality and past experiences of formulation. Additionally, the PTMF is not a set framework, and the outcome of participants' experiences of using the PTMF within their casework will depend on how it is applied and understood by that practitioner. Participants will likely build on their prior knowledge of other frameworks they apply within their practice and make inferences on

how the PTMF can be used. This fits in with the social constructivist approach (Vygotsky, 1986).

Research Design

The current study employs a qualitative research design to explore in-depth the views and experiences of EPs and Trainee Educational Psychologists (TEPs) in applying the PTMF to casework. It employs a 'Big Q' qualitative design, which aligns with its exploratory nature and adheres to a social constructivist paradigm (Kidder & Fine, 1987). It stands in contrast to 'Small Q' research, which is rooted in positivist scientific traditions and strives for objectivity (Braun & Clarke, 2021). By adopting this 'Big Q' methodology, the study embraces a more interpretive and context-sensitive approach to understanding the complexities of EP practice and the application of the PTMF. A qualitative research design is deemed appropriate as the study aims to explore how participants have made sense of EP formulation, their views and experiences of applying the PTMF to formulation, and their perspectives on how it can support the EP role.

Semi-structured interviews were employed to explore participants' views and experiences of applying the PTMF to casework, focusing on formulation and practice. Appreciative Inquiry (Cooperrider et al., 2008) is a strengths-based, positive approach to organisational change and development. The AI model encourages a focus on what is working well within an organisation currently, rather than what is not working well. The interview questions were partially influenced by AI by developing questions to appreciate participants' current knowledge and understanding of formulation within their practice, explore; the application of the PTMF, the positive impacts of the PTMF and the potential future developments and implementations of the PTMF.

Additional questions were inspired by Bronfenbrenner's Ecological Systems Theory (1979), which examined systems interacting with the CYP. This approach allowed for relevant, open-ended questions, enabling participants to offer additional information (Willig & Rodgers, 2017). The researcher guided the interviews to ensure relevant topics were covered, engaging in reciprocal conversation. Semi-structured interviews were chosen for their conversational nature and capacity for meaning-making between researcher and participant (Mojtahed et al., 2014).

Semi-structured interviews align with constructivist and interpretative frameworks (Bryne, 2021), supporting this study's aim to explore EPs' and TEPs' reflections on formulation and the PTMF, including their attitudes and opinions. While online questionnaires could have reached a wider audience, they would not have allowed for the co-construction of meaning through researcher-participant interaction (Mills, Bonner & Francis, 2006). Semi-structured interviews better suit the constructivist approach in exploring human experiences (Cohen & Manion, 1994), acknowledging that interactions continuously shape experiences (Mills et al., 2006). Semi-structured interviews were preferred over focus groups to provide a confidential space for participants to share their PTMF application experiences without peer influence. Semi-structured interviews offered an opportunity to gain an in-depth understanding of participants' perspectives, experiences, beliefs, and motivations (Gill et al., 2008; Patton, 2002). In contrast, focus groups may have been subject to group dynamics and dominant narratives, potentially limiting the diversity of experiences shared.

Participant Recruitment and Sample

Participants were recruited through purposive sampling via social media (Twitter) advertisements (Appendix B), email invitations to the researcher's university colleagues and placement contacts (Appendix C) and sharing within a PTMF interest group. Interested individuals received a participant information sheet and consent form (Appendix D). Upon consent, participants received resources and training videos about the PTMF.

An initial online meeting via Microsoft Teams allowed the researcher to: discuss research aims, ensure participants met the study criteria, explore participants' PTMF understanding, consider potential cases for framework application, opportunities for participants to ask questions and plan interview dates.

Inclusion vs Exclusion Criteria

The study included UK-based, practising EPs with HCPC accreditation and BPS-approved training and TEPs attending approved UK doctorate courses. TEPs were included due to their up-to-date knowledge of the EP role, involvement with EP activities and casework and their contribution to the research field. Participants were required to have a self-directed interest in applying the PTMF to the EP role, existing knowledge of the PTMF, and experience in casework and formulation. Exclusion criteria encompassed non-EPs, EPs working outside the UK, professionals interested in PTMF but not practising as EPs/TEPs,

and those needing help researching the PTMF independently. The study did not provide training and expected participants to engage in their own research to develop their understanding of the PTMF.

This approach aimed to gain rich insights into how EPs and TEPs perceive, understand, and interpret the PTMF within their role, respecting their autonomy as evidence-based practitioners and the flexible nature of the PTMF as a set of principles rather than a prescriptive framework.

Recruitment

Nationwide recruitment occurred from September 2023 to January 2024. Initially, 12 practitioners (three TEPs and nine EPs) responded, with 10 returning consent forms. One EP withdrew before the interview due to time constraints. Eight participants (two TEPs and six EPs) completed interviews. Subsequently, one TEP withdrew their data due to not feeling comfortable talking about a family in the way that they did during the interview. The final study group comprised seven participants: six EPs and one TEP. EPs were labelled participants with a number next to them. This was in order of interview.

Demographics

The study involved seven participants (six EPs and one TEP) working in various contexts, including LA's, private practice, and mental health charities. Participants had gained knowledge of the PTMF primarily through social media, university research, and colleagues. Participants applied the PTMF to diverse casework scenarios involving:

- Complex family situations and behavioural challenges
- Reframing teacher perspectives on pupils from minority communities
- Supporting care-experienced CYP
- Addressing school exclusions and attendance issues
- Guiding staff consultations and supervision
- Exploring needs beyond medical diagnoses
- Addressing racially charged experiences

The PTMF was applied differently across all 7 participants both explicitly and implicitly and was used to guide thinking, develop shared understanding, promote CYPs voices, and explore power dynamics and threats in various educational and social contexts.

Data Collection

Data was collected online via Microsoft Teams video calls from September to December 2023. Interviews lasted 35 to 57 minutes. Online interviews were chosen due to EPs' time constraints and the need to include participants from across the UK. EPs and TEPs are now accustomed to online work following adjustments made during the COVID-19 pandemic and research has identified that online interviews are an effective means of gathering data (Abrams & Gaiser, 2016; Barrero, Bloom & Davis, 2021).

Data Analysis

Data analysis followed Braun and Clarke's (2021) Reflexive Thematic Analysis (RTA) guidelines. To ensure clarity and accountability, Table 1 outlines the step-by-step analysis process. Each coding and theme development stage has been documented to ensure research rigour and dependability.

RTA, a theoretically flexible and interpretative approach to qualitative data analysis, identifies themes and patterns within data sets (Braun & Clarke, 2012). Unlike coding reliability methods (Boyatzis, 1998; Joffe, 2012) and codebook approaches (King & Brooks, 2017; Smith & Firth, 2011), RTA does not pre-identify themes before data collection, allowing for a more interpretative analysis (Byrne, 2022). Coding reliability approaches hypothesise themes based on theory before data collection. Codebook approaches balance RTA and coding reliability by incorporating structured codebooks and domain summaries (Braun & Clarke, 2019). RTA does not attempt to identify themes before data collection like coding reliability. Themes are derived from the data sets and patterns are interpreted by the researcher's engagement with the research data. RTA aligns with the social constructivist paradigm, enabling researchers to participate actively in knowledge development. Themes emerge from data through the researcher's engagement, meaning that outcomes are dependent on the researcher's interpretation, theoretical assumptions, and analytical skills. RTA values reflexivity, subjectivity and creativity as key characterise that set RTA aside from other approaches and positivistic assumptions (Boyatzis, 1998).

Table 1

Six Phases of Reflective Thematic Analysis (Braun & Clarke, 2022).

Phase of Analysis	Approach Taken
Familiarisation of the data.	The researcher transcribed each interview using the Microsoft Teams live transcription feature. This process involved editing and ensuring accuracy. After transcribing each interview, the researcher carefully reviewed and analysed the transcript, taking note of initial reflections, interesting points, and thoughts and feelings that emerged from the interview.
Coding the data.	The researcher organised each transcript by date using the comments function in Microsoft Word (see Appendix F for an example). The researcher reviewed each transcript and their initial codes while keeping the research questions in mind, then modified the codes to better fit the data set. They observed that the initial codes lacked context and adjusted them to provide a deeper understanding of the data set. The codes included descriptive (semantic) and interpretive (latent) elements.
Generating initial themes.	The Macro function in Microsoft Teams allowed the researcher to download the comments (codes) with the quotes for each interview into a separate document. Subsequently, the researcher separated the codes from each interview into two documents based on the research question and suggested initial themes. The codes were then reduced and refined, and colour coding was used to highlight consistent themes and codes across data sets. A comprehensive set of themes and smaller subthemes were identified throughout this process, and the relevant code and quote were included.
Developing and reviewing themes.	The researcher incorporated both descriptive and interpretative elements into the themes. Some themes were based on what participants had said, while others were derived from the overall meaning and sense made by the researcher. The themes were printed and manually sorted to facilitate a smoother process for the researcher. They were then recorded on a new document on Microsoft Teams, considering them one theme rather

| | than two separate ones. Themes were deleted, renamed, and reorganised on the hard and online copies (see Appendix G).

Thematic maps were then created to consolidate the core themes. |
|---|---|
| Refining, defining and naming themes. | The first step was identifying overarching themes, which involved combining themes to ensure a consistent interpretation across the data sets. At this stage, the researcher adopted an interpretive approach to understand the meaning conveyed by the themes in the data. The researcher also considered how the themes related to existing literature and previous research were relevant to the data (Braun & Clarke, 2006). Since there were two research questions, the researcher looked for patterns that emerged across both questions, which are explored and discussed in the research findings and discussion section. Finally, the researcher took a step back from the themes and data to assess whether the themes accurately reflected what the participants had said and whether the quotes provided reliable evidence for those themes. Upon feedback, this section was reviewed and completed again. The researcher felt that the theme developed needed strengthening and that according to the Braun & Clarkes analysis tool (see Table 2), there were too many themes which could potentially result in a weaker data analysis. See reflections in Table 2. |
| Writing up analysis. | The final themes were decided upon and presented in this research's results and discussion section. The researcher provided evidence for the data that formed each theme throughout the findings and discussion section. Writing the themes was an integral part of the analysis (Braun & Clarke, 2012). It helped refine the boundaries of the themes, identify latent patterns, and consider the relationships between the themes and their content. Upon feedback, this section was reviewed and completed again to ensure that the theme descriptions focused on the participant's accounts, ensuring there was a clear summary of the underlying patterns. The write-up includes active interpretation of the data and reflexivity. As |

	discussed in Table 2, reflections on the reviewed write-up provide clarity and minimises overlap between the themes.

Throughout the study, continuous reflection was conducted at each stage and after each interview to identify biases, the researcher's position, and their engagement with the research. This is an essential aspect of the RTA method. Self-reflexivity is further discussed in the reflective chapter of this research. A researcher diary was maintained throughout the research process and regularly used to reflect on the researcher's subjectivity (assumptions, choices, and actions) and discussions with others. (See Appendix H for an example from the researcher's diary).

Quality of Research

Qualitative data is not evaluated in the same way as quantitative data. Researchers have noted that qualitative research should be assessed on its terms (Madill et al., 2000; Sparkes & Smith, 2009; Yardley, 2016). Several researchers have proposed alternative methods to evaluate the trustworthiness (Lincoln & Guba, 1985) and validity of qualitative data (Lincoln & Guba, 1985; Tracy, 2010; Yardley, 2008).

Thematic Analysis (TA) has been criticised for lacking quality and is often misunderstood (Lorelli, Norris & Moules, 2017). The authors of RTA clarify that RTA is a method, not a methodology, underpinned by theoretical and philosophical assumptions (Braun & Clarke, 2022). Quality concerns in RTA arise when researchers have little or no engagement with these underpinning assumptions (Yardley, 2017). TA encompasses various approaches that can be based on different philosophical assumptions and applied to both qualitative and quantitative research designs, making it theoretically sensitive (Yardley, 2016). A common misconception is that TA is a singular approach (Firmin et al., 2008). This can lead to confusion and improper interchangeability of different TA approaches, impacting the philosophical underpinnings and research paradigm. For example, studies might claim to use a qualitative paradigm while engaging with positivist approaches of TA such as coding reliability approaches (Braun & Clarke, 2021).

Another potential issue with RTA is the lack of a specific, universal method for conducting it. To avoid poor-quality RTA, researchers must ensure their approach is theoretically informed, underpinned by their philosophical assumptions, and values the

researcher's creativity and subjective skills in interpreting the data. Braun and Clarke (2020) have published an evaluation tool for assessing TA, which was used in this research to guide the approach and overcome potential limitations. This is a 15-point checklist for quality (reflexive) TA and the tool can be used at different stages of the research, and beyond editing/reviewing. The checklist is split into two areas 1) Adequate choice and explanation of methods and methodology and 2) A well-developed and justified analysis. The checklist was used and informs the reflection on the application and analysis using RTA. Not all points on the checklist were used explicitly at this stage, therefore the researcher has provided some examples in Table 2.

Table 2.

Examples of how the QA (Braun & Clarke, 2020) tool was considered throughout the research

Do the authors explain why they are using thematic analysis (TA), even if only briefly?	This methodology section of this chapter explains the reasons for using RTA within this research and compares reflections of other potential analysis methods in the reflexive chapter.
Do the authors clearly specify and justify which *type* of TA they are using?	The research also explores the differences between the different types of TA available and gives reasons as to why an RTA was applied compared with coding reliability TA or codebook TA and decisions were made based on the researchers underpinning philosophical approach that was employed throughout the research.
Is there a good 'fit' between the theoretical and conceptual underpinnings of the research and the specific type of TA (i.e. is there conceptual coherence)?	The researcher decided upon RTA as it fits well with the underpinning philosophical approach and the researcher's overall approach to understanding truth and knowledge both professionally and personally and therefore aligns with the golden thread that runs throughout the research.
Is there a good 'fit' between the methods of data collection and the specific type of TA?	A range of data collection methods were considered to fit within the 'Big Q' qualitative

	design, such as focus groups- however, the researcher felt that semi-structured interviews provided each participant with more space to share their thoughts, and ideas at their convenience. Focus groups would have meant that there could have been a shared meaning created through those discussions rather than allowing participants to reflect independently on their experiences and practice which was preferred by the researcher.
Is it clear what and where the themes are in the report? Would the manuscript benefit from some kind of overview of the analysis: listing of themes, narrative overview, table of themes, thematic map?	In the findings, the themes are clearly labelled and shown in the table (Table 2) with a brief overview of where to find the descriptions. Originally the researcher did use a thematic map to evidence the themes. However, after a review following feedback, the researcher found that the themes needed to be reconstructed. Originally there were three overarching themes, nine subthemes and 24 child themes and despite being presented clearly in a thematic map the findings and theme development needed re-considering. Upon reflection, the researcher had used codes as child themes, and there was a lot of overlap within the themes and subthemes making the analysis appear potentially weak.
Is there evidence of weak or unconvincing analysis such as: Too many or too few themes? Too many theme levels? Confusion between codes and themes? A mismatch between data extracts and analytic	As noted above, the original themes presented a potentially weaker analysis with too many themes and subthemes. However, following feedback and through reflection the researcher considered re-development of the themes and feels the themes present a strong analysis of the data.

claims? Too few or too many data extracts? Overlap between themes?	
Are reported themes topic summaries, rather than 'fully realised themes' – patterns of shared meaning underpinned by a central organising concept?	A good example of a theme and theme description using Braun and Clarke's RTA guidance would involve a clear and insightful interpretation of the data while demonstrating a deep understanding of the theme of the research question. The researcher aimed to provide clarity in terms of the revised themes and descriptions, including what the theme covers and its contributions. This felt important given the revisions made, and after the revisions were made the themes became patterns of shared meaning underpinned by a central concept that then repetitive summaries of the theme.
Do authors make problematic statements about the lack of generalisability of their results, and or implicitly conceptualise generalisability as statistical probabilistic generalisability (see Smith, 2018)?	The researcher values the core principles of RTA and the subjective nature of the results and therefore does not intend the data to be generalisable to the whole population of EPs and TEPs. This is due to the unique interaction between the researcher and data and the subjectiveness of making sense of the data is a core part of RTA. Furthermore, the underpinning of social constructivism argues that knowledge is constructed by experience, and interaction of that participant within their world and therefore people's realities and understanding of what the truth is, is socially constructed and different for each person. Therefore, depending on where the EP trained, or their experience so far, this will influence their view and the data set.

Ethical Considerations

This study adhered to the ethical guidelines set by the School of Education and Lifelong Learning Research Ethics Committee at the University of East Anglia (Appendix I). The ethical proposal was also guided by the BPS Code of Ethics and Conduct (2018) and the BPS Code of Human Research Ethics (2014).

Participants received an electronic participant information sheet and consent form (Appendix D), which they were required to read, sign, and return via email. These documents were stored in a password-protected folder on OneDrive. Participants were informed about the study's process, expectations, and their rights to ask questions, report complaints, and withdraw. They were assured of anonymity and instructed not to share identifiable information about the CYP and their families.

Interviews were conducted per GDPR (GOV Data Protection Act, 2018) and transcribed using Microsoft Teams and manual transcription. Transcriptions were anonymised, labelled with participant numbers, and stored in password-protected OneDrive and Microsoft Teams folders. To ensure participants felt safe discussing their practices, no identifiable information about them, their services, or training providers was included in the transcripts. Consent from CYP and their families was not required as the study focused on participants' reflections on their practice. The researcher ensured that no identifiable information about CYP was shared or analysed.

Participants were emailed their transcripts for review and confirmation of inclusion in the study (BPS, 2021). Full transcripts are not included in the research appendix to further protect participants' anonymity.

Findings

This section organises the findings into two main themes identified through RTA (Braun & Clarke, 2021). Each theme is made up of three subthemes totalling six subthemes across the data set, refer to Table 3 for a breakdown of the themes. The description of each theme and subtheme are discussed below.

Table 3.

Theme Breakdown

Theme 1	Navigating formulation: Context, frameworks and collaboration
Subtheme 1	Complexities in EP formulation: Assessment, frameworks for practice and evidence
Subtheme 2	The context of the EP role influences the approach to formulation
Subtheme 3	EP formulation is a collaborative process

Theme 2	Enhancing EP formulation through the PTMF
Subtheme 4	Psychological intersections and the PTMF application
Subtheme 5	Comprehensive formulation, the importance of power and systemic awareness through the application of the PTMF
Subtheme 6	Interactions between the EP role and applying the PTMF

It's essential to note that all themes have overlapping and interacting factors that will be further explored in this section. This section will provide explanations of each theme with

references to the subthemes noted above, along with participant quotes gathered during the interviews. The term "stakeholders" will refer to parents/carers, professionals, and anyone who holds information about the CYP, including the CYP themselves at times.

Theme 1. Navigating Formulation: Context, Frameworks and Collaboration

This theme explores the multifaceted nature of EP formulation, highlighting the complexities that influence how EPs understand and engage with the formulation process. Participants emphasised the importance of evidence-based approaches in formulation, stressing that solid empirical foundations are essential for making well-informed decisions about the needs of CYP. The theme also reflects participants' views on what EP formulation means to them, exploring how their understanding of the process shapes their professional practice.

A key focus of this theme is the relationship between assessment and formulation. Participants discussed how assessment serves as the starting point for gathering data, but the formulation is what allows EPs to synthesise and interpret that information, creating a more holistic understanding of the CYP. Through this process, EPs can identify patterns, uncover deeper insights, and develop tailored recommendations. Participants noted that formulation is a dynamic, interpretive process that goes beyond simply collecting information—it's about making sense of the data within the broader context of the CYP's life.

Additionally, the theme delves into how participants engage with frameworks for practice, which are essential tools that shape their approach to both assessment and formulation. These frameworks—whether psychological models, theories, or structured tools—serve as guides for thinking and practice, helping EPs organise their assessments and inform their formulations. Participants highlighted how these frameworks provide structure and consistency, ensuring that their formulations are not only systematic but also meaningful and contextually appropriate for each case.

In sum, this theme highlights the complex, integrative nature of EP formulation. It considers the interplay between evidence, theoretical frameworks, and the relationship between assessment and formulation, illustrating how each element contributes to creating a comprehensive and nuanced understanding of CYP's needs.

Subtheme 1. Complexities in EP Formulation: Assessment, Frameworks for Practice and Evidence

This subtheme explores the complexities involved in understanding and engaging with EP formulation. Participants emphasised the importance of grounding formulation in evidence-based practices, highlighting how this foundational aspect shapes their approach to assessment and formulation. The subtheme also delves into participants' perspectives on what EP formulation means to them, illustrating how their understanding of the formulation process influences their professional practice.

A key focus of this subtheme is the relationship between assessment and formulation. Participants reflected on how they untangle and navigate the interplay between these two elements, emphasising that while assessment gathers essential information, formulation goes beyond this to synthesize and make sense the CYP presentation in a meaningful way. This process allows EPs to create a holistic understanding of a CYP needs informing subsequent interventions and support strategies.

The subtheme further explores how participants engage with various frameworks for practice, and how these frameworks shape their approach to both assessment and formulation. Participants discussed how these frameworks, which may include psychological models, theories, and tools, guide their thinking, structure their assessments, and influence the ways they conceptualise and formulate the needs of CYP. The frameworks help create coherence in the formulation process, ensuring that it is not only structured but also relevant to the specific needs and context of each case.

Overall, this subtheme reflects the multifaceted nature of EP formulation, considering both the theoretical and practical dimensions. It highlights how evidence, frameworks, and the interrelationship between assessment and formulation all play a vital role in shaping the formulation process.

Understanding of Formulation

Participants viewed EP formulation as an intentional exploration of a CYP profile throughout the assessment, involving psychological analysis and interpretation. One participant emphasised this point by stating that they felt that EPs play a part in, *"Understanding what psychological processes are happening and I think critically doing that through the analysis and the interpretation. That's the role of the EP, really"* (participant 8).

Participants felt that formulation explains the CYP's presentation beyond the surface level, delving into the reasons behind their behaviour. As one participant described*, "the aspect of formulation is the iceberg underneath. Do you know what I mean? It's all about what's going on and how you got to that thinking"* (participant 5).

Participants explained that, in their experience, formulation is a process of understanding the needs of CYP using a holistic approach. This involves exploring various areas such as cognition, social, emotional, communication, interaction, and physical needs. One participant noted, *"Yeah. I think to me it means considering all aspects of the child's life, trying to gather all the information possible, and making sure I can consider the best way of meeting the priority needs that the child is presenting with at school"* (participant 1). Formulation was also described by participant 2 as *"A systemic idea that explains some part or all of a young person's, or any person's experience"*.

Participants shared that their approach to formulation included considering ethically informed practice, avoiding biases, remaining evidence-based, and maintaining an open mind throughout the assessment process. As one participant stated, *"I might loosely hold those two hypotheses in mind, and I'm trying to figure out what would help me to discard one of these ideas or would it push me in one direction more than the other?"* (participant 2). This reflects the practice of questioning initial hypotheses and ensuring thorough exploration to avoid biases, one participant articulating, *"it used to be a key thing when I was training as well about not to fall in love with your own hypotheses, not to sort of take that first thought as the answer to everything and almost question everything and yeah, not take everything as given and explore"* (participant 4).

Participants highlighted the importance of considering multiple competing explanations for observed behaviours. One participant illustrated this by saying, *"I think specifically I tried to think about multiple competing explanations for the kind of behaviour that I'm seeing, I try to disprove them. In my mind, I think what would be a fair test for me to discard this idea? But, you know, two hypotheses that might come to mind are the young person has autism or the young person has the thing that they call attachment difficulties or relational needs… And so, for example, to do that, I might look at something like the Coventry Grid, which is about that specific attachment difficulties versus autism and I would look at some of the behaviours that are happening"* (participant 2).

Overlap with Assessment

Participants agreed that the process of formulation begins with the referral and continues until the end of their involvement. As one noted, *"The process of the formulation does start even before you meet anyone"* (participant 5), and another added, *'formulation is a*

process, a starting point, and it's an endpoint" (participant 3) Participants suggested that formulation is iterative: assessment informs the action of formulation, and, at times, formulation influences how an assessment is conducted and its outcomes. For instance, one participant noted the developing nature of the formulation process, stating, *"I'm doing formulation as I go along with assessment gained, like gathering information"* (participant 1). Several participants highlighted the interconnected nature of the assessment and formulation process and discussed how formulation is informed by ongoing interactions and assessments. One participant explained, *"Then I might speak with the child one-on-one. Get their views and again I'd, I suppose I'd have questions based on the formulation"* (participant 3).

The necessity of context in formulation was also noted, as one participant remarked, *"I think you know formulation can't be done in a vacuum, can it?"* (participant 4). This reflects the sentiment that formulation requires continuous interaction with the child's environment and context. Another participant illustrated the practical aspect of starting with available information, saying, *"So you know, I might start off with the paperwork for a child. If there is any"* (participant 3).

Moreover, participants indicated that while formulation is integral throughout the assessment process, they often employ a flexible approach where formal models or frameworks are not explicitly used. As one participant articulated, *"I feel like it's a bit easier to just to get some information and just to see what's going on, ask some questions and sometimes maybe you are formulating, but you've not used like a model or framework formally in your head"* (participant 5).

These insights collectively highlight that the participant's experience of formulation is an evolving process that continuously integrates new information from assessments and interactions with the child, emphasising its iterative and context-dependent nature.

Frameworks for practice

Participants shared that in their experience sometimes a specific framework is not used in a step-by-step process, and a mixture of different psychological theories influence their thinking, such as Bronfenbrenner's Ecological Theory, Maslow's hierarchy of needs, solution-oriented approaches, and trauma-informed practice. Participants felt that certain aspects of a CYP profile influence which framework or psychological theory is drawn on

during the formulation and assessment process. One participant explained, *"Maslow's hierarchy as a framework or Bronfenbrenner, I say those because those are the ones people know. Maybe that that works for me"* (participant 2). The same participant later noted, *"there are certain kinds of cases or certain aspects of cases that draw me towards different frameworks depending on what I'm thinking of or what the relevant things are"* (participant 2). Additionally, a participant mentioned integrating various approaches, saying, *"But I base the consultation on solution-focused brief therapy, systemic family practice and then also personal construct psychology"* (participant 3).

Participants concluded that frameworks provide a guide to help plan and structure the formulation and assessment process, aiding in understanding CYP needs. Participants agreed that frameworks help guide their thinking and remind them to consider certain aspects of the CYP profile, that might not automatically come to mind, such as thinking about strengths. As one participant put it, *"So that's the sort of start of that formulation and then the framework helps to make you think about the strengths. You know what? What strengths a child might have"* (participant 4).

Moreover, frameworks for practice were discussed as a means of bolstering participants' confidence in their psychological thinking and ensuring they remain psychologically informed when sharing their understanding of a CYP. One participant emphasised the importance of a psychological framework, stating, *"I'm there, you know, I'm a psychologist and I feel I need a psychological framework and to be looking at the child and thinking about the child differently. You know and I feel very strongly that if I'm at a meeting or if I'm in a school of a child, I am to be thinking about the child psychologically"* (participant 1).

Overall, these insights from the participants in this study highlight the flexible and integrative approach that they take within their formulation process as EPs and TEPs, drawing on multiple theories to effectively address the diverse needs of CYP.

Subtheme 2. The Context of the EP Role Influences the Approach to Formulation

This subtheme explores participants' reflections on how the context of their role shapes their approach to formulation in their practice. Participants acknowledged that their formulation processes are influenced by a range of factors operating at different levels. At the

broader level, the structure and policies of the UK education system, as well as the models of service delivery, were seen as key determinants. These systemic factors set the framework within which EPs operate, influencing the way they approach and understand the needs of CYP.

On a more individual level, participants noted the impact of their training, both as EPs and TEPs as well as their personal development over time. They highlighted how the knowledge and skills they gain through formal education and professional experience shape their formulation approach, particularly in how they assess and interpret the needs of CYP.

Participants also pointed out that their approach to formulation is influenced by the service context in which they work, particularly whether the service is more medically inclined or less medicalised. In services with a more medical model, the focus may lean toward diagnostic or pathology-based formulations, while less medicalised services may adopt a more holistic, ecological, or person-centred approach to understanding CYP's needs. These service-level influences impact not only the type of assessments conducted but also the theoretical and conceptual frameworks that guide formulation.

Overall, this subtheme highlights the dynamic interplay of systemic, educational, and individual factors that shape the formulation process. It underscores how EPs navigate multiple contextual layers—ranging from national policies and service models to personal experiences and professional training—in their approach to understanding and supporting CYP.

UK Education System

One participant reflected on their experience in their home country and that the UK's education system differs from that of other countries, which influences how they as an EP attempt to understand and communicate the needs of CYP. The participant stated, *"I think when I first started working and especially working back in [named a country], I guess the concept, the context of working in an EP service in [named a country] was more around thinking holistically about the young person, but also would lead eventually into some kind of label or diagnosis, because it was a multidisciplinary team that included health professionals as well"* (participant 6). This perspective highlights how the cultural and systemic differences in educational contexts shaped the role and expectations of the participant's experience as an EP.

Another participant discussed the impact of different work contexts on how they approach assessment and formulation, noting, *"I think partially the context of work, and so whether working in a more medicalised model or framework or environment geared towards diagnosis, or working in a less medicalised environment where the aim is not necessarily a diagnosis, but it's more about understanding the young person"* (participant 6). This contrast emphasises the varied approaches that the participants encounter based on the educational and healthcare systems prevalent in their professional settings.

Moreover, participants noted the implications of statutory assessments on their practice, emphasising such processes' constraints and long-term implications. One participant highlighted these challenges, stating, "*Whereas when I'm working on non-statutory cases where it's advice to the school, I say right, here are some strategy recommendations. Try these out. See how you get on? You know, review it with the young person. Whereas with the EHCNa, it makes it a lot more difficult, I think"* (participant 5). This distinction highlights the participant's views on how statutory assessments necessitate more rigorous adherence to procedural requirements and careful consideration of recommendations, given their lasting impact on the CYP involved.

These insights show the nuanced and varied approaches that the participants adopt within different educational and statutory frameworks, reflecting their adaptability in addressing the diverse needs of CYP while navigating systemic and cultural influences and understanding the impact of these broader systemic factors on CYP presentations. As one participant succinctly put it, *"The child in interaction with their broader social economic emotion by both systems. That's how I think about what a formulation is, it's about trying to understand the child in interaction with their social environment"* (participant 2).

Service Delivery Model

Additionally, participants shared insights into how their formulation approaches, specifically the frameworks they utilise during assessments, have been influenced and adapted based on the service settings they operate within, and the service delivery models they encounter. One participant illustrated this point, stating, *"So that's one framework, but then when I initially trained, I did my first placement in [named locality/LA], where they've always had a very strong consultation model and so I used that model to guide my assessment work"* (participant 3). Participants shared their experiences of the impact of specific service

contexts and organisational models on their professional practices and formulation strategies. The flexibility in approach highlights the adaptive nature of the participants as they navigate different professional environments, integrating various frameworks and methodologies to effectively meet the needs of CYP within diverse educational settings.

Individual Level (training and personal development)

Participants conveyed that their understanding and practice of formulation have evolved significantly over time, influenced by experience, training opportunities, and the educational contexts in which they operate. There was consensus among participants regarding the limited exposure to formulation training during their initial education and the impact of university courses on their approach to formulation. One participant noted the scarcity of formal training in formulation, remarking, *"Yeah, no, we had very little formulation training"* (participant 1). This acknowledgement emphasises the varying levels of exposure to formulation concepts during their education and training as EP. Alternatively, another participant reflected on their professional growth during their training, stating, *"I think it's become more part of my practice as time has gone on. At the start of my course, formulation seemed a bit alien, something I wasn't used to, especially based on my previous roles"* (participant 5). This sentiment highlights the developmental trajectory of the participants as they integrate formulation into their professional routines and the difference in experience of formulation exposure during their training.

Participants also discussed how their professional backgrounds and educational experiences shaped their approach to formulation. One participant described the influence of previous roles and academic training, stating, *"A lot of my colleagues who were teachers and did the masters think differently. They still think like teachers"* (participant 1).

Moreover, participants highlighted the influence of specific theoretical frameworks emphasised in their training. For instance, one participant mentioned, *"I trained at [name of university], where they're very big on Bronfenbrenner's Ecosystemic model, so that's always been a massive part of how I would think about cases"* (participant 3). This demonstrates how academic institutions shape the participant's theoretical foundations and approach to case formulation.

Additionally, participants discussed their ongoing efforts to refine their professional practices, such as developing tailored assessment tools and refining intake procedures. As one participant explained, *"I've been developing my own consent form and referral forms and really thinking about what information do I really need to know and how to gain that in a concise way to get that first information about a referral and then use it as a springboard"* (participant 4).

Participants shared insights indicating that formulation in EP practice can be perceived as complex and inconsistent due to the diverse range of frameworks, psychological theories, and training backgrounds influencing EPs' approaches. One participant expressed this complexity, stating*, "I think because there are so many different ways to formulate as well, that sort of makes it a bit confusing"* (participant 5). Similarly, another participant highlighted that they feel there are discrepancies in understanding formulation within the profession, noting, *"People understood, or tutors understood, differently from me about what formulation meant and placement supervisors especially would have. In my experience, have understood formulation to mean what support service the child needs, you know, like a very tangible, concrete approach and I just entered it completely differently"* (participant 1).

Participants acknowledged the evolving nature of their own formulation practices, influenced by professional development and the unique circumstances of each case. One participant reflected, *"I feel like there's very varied practice within the EP profession about how people formulate and I think even within myself as a professional developing over the years I feel like has changed quite a lot. I feel like it varies within the situation, and with the young person, so that there's certain times where, I feel like formulation - hypotheses just jump up even from the get-go because there's very clear signs and there's times where I might approach the case with a more kind of clear canvas because there isn't much information there to lead me to form hypothesis straight away"* (participant 6).

These perspectives highlight that in the participant's experience, the nuanced and adaptive nature of formulation in their EP and TEP practice, where they navigate various theoretical perspectives and practical considerations to support CYP's educational and psychological needs effectively. In sum, participants expressed a shift in their formulation approach from seeking singular explanations to understanding multifaceted factors influencing a CYP's life. One participant articulated this evolution, stating, *"My formulation now is less about trying to find one singular reason or label but more about trying to*

understand the different factors and how they work within the young person's life"
(participant 6). These insights show the dynamic and context-dependent nature of formulation evolving throughout participants' experiences of training to become and EP and ongoing experiences.

Subtheme 3. EP Formulation is a Collaborative Approach

This subtheme reflects participants' views that EPs are not positioned as the sole experts in developing formulations of the needs of CYP. Instead, participants emphasised the importance of co-production in the formulation process. They highlighted that the key contributors to understanding the CYP's profile are the parents or carers, the CYP themselves, and professionals who are familiar with the family. These individuals hold valuable insights that are essential for developing a comprehensive understanding of the CYP's needs.

Participants emphasised that EPs play a crucial role in synthesizing this diverse information into a co-produced summary, underpinned by psychological theory and principles. They see their role as integrative—bringing together various perspectives and creating a cohesive, holistic formulation that reflects the lived experiences and needs of the CYP.

To facilitate this co-production, participants highlighted the importance of using accessible language during the formulation process. They felt that the language used should be clear and understandable to all stakeholders involved, including parents, carers, CYP, and other professionals. Using accessible language was seen as crucial not only for ensuring that the formulation is easily understood but also for making sense of the CYP's needs in a way that resonates with the whole team involved.

Moreover, participants discussed how using accessible language is vital for effective communication. This includes tailoring the language of the formulation depending on the audience (e.g., parents, teachers, or professionals) and ensuring that written information such as reports is comprehensible to those who may not have a psychological background. By doing so, EPs and TEPs are better able to communicate complex psychological concepts in a way that fosters collaboration and shared understanding.

In summary, this subtheme values the importance of co-production and accessible language in the formulation process. It highlights how EPs can support a collaborative approach by integrating diverse perspectives and using language that makes psychological concepts and assessments more accessible to all stakeholders.

Coproduction

Participants agreed that the formulation of a CYP's needs develops over time as more information is shared and explored at different points with different stakeholders within the assessment process. This further promotes the idea that formulation is a continuous and dynamic process embedded within the overall assessment as identified in Subtheme 1, constantly evolving based on the information gathered. One participant highlighted this by stating, *" based on paperwork that you get then obviously you have to keep an open mind, I mean formulations, your initial formulations, I think I would say with the Monsen model for example encourages you to make an initial hypothesis, doesn't it an initial things which you might have to do before you've met anyone or actually checked anything out"* (participant 5). This reflects the iterative nature of the formulation process, where initial hypotheses are continuously refined as new data is collected and analysed throughout the assessment period.

Participants concluded that EP formulation is a summary of the CYP's needs and profile, co-produced with the CYP, parents/carers, adults supporting the CYP, and professionals. The EP plays an active role in developing and drawing out appropriate information from stakeholders, emphasising that EPs are not the sole experts in the CYP's life and that information from stakeholders is crucial. As one participant noted, *" sometimes we have to almost kind of prod those a little bit and go, oh, I wonder and, you know, ask them for their evidence of where they've come from this, this position about the child themselves"* (participant 4). The same participant later clarified the importance of co-construction, stating, *"It needs to have that co-construction, that curiosity"*.

Participants also preferred providing information that stakeholders would appreciate when reading the formulation summary. This aligns with the idea that the formulation process should be collaborative and accessible*: "Because when I'm writing the formulation and when you try to make it in a way that you know people will appreciate it, that they'll relate to it. And that it's not like me throwing something on them"* (participant 5). The view that the EP should not impose their perspective as the 'expert' in that CYP life was expressed by another

participant: *"It's about the views of everyone else around me ... I suppose the reason I don't like formulation because it places me as an expert...So I may have my own theories about, you know, why this young man is doing what he's doing. But if it doesn't sit with people around them, then I don't think I should be imposing my view of it. Often I would suggest my hypothesis or my theory or the psychological explanation that I might have a view of, but it's at the end of it"* (participant 8).

Language

Participants explained that the language they use during formulation can significantly impact the participation and understanding of parents/carers, CYP and other professionals. The choice of language can either facilitate or hinder effective coproduction. Participants noted that they typically avoid using terms like "formulation" or "hypothesis" with stakeholders other than psychologists due to their scientific connotations. One participant shared: *'You might not sort of speak to a parent in that way in that language, but you might with a teacher or a counsellor, or again, that's your own formulation sitting there thinking, OK, what's going on?' (participant 4).* The reluctance to use the term "formulation" with non-psychologists was echoed by another participant who noted, *"I wouldn't use the word formulation with a child, a family, or even school staff. But I would with other psychologists"* (participant 3). This selective use of terminology is intended to maintain engagement and avoid the alienation of stakeholders unfamiliar with clinical language. Additionally, participants expressed discomfort with the clinical origins of the term "formulation." One participant mentioned, *"I don't like the term because it comes from clinical. It doesn't sit very well with the way I work"* (participant 8). These insights suggest a preference for language perceived as more collaborative and less authoritative.

One participant elaborated on the challenges of using sensitive and non-blaming language in formulations, especially when addressing complex family dynamics: *"It's hard to be sensitive in your words and thinking. A lot of children, young people, and families we work with have gone through some really tough things. To write that in a way that's sensitive and non-blaming is hard. For example, if you're thinking about a family or systemic formulation and the family had certain difficulties going on at the time, how do you write that formulation in a way that doesn't put the blame on the family?"* (participant 5). This highlights the delicate balance required to communicate effectively without alienating stakeholders.

Participants explained that they prefer to use non-medicalised language within their formulations and to avoid within-child language when sharing their thinking around the needs of CYP. One participant emphasised this approach by stating, *"I will use language that describes around it. But I wouldn't necessarily, you know, say, there's an autism trait here or any of that. So I would, I would slant a lot of the report towards what the school needs to support the young person rather than autism, so highlighting different parts if you like"* (participant 8). This reflects a deliberate shift from diagnostic labels to more descriptive, context-based language that focuses on practical support needs.

Overall, participants illustrate the participants' awareness of the implications of their language choices in facilitating or hindering effective coproduction and the importance of adapting their communication to be inclusive and sensitive to all stakeholders' needs.

Theme 2. Enhancing Formulation Through the PTMF

This theme synthesizes participants' perspectives on the benefits and additional dimensions the PTMF contributes to understanding the profile of CYP within the context of EP roles and formulation processes. Participants consistently highlighted how the PTMF's person-centred approach empowers EPs to better understand and support CYP by helping them make sense of their experiences and share their stories. This, in turn, shapes the EP's understanding of the CYP's needs and offers a deeper, more nuanced perspective on their situation.

The theme also captures how participants apply the PTMF in practice, with its core principles and values both implicitly and explicitly guiding their thinking and conversations throughout the assessment process. Participants emphasised that the PTMF encourages a holistic view of the CYP, prompting EPs to consider not only the child's individual experiences but also the broader context in which those experiences occur.

A unique and valuable aspect of the PTMF, according to participants, is its focus on power dynamics. This focus invites EPs to reflect on how power influences interactions, decision-making, and the formulation process itself, enhancing the EP's ability to work in a more reflective and empathetic manner.

In addition, the theme highlights how the PTMF supports collaboration by providing structure to the formulation process. Participants noted that it encourages systemic thinking,

helping EPs consider the interrelated factors that influence the CYP's development and well-being. This approach fosters a more inclusive, collaborative process between EPs, parents, carers, professionals, and CYP, leading to more robust and comprehensive assessments and interventions.

Overall, this theme shows how the PTMF not only provides a structured approach to formulation but also enhances the depth and quality of understanding, empowering EPs to create more collaborative, systemic, and person-centred assessments.

Subtheme 4. Psychological Intersections and the Application of the PTMF

This subtheme explores how the psychological theories already embedded in participants' practice as EPs align with and are reinforced by the psychological principles underlying the PTMF. Participants identified several areas of overlap, particularly the PTMF's person-centred approach, which they felt resonated strongly with their existing values and practices. They emphasised how the framework supports the incorporation of the CYP perspective, urging EPs to engage more deeply with the CYP's views and consider the meaning they make of their experiences.

Participants reflected on how this alignment with the PTMF encourages a more holistic and empathetic approach, enhancing their ability to understand and work with CYP in a way that is grounded in psychological theory. Several noted that the PTMF's emphasis on the CYP's voice not only strengthens their practice but also helps to ensure that the formulation is truly person-centred, facilitating better outcomes.

Additionally, this subtheme highlights participants' views on how the PTMF enhances coproduction and collaborative processes. Many participants reported that the PTMF fosters a more collaborative approach to assessment and formulation, enabling better communication and shared understanding among stakeholders, including CYP, parents/carers, and professionals. By encouraging active involvement from all parties, the PTMF is seen as a tool that promotes the co-creation of meaningful assessments and interventions.

In summary, this subtheme highlights how the PTMF builds upon and integrates with existing psychological frameworks in EP practice. It highlights the value of the framework in promoting a person-centred approach, enhancing understanding of the CYP's perspective, and facilitating co-production and collaborative formulation.

Person-Centred Practice and CYP

Participants' perspectives of EP formulation, particularly in participants' perceptions that EP formulation already embodies a person-centred approach. However, this subtheme synthesises participants' experiences and perspectives regarding the PTMF as a tool that empowers CYP to actively guide and prioritise the information explored during the process. Participant 2 shared, *"Without me being the one to name it and then to, let whatever comes from the person emerge. So there's a person-centeredness to it that I like."* This statement emphasises the importance of allowing individuals to shape their narratives and priorities within the formulation, thereby promoting a more inclusive and responsive approach. Participants agreed that implementing person-centred questions influenced by the PTMF, enhanced their practice in encouraging CYP to participate in decision-making and individual agency during the assessment, which shaped their formulation further.

This subtheme brings together participants' views on how the PTMF encouraged them to explore the CYP perspective further and highlights the importance of EPs understanding the sense that CYP are making from their experiences. In addition to gathering the CYP's views more generally, the PTMF encouraged the participants to support the CYP in articulating their perspectives regarding their experiences to understand what sense they are making of the situation. Participants felt that the PTMF had a strong person-centred element, emphasising that the CYP is central to the process. Participants shared that, in their experience, the PTMF supports the adults around the CYP in helping the CYP to make sense of and better understand their experiences. Several participants shared that this aspect of the PTMF often felt like an intervention. As one participant noted, *"A lot more I guess as well in terms of it's every question is an intervention type "*(participant 2).

Participants highlighted that the PTMF facilitated a shift in their practice by focusing on helping CYP understand their experiences beyond diagnoses and challenging behaviours. This approach enabled participants to gain insights into CYP's needs through their perspectives. One participant emphasised the importance of understanding the emotional world of the CYP, stating*, "What is it like to sit with all those feelings and what's going on in*

your world?" (participant 1). Another participant expressed hope that the PTMF would amplify the CYP's voice amidst complex adult interventions, noting, *"I'm hoping that we get a bit more of his voice because it's his narrative"* (participant 8). Participants highlighted the necessity of explaining situations to CYP who might struggle to comprehend, with one remarking, *"They [adults supporting the CYP] needed to understand that he [the CYP] couldn't understand what was happening" (participant 1).* Exploring a CYP's personal experiences and their meanings was seen as crucial, as articulated by another participant: *''So I asked a lot of questions about his experiences in in early key stage one- key stage two, he's experiences of his home life and what has it been like living with [diagnosis] and I was really interested in the meaning that he brought. So I was like, OK, so I've never met anyone having this [diagnosis]. What does that mean to you? How? How does it kind of impact you?* (participant 6). Participants also valued the PTMF for allowing CYP to narrate their histories and experiences comprehensively, stating, *"Positives [include] allowing the young person to tell their story about what's happened and really trying to understand"* (participant 6). These insights highlight how the PTMF encouraged EPs and TEPs in this study to adopt a more nuanced and curious approach to understanding CYP's experiences and needs.

Enhancing Collaboration

Participants expressed that the PTMF encourages EPs to engage in collaborative formulation processes, fostering shared understanding among stakeholders (parents/carers, CYP, and professionals) and gradually gathering information. They noted that the PTMF promotes a reciprocal process during formulation, involving the development of perspectives from parents/caregivers and professionals regarding the CYP's needs, supporting the child in understanding their experiences, and considering behaviours beyond surface-level observations. Participants indicated that EP formulation and the PTMF also emphasise a comprehensive and systemic exploration of needs beyond medical model labels. They also highlighted that the systemic thinking encouraged by the PTMF contributes to the EP's formulation of the needs of CYP.

Participants' experience with the PTMF highlighted the importance of creating opportunities for parents/carers and professionals to share their thoughts and delve deeper into their understanding of the CYP's needs. The PTMF facilitates a more detailed exploration of stakeholders' thoughts and encourages curiosity about the factors influencing

the CYP's presentation. One participant noted that the framework provided *"An opportunity to give some space, a permission to give some space to think a little bit more about what was going on which allowed for a more implicit consideration of issues and fostered curiosity about the situation"* (participant 4).

The PTMF also enabled participants to explore how professionals felt and reacted to the CYP's behaviours. This aspect of the framework was seen as opening up conversations and broadening the scope of inquiry*: "We thought about the threats to them and their sense of, you know, my response and my threat of having something that we didn't really understand or maybe felt a bit frightened of... So yeah, I think the positives were that it just opened things up, just those quite simple questions of widen it out a little bit"* (participant 4). Furthermore, the framework encouraged professionals to stop and think more deeply about the underlying issues affecting the CYP*: "So you know the work then was just about stopping and thinking and doing that well. What? What's happening? What else is going on? What are the things happening in the child's life to maybe unsettle her in this way and cause distress? So we were able to really dig down into some of that and then think about the impact on the family"* (participant 4).

Participants shared their thoughts regarding how the PTMF supports EPs in developing a shared understanding between parents/carers and other professionals regarding the CYP's needs and presentation. The subtheme captures participants' views on the impact of changing the narrative of the CYP's presentation using the PTMF, such as supporting adults to understand behaviours differently and to change their perspectives.

One participant highlighted the importance of consistency in communication among adults involved in the CYP's life: *"Through other people really, Other people that he had a relationship with him. There were a lot of adults in his life and again, I felt it important that they were all saying the same thing to him or a similar type of thing, so that was positive in that"* (participant 1). The same participant added to this sentiment, noting the value of unified messaging: *" I suppose it just had an impact on me recommending that we all say the same thing and use the script and... I felt like out of all this, I've felt that's been really useful"* (participant 1).

Participants felt the PTMF was powerful in enabling a shift in adults' thinking around the CYP's presenting behaviours. By using the PTMF, EPs were able to provide a different perspective on the CYP's needs, reducing stigma and encouraging adults to rethink their

views on the CYP. One participant shared an instance of this impact: *"I had some sense that maybe some of her comments were a little bit dismissive or reinforcing stigma regarding the young person... and there was a little bit of a maybe, I had some cognitive dissonance for her. And then she went oh, that's why we have somebody like you coming in and saying, because I would never. I would never think of this thing"* (participant 2).

The PTMF also facilitated shifts in thinking by allowing professionals to reflect on their perspectives. As one participant noted*, "I'm I suppose there was something for me of enabling some shift in someone's thinking'* (participant 4). This reflective process was further enhanced through consultative work, as the participant described: *"As I say, it's the work with and the consultation, so with my consultation work with the charity I work with, it's an unnamed child, so it's really interesting. It's just in that conversation... and often when they have a consultation with me, it's either a child that's in counselling with them or it's a child they're about to start work with, so they're doing their own formulation"* (participant 4).

Lastly, participants recognised that the PTMF aligns with their EP practice such as being trauma-informed, thinking systemically, holistically and working within a non-medical model. Participants in this study articulated perspectives on how the PTMF intersects with and complements existing practices within the role of EPs. Several participants emphasised that the PTMF resonates with their existing psychological approaches, such as personal construct psychology, trauma-informed practices, and Bronfenbrenner's Ecological Model. Participant 4 expressed this sentiment, stating, *"Why are we kind of trying to make it a separate step thing? This is stuff we're doing already, just under a different name."* Another participant further reflected on the framework's continuity with current practices, stating, *"I realised that it's kind of a different way to describe concepts that I might already think about"* (participant 3). This viewpoint shows the participants' perception that the PTMF formalises and clarifies approaches already embedded in their professional repertoire.

Moreover, Participant 6 described the PTMF as integrating seamlessly with existing frameworks and practices, stating, "*But I do feel that the way it is, it's another brilliant way of formulating. Kind of it would go very hand to hand with Bronfenbrenner's model, which is already holistic. Moving away from within child factors, so I guess in that sense it's not a, a far reach from that"* This highlights the complementary nature of the PTMF with established

holistic models, suggesting that it is another brilliant way for participants to add to their 'formulation processes.

However, participants noted that while the PTMF enriches formulation processes, it does not necessarily lead to distinct recommendations or alter the outcome of assessments in terms of available support options. Participant 2 reflected on this aspect: "*It was broadly the same stuff that I would have otherwise recommended.*" Participant 5 expanded on this, emphasising, "*Erm but I also feel that the recommendations that we that are available to me you know based upon, what EPs have done over the last, however many years based on what people are currently doing, it's how we learn, isn't it kind of like vygotsky-en like we researched evidence and if we are using different types of frameworks that will influence strategies that I have available to me.*"

In summary, while participants recognise the PTMF as a coherent extension of their existing psychological frameworks, they perceive its impact primarily in enriching their conceptualisation processes rather than fundamentally altering the practical outcomes or recommendations derived from their assessments. This perspective highlights the PTMF's role in enhancing the depth and clarity of participants' practice through synergies with established psychological theories and frameworks.

Subtheme 5. Comprehensive Formulation, the Importance of Power and Systemic Awareness Through the Application of the PTMF

This subtheme highlights the participants' experiences using the PTMF in complex case formulations. Participants consistently reported that the PTMF provided both structure and clarity when addressing intricate or multifaceted cases. They described how the guide questions embedded within the PTMF encouraged a more systematic approach to assessment and formulation.

The majority of participants expressed that the PTMF enhanced their confidence when working through complex needs, noting how it helped them maintain focus on key elements while considering the various interconnected factors in a case. In particular, participants felt that the PTMF facilitated their thinking by encouraging a holistic perspective, especially when working with parents, carers, professionals, and CYP.

Participants highlighted how the PTMF's structured approach made it easier to navigate the complexities of formulating assessments and designing interventions. They also emphasised the framework's ability to foster collaboration, with many noting that it provided a shared language or understanding that facilitated communication between multiple stakeholders. For some, the clarity it offered when addressing complex needs translated into a more confident and effective approach to clinical work.

Overall, this subtheme highlights the use of the PTMF as a tool that structures and guides practice, particularly in situations where cases are complex or require multiple perspectives. It reflects participants' perception of the PTMF as both a practical guide and a confidence-building tool in their work.

One described the framework's impact on formulation processes, stating, *"I guess the other way of applying it is in my writing, in my psychological summary and formulation and referring to those protective factors, so the power resources, So, when I first started writing the formulation, the first thing I was like bullet pointing right, let's talk about protective factors. What does that? What are that young person's power resources?"* (participant 6). This excerpt illustrates how the PTMF prompted the participant to consider protective factors and resources in their assessments, thereby enhancing clarity and structure in their documentation.

Another participant reflected on the PTMF's role as a tool for reflection and formulation, noting, *"Just the clarity that I had after I'd drawn up the framework, I was able to see clearly. Why the child was behaving the way was, how he was not able to make sense or make any meaning of what had happened to him or what was still happening to him. I like a framework as in prompts. So to help to remind, just think you know sometimes you might forget bits or you might as prompts for us to think about either during work with an individual child. Or, I'd like you say when you're kind of formulating yourself in your head, looking at everything that you got in front of you"* (participant 1). This illustrates how in this participant's experience the PTMF served as a cognitive aid, prompting the participant to consider multiple facets of a CYPs experience and context in their therapeutic practice and documentation. In summary, participants felt that the PTMFs supported them in enhancing structure, facilitating meaningful conversations, and guiding reflective practice.

The PTMF was thought to result in a comprehensive understanding of complex need. Participants in the study expressed nuanced views regarding the applicability and utility of

the PTMF. Several participants noted that while they did not perceive the PTMF as universally relevant to every CYP they work with, they found it particularly valuable in contexts involving complex cases. One participant shared *"We obviously think about the context of the environment, but the way that power split up into relational, ideological, you know, it really made me think because I first thought this isn't going to apply to any old child."* (participant 1).

Another participant reflected on the resource-intensive nature of using the PTMF, stating, "*I feel that because it's a big framework I feel that it's I can only have the time to justify and, and the justification to use it for more complex cases."* (participant 8). Participants agreed that the PTMF demands significant time and effort, which they felt justified only in cases requiring deeper exploration and understanding of more complex cases. Participants felt that while the PTMF enhances clarity and depth of understanding when applied, its practical implementation may necessitate careful consideration of when and how to use it effectively in educational and therapeutic settings. By focusing its use on complex cases.

Another key point was that the PTMF encourages the EP to think even more systemically and politically. Some participants shared their perspectives on how the PTMF encourages EPs to adopt a systemic and expansive approach to understanding the needs of CYP, including considerations of political marginalisation throughout the assessment, consultation, formulation, and reflective processes. One participant shared: *"Not doing what doesn't work, keep a note of what's working. But I just thought a bit more broadly about it. A bit more systemically because of the framework."* (participant 1). This statement reflects on the framework's role in prompting broader systemic thinking about interventions and strategies. Similarly, another participant highlighted the framework's influence on considering broader societal factors, stating, *"In the case of the power threat meaning framework. What often, I guess calls me to use that is thinking about a broader political marginalisation"* (participant 2). This observation emphasises how the PTMF prompted the participant to consider political and social contexts that may impact a CYP's experiences and behaviours. Participant 2 also discussed how the PTMF facilitated exploration of social influences, stating, "*in terms of developing with the, I think it facilitates my own exploration of the broader social influences that are going on and how I guess something phenomenological about that what's it is."*

The last key point that was considered relates to the idea that the PTMF enhanced the participant's confidence and skills in formulation and particularly made them consider the role of power. Several participants said applying the PTMF enhanced their confidence in formulating comprehensive assessments and interventions for CYP. They emphasised that using the PTMF grounded their formulations in evidence, thereby fostering a sense of thoroughness in understanding the needs of CYP and facilitating effective communication with other professionals involved in their care. One participant reflected on this impact, stating, *"So I suppose mostly for me, just to be honest, that I was able to feel that I'd done as good a job as I could and helping everyone understand them and themselves"* (participant 1). This highlights how the PTMF bolstered the participant's confidence in the completeness and clarity of their formulation.

Moreover, several participants discussed the unique perspective the PTMF offers on power dynamics within educational contexts, stating, *"The difference with the PTMF is the power I think"* (participant 3). This observation shows the framework's role in prompting EPs to consider power dynamics that may impact a CYP's experiences and behaviours within school settings. Some participants felt that the PTMF is embedded within their practice: *"The power threat meaning framework there has been around a little while now and it's sort of tied in with me developing my EP skills in some way."* (participant 4). Other participants discussed that the PTMF the confidence gained in justifying decisions and interventions, stating*, "Or feel very strong in my rationale for like if you go to tribunal or something, in this case study, there is a really strong to rationale to, for why supporting him to develop healthy, constructive peer relationships was really important."* (participant 2). The participants collectively highlight that in their experience the PTMF' is beneficial for their practices, enhancing their ability to formulate evidence-based assessments, consider nuanced factors like power dynamics, and communicate effectively within multidisciplinary teams to support the holistic needs of CYP in educational settings.

Subtheme 6. Interactions Between the EP role and applying PTMF

This subtheme synthesizes participants' perspectives on how the contextual factors inherent to the EP role can either support or obstruct the effective implementation of the PTMF. Participants identified several key barriers, primarily related to the limited time and capacity that EPs face in their professional practice. These constraints often impede the ability to fully engage with the PTMF during assessments with CYP.

A recurring theme across the data was that applying the PTMF in a comprehensive manner—especially when addressing complex and nuanced concepts like power dynamics—requires significant time investment and a shift away from habitual thinking patterns. Many participants emphasised that the process of fully integrating the framework into assessments demands not only time for reflection but also a deliberate change in approach, which can be difficult given the fast-paced nature of the EP role.

Participants also highlighted the importance of scaffolding to support stakeholders—such as parents, carers, professionals, and CYP—in understanding and engaging with the PTMF during the assessment process. Several noted that without adequate support structures in place, the framework could be overwhelming or inaccessible for those not already familiar with its concepts. This emphasises the need for EPs to consider how to break down the framework's complex ideas into more digestible components that can be effectively communicated and understood by all involved.

In summary, this subtheme emphasises that while the PTMF holds significant potential to improve practice, its successful implementation is highly dependent on the broader contextual factors within the EP role. The time, capacity, and support mechanisms available to EPs are crucial in determining how well the framework can be utilized to its full potential.

Moreover, participants highlighted systemic barriers within the educational environment that impede PTMF implementation. These barriers include insufficient capacity within EP roles to engage systemically and a prevailing preference among some educational professionals for diagnostic frameworks over holistic, narrative-driven approaches like the PTMF. The institutional focus on diagnosis within the education system was perceived as a significant challenge, limiting opportunities to promote alternative perspectives that prioritise understanding and meaning-making over diagnostic categorisation.

Participants recognised that EPs work in systems that can potentially facilitate or act as a barrier to applying the PTMF within their practice. Several participants within the study identified that the current operational context of EPs presents barriers to applying the PTMF. Many EPs emphasised that their role often involves completing one-off assessments and statutory obligations, which limit the opportunity to develop meaningful relationships with CYP before applying the PTMF. Participant 5 highlighted this challenge, stating, *" if you only get to meet a child or young person once, maybe twice. If you're lucky, that's the*

unfortunate climate that we're in like it's once or twice if it's an EHCNa, even if it's a traded or or whatever like, it doesn't seem like you get to meet people regularly and you know how, especially if you're using it in a joint co-constructed way as well it can be, it could be seen as quite invasive I think to go straight in with that"

Several participants also identified systemic factors within their roles that hinder the effective application of the PTMF. Participant 3 discussed the limited capacity for systemic work, stating, *"So having enough chance to do systemic work, maybe."* Additionally, pointing out the influence of the medical model in professional environments, stating, *"Then the prevalence of the medical model is definitely a barrier. So even if all of us EPs are trained to think systemically, which I think mostly we are, there might be a clinical or there might be a psychiatrist, proposing a medicalised view.* Several participants agreed that organisational priorities and the prevailing emphasis on diagnoses can constrain EPs' ability to adopt holistic, person-centred approaches like the PTMF.

In conclusion, while several of the participants recognise the value of the PTMF in fostering meaningful understanding and support for CYP, they face formidable challenges related to time constraints, systemic work capacity, and the dominant influence of diagnostic paradigms within their professional settings. Addressing these barriers requires strategic efforts to integrate person-centred approaches more effectively into Educational Psychology practice, thereby enhancing the quality and relevance of support provided to CYP in diverse educational contexts.

Participants recognised that several adaptions are required to make the PTMF fit within the EP role.

Several participants in this study expressed a need for further adaptation and research of the PTMF within educational contexts to enhance its relevance to the role of EPs. Some participants articulated concerns about the framework's complexity, stating, *"I think the main barrier is that it's a complex framework. It's not quite tailored to the EP role. I think it needs to be easier to use somehow"* (participant 8).

Moreover, participant 4 highlighted the challenge of integrating the PTMF into educational settings, stating, *"What are the powers of operating in education? Or are the patterns of distress or difficulty that we see in education and, and have them as an aside, to the patterns that?"* They further expanded on this, suggesting the integration of psychological perspectives, such as attachment theory and trauma-informed approaches: *" you can see*

where they're taking it slightly into the education realm, but I think we could really offer some different thinking around that and bringing it into some of the psychology of understanding attachment and the trauma informed stuff as well".

Another participant pointed out a specific gap in the PTMF concerning practical application and review processes within educational contexts*: "Whereas I think the power threat meaning framework has come from more of a clinical psychology where they may be used to doing therapy sessions for example with the person, and whereas sometimes we're able to see someone once or twice, but step that's missing from the power threat meaning framework is the explicit step. I think what I need just need something as an EP like, how is this going to be reviewed and in terms of the recommendations and strategies and in that sense"* (participant 5).

Additionally, participants identified challenges in adapting PTMF language and concepts to meet the needs of CYP typically encountered by EPs, such as those with SEND. Participants noted difficulties in applying the PTMF to primary-aged CYP or those with social, communication, and interaction difficulties, highlighting the need for accessibility and relevance in framework implementation within diverse educational settings. Several participants observed that some questions within the PTMF are inherently deep and open-ended, posing challenges for CYP to answer. One participant elaborated, *"Really important one as well was like some of the questions are quite deep, aren't they? This is before we done anything, how easy it was gonna be to sort of answer the questions quite open-ended, which is a positive thing. But then they need to be able to answer the question rather than saying I don't know what the meaning of that is. I felt that it was quite difficult for young people to answer because the questions were so open-ended"* (participant 5). This indicates that while open-ended questions can be beneficial, they can also be daunting for CYP, who may struggle to provide meaningful responses. For example, the participant noted, *"So for example, would you agree that this has been a power or threat in your life? I think that the questions they look simple but actually aren't. Answering them is very difficult"* (participant 5). This quote highlights the complexity and potential inaccessibility of the PTMF's language, suggesting a need for adjustments to facilitate better understanding and engagement from all stakeholders involved.

Several participants noted that the concept of power, in particular, is difficult to unpack and apply in practice with all stakeholders unfamiliar with this framework, such as

parents/carers and teaching staff. It necessitates time to comprehend its intricate ideas. One participant shared, *"Because I realised when I was talking, that the other adults weren't able to do that because obviously they hadn't sat like me and drawn out this power/threat because it was hard. I did find it hard to do"* (participant 1). This quote highlights in the participant's experience they felt that the stakeholders presented with some level of difficulty when trying to understand and utilise the PTMF without extensive preparation. Another participant highlighted the need for additional support to make the PTMF comprehensible to others*: " I think there's some work to be done to help others [parents/carers and teachers] really make sense of it"* (participant 4). This reflects the participant's views that there is a necessity for ongoing efforts to simplify and clarify the framework's language.

The last key point that is considered within this subtheme relates to the amount of time the PTMF takes to apply in practice, and this is seen as a barrier considering EPs are typically limited with their time. Several participants in this study highlighted challenges associated with applying the PTMF, particularly concerning its conceptual complexity and the cognitive demands it imposes. One participant reflected on these challenges, stating*, " just the cognitive load, I suppose that it took because it was required a lot more thinking than I normal work and drawing up the diagram and thinking about things that I don't normally think about, like power and words like relation, ideological, social capital, that yeah, that were fine when I was doing the doctorate"* (participant 1). Participants agree that there is a high cognitive effort required to navigate unfamiliar concepts within the PTMF, contrasting with more routine professional tasks. Moreover, participant 1 continued, highlighting time constraints as a significant barrier: "*So the effort, I suppose and the time, yeah, like sometimes in multidisciplinary meetings, you are very quickly, reading summaries of notes, summaries of reports and going in and just thinking on my feet or as this and that's time, that's just time and workload that kind of barrier."* This comment emphasises the practical challenges in integrating the PTMF into fast-paced professional environments, where rapid decision-making and workload management are crucial.

Additionally, participants discussed the need for extensive scaffolding to facilitate stakeholders' understanding of PTMF concepts. Participant 5 noted, *"So you need to sort of break them down a lot more, then what's on that A4 page to make it make sense basically"*. Another participant also shared the difficulty in ensuring stakeholder comprehension within the constraints of EP work, stating, *"I think the difficulty is getting people around the young person to understand what it is and because of the way EPs work is we don't always often*

have the time to do that" (participant 8). This reflection highlights the practical barriers to achieving comprehensive stakeholder engagement and understanding within the limited timeframes typical of EP engagements.

In summary, participants' experiences show the cognitive, temporal, and communicative challenges associated with applying the PTMF in their practice. These challenges necessitate strategies for simplifying concepts.

Discussion

This research study aimed to understand how EPs and TEPs view and utilise formulation in their practice. Additionally, it sought to explore EPs' and TEPs' perspectives and experiences with applying the PTMF to their formulations and to determine how the PTMF can be optimally integrated into the EP role in the future. Despite the significant interest in the PTMF since its publication in 2018, literature on its application within EP practice is scarce, particularly concerning its application to EP formulation. However, interest in its application within education and Educational Psychology is growing (Bodfield & Culshaw, 2024). The findings of the current research study contribute to the body of knowledge established by Milligan's (2022) Educational Psychology doctoral thesis, which broadly explored EPs' views and experiences with the PTMF and recommended further research on formulation.

This study employed a social constructivist approach, recognising that participants perceive formulation, the EP's role, and the PTMF's application differently based on their societal position and professional experience (Mertens, 2015). The aim was to capture these diverse perspectives through semi-structured interviews, which allowed the researcher's knowledge and interactions to shape the interview (Creswell, 2013; Denzin & Lincoln, 2011; Mertens, 2015; Schwandt, 2003). This methodology aligns with the PTMF's flexible and interpretative nature, valuing personal experiences and interactions (Johnstone et al., 2018). Data was analysed using RTA (Braun & Clarke, 2022), emphasising the researcher's active role in interpreting the findings, a noted strength of this approach (Braun & Clarke, 2021). The reflective chapter will further elaborate on this process.

The research questions were developed based on identified gaps in the literature and the researcher's understanding. To the best of the researchers' knowledge, no prior studies

have explored EPs' and TEPs' views and experiences of applying the PTMF in EP formulation. The following research questions will be addressed:

RQ1) What are EPs/TEPs' views and experience of formulation within the EP role?

RQ2) What are EP's/TEPs' views and experience of using the PTMF within EP formulation and practice?

The discussion will interpret the findings by integrating relevant theories and previous literature. Given the inductive nature of this research, additional literature not initially considered in the literature review may also be referenced. The themes and subthemes will be condensed and discussed in relation to previous research, theoretical perspectives, and implications for EP practice. The discussion will also explore potential opportunities for enhancing EP practice, study limitations, and future research recommendations.

Findings and themes

The RTA identified three overarching themes that encapsulate EPs' and TEPs' perspectives on EP formulation, the factors influencing their formulation approach, and the application of the PTMF in this context. Table 4 outlines each theme in relation to the research questions. The discussion will integrate these findings with the main arguments and trends in the existing literature.

Table 4

Mapping the Overarching Themes onto the Research Questions

	Research Questions	
Themes	RQ1	RQ2
Theme 1. Navigating formulation: Context, frameworks and collaboration.	X	
Theme 2. Enhancing EP formulation through the PTMF		X

RQ1) What are EPs/TEPs' views and experience of formulation within the EP role?

Theme 1. Navigating formulation: Context, frameworks and collaboration

The study found that participants viewed formulation as an integral part of the EP role embedded within the assessment process and reported it to not be a distinct action. This led to the development of the first overarching theme, "Formulation is Embedded in EP Assessment." Literature supports this view, highlighting the complexity and multi-faceted nature of EP formulation, which is typically embedded within the overall assessment process (Atkinson et al., 2022; Kelly et al., 2017). Participants described formulation as a process of identifying strengths and weaknesses in the CYP profile and understanding the reasons behind their behaviour (Atkinson et al., 2022). In essence, participants felt that EP formulation involves gathering a holistic understanding of the CYP's needs. Participants identified several key factors in EP formulation including the CYP's developmental history, life experiences, current interactions with wider systems, family background, medical history, and overall context. These key components align with the definition of formulation used in this study and align with the principles of the PTMF for understanding emotional distress (Johnstone et al., 2018a). Additionally, participants noted that EP formulation is underpinned by psychological theory and evidence-based practice, involving hypothesis testing and unbiased thinking. Formulation begins when information about the CYP is shared, guiding the assessment approach. This perspective is echoed in BPS guidance, which states that EP assessment practices should be informed by theory, evidence, and an understanding of the practice context, with formulation based on integrating knowledge acquired during the assessment process (BPS, 2021). Furthermore, participants felt that the assessment framework employed by the EP or TEP was reported to significantly influence the formulation outcome.

The EP role is crucial in identifying CYP needs (Roth et al., 2008). Several participants in this study noted the diversity in practices in understanding CYP needs through formulation and assessment. The study illustrates that this diversity reflects the complex and nuanced perceptions of EP formulation. Participants suggested various reasons for this variability, including differing views among EPs regarding their role and relationship with how they engage with formulation. These conclusions from the participants in this study are also found within the literature. Assessment practices are considered as the primary role for

EPs within the literature, expectations from other professionals and also noted within key legislation such as the SEND COP (2015). Research in the past has highlighted that although assessments form a key part of the EP role with a strong core repertoire of assessment tools, practices amongst EPs have shown a high homogenous across the profession. Further research found that the diversity reflects on meeting criteria imposed by the LA they work within, access to standardised resources within their LA, professional judgment, epistemological and ethical considerations when conceptualising their roles within assessment and reference to knowledge within a specific area (Hassard, 2022; Woods & Farrell, 2006). This literature links to the participants in this study, participants felt that the context of their training, experiences and LA priorities influenced their approach to formulation and assessment.

It is noted that there is limited official guidance on how EPs should conduct assessments and formulate their approaches, which contributes to the variability in practice. Additionally, EP assessments are acknowledged in the literature as complex and multifaceted, involving a diverse range of assessment activities (Atkinson et al., 2022). While there is no explicit official guidance for EPs on formulation, they operate as autonomous, evidence-based, applied psychologists, choosing the most effective methods (HCPC, 2023). However, the implications for practice extend beyond methodology to how EPs perceive their role and engage with formulation terminology. Most of the participants in this study felt that the term 'formulation' is perceived as clinical and aligned with an expert role, consistent with legislation positioning EPs as experts in their field (SEND COP, 2015). EPs are highly regarded by parents/carers and professionals alike (Boyle & MacKay, 2007; Ireland, 2008; Lee & Woods, 2017). However, there appears to be a discrepancy between how EPs view their role and position in formulation and assessment compared to external perceptions. This disconnect was also noted in previous research on EPs' self-perceptions (Ashton & Roberts, 2006), possibly contributing to their hesitancy in sharing their formulation insights to avoid being overly labelled as experts.

Moreover, these implications encompass issues of social justice and equality. For instance, variations in formulation approaches may lead to differing interpretations of CYP needs. Depending on an EP's orientation, their formulation could significantly influence recommendations and access to services or resources. The complexity of assessment practices has been extensively discussed in the literature (Atkinson et al., 2022), where some EPs may employ diagnostic medical language while others do not.

Despite the variability in practice, EPs are trained as evidence-based practitioners focused on meeting CYP needs and guided by established frameworks. The findings of this study emphasised a consensus among the EPs and TEPs who contributed regarding the use of diverse frameworks to approach formulation, aligning with existing literature (Sedgwick, 2019).

Some of the participant's views in this study regarding EPs' use of frameworks for practice align with existing literature. EPs are actively engaged and trained using frameworks that underpin their assessment approaches (Annan et al., 2013; DECP, 1999; Engerström, 1987; Frederickson & Cline, 2002; Gameson et al., 2003; Monsen et al., 1998; Woolfson et al., 2003). Training courses also incorporate various frameworks into their programs, influencing how TEPs are prepared for the EP role in assessment. Literature examining these frameworks suggests they promote shared understanding and scientific rigour among EPs (Sedgwick, 2019).

Participants noted that other factors influencing formulation in their EP role include the doctoral training course they completed and the values underpinning that course. For instance, courses emphasising social justice and person-centred practice tend to encourage coproduced formulations and dynamic assessments. Additionally, participants observed that their experience and service delivery model shape their approach to formulation and assessment. For example, a preference for consultation or solution-oriented models may lead to different approaches than those using traditional psychometric measures and standardised testing.

The study indicates that several participants in this study frequently adopt language aligned with the social model of disability, occasionally incorporating elements of the biopsychosocial model. Some participants expressed that when communicating with parents/carers, they employ simpler language that summarises the understanding of the CYP's primary areas of need at the time of assessment, moving away from a diagnosis-oriented approach. This approach is supported by guidance emphasising that a diagnosis is unnecessary to access support services and that a needs analysis is more beneficial (SEND COP, 2015). However, current practices in the UK appear insufficient in ensuring that CYP receive educational support, as many parents/carers report rejections from EHCPs or other special educational services due to inadequate evidence or lack of a formal diagnosis (Downs & Smith, 2022). This issue is likely exacerbated by high service demand (Smith, 2023).

Several participants in this study recognise that EP formulation is a co-production process. The findings highlight the importance of co-creating EP formulations to ensure that CYP and their families feel heard and understood. This collaborative approach is reflected in the participants' reports, which are tailored for parents/carers, CYP, and professionals alike. Some participants expressed that formulation involves jointly making sense of situations, and it is the role of the EP to ensure that their formulation captures this collaborative effort. The study highlights that the EPs and TEPs in this study do not position themselves as sole 'experts' in the process. Instead, they emphasise that parents/carers, professionals, and CYP are the experts in their own lives, often holding the solutions to their challenges. This perspective aligns with various practice frameworks EPs draw upon, such as consultation models and solution-focused approaches (Gameson et al., 2003; Kelly etl., 2017; Sedgwick, 2019).

In cases where CYP cannot fully articulate information about themselves, several participants shared that they often rely on adults who know them best. While EPs can work with CYP up to the age of 25, they primarily engage with those under 16 due to the majority of referrals originating from school settings. Given the diverse needs of CYP, which affect their comprehension levels, EPs frequently adopt an approach that involves gathering information from multiple sources and stakeholders. This emphasis on co-production is crucial for triangulating and exploring gathered information to develop EP formulations (Annan et al., 2013). The study's findings align with the expected practices of EPs, further supported by SEND legislation, which emphasises co-production as integral to their work (SEND COP, 2015).

The findings of this study demonstrate that coproduced formulations can facilitate two-way interactions, benefiting the understanding and support of parents/carers, CYP, and other professionals. It is noted that these benefits align with those observed in the PTMF approach, which enhances coproduced formulations. Furthermore, participants in this study felt that EP formulation enhances stakeholders' understanding of CYP, achieved through careful consideration during consultations and the language used in reports. Moreover, this study highlights the integration of EP formulation into the assessment process, highlighting its evolution as additional stakeholder information about the CYP is gathered. This iterative process involves exploring and refining evidence and hypotheses throughout the assessment phase.

RQ2) What Are EP's/TEPs' Views and Experience of Using the PTMF Within EP Formulation and Practice?

Theme 2. Enhancing EP Formulation through the PTMF

The participants in this study felt that the PTMF enhances and promotes co-produced formulations with the CYP, parents/carers, and adults around the CYP. This is in line with previous findings suggesting that formulation should be co-produced to avoid further feelings of disempowerment (Lewis-Morton et al., 2017; Leverington, 2023) and ideas suggesting that PTMF can be used during formulation to develop people's thinking and understanding of a person (Collins et al., 2022b). In Educational pPsychology, coproduction empowers parents/carers, CYP, and supporting adults to feel heard and understood, and it encourages meaningful and effective engagement (Burton et al., 2010; Harding & Atkinson, 2009). EPs are often able to bring everyone together and empower CYP to share their views (Burton et al., 2010), promoting the importance of CYP having agency over their own lives (Mameli et al., 2019). Therefore, the PTMF enhances this by encouraging EPs to take the time to explore the CYP narrative, understand their perspective, and share their story.

The findings in this study show that participants felt that the PTMF fosters a shared understanding among adults regarding the needs of CYP by offering a fresh perspective on the experiences that have shaped their current situations and requirements. This concept was also supported by Leverington's doctoral thesis (2023), which found that professionals often experience a moment of realisation where their perception of the individual's issues changes after using the PTMF to guide their thinking. Similarly, several participants in this study described an instance where a support worker was visibly processing and contemplating how the EPs used questions from the PTMF to explore different experiences.

In the literature, EPs are recognised for their ability to develop a comprehensive understanding of CYP based on their psychological knowledge (Farrell et al., 2006). Some participants in this study suggest that incorporating the PTMF into the EP's formulation process enhances and encourages them to think holistically and systematically about the needs of CYP, taking input from various stakeholders into account. This is achieved by allowing the EP to thoroughly analyse the presentation of CYP from a different perspective and maintain a sense of curiosity throughout the process.

Many participants in the study believed that the PTMF improves opportunities to help adults working with CYP and understand their behaviour from a different perspective. This challenges potentially stigmatising views and encourages understanding behaviour as a form of communication. Some participants also noted that the PTMF allows for a deeper understanding and exploration of life experiences and ultimately provides more compassionate care for CYP. The participant's views in this study also resonate with related literature discussing using the PTMF in understanding professionals' experiences with individuals with learning disabilities (Levington, 2023). Levington's research indicates that employing the core questions of PTMF can indirectly influence others' perspectives on individuals, potentially fostering empathetic and compassionate care within support networks (Levington, 2023). Although the study primarily focuses on adults with learning difficulties and involves participants from clinical psychology backgrounds in NHS services, it offers insights into how professionals supporting specific populations can adopt PTMF to reshape their practices and perspectives, which is relevant to the current study. Leverington's (2023) findings are further supported by previous claims within the research that the PTMF offers a compassionate and empowering perspective to understanding service users' needs (Bostock & Armstrong, 2019; Travers, 2022).

In the current research study, several participants discussed how working with colleagues to develop a deep understanding of the needs of CYP through consultation had a positive impact. They emphasised the importance of team formulation in unpacking their thinking and formulations. This is also supported by existing literature highlighting the powerful impact of team formulations (Berry et al., 2017). Participants suggested having more opportunities to engage in team formulation as part of the EP role would be beneficial. Several participants in the study noted that EPs often work alone and may not have frequent chances to engage in team formulations. Organising meetings with a variety of professionals at the same time can also be challenging.

The findings from this study demonstrate that applying the PTMF within formulation serves a dual purpose: supporting adults in understanding the CYP narrative and facilitating the CYP's comprehension of their own experiences. Participants emphasised that the PTMF aligns with and promotes a person-centred approach to formulation and assessment. This is in line with the government's guidance for EPs. In statutory assessments, EPs must incorporate CYP perspectives and maintain a person-centred focus (SEND COP, 2015). Person-centred planning was introduced to the broader educational context by 2010 and became a statutory

requirement in England for assessing pupils' educational needs (Children and Families Act, 2014; DfE & DoH, 2015). Person-centred practices (PCP) stipulate that EPs should provide opportunities for CYP involvement in decisions affecting them as part of statutory educational legislation (SEND COP, 2015). While PCP appears to be an effective method for engaging CYP and their families, research within education is currently limited and methodologically weak (Gray & Woods, 2022). Humanistic principles underpin PCP approaches and aim to enhance quality of life. This study's findings support this notion, as participants reported that the PTMF prioritises the CYP's perspective and their interpretation of experiences, ensuring their input in co-produced formulations.

Participants in this study also suggest that the PTMF provides a structured approach to formulation and assessment for EPs. As participants previously discussed, EP formulation is a complex and multifaceted process, drawing upon various frameworks and psychological theories. This complexity is reflected in the current study's findings, with some participants reporting that formulation can be confusing and varies not only between EPs in terms of their approach but also for individual EPs depending on the specific case and the CYP they are working with. Applying the PTMF appears to mitigate this variability by providing a structured framework. Participants indicated that the PTMF is particularly beneficial in more complex cases, offering a systematic starting point for assessment. This structured approach may enhance consistency in formulation practices while allowing flexibility in diverse cases. The PTMF's potential to provide structure in formulation aligns with calls in the field for more standardised approaches to psychological formulation (Atkinson et al., 2023). However, further research is needed to determine how much the PTMF can balance the need for structure with the flexibility required in EP practice.

The participants in this study felt that the PTMF's 'power' dimension emerged as a distinctive feature compared to other frameworks utilised by EPs. Although some participants did not extensively elaborate on this aspect, the findings suggest that applying the PTMF can potentially empower EPs to address the impact of power dynamics and confidently articulate their thinking to parents/carers and professionals, citing its psychological foundation. However, this claim has been contested in previous literature, with some arguing that the PTMF lacks a robust evidence base (Salkovskis, 2019).

Interestingly, while EPs generally eschew positioning themselves as experts in others' lives during general formulation, they reported increased confidence when presenting PTMF-

based formulations to wider professional audiences. This shift aligns with recent literature highlighting the need for alternative, non-diagnostic approaches to describing needs (Randall & Coles, 2018; Weedon, 2017). A recent doctoral thesis corroborates this, suggesting that the PTMF provides an evidence-based justification for integrating non-diagnostic and trauma-informed approaches into clinical practice (Travers, 2022). The current study's findings support this perspective, indicating that some participants reported feeling more confident in their formulations and assessment approaches when using the PTMF to describe needs rather than labels, particularly when collaborating with other professionals. This suggests that the PTMF may offer a valuable framework for EPs to bridge the gap between traditional diagnostic approaches and more holistic, context-sensitive formulations.

As noted above in theme 2, several participants highlight that applying the PTMF in EP formulation enhances coproduction with children and CYP, parents/carers, and professionals, ensuring a more comprehensive understanding and communication of the CYP's narrative. The PTMF's contribution to assessment processes is evident in a shift from standardised testing measures and deficit-oriented language towards more dynamic assessment approaches that explore beyond labels and provide opportunities for in-depth exploration with the CYP's support network. This approach aligns with the notion that assessment and formulation are inherently intertwined processes. While participants reported that the PTMF led to alterations in their assessment methodology, most did not observe significant changes in their final recommendations. Notably, the two participants who applied the PTMF explicitly and directly with CYP and adults reported more coproduced recommendations and a direct influence on their interventions. The study suggests that implicit application of the PTMF may not yield substantially different recommendations compared to traditional EP practices. This finding may be attributed to the alignment of the PTMF with existing EP values and practices, as participants reported that they had already incorporated many of the framework's underlying concepts in their work. This observation is consistent with Milligan's (2022) findings, which indicate that EPs working on individual cases may have limited capacity to recommend systemic interventions. These findings emphasise the need for further research into the explicit application of the PTMF in EP practice and its potential to influence both the formulation and intervention planning process and outcomes.

Several participants in this study reported that implementing the PTMF in EP practice is significantly influenced by contextual factors such as time constraints and the nature of EP

casework. EPs often conduct one-off assessments, which limits the depth and continuity of PTMF application. The study findings suggest that the PTMF's comprehensive approach requires more time than is typically available in current EP practice, raising ethical considerations about its implementation. The PTMF's applicability appears to vary depending on the complexity of cases, with participants indicating its greater utility in complex trauma or emotional well-being cases compared to work with younger CYP or those with communication difficulties. However, recent literature suggests an evolving EP role, with increased involvement in ongoing therapeutic work (Atkinson et al., 2022; Rees, 2024), which may facilitate more comprehensive PTMF application. The PTMF's systemic application, particularly in working with adults and systems surrounding the CYP, offers the potential for significant impact (Bodfield & Culshaw, 2024). This aligns with Milligan's (2022) suggestion that the PTMF could facilitate broader changes within Educational Psychology. The current study supports this notion, highlighting the PTMF's effectiveness in shifting adult perspectives, providing an alternative understanding of CYP needs, reducing stigma, and encouraging shared narratives. These findings highlight the need for further research into adapting the PTMF for varied EP contexts and exploring its potential for systemic change in educational settings.

The time-consuming nature of the PTMF, noted in previous literature (Reis et al., 2019), was confirmed by several participants in this study. Participants in this study reported that the factors contributing to this include the need to scaffold the concept for stakeholders, develop relationships with CYP and apply the framework over an extended period. Only two participants reported explicit application of the PTMF within their assessment process, with one implementing it over multiple sessions. The majority described implicit application to inform their thinking during one-off assessments, mirroring their approach to general EP formulation and use of other frameworks. Some participants expressed concerns about the PTMF's applicability with CYP, particularly regarding their ability to grasp the concept, their awareness of their experiences, and the challenges of working with CYP with special educational needs or communication difficulties. The limited capacity and time available to EPs were also cited as barriers to effective and safe PTMF implementation. These findings highlight the need for further research into adapting the PTMF for varied EP contexts and exploring strategies to overcome time and capacity constraints while maintaining the framework's integrity and effectiveness.

Lastly, the PTMF advocates for language that avoids psychiatric labels, preferring terms like 'emotional distress' over categorisations of 'mad, bad, or sad' (Johnstone & Boyle, 2018; Macleod, 2006). This aligns with the study's findings that participants reported typically using person-centred language and exploring needs beyond labels. While the PTMF promotes a shift from medicalised labels and focuses on protective factors, its trauma-informed language (e.g., 'threat', 'protective') may contribute to its slow uptake in EP practice. Participants noted that EPs do not always work with CYP who have obvious trauma or power-related experiences; these factors are often more subtle or 'ideological' in EP casework. Consequently, participants suggested that the PTMF might be more applicable when working with CYP with explicit trauma experiences or complex profiles, including medical needs. This tension between the PTMF's language and typical EP practice highlights the need for further research on adapting the framework to suit the diverse contexts encountered in educational psychology.

Implications for EP practice

The study emphasises the need for EPs to view themselves as experts when working with CYP and to draw upon the adults around them to understand these needs. This is crucial for their approach to formulation and engaging with it. Given that others value EPs' opinions and influence subsequent support for CYP, it is essential for EPs to prioritise their engagement with formulation. EPs value social justice and equality, yet the variability in EP formulations and lack of guidance can lead to inconsistent explanations of CYP needs. Frameworks are valued by EPs and frequently referenced in the literature. The PTMF offers an updated, trauma-informed, evidence-based framework that integrates various psychological theories while maintaining flexibility.

Participants applied the PTMF in various contexts, including work with professionals, CYP, parents/carers, and school staff, as well as during consultations and supervision. This study, however, offered limited insight into PTMF applications beyond direct interactions with CYP and immediate stakeholders. As the literature suggests, PTMF can be utilised in diverse educational settings (Bodfield & Culshaw, 2024). The study's constraints, such as instructing participants to apply PTMF specifically to their casework and the limited engagement time due to their full-time roles, likely influenced the breadth of PTMF application observed. Despite efforts to explore how EPs could integrate PTMF into broader

practice, the responses were limited, particularly regarding systemic application. This may be attributed to a general lack of awareness and exposure to PTMF within educational literature among EPs. The literature indicates that the education system perpetuates power imbalances, significantly affecting CYP's mental health, well-being, and attendance. The study's findings suggest that PTMF could be a valuable tool in addressing these power dynamics, which are evident in school behavioural systems, measures of success (such as OFSTED evaluations, attendance, and exam results), and high levels of EBSNA. EPs have contributed to developing an online intervention grounded in the PTMF, demonstrating additional ways EPs can utilise the framework. This highlights the potential for PTMF to inform and enhance EP practice in various educational and systemic contexts.

EPs likely operate within systems that limit the use and application of the PTMF. However, similar to how they influence behavioural policies, EPs can support schools in developing mental health curricula that help CYP view emotional distress and well-being differently. The study indicates that the PTMF can empower EPs, increasing their confidence and comfort in using it during conversations and formulations with other professionals. A key takeaway from participants is that EPs must be courageous in adopting an expert role and advocating for a shift in how CYP needs are viewed, particularly by addressing concepts such as power within schools and broader systems. The EPs in this study felt that the PTMF aligns with their existing practices and values, and does not significantly alter their formulations. However, they noted that PTMF complements other psychological theories, such as trauma-informed approaches, person-centred practice, and Bronfenbrenner's Ecological Systems Theory (1978).

A significant barrier highlighted in the literature is that parents/carers and CYP often seek a diagnosis to feel supported and heard by the system. A recent study found that framing difficulties as 'normal responses' to circumstances can make individuals feel that their distress is not adequately acknowledged (Varney, 2021). For EPs to work in a person-centred way, they need to use the PTMF flexibly to support CYP and their parents/carers effectively (Travers, 2022). Additionally, the PTMF can complement a diagnosis, acknowledging its role in the CYP's story (Milligan, 2022).

Lastly, the study suggests several practical applications for PTMF, including using it in supervision with EP colleagues, supporting educational staff, providing training, engaging in research, and incorporating it into intervention work. Additionally, PTMF can inform

systemic policies on EBSNA, behavioural policies, and mental health curricula, among other issues.

Study Limitations

This study employed a clear and rigorous methodology to examine the perspectives and experiences of EPs and TEPs. A social constructivist approach was consistently used throughout the study. Therefore, this research reflects the researcher's subjective interpretation of a specific group of professionals' experiences based on their unique accounts and perspectives at a particular point in time. The study did not aim to measure or assess the PTMF application objectively. Instead, it sought to provide a reliable interpretation of its potential applicability by engaging in the research process rigorously and transparently. This approach was supported by adhering to various guidelines for high-quality qualitative research (Braun & Clarke, 2021; Elliott et al., 1999).

The study only included one TEP, and all of the EPs completed training at a doctoral level. Therefore, the sample may not be representative of EPs without doctoral-level training. However, the study's epistemological position did not aim to achieve generalisability in the positivist sense. Instead, it sought to provide analytic generalisability by offering novel conceptual insights and interpreting them in the context of relevant literature. It would have been beneficial to include EPs and TEPs from different training backgrounds to explore the influence of doctoral training on EP formulation and application of the PTMF. Nonetheless, participants compared their experiences with colleagues who did not have the same training. Future research could compare EP formulation based on doctoral versus master's level training and between TEPs and EPs.

In addition, this study included participants who were already familiar with the PTMF, had a self-directed interest, and were aware of the PTMF. This might indicate that their views are potentially biased toward a more positive perception and use of the PTMF. It is possible that participants felt the PTMF was consistent with their values and practices and were, therefore, already inclined to apply it. However, the interview questions encouraged participants to consider its application to CYP and the challenges of using the PTMF within their role, allowing for a more nuanced discussion.

Contributions to Educational Psychology and Future Research Recommendations

The findings from this study provide clear contributions to Educational Psychology practice and future research opportunities:

1. It explicitly explores the application of the PTMF in Educational Psychology formulation and practice, which was identified as a gap in the existing literature.

2. It provides insights into how EPs and TEPs view and experience formulation within their role and how the PTMF can enhance this process.

3. The study highlights that the use of the PTMF can:
   - Enhance co-produced formulations with CYP, parents/carers, and professionals.
   - Promotes a more holistic and systematic approach to understanding CYP needs.
   - Offer a fresh perspective on experiences shaping CYP's current situations.
   - Challenge potentially stigmatising views and encourage understanding behaviour as communication.
   - Provide a structured approach to formulation and assessment, particularly beneficial in complex cases.

4. It identifies how the PTMF's focus on power dynamics distinguishes it from other frameworks used by EPs, potentially empowering EPs to address power imbalances more confidently in their practice.

5. The research reveals that while some EPs find value in the PTMF, its implementation is challenged due to time constraints and the nature of EP casework, suggesting a need for adaptation to EP contexts.

6. It provides insights into how the PTMF could be integrated into broader EP practice, including supervision, staff support, training, research, and intervention work.

7. The study suggests that the PTMF could be a valuable tool in addressing systemic issues in education, such as power dynamics in school behavioural systems and emotional-based school non-attendance.

Overall, this research offers a nuanced exploration of how the PTMF can be applied in Educational Psychology, its potential benefits, and its implementation challenges, providing a foundation for further research and practice development in this area.

Future research could consider exploring the following:

- CYP views of the PTMF concepts and their understanding of the framework when exploring their emotional well-being
- Parents/carers' and educational professionals' perspectives of the PTMF and their perceived impact of the framework on understanding the CYP
- Educational professionals' views on EPs' formulations
- EPs' use of team formulation

Conclusion

The research aimed to understand how EPs and TEPs view and use formulation, particularly in applying the PTMF to their practice. It contributes to the limited literature on EP formulation and the application of PTMF in this context. The study confirms that EP formulation is complex and integral to the assessment process, involving various psychological frameworks. EPs value accessible language and communication, with coproduction crucial in their formulation approach.

Coproduction enhances EP formulation and supports CYP and the adults around them in understanding needs differently, functioning as both a tool and an intervention. The PTMF aligns well with EP values and practices, integrating familiar psychological theories. Moving forward, promoting the PTMF within the EP role is essential.

The study concludes that further exploration of PTMF application in education is needed to refine its use with CYP. Introducing parents/carers and educational colleagues to the PTMF could shift societal perspectives on mental health diagnoses for CYP facing significant power dynamics. Challenges include working with CYP with additional needs and the PTMF's complexity and time demands, which EPs may struggle to meet with their current capacity.

Chapter Three: Reflexivity

Introduction to Reflective Practice

  Reflective practice, defined as the process of learning through experience to gain new insights into self and practice (Boud et al., 1985), is a mandatory skill for EPs (Health and Care Professions Council [HCPC], 2023). This research emphasises reflexivity to adhere to ethical principles in human research (British Psychological Society [BPS], 2021), particularly focusing on competence and integrity. The study analysed data using RTA, acknowledging the researcher's integral role in data analysis and interpretation (Braun & Clarke, 2022). Therefore, reflective practice has been critical throughout this research study.

  This chapter critically examines my positionality, exploring how personal thoughts, feelings, and experiences influenced the research approach. It also reflects on my learning and development throughout the study and outlines plans for disseminating the findings.

Critical Reflexivity

  Positionality

  The researcher's identity and position can significantly influence all aspects of the research, including the research question, study design, data collection, and data analysis (Wilson et al., 2022). Positionality and reflexivity are important concepts to consider when planning and conducting research (Huberman & Miles, 2002; Savin-Baden & Major, 2013). It's crucial for the researcher to be aware of their position within the research and to be able to identify and communicate their assumptions regarding the research topic, design, context, and processes. Moreover, researchers should be able to engage in reflexivity to question their assumptions and address any potential issues that may arise (Wilson et al., 2022).

Positionality refers to the position that a researcher has chosen to adopt within a given research study (Savin-Baden & Major, 2013). It requires the researcher to consciously examine their own identity. This allows the reader to assess the impact of the researcher's characteristics and perspectives on the study population, the topic under study, and the research process. To maintain the quality and validity of the research, I aimed to remain reflective throughout the process. This involves being aware of my position and how my position may have influenced various stages of the research in particular my perspective throughout and decision making (Hamdan, 2009). Reflexivity is an ongoing examination of how the researcher's identity could impact research design, methods, analysis, as well as ontology and epistemology (Basit, 2013). This is important for addressing ethical issues and issues related to knowledge creation (Berger, 2013).

I utilised the Social Graces Framework (Burnham, 2012), also known as 'social GGRRAAACCEEESSS'. This term is an acronym representing Gender, Geography, Race, Religion, Age, Ability, Appearance, Culture, Class, Education, Employment, Ethnicity, Spirituality, Sexuality, and Sexual orientation. It encompasses aspects of personal and social identity that grant individuals varying degrees of power and privilege (Partridge, 2019). I employed this framework to identify factors within my identity that are crucial to understanding my approach to the research study and my position (refer to Figure 2).

Figure 5

The Social Graces Framework (Burnham, 2012)

Some of the key considerations that I explored before starting the study regarding the researcher can be found in Table 5.

Table 5

Researcher's Social Graces

Social Graces	How the researcher identifies with the social graces
Gender	Female
Age	29
Ability	Non-Disabled but has reading and writing needs (known as Dyslexia)
Sexuality	Straight/Heterosexual
Education	Training to be a Child and Educational Psychologist at Doctorate level
Employment	Employed on placement in a private psychology service
Class	Working class
Race	White
Ethnicity	British
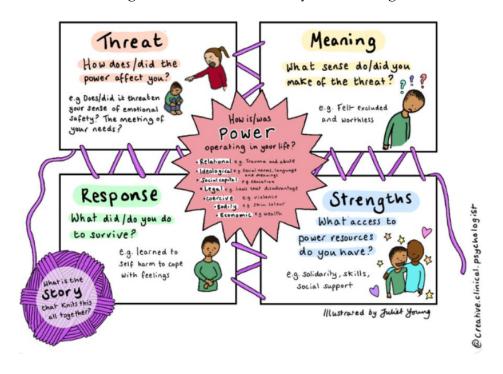
I deemed it essential to engage in critical self-reflection regarding aspects of my identity that intersect with societal power structures and potential oppression, including ideological power. This reflexive process was particularly salient given my interest in the PTMF and its underlying principles. A significant aspect of my identity that impacted the study was my specific learning difficulty (SpLD), commonly referred to as Dyslexia. This neurodivergence notably influenced my confidence in conducting the study and substantially affected my experience of the thesis writing process. Furthermore, I critically examined the potential tension between my professional role and personal values. While I prioritise social justice and equity, my employment in a private psychology practice could be perceived as incongruous with these principles. However, it is noteworthy that the service is predominantly (95%) funded by the Local Authority (LA), with most commissions

originating from educational settings and the LA rather than individual clients such as parents/carers and CYP. This funding structure aligns more closely with traded models currently employed in LA services, potentially mitigating some ethical concerns. This reflexive analysis of my positionality aims to enhance transparency and contextualise the research process, acknowledging the complex interplay between personal identity, professional role, and research objectives.

I also used the PTMF to investigate and reflect on my background, experiences, and identity (Johnstone et al., 2018) and will discuss how it may interact with the research approach (see Figure 3).

Figure 6

The Power Threat Meaning Framework illustration by Julliet Young.

Power and Positionality

My personal history encompasses a complex array of adverse childhood experiences (ACEs), including different levels of traumas such as relational trauma, bereavement,

socioeconomic disadvantage, homelessness and housing insecurity, parental mental health challenges, and broader familial adversities. This background significantly informs my positionality and epistemic standpoint. Of relevance to this study is my experience as the eldest of four siblings, all of whom encountered substantial educational difficulties during periods of housing instability and trauma exposure. Notably, all three of my younger siblings disengaged from formal education by age 13, subsequently receiving diagnoses of Attention Deficit Hyperactivity Disorder (ADHD) and offers of pharmacological interventions all because they were not able to conform to the education-setting rules and boundaries and the educational setting was not trauma-informed. These interventions were proposed without adequate consideration of my siblings' home environments or the provision of holistic support. Furthermore, my mum experienced a range of traumatic experiences and was subsequently diagnosed with an array of mental health disorders and prescribed a long list of medications to help 'balance her brain chemicals'. Eventually, my mum and I felt that this treatment was more harmful and she decided to gradually stop taking the long list of medication. The key factor in this was that when my mum had decided to stop her medications, her life had significantly changed for the better and the range of stressors present at the time of her hospital admission had reduced. This lived experience of navigating systemic responses to childhood adversity, supporting a parent with mental health needs, and witnessing siblings' educational disengagement constitutes a critical aspect of my positionality. It significantly influenced my selection of the research topic and informed my approach to understanding the intersection of trauma, educational experiences, and systemic responses. This reflexive acknowledgement of personal history and its impact on research interests aligns with the principles of qualitative inquiry, particularly within critical and interpretive paradigms. It highlights the importance of researcher transparency and the recognition that personal experiences can both enrich and potentially bias the research process.

Choosing the Research Topic and Refining the Research Questions

My interest in EP formulation was catalysed at the inception of the doctoral training, particularly during the start of casework in the second year. This interest was underpinned by a commitment to evidence-based practice, as mandated by the Health and Care Professions Council (HCPC, 2023), and a desire to articulate professional reasoning transparently to stakeholders, including other professionals, CYP and their caregivers.

My academic background in Forensic Psychology, which introduced case formulation to share psychological reasoning in legal contexts, provided a foundational understanding of formulation practices. Additionally, prior professional experience as a family support worker, which required evidencing the practitioner's thinking and documentation for legal and professional safeguarding purposes, informed my perspective on professional accountability and transparency.

The transition to doctoral training in Educational Psychology presented a paradigm shift in professional autonomy, initially eliciting uncertainty. This was particularly evident in my discomfort with the 'summary' section of EP reports, typically used for formulations. This discomfort sparked an interest in the diverse approaches to formulation writing, dissemination, and associated discourse within the EP community. In addition, I observed significant differences in formulation practices among EPs during their placement time, including supervisors who avoided sharing their formal formulations in favour of summaries of involvement. This variability engendered confusion, given the explicit references to psychological formulation in both HCPC (2023) guidelines and British Psychological Society (BPS, 2015) guidance. Furthermore, the training program I was on introduced various frameworks for practice, including the Monsen Model Problem-Solving Framework and COMOIRA, with an expectation for trainees to demonstrate formulation development in their portfolio work. This curricular focus contrasted with the observed variability in field practices, prompting me to explore formulation approaches in Clinical Psychology, where the literature appears more extensive. This confluence of personal experience, professional background, and observed practice variability within the EP field formed the foundation of my interest in EP formulation practices, ultimately informing the focus of this research study.

The researcher's personal experiences significantly influenced me in the PTMF. During maternity leave, I attended a PTMF interest group for EPs and this highlighted a gap in the framework's application to EP practice. Subsequent discussions with colleagues and TEPs revealed a limited awareness of the PTMF within the EP community. Furthermore, an observational experience during an assessment involving a youth offending worker and a specialist EP provided me with an opportunity to apply the PTMF to my cognitive processes. Reflection on this experience suggested the potential utility of the PTMF when working with similar populations of CYP as the PTMF provided additional perspective to understand the

CYP presenting need and profile. This led to the formulation of a research question: "How can the PTMF be applied within EP Formulation?".

Initially, I planned to focus on applying the PTMF to EP practice more broadly and explore EPs' views and perceptions of the PTMF. However, I realised that there was only one research paper on the topic, written by a recent TEP named Milligan (2022), which addressed the same initial question I had in mind. In Milligan's paper, she discussed the use of the PTMF in EP formulation for future research. Additionally, my initial literature review revealed that there is very little research on the application of the PTMF in Educational Psychology or EP formulation. This led me to expand the scope of the literature review to include EP formulation more comprehensively, examining how EPs engage with formulation and the terminology associated with it. This broader literature review provided a foundation for understanding the current state of formulation practices in Educational Psychology and the potential for integrating the PTMF into EP formulation processes. It also helped refine my research focus and emphasised the need for empirical investigation into the application of the PTMF within EP formulation practices.

I conducted a further literature review to explore current EP engagement with formulation. This review revealed a significant gap in research and literature specifically focusing on EP approaches to formulation. Instead, the literature primarily emphasises frameworks for practice rather than viewing formulation as a distinct core function. It is well-established in the field that EPs engage in five key functions: consultation, assessment, intervention, training, and research (Fallon et al., 2010). My reflections on placement experiences aligned with the literature, noting that EPs often discussed formulation within the context of broader frameworks for practice. The literature suggests formulation is primarily embedded within the assessment function of the EP role. The complexity surrounding EP formulation in the literature led me to adopt two separate research questions to provide an updated understanding of EP formulation:

1. What are EPs'/TEPs' views and experiences of formulation within the EP role?

2. What are EPs'/TEPs' views and experiences of using the PTMF within EP formulation and practice?

These questions aim to address the identified gap in the literature and provide a contemporary perspective on EP formulation practices. By exploring both the

conceptualisation and practical application of formulation in current EP work, my research seeks to contribute to a more comprehensive understanding of this critical aspect of EP practice and explore how the PTMF can be best applied to inform EP formulation.

Design of the Research

A comprehensive review of the literature revealed that existing studies incorporating the PTMF predominantly employ qualitative methodologies, with a notable absence of quantitative research in this domain. I initially considered using a mixed-methods approach, employing an online questionnaire for data collection. However, upon critical reflection, I determined that such an approach might not provide the depth of discussion and nuanced exploration of experiences necessary for this study. Given the complex and interpretive nature of the PTMF, along with the limited understanding of its application in EP practice, I concluded that a more in-depth, qualitative approach was required. This decision aligned with the exploratory nature of my research questions and the need to capture the rich, contextual data that characterises practitioners' experiences and interpretations of the PTMF in formulation processes. Additionally, this approach is consistent with the epistemological stance of the PTMF itself, which emphasises the importance of narrative and contextual understanding in psychological practice (Johnstone et al., 2018).

Methodological Framework and Participant Selection

Initially, I considered employing an Appreciative Inquiry (AI) model as the primary framework for data collection, guidance, and reporting. However, upon reflection, I realised that a single model would be insufficient to capture the complexity of the research topic. As a result, I expanded the study's underpinnings to incorporate a range of psychological frameworks, including solution-oriented approaches, Bronfenbrenner's Ecological Systems theory, and elements of the AI model. This multi-framework approach allowed for a more comprehensive and nuanced exploration of the research questions.

The criteria for participant selection underwent significant reconsideration after presenting the research proposal. Initially, I had excluded TEPs from the participant pool due to concerns about their limited exposure to formulation and their still-developing understanding of the EP role. However, after discussions with colleagues on placement and

within the doctoral program, I discovered there was substantial interest from TEPs in the research topic. After careful consideration of the practicalities and rationale, I decided to expand the participant pool to include TEPs. This inclusion was justified on several grounds:

1. TEPs, as EPs in training, are expected to engage in typical EP activities throughout their training, gaining practical experience and honing their skills.
2. TEPs receive close supervision from practising EPs during their placements, ensuring support and guidance in their casework.
3. TEPs are required to meet the same Health and Care Professions Council (HCPC) competencies (2023) and British Psychological Society (BPS) standards (2021) as qualified EPs, ensuring ethical practice and professional development.
4. Including TEPs increased the feasibility of gathering sufficient participants, especially considering the novelty of PTMF in EP practice and the limited number of EPs currently applying this framework.
5. TEP participation offered a valuable perspective on the potential applications of the PTMF in practice, potentially capturing innovative approaches from those newer to the field.

This expansion of the participant pool necessitated adaptations to the research introduction and the development of a brief introductory session on the PTMF. This session aimed to provide additional information to potential participants who expressed interest but needed more background on the framework before applying it within the research context. This methodological refinement enhanced the study's potential to capture a broader range of perspectives on the application of the PTMF in EP practice while maintaining rigorous standards for participant qualification and engagement.

Methodological Considerations: Formulation Template

I engaged in ongoing reflection regarding the provision of a formulation template to guide participants' thinking about the PTMF and EP practice. While I received no specific feedback during the research presentation, I sought feedback from colleagues in the PTMF EP interest group. Johnstone advised colleagues that if a template were to be used, it would require an introductory session or training to ensure adherence to PTMF principles, particularly its emphasis on collaborative formulation. This guidance prompted me to critically re-evaluate

the research design. Ultimately, I decided to exclude the formulation template from the research design for several key reasons:

1. Alignment with PTMF Principles: The PTMF emphasises an open, flexible, and collaborative approach to formulation. Including a template risked misrepresenting the framework as a prescriptive, paper-based exercise rather than a dynamic, person-centred process.

2. Preservation of Natural Application: Removing the template allowed participants to apply the PTMF to their formulations more organically, focusing on the framework's core concepts rather than adhering to a predetermined structure.

3. Exploration of Diverse Applications: The absence of a template enabled me to examine variations in how EPs and TEPs implemented the framework within their formulations, providing insights into the factors influencing their psychological thinking and processes.

4. Avoidance of Methodological Interference: By not imposing a structured template, the research design minimised potential interference with participants' authentic experiences of applying the PTMF in their practice.

This methodological decision aligned with the exploratory nature of the research and the PTMF's emphasis on contextual understanding and flexible application. It allowed for a more nuanced examination of how practitioners integrate the PTMF into their existing formulation practices, potentially revealing innovative approaches and challenges in its application within educational psychology contexts.

Philosophical and Epistemological Approach

Initially, I intended to adopt a Critical Realist approach (Bhaskar, 1978). However, following feedback from course tutors during the research proposal presentation, I was prompted to reconsider my epistemological stance. Upon reflection, the concept of a 'shared truth' revealed only through individuals' perceptions, views, and experiences (Kelly, 2017) seemed incongruent with my research objectives. Further contemplation led me to conclude that a social constructivist approach aligned more closely with both the underpinnings of the PTMF (Pilgrim, 2020) and my understanding of knowledge construction. This approach

posits that knowledge is constructed through social interactions and that individuals perceive the world differently based on their positions and experiences (Mertens, 2015). My personal experiences related to understanding emotional distress, coupled with my value for individual perspectives and explanations of experiences, further reinforced the suitability of the social constructivist approach. This epistemological stance aligns with my values and the aims of the research.

The study sought to explore the views and experiences of EPs and TEPs regarding formulation, valuing the diverse experiences that shape these views and their reflections on applying the PTMF within formulation processes. I aimed to present a co-constructed interpretation of these views and experiences, acknowledging the intersubjective nature of knowledge creation in this context. This epistemological shift enhanced the coherence between my research methodology, the theoretical framework (PTMF), and my personal stance, thereby strengthening the overall research design and the potential for meaningful insights.

Analysing the Data

I considered several methods for data analysis, including Interpretative Phenomenological Analysis (IPA), Grounded Theory (GT), and Discourse Analysis (DA). I initially found IPA to be inappropriate for addressing the research questions in this study. IPA is best applied when exploring subjective individual experiences and how people personally view phenomena. Its underlying theoretical assumptions are phenomenological, focusing on how individuals make sense of their experiences (Smith et al., 2022). However, my study aimed to explore EPs' and TEPs' professional views and experiences of the PTMF patterns and themes across a range of EPs, rather than delving into individual lived experiences. I reflected that IPA might have been more suitable for exploring how CYP make sense of their experiences using the PTMF.

I also considered Grounded Theory but ultimately decided against it. GT aims to identify theoretical constructs and explore relationships between constructs, often producing a theory for a specific process or phenomenon. This approach typically uses a range of data collected over time, with data collection and analysis occurring simultaneously to inform subsequent steps of the study (Timonen et al., 2018). I felt that this approach didn't align with my current research objectives, as the study was not attempting to develop a new theory or concept. Instead, it aimed to explore how an established framework (PTMF) was being used

by EPs and TEPs currently. I noted that GT might be a potential option for future research aiming to develop a new framework underpinned by the PTMF for application in EP practice.

Lastly, I found Discourse Analysis (DA) to be unsuitable. My research aimed to explore views and reflections based on experiences, rather than focusing on a particular concept or phenomenon. DA is better suited for studying language and meaning in naturalistic conversations or publications about a phenomenon (Harper & Thompson, 2011). Therefore, I didn't think it was appropriate to explore views and experiences of formulation and applying the PTMF. While language was addressed within the research findings, the primary focus was not on exploring language and discourses of meaning. I reflected that DA could be an interesting approach for future research, such as examining parents' or carers' views and understanding of mental health using the PTMF or exploring language around the term "formulation."

Consequently, I determined that Thematic Analysis (TA) was the most suitable option to explore and develop patterns and themes across the data set. I acknowledge that TA is not a singular method and includes various types of TA, such as coding reliability TA, codebook TA, and reflexive TA (RTA). RTA differs from other forms of TA, such as coding reliability (Boyatzis, 1998; Joffe, 2012) and codebook approaches (King & Brooks, 2017; Smith & Firth, 2011). Unlike coding reliability approaches, RTA does not attempt to identify themes prior to data collection. Coding reliability approaches allow the researcher to hypothesise themes based on theory before data collection and are likely underpinned by a positivist stance (Byrne, 2022). Codebook approaches occupy a middle ground between RTA and coding reliability approaches. They value and consider the interpretative nature of data coding (Braun et al., 2019) but also include a structured codebook and conceptualise themes as domain summaries.

I believed that RTA was the most appropriate method for analysing the data, as it fits within the 'Big Q' methodology (Braun & Clarke, 2021). I was already familiar with RTA, having used it for my Year 1 mini-research project. However, despite my previous experience with this type of analysis, I realised I needed to revisit and gain a deeper understanding of the approach. Initially, I did not enjoy conducting this analysis in Year 1 and was apprehensive about how RTA works in terms of interpreting the results. Before starting this research, I didn't fully understand how significant and valuable my role in the data analysis would be.

However, upon realising this, I felt more confident in the data collection and analysis and came to value this aspect of the approach.

I initially attempted to conduct two separate RTAs for my two research questions, but as the analysis and themes developed, it became evident that the themes should be combined into one RTA. This decision helped organise and present the data in a way that told a coherent story and interlinked the findings, as there was a significant overlap throughout the data analysis. It later became evident that EP formulation overlaps with the PTMF, and therefore only one RTA was necessary.

Following the 6 phases of RTA outlined by Braun & Clarke (2006; 2022) took place over a two-month period. I reflect on the difficulty of getting past the interview transcribing, which was the hardest part both emotionally and physically. However, an important step to remember when manually transcribing is that it is an essential part of the data analysis that researchers should complete themselves, as "transcribing discourse, like photographing reality, is an interpretive practice" (Riessman, 1993, p. 13), and as a result, "analysis begins during transcription" (Bird, 2005, p. 230).

I also found that the coding of the interviews was a tedious process. However, once that part was completed, I enjoyed getting to know my data and familiarising myself with what the participants had shared. Alongside this process, I lacked confidence in my ability to complete the RTA and trust my interpretation, which impacted my motivation (Guay et al., 2001; Palavan, 2017). Self-esteem and perceived competence are important for students' engagement with learning, ability to take academic risks, and resilience, all of which are important traits when completing a thesis. I emphasised the importance of research supervision for validation, containment, and reassurance (Hulusi & Maggs, 2015). Familiarising myself with the data set was crucial after initially struggling with it. This step facilitated the rest of the process, eventually leading me to gain a thorough understanding of the data.

When it came to coding the data, I found it challenging to get the codes right. I had to code the interviews multiple times before feeling confident with my selected codes. The varying opinions on coding length, naming, and the number of codes required for each interview also posed difficulties. However, the authors of RTA (Braun & Clarke, 2022) acknowledge the integral role of the researcher in shaping the data set through coding.

I often drew on my personal experiences and training as an EP, as well as my understanding of emotional distress, to make sense of others' stories. This resonates with the belief that relating someone's perspective to your own experiences is crucial (Smith & Shinebourne, 2012). RTA promotes this process by encouraging researchers to be aware of their subjective experiences and assumptions throughout.

I had to be mindful of my own thoughts and beliefs when developing themes from the coded data, ensuring that these did not overshadow the actual data. It was important to remind myself that researcher subjectivity is a valuable resource (Gough & Madill, 2012) when lacking confidence in my interpretations (Braun & Clarke, 2022).

Professional and Ethical Issues

Recruitment & Bias

At first, I planned to recruit participants only from the PTMF EP interest group, as they were already familiar with the PTMF and understood its basis. However, I soon realised that doing so might lead to biased and overly positive views towards the PTMF. Therefore, I expanded the recruitment to include any EP and TEP with a self-directed interest in the PTMF or a desire to learn more about its application in the EP role. I used purposive sampling to recruit participants who were motivated to apply the PTMF in their practice. To mitigate bias, I explored both the barriers and benefits of applying the PTMF to EP formulation and considered its broader application to the EP role. As EPs are considered reflective and ethical practitioners, I trusted that the participants in this study would share their honest opinions (BPS, 2021; HCPC, 2023).

Another potential bias I discussed in the empirical chapter is related to the study only recruiting participants who are currently in a doctoral-level training program or have completed one in the past. Although unintentional, this could reflect that new or previously trained EPs might think differently about EP formulation compared to EPs who did not receive doctoral training. I addressed researcher bias by maintaining a reflective diary throughout the different stages of the study. I considered this particularly important about my own position and life experiences that led me to become interested in this topic. Thus, I emphasised and maintained reflexivity throughout the research. It is important to recognise that I cannot be separated from the research, and I would have influenced and interacted with

the data collection and analysis. I value this with the RTA approach, rather than seeing it as a negative (Braun & Clarke, 2022).

Dissemination of Findings

I recognise the unique dual reliance on evidence-based practice and practice-based evidence. Sedgwick & Stothard (2021) highlight the importance of narrowing the gap between research and practice. Reflecting on my placement experiences and my work as an assistant has provided me with vital learning opportunities that have enriched my knowledge base. Consequently, I aim to adopt a 'multi-stranded' approach to ensure that this study contributes to the existing research evidence base and influences further research into EP formulation and the application of the PTMF within Educational Psychology.

To achieve these aims, I propose the following dissemination and development strategies:

1. Resource Development: Acknowledging the findings that the PTMF is perceived as complex and time-consuming, I intend to explore ways to develop visual and physical resources that EPs and TEPs can use to inform their formulation and assessment approaches with CYP. This may include creating card-based tools or visual aids applicable to education and casework.

2. Interdisciplinary Application: Following a participant's suggestion, I plan to investigate how EPs can utilise this framework with wider professionals working with CYP, such as youth offending teams, social care, and educational staff. This may involve adapting approaches like solution circles or a circle of adults, underpinned by the PTMF.

3. Podcast Series: To make the PTMF more accessible and digestible for EPs, I propose initiating a podcast series focusing on the main concepts of the PTMF and its potential applications within education and EP practice. This aligns with the social constructivist approach I adopted in the research, as it will feature guests sharing their experiences of applying the PTMF in formulation and wider EP practice.

4. Workplace Promotion: I intend to promote the PTMF within my current work settings through team service days and its use as a framework during peer supervision

sessions. This aims to encourage the adoption of the PTMF as a formulation framework in professional practice.

5. Webinar Presentations: I plan to present findings through webinars accessible to EPs, TEPs, and other relevant professionals.

6. Conference Presentations: I aim to submit the thesis for presentation at conferences such as the British Psychological Society's Division of Educational and Child Psychology's TEP Conference, inspiring future TEPs in their thesis planning.

These multi-faceted dissemination strategies aim to bridge the gap between research and practice, promoting the integration of the PTMF into EP formulation practices and stimulating further research in this area.

Conclusions

This chapter has provided a critical examination of my journey throughout the study, highlighting the importance of reflexivity in qualitative research, particularly when employing RTA. My positionality, including my personal experiences and professional background, has significantly influenced the choice of research topic, methodological decisions, and data interpretation. The evolution of the research design, from the initial conceptualisation to the final methodology, demonstrates the iterative nature of qualitative research and the value of flexibility in responding to emerging insights and challenges.

The shift in epistemological stance from critical realism to social constructivism reflects my deepening understanding of the research aims and the nature of knowledge construction in the context of Educational Psychology and the PTMF. My reflections on the data analysis process highlight both the challenges and rewards of engaging deeply with qualitative data. The struggles with transcription, coding, and theme development underscore the complexity of qualitative analysis and the importance of persistence and self-reflection in overcoming these obstacles.

Ethical considerations, particularly regarding participant recruitment and potential biases, were carefully addressed throughout the research process. My commitment to transparency and reflexivity has enhanced the credibility and trustworthiness of the findings. Finally, the proposed dissemination strategies reflect my commitment to bridging the gap

between research and practice in Educational Psychology. By exploring diverse avenues for sharing the research findings, I aim to contribute meaningfully to the field and inspire further exploration of the PTMF's application in Educational Psychology practice.

This reflexive account not only provides context for understanding the research findings but also serves as a valuable learning experience for me, contributing to my development as a reflective practitioner in the field of Educational Psychology.

References

Abrams, K. M., & Gaiser, T. J. (2016). Online focus groups. In N. Fielding, R. M. Lee, & G. Blank (Eds.), *The SAGE handbook of online research methods* (2nd ed.). Sage.

Aherne, C., Moloney, O., & O'Brien, G. (2019, January). Youth mental health and the power threat meaning framework: Jigsaw's systems perspective. *Clinical Psychology Forum*, 313, 3-8. https://doi.org/10.53841/bpscpf.2019.1.313.3

Adom, D., Yeboah, A., & Ankrah, A. K. (2016). Constructivism philosophical paradigm: Implication for research, teaching and learning. *Global Journal of Arts Humanities and Social Sciences*, 4(10), 1-9. https://www.eajournals.org/wp-content/uploads/Constructivism-Philosophical-Paradigm-Implication-for-Research-Teaching-and-Learning.pdf

Amari, N. (2023). Self-formulation in counselling psychology: The Power Threat Meaning Framework. *Journal of Humanistic Psychology*. https://doi.org/10.1177/00221678231154292

Annan, M., Chua, J., Cole, R., Kennedy, E., James, R., Markúsdóttir, I., Monsen, J., Robertson, L., & Shah, S. (2013). Further iterations on using the problem-analysis framework. *Educational Psychology in Practice*, 29(1), 79–95. https://doi.org/10.1080/02667363.2012.755951

Association of Educational Psychologists. (2020). *Transitional period guidance: AEP guidance for educational psychologists in England, Summer 2020*.

Atkinson, C., Barrow, J., & Norris, S. (2022). Assessment practices of educational psychologists and other educational professionals. *Educational Psychology in Practice*, 38(4), 347-363. https://doi.org/10.1080/02667363.2022.2109005

Atkinson, C., & Kenneally, O. (2021). A model for therapeutic educational psychology practice. *Educational Psychology in Practice*, 37(3), 284-302. https://doi.org/10.1080/02667363.2021.1933393

Ashton, R., & Roberts, E. (2006). What is valuable and unique about the Educational Psychologist? *Educational Psychology in Practice*, 22(2), 111–123. https://doi.org/10.1080/02667360600668204

Aveyard, H. (2023). *Doing a literature review in health and social care: A practical guide* (5th ed.). McGraw-Hill Education.

Ball, S. (Ed.). (2019). *Foucault and education: Putting theory to work*. Routledge.

Ball, M., Morgan, G., & Haarmans, M. (2023). The power threat meaning framework and psychosis. In J. A. Diaz-Garrido, R. Zuniga, H. Laffite, & E. Morris (Eds.), *Psychological interventions for psychosis* (pp. 141–169). Springer. https://doi.org/10.1007/978-3-031-27003-1_8

Barnwell, G., Stroud, L., & Watson, M. (2020). Critical reflections from South Africa: Using the power threat meaning framework to place climate-related distress in its socio-political context. *Clinical Psychology Forum*, 332, 7–15. https://doi.org/10.53841/bpscpf.2020.1.332.7

Barrero, J. M., Bloom, N., & Davis, S. J. (2021). *Why working from home will stick*. National Bureau of Economic Research.

Berry, K., Haddock, G., Kellett, S., Awenat, Y., Szpak, K., & Barrowclough, C. (2017). Understanding outcomes in a randomized controlled trial of a ward-based intervention on psychiatric inpatient wards: A qualitative analysis of staff and patient experiences. *Journal of Clinical Psychology*, 73(10), 1211-1225. https://doi.org/10.1002/jclp.22434

Bodfield, K. S., & Culshaw, A. (2024). Applying the power threat meaning framework to the UK education system. *Pastoral Care in Education*, 1-20. https://doi.org/10.1080/02643944.2024.2316589

Bostock, J., & Armstrong, N. (2019). Developing trauma-informed care and adapted pathways using the Power, Threat, Meaning framework (Part 1: Being heard and understood differently). *Clinical Psychology Forum*, 314, 25-29. https://doi.org/10.53841/bpscpf.2019.1.314.25

Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic analysis and code development*. Sage.

Boyland, J. (2019). A social constructivist approach. *Australian Counselling Research Journal*, 13(2). https://www.acrjournal.com.au/resources/assets/journals/Volume-13-Issue-2-2019/Manuscript5%20-%20A%20Social%20Constructivist%20Approach.pdf

Boyle, M. (2020). Power in the "Power Threat Meaning Framework". *Journal of Constructivist Psychology*. https://doi.org/10.1080/10720537.2020.1773357

Braun, V., & Clarke, V. (2022). Conceptual and design thinking for thematic analysis. *Qualitative Psychology*, 9(1), 3. https://doi.org/10.1037/qup0000196

Braun, V., & Clarke, V. (2021). *Thematic analysis: A practical guide*. Sage.

Braun, V., & Clarke, V. (2020). One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qualitative Research in Psychology*, 18(3), 328-352. https://doi.org/10.1080/14780887.2020.1769238

Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, 11(4), 589-597. https://doi.org/10.1080/2159676X.2019.1628806

Braun, V., Clarke, V., & Weate, P. (2016). Using thematic analysis in sport and exercise research. In *Routledge handbook of qualitative research in sport and exercise* (pp. 213-227). Routledge.

Braun, V., & Clarke, V. (2012). Thematic analysis. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, & K. J. Sher (Eds.), *APA handbook of research methods in psychology, Vol. 2: Research designs: Quantitative, qualitative, neuropsychological, and biological* (pp. 57–71). American Psychological Association.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Bronfenbrenner, U. (1979). *The ecology of human development*. Harvard University Press.

British Psychological Society. (2021). *Code of ethics and conduct*. https://explore.bps.org.uk/content/report-guideline/bpsrep.2021.inf94

British Psychological Society. (2019). *Mental health support teams: How to maximise the impact of the new workforce for children and young people*. [Briefing Paper]. https://www.bps.org.uk/guideline/mental-health-support-teams-how-maximise-impact-new-workforce-children-and-young-people

British Psychological Society. (2017). *Practice guidelines*. https://explore.bps.org.uk/content/report-guideline/bpsrep.2021.inf94

British Psychological Society. (2015). *Guidance for educational psychologists (EPs) when preparing reports for children and young people following the implementation of The Children And Families Act 2014.*

https://www.tameside.gov.uk/TamesideMBC/media/education/GuidanceforEduPsych
WEB.pdf

British Psychological Society. (2002). *Professional practice guidelines: Division of
educational and child psychology*.
https://www.scribd.com/document/363999961/Professional-Practice-Guidelines-
Division-of-Educational-and-Child-Psychology

British Psychological Society, Division of Educational and Child Psychology. (1999).
Framework for psychological assessment and intervention. *DECP Debate*, 89.

Brown, L. R. (2019). *Experiences of workplace bullying from the perspectives of trainee
clinical psychologists: A qualitative study* [Doctoral dissertation, University of
Hertfordshire]. EThOS.

Bryan, K. (2021). Adults in the prison population. In L. Cummings (Ed.), *Pragmatic
language disorders: Complex and underserved populations*. Springer.
https://ray.yorksj.ac.uk/id/eprint/5608/2/Chapter%2027%20Adults%20in%20the%20
prison%20population%20edited%20%281%29.pdf

Burden, B. (2017). Frameworks for practice in educational psychology: Illuminative
evaluation. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for
practice in educational psychology: A textbook for trainees and practitioners* (pp. 11–
28). Jessica Kingsley Publishers.

Burr, V. (2015). *Social constructionism*. Routledge. https://doi.org/10.4324/9781315715421

Burton, D., Smith, M., & Woods, K. (2010). Empowering children through training as social
scientists: An example of a direct contribution to the curriculum. *Educational
Psychology in Practice*, 26(2), 91–104. https://doi.org/10.1080/02667361003768419

Byrne, D. (2022). A worked example of Braun and Clarke's approach to reflexive thematic
analysis. *Quality & Quantity*, 56, 1391–1412. https://doi.org/10.1007/s11135-021-
01182-y

Campbell, T. (2023). 'Inverse care' and unmet need: How children in poorer areas are less
likely to receive the right SEND diagnosis or provision. Special Needs Jungle.
https://www.specialneedsjungle.com/inverse-care-unmet-need-children-poorer-areas-
are-less-likely-to-receive-right-send-diagnosis-provision/

Cantrell, E. (2021). *Exploring the interface between clinical psychology and the benefits
system* [Doctoral dissertation, University of Liverpool]. EThOS.

Children and Families Act 2014, c. 6.

    https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted

Cogen, O. (2020). *A grounded theory study of the psychological and social processes apparent in the lives of contemporary 16-18 year olds* [Doctoral dissertation, University of Cardiff]. EThOS.

Cohen, L., & Manion, L. (1994). *Research methods in education* (4th ed.). Routledge.

Collins, N. (2019). The 'own my life' course: Building literacy with women about trauma through the Power Threat Meaning Framework. *Clinical Psychology Forum*, 313, 38-41. https://doi.org/10.53841/bpscpf.2019.1.313.38

Collins, G., Fyson, R., Morgan, G., Runswick-Cole, K., Steel, J., & Boyle, M. (2022). *The Power-Threat Meaning Framework: A new way of thinking about the lives of People with Intellectual Dis/abilities*. https://doi.org/10.13140/RG.2.2.18147.43044

Cooke, A., Smythe, W., & Anscombe, P. (2019). Conflict, compromise and collusion: Dilemmas for psychosocially-oriented practitioners in the mental health system. *Psychosis*, 11(3), 199-211. https://doi.org/10.1080/17522439.2019.1582687

Cooperrider, D. L., Whitney, D., & Stavros, J. M. (2008). *Appreciative inquiry handbook: For leaders of change*. Berrett-Koehler.

Cottone, R. (2001). A social constructivism model of ethical decision making in counseling. *Journal of Counseling & Development*, 79(1), 39-45. https://doi.org/10.1002/j.1556-6676.2001.tb01941.x

Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches* (2nd ed.). Sage.

Creswell, J. W., & Creswell, J. D. (2017). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage.

Cromby, J. (2021). The power threat meaning framework. In *The Palgrave encyclopedia of critical perspectives on mental health* (pp. 1-11). Springer.

Cromby, J., & Maffei, N. (2020). *Translating the PTMF into practice: Issues and reflections* [Paper presentation]. DCP Annual Conference, Birmingham, United Kingdom.

Enlander, A., Simonds, L., & Hanna, P. (2021). Using the power threat meaning framework to explore birth parents' experiences of compulsory child removal. *Journal of Community & Applied Social Psychology*, 1-16. https://doi.org/10.1002/casp.2581

Denzin, N. K., & Lincoln, Y. S. (Eds.). (2000). *The landscape of qualitative research: Theories and issues*. Sage.

Department for Education. (2023). *Educational psychology services: Workforce insights and school perspectives on impact.* https://assets.publishing.service.gov.uk/media/649c4a4406179b00113f7498/Educational_Psychology_services_-_Workforce_insights_and_school_perspectives_on_impact.pdf

Department for Education. (2019). *Research on the Educational Psychologist Workforce.* https://wrap.warwick.ac.uk/id/eprint/145141/7/WRAP-Research-Educational-psychologist-workforce-2019.pdf

Department for Education. (2015). *Special educational needs and disability code of practice: 0 to 25 years* (DFE-00205-2013). https://www.gov.uk/government/publications/send-code-of-practice-0-to-25

Department for Education. (2014). *Educational Psychology Workforce Survey 2013.* https://core.ac.uk/download/pdf/20090179.pdf

Department of Education and Science. (1968). *Psychologists in Education Services* (Summerfield Report). HMSO.

Department for Education and Employment. (2000). *Educational Psychology Services (England): Current role, good practice and future directions. The Report of the Working Group.* HMSO.

Department of Health & Department for Education. (2017). *Transforming children and young people's mental health provision: A green paper.* https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664855/Transforming_children_and_young_people_s_mental_health_provision.pdf

Department of Health & Social Care. (2021). *Reforming the mental health act.* https://www.gov.uk/government/consultations/reforming-the-mental-health-act

Devenney, R. (2021a). *Exploring perspectives of school refusal in second-level education in Ireland: Study 2 – Education professionals' views on school refusal* [Doctoral dissertation, Maynooth University Ireland]. Maynooth University Research Archive Library. https://mural.maynoothuniversity.ie/15687/

Devenney, R. (2021b). *Exploring perspectives of school refusal in second-level education in Ireland: Study 3 – Parents perspectives of school refusal* [Doctoral dissertation, Maynooth University Ireland]. Maynooth University Research Archive Library. https://mural.maynoothuniversity.ie/15687/

Devenney, R. (2021c). *Exploring perspectives of school refusal in second-level education in Ireland: Study 4 – Young people's' experiences of school refusal* [Doctoral dissertation, Maynooth University Ireland]. Maynooth University Research Archive Library. https://mural.maynoothuniversity.ie/15687/

Division of Educational and Child Psychology. (2024). *Education health and care needs assessments and the current crisis in the educational psychology workforce*. The British Psychological Society. https://www.bps.org.uk/news/rise-education-health-and-care-needs-assessments-and-current-crisis-educational-psychology

Division of Educational and Child Psychology. (1999). *Framework for psychological assessment and intervention*. British Psychological Society.

Downs, C. M., & Rayner-Smith, K. (2022). The space between the rock and the hard place: Personality disorder diagnosis in people with intellectual disabilities. *Advances in Mental Health and Intellectual Disabilities*, 16(2), 76-86. https://doi.org/10.1108/AMHID-11-2021-0045

Dunsmuir, S., & Cobbald, A. (2017). A framework for promoting child mental health in schools. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (pp. 11–28). Jessica Kingsley Publishers.

Elliott, J. G., & Nicholson, R. (2016). *Dyslexia: Developing the debate*. Bloomsbury Press.

Elliott, J. G., & Grigorenko, E. L. (2014). *The dyslexia debate*. Cambridge University Press.

Engeström, Y. (1987). *Learning by expanding: An activity-theoretical approach to developmental research*. Orienta-Konsultit.

Farrell, E., & Mahon, Á. (2021). Understanding student mental health: Difficulty, deflection and darkness. *Ethics and Education*, 16(1), 36-50. https://doi.org/10.1080/17449642.2020.1864585

Farrell, P., Woods, K., Lewis, S., Rooney, S., Squires, G., & O'Connor, M. (2006). *A review of the functions and contribution of educational psychologists in England and Wales in light of "Every Child Matters: Change for Children"*. Department for Education and Skills.

Fallon, K., Woods, K., & Rooney, S. (2010). A discussion of the developing role of educational psychologists within Children's Services. *Educational Psychology in Practice*, 26(1), 1-23. https://doi.org/10.1080/02667360903522744

Firmin, M. (2008). Themes. In L. M. Given (Ed.), *The SAGE encyclopedia of qualitative research methods* (pp. 869–869). Sage.

Flynn, A., & Polak, N. (2019). Incorporating the Power Threat Meaning Framework into an autism and learning disability team. *Clinical Psychology Forum*, 313, 42. https://doi.org/10.53841/bpscpf.2019.1.313.42

Frederickson, K., Jackson, B. S., Strauman, T., & Strauman, J. (1991). Testing hypotheses derived from the Roy Adaptation Model. *Nursing Science Quarterly*, 4(4), 168-174. https://doi.org/10.1177/089431849100400409

Frederickson, N. L., & Cameron, R. J. (1999). *Psychology in education portfolio*. NFER-Nelson.

Frederickson, N., & Cline, T. (2002). *Special educational needs, inclusion and diversity: A textbook*. Open University Press.

Freeman, L., & Miller, A. (2001). Norm-referenced, criterion-referenced, and dynamic assessment: What exactly is the point? *Educational Psychology in Practice*, 17(1), 3–16. https://doi.org/10.1080/02667360120039942

Fyson, R., Morley, K., & Murphy, A. (2019). Using the Power Threat Meaning Framework in social work education. *Clinical Psychology Forum*, 313, 33-37. https://doi.org/10.53841/bpscpf.2019.1.313.33

Gallagher, O., Regan, E. E., & O'Reilly, G. (2024a). The power threat meaning framework 5 years on− A scoping review of the emergent empirical literature. *British Journal of Psychology*. https://doi.org/10.1111/bjop.12702

Gallagher, O., Regan, E. E., & O'Reilly, G. (2023). 'I've lived and bred violence my whole life': Understanding violence in the Irish prison service through the lens of the power threat meaning framework. *Psychology, Crime & Law*, 1–29. https://doi.org/10.1080/1068316X.2023.2228967

Gallagher, O., Regan, E. E., & O'Reilly, G. (2024b). 'Violence is all he knew, and it seemed to work': Using the power threat meaning framework to explore prison officers' understandings of violence in Irish prisons. *Psychology, Crime & Law*, 1–31. https://doi.org/10.1080/1068316X.2024.2303485

Gameson, J. & Rhydderch, G. [Gill]. (2017). The constructionist model of informed reasoning and reasoned action (COMOIRA). In B. Kelly, L. Marks Woolfson, &J. Boyle (Eds.), Frameworks for practice in educational psychology: A textbook for trainees and practitioners (pp. 123–150). London, England: Kingsley.

Gameson, J., Rhydderch, G., Ellis, D., & Carroll, T. (2003). Constructing a flexible model of integrated professional practice Part 1 — Conceptual and theoretical issues. *Educational & Child Psychology*, 20(4), 96–115.

GOV UK. (2023). *Education, Health and Care Plans*. https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans

GOV UK. Public Health England. (2019). *Children and Young People Mental Health and Wellbeing: JSNA toolkit*. https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/5-children-and-young-people

GOV UK. (2018). *The Data Protection Act*. https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted

Griffiths, A. (2019). Reflections on using the Power Threat Meaning Framework in peer-led systems. *Clinical Psychology Forum*, 313, 9-14. https://doi.org/10.53841/bpscpf.2019.1.313.9

Griffiths, H., & Baty, F. (2019). Bringing the outside in: Clinical psychology training in socially aware assessment, formulation, intervention and service structure. *Clinical Psychology Forum*, 313, 20. https://doi.org/10.53841/bpscpf.2019.1.313.20

Gill, P., Stewart, K., Treasure, E., & Chadwick, B. (2008). Methods of data collection in qualitative research: Interviews and focus groups. *British Dental Journal*, 204(6), 291-295. https://doi.org/10.1038/bdj.2008.192

Gray, A., Woods, K., & Nuttall, C. (2022). Person-centred planning in education: An exploration of staff perceptions of using a person-centred framework in an alternative provision. *Emotional and Behavioural Difficulties*, 27(2), 118-132. https://doi.org/10.1080/13632752.2022.2092065

Grieg, A., MacKay, T., & Ginter, L. (2019). Supporting the mental health of children and young people: A survey of Scottish educational psychology services. *Educational Psychology in Practice*, 35(3), 257–270. https://doi.org/10.1080/02667363.2019.1573720

Harding, E., & Atkinson, C. (2009). How educational psychologists record the voice of the child. *Educational Psychology in Practice*, 25(2), 125–137. https://doi.org/10.1080/02667360902905171

Harker, M. E., Dean, S., & Monsen, J. J. (2017). Solution-Orientated educational psychology practice. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (pp. 11–28). Jessica Kingsley Publishers.

Harper, D. (2020). Framing, filtering and hermeneutical injustice in the public conversation about mental health. *Journal of Constructivist Psychology*. https://doi.org/10.1080/10720537.2020.1773360

Hassard, J. (2022). Exploring educational psychologists' perceptions of changes to assessment practice throughout the COVID-19 pandemic. *Educational Psychology in Practice*, 38(2), 214-231. https://doi.org/10.1080/02667363.2022.2067135

Health and Care Professions Council. (2023). *Standards of proficiency - Practitioner psychologists*. https://www.hcpc-uk.org/globalassets/resources/standards/standards-of-proficiency---practitioner-psychologists.pdf

Hopkins, A. (2021). *A discourse analysis of how Educational Psychologists talk about Trauma-informed Practice* [Doctoral dissertation, University of Essex & Tavistock and Portman NHS Foundation Trust].

Insel, T. (2013, April 29). *Transforming Diagnosis*. NIMH Director's Blog. https://web.archive.org/web/20170103113914/https://www.nimh.nih.gov/about/directors/thomas-insel/blog/2013/transforming-diagnosis.shtml

Ireland, J. L. (2008). Psychologists as witnesses: Background and good practice in the delivery of evidence. *Educational Psychology in Practice*, 24(2), 115–127. https://doi.org/10.1080/02667360802019172

Jack, R. H., Hollis, C., Coupland, C., Morriss, R., Knaggs, R. D., Cipriani, A., ... & Hippisley-Cox, J. (2019). Trends in antidepressant prescriptions in children and young people in England, 1998–2017: Protocol of a cohort study using linked primary care and secondary care datasets. *BMJ Mental Health*, 22(3), 129-133. https://doi.org/10.1371/journal.pmed.1003215

Jagasia, K., Saunders, P., & Roufeil, L. (2022). Now I can see things for what they are: The experiences of adult children of narcissists. *Journal of Constructivist Psychology*, 36, 524–546. https://doi.org/10.1080/10720537.2022.2048285

Joffe, H. (2012). Thematic analysis. In D. Harper & A. R. Thompson (Eds.), *Qualitative research methods in mental health and psychotherapy: A guide for students and practitioners* (pp. 209–223). Wiley.

Johnstone, L. (2018). Psychological formulation as an alternative to psychiatric diagnosis. *Journal of Humanistic Psychology*, 58(1), 30-46. https://doi.org/10.1177/0022167817722230

Johnstone, L., & Boyle, M. (2020). *A straight-talking introduction to the Power Threat Meaning Framework: An alternative to psychiatric diagnosis*. PCCS Books Ltd.

Johnstone, L., Boyle, M., Cromby, J., Dillon, J., Harper, D., Kinderman, P., Longden, E., Pilgrim, D., & Read, J. (2018a). *The Power Threat Meaning Framework: Overview*. British Psychological Society. https://cms.bps.org.uk/sites/default/files/2022-07/PTM%20Framework%20%28January%202018%29_0.pdf

Johnstone, L., Boyle, M., Cromby, J., Dillon, J., Harper, D., Kinderman, P., Longden, E., Pilgrim, D., & Read, J. (2018b). *The Power Threat Meaning Framework: Towards the identification of patterns in emotional distress, unusual experiences and troubled or troubling behaviour, as an alternative to functional psychiatric diagnosis*. British Psychological Society. https://www.researchgate.net/profile/Lucy-Johnstone-3/publication/326864047_The_Power_Threat_Meaning_Framework_An_Alternative_Nondiagnostic_Conceptual_System/links/5ca4770e458515f785203739/The-Power-Threat-Meaning-Framework-An-Alternative-Nondiagnostic-Conceptual-System.pdf

Johnstone, L., Boyle, M., Cromby, J., Dillon, J., Harper, D., Kinderman, P., Longden, E., Pilgrim, D., & Read, J. (2018c). *The Power Threat Meaning Framework: Towards the identification of patterns in emotional distress, unusual experiences and troubled or troubling behaviour, as an alternative to functional psychiatric diagnosis*. British Psychological Society.

Johnstone, L., Boyle, M., Cromby, J., Dillon, J., Harper, D., Kinderman, P., Longden, E., Pilgrim, D., & Read, J. (2019). Reflections on responses to the Power Threat Meaning Framework one year on. *Clinical Psychology Forum*, 313, 47-54. https://doi.org/10.53841/bpscpf.2019.1.313.47

Johnstone, L., & Dallos, R. (2013). Introduction to formulation. In L. Johnstone & R. Dallos (Eds.), *Formulation in psychology and psychotherapy* (pp. 1-17). Routledge.

Joseph, S. (2017). Positive psychology as a framework for practice. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (pp. 11–28). Jessica Kingsley Publishers.

Joshi, G., Faraone, S. V., Wozniak, J., Tarko, L., Fried, R., Galdo, M., Furtak, S. L., & Biederman, J. (2017). Symptom profile of ADHD in youth with high-functioning autism spectrum disorder: A comparative study in psychiatrically referred populations. *Journal of Attention Disorders*, 21(10), 846–855. https://doi.org/10.1177/1087054714543368

Kelly, B. (2017). Frameworks for practice in educational psychology: Coherent perspectives for a developing profession. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.),

Frameworks for practice in educational psychology: A textbook for trainees and practitioners (2nd ed., pp. 11–28). Jessica Kingsley Publishers.

Kelly, B. (2008). Frameworks for practice in educational psychology: Coherent perspectives for a developing profession. In B. Kelly, L. Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (pp. 15-30). Jessica Kingsley Publishers.

Kelly, B. (2006). Exploring the usefulness of the Monsen problem-solving framework for applied practitioners. *Educational Psychology in Practice*, *22*(1), 1-17. https://doi.org/10.1080/02667360500512312

Kennedy, H. (2006). An analysis of assessment and intervention frameworks in educational psychology services in Scotland: Past, present and possible worlds. *School Psychology International*, 27(5), 515-534. https://doi.org/10.1177/0143034306073396

Kidder, L. H., & Fine, M. (1987). Qualitative and quantitative methods: When stories converge. *New Directions for Program Evaluation*, 1987(35), 57–75. https://doi.org/10.1002/ev.1459

King, N., & Brooks, J. M. (2016). *Template analysis for business and management students*. Sage.

Kotov, R., Krueger, R. F., Watson, D., Cicero, D. C., Conway, C. C., DeYoung, C. G., Eaton, N. R., Forbes, M. K., Hallquist, M. N., Latzman, R. D., Mullins-Sweatt, S. N., Ruggero, C. J., Simms, L. J., Waldman, I. D., Waszczuk, M. A., & Wright, A. G. C. (2021). The hierarchical taxonomy of psychopathology: A quantitative nosology based on consensus of evidence. *Annual Review of Clinical Psychology*, 17(1), 83–108. https://doi.org/10.1146/annurev-clinpsy-081219-093304

Lane, D. A., & Corrie, S. (2007). *The modern scientist-practitioner: A guide to practice in psychology*. Routledge.

Leadbetter, J. (2017). Frameworks for practice in educational psychology: Activity theory and the professional practice of educational psychology. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (2nd ed., pp. 11–28). Jessica Kingsley Publishers.

Leeming, D., Lucock, M., Shibazaki, K., Pilkington, N., & Scott, B. (2022). The impact of the covid-19 pandemic on those supported in the community with long-term mental health problems: A qualitative analysis of power, threat, meaning and survival. *Community Mental Health Journal*, 58, 1297–1309. https://doi.org/10.1007/s10597-021-00932-4

Lee, K., & Woods, K. (2017). Exploration of the developing role of the educational psychologist within the context of "traded" psychological services. *Educational Psychology in Practice*, 33(2), 111–125. https://doi.org/10.1080/02667363.2016.1258545

Leverington, M. (2023). *"What has happened to you?": Re-humanising Services for People with Learning Disabilities* [Doctoral dissertation, Royal Holloway, University of London]. https://pure.royalholloway.ac.uk/ws/portalfiles/portal/56154796/FinalTHESISLeveringtonMeganWhatHasHappenedToYouRehumanisingServicesForPeopleWithLearningDisabilities.pdf

Lewis, S. J., Arseneault, L., Caspi, A., Fisher, H. L., Matthews, T., Moffitt, T. E., Odgers, C. L., Stahl, D., Teng, J. Y., & Danese, A. (2019). The epidemiology of trauma and post-traumatic stress disorder in a representative cohort of young people in England and Wales. *The Lancet Psychiatry*, 6(3), 247-256. https://doi.org/10.1016/S2215-0366(19)30031-8

Lewis-Fernández, R., & Kirmayer, L. J. (2019). Cultural concepts of distress and psychiatric disorders: Understanding symptom experience and expression in context. *Transcultural Psychiatry*, *56*(4), 786-803. https://doi.org/DOI:10.1177/1363461519861795

Lewis-Morton, R., Harding, S., Lloyd, A., Macleod, A., Burton, S., & James, L. (2017). Co-producing formulation within a secure setting: A co-authorship with a service user and the clinical team. *Mental Health and Social Inclusion*, 21(4), 230–239. https://doi.org/10.1108/MHSI-03-2017-0013

Lincoln, Y., & Guba, E. G. (1985). *Naturalistic inquiry*. Sage.

Lozupone, M., La Montagna, M., D'Urso, F., Daniele, A., Greco, A., Seripa, D., & Panza, F. (2019). The role of biomarkers in psychiatry. *Reviews on Biomarker Studies in*

Psychiatric and Neurodegenerative Disorders, 135–162. https://doi.org/10.1007/978-3-030-05542-4_7

Macleod, G. (2006). Bad, mad or sad: constructions of young people in trouble and implications for interventions. *Emotional and Behavioural Difficulties*, 11(3), 155-167. https://doi.org/10.1080/13632750600833791

Madill, A., Jordan, A. & Shirley, C. (2000). Objectivity and reliability in qualitative analysis: Realist, contextualist and radical constructionist epistemologies. *British Journal of Psychology*, 91(1), 1-20. https://doi.org/10.1348/000712600161646

Mameli, C., Molinari, L., & Passini, S. (2019). Agency and responsibility in adolescent students: A challenge for the societies of tomorrow. *British Journal of Educational Psychology*, 89(1), 41–56. https://doi.org/10.1111/bjep.12215

Mental Health Act 2007, c. 12. https://www.legislation.gov.uk/ukpga/2007/12/contents

Mercieca, D., & Mercieca, D. P. (2022). Educational Psychologists as 'Dissenting Voices': Thinking Again about Educational Psychologists and Social Justice. *Education Sciences*, 12(3), Article 171. https://doi.org/10.3390/educsci12030171

Mertens, D. M. (2015). *Research and evaluation in education and psychology: Integrating diversity with quantitative, qualitative, and mixed methods* (4th ed.). Sage Publications.

Michelson, S. (2022). Negotiating master narratives: The practice of 'counterstorying' in children's personal narratives about family-related adversities. *Child & Family Social Work*, 27(4), 616-625. https://doi.org/10.1111/cfs.12910

Milligan, E. (2022). *Exploring Educational Psychologists' views and experiences of the Power Threat Meaning Framework* [Unpublished doctoral dissertation]. Tavistock and Portman NHS Foundation Trust, University of Essex.

Mills, J., Bonner, A., & Francis, K. (2006). The development of constructivist grounded theory. *International Journal of Qualitative Methods*, 5(1), 25-35. https://doi.org/10.1177/160940690600500103

Mind. (2021). *Not Making the Grade: why our approach to mental health at secondary school is failing young people*. https://www.mind.org.uk/media/8852/not-making-the-grade.pdf

Mojtahed, R., Nunes, M. B., Martins, J. T., & Peng, A. (2014). Equipping the constructivist researcher: The combined use of semi structured interviews and decision making maps. *Electronic Journal of Business Research Methods*, 12(2), 87-95. https://www.researchgate.net/publication/287518420_Equipping_the_constructivist_researcher_The_combined_use_of_semi-structured_interviews_and_decision-making_maps

Monsen, J. J., & Frederickson, N. (2008). The Monsen et al. problem solving model ten years on. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (pp. 69–93). Jessica Kingsley Publishers.

Monsen, J., Graham, B., Frederickson, N., & Cameron, R. J. (1998). An accountable model of practice. *Educational Psychology in Practice*, 13(4), 234-249. https://doi.org/10.1080/0266736980130405

Morgan, A. (2023). Power, Threat, Meaning Framework: A Philosophical Critique. *Philosophy, Psychiatry, & Psychology*, 30(1), 53–67. https://doi.org/10.1353/ppp.2023.0011

Morgan, F., Costello, E., & Gilbert, I. (2023). *Square Pegs: Inclusivity, Compassion and Fitting in-a Guide for Schools*. Crown House Publishing.

National Institute for Health and Care Excellence. (2021). *Looked-after children and young people* [NICE Guideline NG205]. https://www.nice.org.uk/guidance/ng205

National Institute for Health and Care Excellence. (2019). *Depression in children and young people: identification and management* [NICE Guideline NG134]. https://www.nice.org.uk/guidance/ng134

National Institute for Health and Care Excellence. (2018). *Therapeutic Interventions After Abuse and Neglect*. https://www.nice.org.uk/about/nice-communities/social-care/quick-guides

Newton, D., Lucock, M., Armitage, R., Monchuk, L., & Brown, P. (2022). Understanding the mental health impacts of poor quality rented housing during the UK's first covid-19 lockdown. *Health and Place*, 78(10), 28-98. https://doi.org/10.1016/j.healthplace.2022.102898

NHS Digital. (2023). *Mental Health of Children and Young People in England in 2021- wave 4 follow up to the 2017 survey*. https://digital.nhs.uk/data-and-

information/publications/statistical/mental-health-of-children-and-young-people-in-england/2023-wave-4-follow-up

NHS Digital. (2022). *Mental health services monthly statistics, performance December 2021 - provisional January 2022*. https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-services-monthly-statistics/performance-december-2021-provisional-january-2022

NHS Digital. (2021). *Mental Health of Children and Young People in England in 2021- wave 2 follow up to the 2017 survey*. https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2021-follow-up-to-the-2017-survey

Nikopaschos, F., Burrell, G., Clark, J., & Salgueiro, A. (2023). Trauma-Informed Care on mental health wards: the impact of Power Threat Meaning Framework Team Formulation and Psychological Stabilisation on self-harm and restrictive interventions. *Frontiers in Psychology*, 14(11), 45-100. https://doi.org/10.3389/fpsyg.2023.1145100

Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic Analysis: Striving to Meet the Trustworthiness Criteria. *International Journal of Qualitative Methods*, *16*(1). https://doi.org/10.1177/1609406917733847

OFSTED. (2022). Prisoner education: A review of reading education in prisons. https://www.gov.uk/government/publications/prison-education-a-review-of-reading-education-in-prisons/prison-education-a-review-of-reading-education-in-prisons#fn:1

O'Toole, C. (2019). Time to teach the politics of mental health: Implications of the Power Threat Meaning Framework for teacher education. *Clinical Psychology Forum*, 313, 15–19. https://doi.org/10.53841/bpscpf.2019.1.313.15

Paradiso, J., & Quinlan, E. (2021). Mental health caregivers' experiences from the perspectives of the power threat meaning framework. *Journal of Humanistic Psychology*, 62(6), 869-890. https://doi.org/10.1177/00221678211041789

Patton, M. Q. (2002). *Qualitative research & evaluation methods* (3rd ed.). Sage.

Pameijer, N. (2017). Assessment and intervention: Bridging the gap with a practice-based model. *Educational & Child Psychology*, 34(1), 66–82. https://hgw-noelle-pameijer.nl/wp-content/uploads/2018/01/3a6.-Assessement-1-Engels-.pdf

Pautasso, M. (2019). The structure and conduct of a narrative literature review. *A guide to the scientific career: Virtues, communication, research and academic writing*, 299-310.

Pickersgill, M. (2024). Stalling or oiling the engines of diagnosis? Shifting perspectives on the DSM and categorical diagnosis in psychiatry. *Sociology of Health & Illness*, 46(S1), 132–151. https://doi.org/10.1111/1467-9566.13682

Pillay, J. (2020). Social justice implications for educational psychologists working with orphans and vulnerable children in South Africa. *School Psychology International*, 41(1), 37-52. https://doi.org/10.1177/0143034319893005

Pilgrim, D. (2020). A Critical Realist reflection on the Power Threat Meaning Framework. *Journal of Constructivist Psychology*, 33(4), 345-355. https://doi.org/10.1080/10720537.2020.1773359

Randall, J., & Coles, S. (2018). Questioning diagnoses in clinical practice: a thematic analysis of clinical psychologists' accounts of working beyond diagnosis in the United Kingdom. *Journal of Mental Health*, 27(5), 450-456. https://doi.org/10.1080/09638237.2018.1437599

Rashed, M. A. (2023). The 'Power Threat Meaning Framework': Yet another master narrative?. *Philosophy, Psychiatry, & Psychology*, 30(1), 69-72. https://doi.org/10.1353/ppp.2023.0012

Raskin, J. D., Maynard, D., & Gayle, M. C. (2022). Psychologist attitudes towards DSM-5 and its alternatives. *Professional Psychology: Research and Practice*, 53(6), 553–563. https://doi.org/10.1037/pro0000480

Rees, K. (2024). *The Mental Health and Wellbeing of Children and Young People with Learning Difficulties: A Guide for Educators*. Jessica Kingsley Publishers.

Reis, M., Dinelli, S., & Elias, L. (2019). Surviving prison: Using the power threat meaning framework to explore the impact of long-term imprisonment. *Clinical Psychology Forum*, 313, 25–32. https://doi.org/10.53841/bpscpf.2019.1.313.25

Richards, A. (2017). Frameworks for practice in educational psychology: Organisational psychology as a framework for practice in educational psychology. In B. Kelly, L. Marks Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (2nd ed., pp. 11–28). Jessica Kingsley Publishers.

Robinson, J. (2021). Number of young children prescribed antidepressants has risen by 41% since 2015. *The Pharmaceutical Journal*. https://pharmaceutical-journal.com/article/news/number-of-young-children-prescribed-antidepressants-has-risen-by-41-since-2015

Robson, C. (2002). *Real world research: A resource for social scientists and practitioner-researchers* (2nd ed.). Blackwell.

Rothì, D. M., Leavey, G., & Best, R. (2008). Recognising and managing pupils with mental health difficulties: Teachers' views and experiences on working with educational psychologists in schools. *Pastoral Care in Education*, 26(3), 127–142. https://doi.org/10.1080/02643940802246419

Rutter, S., & Atkinson, C. (2024). How educational psychologists use cognitive behavioural therapy interventions: a systematic literature review. *Educational Psychology in Practice*, 40(1), 96-120. https://doi.org/10.1080/02667363.2023.2274028

Salkovskis, P. (2019). *Power Threat Meaning Framework presentation: What happened to me, why it seems threatening and what it means*. https://psychonoclast.wordpress.com/2019/07/13/power-threat-meaning-framework-presentation-what-happened-to-me-why-it-seems-threatening-and-what-it-means/

Sapsford, H. (2021). *Designing and evaluating a psychological intervention for individuals with Multiple Complex Needs* [Doctoral thesis, University of Nottingham]. EThOS.

Schulze, J., Winter, L. A., Woods, K., & Tyldesley, K. (2017). Investigating the significance of social justice in educational psychology practice – A systematic literature review. *Educational and Child Psychology*, 34(3), 57–73. https://doi.org/10.53841/bpsecp.2017.34.3.57

Scottish Executive. (2002). *Review of provision of educational psychology services in Scotland (The Currie Report)*. Scottish Executive.

Schnackenberg, N. (2019). *"The only way I was going to be lovable.": A grounded theory of young people's experiences of Body Dysmorphic Disorder* [Doctoral thesis, University of Essex]. EThOS.

Schwandt, T. A. (2000). Three epistemological stances for qualitative inquiry: Interpretivism, hermeneutics, and social constructionism. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 189-213). Sage Publishing.

Seery, C., Bramham, J., & O'Connor, C. (2021). Effects of a psychiatric diagnosis vs a clinical formulation on lay attitudes to people with psychosis. *Psychosis*, 13(4), 361-372. https://doi.org/10.1080/17522439.2021.1901302

Sedgwick, A. (2019). Educational psychologists as scientist practitioners: A critical synthesis of existing professional frameworks by a consciously incompetent trainee. *Educational Psychology Research and Practice*, 5(2), 1-19. https://uel.ac.uk/sites/default/files/sedgwick-a-2019-educational-psychologists-as-

scientist-practitioners-a-critical-synthesis-of-existing-professional-frameworks-by-a-consciously-incompetent-trainee-educational-psychology-research-and-practice-5-2-1-19.pdf

Seligman, M. E., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist*, 55(1), 5-14. https://doi.org/10.1037/0003-066X.55.1.5

Sharpe, H., Ford, T., Lereya, S. T., Owen, C., Viner, R. M., & Wolpert, M. (2016). Survey of schools' work with child and adolescent mental health across England: A system in need of support. *Child and Adolescent Mental Health*, 21(3), 148–153. https://doi.org/10.1111/camh.12166

SHIFT Recovery Community. (2020). Using the Power Threat Meaning Framework in a self-help group of people with experiences of mental and emotional distress. *Journal of Constructivist Psychology*, 33(4), 383-397. https://doi.org/10.1080/10720537.2020.1773361

Simpson, J., & Atkinson, C. (2021). The role of school psychologists in therapeutic interventions: A systematic literature review. *International Journal of School & Educational Psychology*, 9(2), 117–131. https://doi.org/10.1080/21683603.2019.1689876

Siverns, K., & Morgan, G. (2020). 'If only I could have said, if only somebody was listening': Mothers' experiences of placing their child into care. *Adoption Quarterly*, 24(3), 207-228. https://doi.org/10.1080/10926755.2021.1908473

Smith, S. (2023). *Uncovering the origin of the evil EHCP 'Golden Ticket' Narrative*. The Special Needs Jungle. https://www.specialneedsjungle.com/uncovering-origin-ehcp-golden-ticket-narrative/

Smith, A. (2018). *Understanding the experiences of unaccompanied asylum-seeking young people as they turn eighteen whilst subject to UK immigration control* [Doctoral thesis, University of Leicester]. EThOS. https://figshare.le.ac.uk/articles/thesis/Understanding_the_Experiences_of_Unaccompanied_Asylum-seeking_Young_People_as_They_Turn_Eighteen_Whilst_Subject_to_UK_Immigration_Control/10211783

Smith, J., & Firth, J. (2011). Qualitative data analysis: the framework approach. *Nurse Researcher*, 18(2), 52-62. https://doi.org/10.7748/nr2011.01.18.2.52.c8284

Snyder, H. (2019). Literature review as a research methodology: An overview and guidelines. *Journal of Business Research*, 104, 333-339. https://doi.org/10.1016/j.jbusres.2019.07.039

Sparkes, A. C., & Smith, B. (2009). Judging the quality of qualitative inquiry: Criteriology and relativism in action. *Psychology of Sport and Exercise*, 10(5), 491-497. https://doi.org/10.1016/j.psychsport.2009.02.006

Steup, M., & Neta, R. (2024). Epistemology. In E. N. Zalta & U. Nodelman (Eds.), *The Stanford Encyclopedia of Philosophy* (Spring 2024 ed.). Stanford University. https://plato.stanford.edu/archives/spr2024/entries/epistemology/

Stobie, I. (2002). Processes of 'change' and 'continuity' in educational psychology: Part II. *Educational Psychology in Practice*, 18(3), 213–237. https://doi.org/10.1080/0266736022000010258

Taxiarchi, V. P., Chew-Graham, C. A., & Pierce, M. (2023). Substantially more children receiving antidepressants see a specialist than reported by Jack et al. *BMC Medicine*, 21(1), 345. https://doi.org/10.1186/s12916-023-03043-x

Taylor, J. (2022). *Sexy But Psycho: How the Patriarchy Uses Women's Trauma Against Them*. Hachette UK.

The Lancet. (2024). Severe mental illness in the UK: a crisis of compassion. *The Lancet*, 403(10427), 759. https://doi.org/10.1016/S0140-6736(24)00308-8

Timonen, V., Foley, G., & Conlon, C. (2018). Challenges When Using Grounded Theory: A Pragmatic Introduction to Doing GT Research. *International Journal of Qualitative Methods*, *17*(1). https://doi.org/10.1177/1609406918758086

Torjesen, I. (2019). Childhood trauma doubles risk of mental health conditions. *BMJ*, 364, l854. https://doi.org/10.1136/bmj.l854

Tracy, S. J. (2010). Qualitative quality: Eight "big-tent" criteria for excellent qualitative research. *Qualitative Inquiry*, 16(10), 837-851. https://doi.org/10.1177/1077800410383121

Travers, Z. (2022). *A systematic review of burnout in trainee mental health professionals and a qualitative exploration of clinical psychologists' use of the power threat meaning framework: Study 2 – Clinical psychologists experiences of using the power threat meaning framework in UK mental health settings: A thematic analysis* [Doctoral thesis, Cardiff University]. Online Research @ Cardiff. https://orca.cardiff.ac.uk/id/eprint/152405/

Van Der Meer, J. M., Oerlemans, A. M., Van Steijn, D. J., Lappenschaar, M. G., De Sonneville, L. M., Buitelaar, J. K., & Rommelse, N. N. (2012). Are autism spectrum disorder and attention-deficit/hyperactivity disorder different manifestations of one overarching disorder? Cognitive and symptom evidence from a clinical and population-based sample. *Journal of the American Academy of Child & Adolescent Psychiatry*, 51(11), 1160–1172. https://doi.org/10.1016/j.jaac.2012.08.024

Van Loo, H. M., Romeijn, J. W., de Jonge, P., & Schoevers, R. A. (2013). Psychiatric comorbidity and causal disease models. *Preventive Medicine*, 57(6), 748–752. https://doi.org/10.1016/j.ypmed.2012.10.018

Varney, J. (2021). *Investigation into alternatives to psychiatric diagnosis* [Doctoral dissertation, Canterbury Christ Church University].

Vygotsky, L. (1986). *Thought and language* (A. Kozulin, Ed. & Trans.). MIT Press. (Original work published 1934)

Wagner, P. (2000). Consultation: Developing a comprehensive approach to service delivery. *Educational Psychology in Practice*, 16(1), 9-18. https://doi.org/10.1080/026673600115229

Watson, J. (2019). *Drop the Disorder! Challenging the culture of psychiatric diagnosis*. PCCS Books Ltd.

Weedon, J. L. (2017). *Multidisciplinary team members' experiences of team formulation: A thematic analysis* [Doctoral dissertation, University of Leicester]. https://figshare.le.ac.uk/articles/thesis/Multidisciplinary_team_members_experiences_of_team_formulation_A_thematic_analysis/10222157

Whitney, D. D., & Trosten-Bloom, A. (2010). *The power of appreciative inquiry: A practical guide to positive change* (2nd ed.). Berrett-Koehler Publishers.

Wicks, A. (2013). Do frameworks enable educational psychologists to work effectively and efficiently in practice? A critical discussion of the development of executive frameworks. *Educational Psychology in Practice*, 29(2), 152-162. https://doi.org/10.1080/02667363.2013.796444

Williams, A. J., Billington, T., Goodley, D., & Corcoran, T. (Eds.). (2016). *Critical educational psychology*. John Wiley & Sons.

Willig, C., & Rogers, W. S. (Eds.). (2017). *The SAGE handbook of qualitative research in psychology* (2nd ed.). SAGE Publications Ltd.

Wood, J. (2015). Best practice in the psychological assessment of early years children with differences. *Educational Psychology Research and Practice*, 1(1), 23-29.

https://uel.ac.uk/sites/default/files/wood-j-2015-best-practice-in-the-psychological-assessment-of-early-years-children-with-differences-educational-psychology-research-and-practice-1-1-23-29.pdf

Woodger, K. (2020). Drop the disorder! Challenging the culture of psychiatric diagnosis by Jo Watson (ed)(2019). *Journal of Psychosocial Studies*, *13*(2), 219-222. https://doi.org/10.1332/147867320X15858379522016

Woods, K., & Farrell, P. (2006). Approaches to psychological assessment by educational psychologists in England and Wales. *School Psychology International*, 27(4), 387–404. https://doi.org/10.1177/0143034306070425

Woolfson, L. M., Whaling, R., Stewart, A., & Monsen, J. (2003). An integrated framework to guide educational psychologist practice. *Educational Psychology in Practice*, 19(4), 283–304. https://doi.org/10.1080/0266736032000138535

Yardley, L. (2016). Demonstrating the validity of qualitative research. *The Journal of Positive Psychology*, 12(3), 295-296. https://doi.org/10.1080/17439760.2016.1262624

Zafeiriou, M. E., & Gulliford, A. (2020). A grounded theory of educational psychologists' mental health casework in schools: connection, direction and reconstruction through consultation. *Educational Psychology in Practice*, 36(4), 422-442. https://doi.org/10.1080/02667363.2020.1818553

Appendices

Appendix A. Interview Questions

1. How would you describe formulation in EP practice? (what does the term formulation mean to you)
2. How do you usually 'formulate' or construct hypothesis within your casework or thinking?
3. Can you tell me about the case you applied the PTMF to? How did you apply the PTMF to this case?
4. How did you use the PTMF to develop your thinking about the child?
5. Did using the PTMF have an impact on the recommendations and interventions chosen? If so, what was the impact?
6. Were there positives to using PTMF to develop your thinking around the child? If so, what were these?
7. Were there barriers to using the PTMF to develop your thinking around the child? If so, what were these?
8. What are your views on using the PTMF within the EP role moving forward?

Appendix B. Social Media Recruitment Advertisement

Appendix C. Recruitment Email

<u>Email invitation</u>

This is the information which will be sent in the email alongside the poster/advert and PIS and consent form.

Educational Psychologists and Trainee Educational Psychologists are needed for an interview study exploring the experience of using the Power Threat Meaning Framework within their role, particularly applying it within formulation during a piece of casework.

As part of my doctoral research project, I am looking to explore Educational Psychologists' and Trainee EP's views and experiences of applying the Power Threat Meaning Framework (Johnstone & Boyle, 2018) within their practice in particular within formulation.

Title:

'Exploring EPs'/TEPs' Views and Experiences of Using the Power Threat Meaning Framework During Formulation?': A Reflexive Thematic Analysis Study.

The research aims to;
- Explore EPs/TEPs views and experience of applying the PTMF within formulation.
- To understand how the PTMF can be best applied to the EP role.

The pre-session information and interviews will be conducted online. However, face-to-face can be arranged if potential participants have limited access to online resources or have special requirements.

If you are interested in participating please read the participant information and consent form attached to this email and return via email to d.stroud@uea.ac.uk **Please download the correct form relevant to your role (EP or TEP).**

If you have any questions please contact the researcher: Demi Stroud, Trainee Educational Psychologist at UEA d.stroud@uea.ac.uk

Appendix D. Participant Information Sheet and Consent Form

Miss Demi Stroud

Trainee Educational Psychologist

PGR Student at UEA

28th June, 2023

Faculty of Social Sciences

School of Education and Lifelong Learning

University of East Anglia

Norwich Research Park

'Exploring EPs'/TEPs' Views and Experiences of Using the Power Threat Meaning Framework During Formulation?': A Reflexive Thematic Analysis Study.

PARTICIPANT INFORMATION SHEET

(1) What is this study about?

You are invited to take part in a research study about applying the Power Threat Meaning Framework (PTMF) to the EP role and practice.

The PTMF was developed to understand emotional distress and well-being (Johnstone & Boyle, 2018a; 2018b). It provides an alternative explanation for emotional well-being, which is not based on psychological deficits or psychiatric diagnosis as explained by the dominant medical model. Instead, the framework places emphasis on individuals understanding their lives and experiences. The main principles of the framework explore how power has operated in a person's life, the impact of the resulting threats and how the person has survived (Johnstone & Boyle, 2020). The framework can be applied in multiple ways, such as systemically to understand organisations and social issues, as well as therapeutically to understand individual experiences (BPS, 2021).

You will be asked to familiarise yourself with the PTMF via resources provided to you, such as the pre-recorded video, BPS summary sheet and BPS PTMF website. You will be given three months to apply the framework to a piece of casework, and the framework to be considered during formulation.

You will be invited to a semi-structured interview online via Microsoft Teams. This could last up to 90 minutes.

You have been invited to participate in this study because you are a qualified EP in the UK with access to casework. You also have an interest in exploring how the PTMF complements and can be applied to the EP role, especially when guiding formulation. This Participant Information Sheet tells you about the research study. Knowing what is involved will help you decide if you want to take part in the study. Please read this sheet carefully and ask questions about anything that you don't understand or want to know more about.

Participation in this research study is voluntary. By giving consent to take part in this study you are telling me that you:

Understand what you have read.

Agree to take part in the research study as outlined below.

Agree to the use of your personal information as described.

You have received a copy of this Participant Information Sheet to keep.

(2) Who is running the study?

The study is being carried out by the following researcher(s): Miss Demi Stroud. A Trainee Educational Psychologist and a PGR student at the University of East Anglia. The research will take place under the supervision of **Dr Andréa Honess, AFBPsS Chartered Psychologist**. Associate Professor, joint Course Director for the Doctorate in Educational Psychology (EdPsyD) at The University of East Anglia (UEA).

(3) What will the study involve for me?

You will be required to familiarise yourself with the resources provided.

Attend a 30-minute online meeting to discuss the study, aims and process via Microsoft Teams to answer any questions regarding the study before commencing.

You will then be given 3 months to apply the PTMF to a piece of casework that you will discuss in the online interview.

Invited to an online interview to discuss experience and views on the PTMF and EP role. This could last 90 minutes depending on how much you would like to bring to the discussion.

The questions will be focused on exploring your views as an EP on how the PTMF can be applied in the EP role. The questions will unpick how best the framework can be applied, and what worked well and what did not work so well. An audio/video recording will be taken.

You will have the opportunity to review information generated about you prior to publication.

(4) How much of my time will the study take?

In total the study may take around 1 day of your time. This includes the following;

- Approx. 1 hour preparation (including pre-training video and documents).
- Approx 1/2 day applying to a piece of independent casework in practice.
- Approx 90 minutes for the online interview and reviewing the transcript.

(5) Do I have to be in the study? Can I withdraw from the study once I have started?

Being in this study is completely voluntary and you do not have to take part.

Your decision whether to participate will not affect your current or future relationship with the researchers or anyone else at the University of East Anglia now or in the future.

If you decide to take part in the study, you can withdraw your consent up to the point that your data is fully anonymised. You can do this by sending an email to my email address: D.stroud@uea.ac.uk stating that you would like to withdraw from the study.

(6) What are the consequences if I withdraw from the study?

You are free to stop the interview at any time. Unless you say that you want me to keep them, any recordings will be erased and the information you have provided will not be included in the study results. You may also refuse to answer any questions that you do not wish to answer during the interview. If you decide at a later time to withdraw

from the study your information will be removed from our records and will not be included in any results, up to the point I have analysed and published the results.

(7)   Are there any risks or costs associated with being in the study?

Aside from giving up your time, we do not expect that there will be any risks or costs associated with taking part in this study.

(8) Are there any benefits associated with being in the study?

Time for personal CPD and reflection of own practice.

(9) What will happen to the information provided by me and the data collected during   the   study?

Your personal data and information will only be used as outlined in this Participant Information Sheet, unless you consent otherwise. Data management will follow the Data Protection Act 2018 (DPA 2018) and UK General Data Protection Regulation (UK GDPR), and the University of East Anglia's Research Data Management Policy.

The information you provide will be stored securely and your identity will be kept strictly confidential, except as required by law. Study findings may be published, but you will not be identified in these publications if you decide to participate in this study.

Study data may also be deposited with a repository to allow it to be made available for scholarly and educational purposes. The data will be kept for at least 10 years beyond the last date the data were accessed. The deposited data will not include your name or any identifiable information about you.

(10) What if I would like further information about the study?

When you have read this information, Miss Demi Stroud (d.stroud@uea.ac.uk, N/A) will be available to discuss it with you further and answer any questions you may have.

(11) Will I be told the results of the study?

You have a right to receive feedback about the overall results of this study.

You can tell us that you wish to receive feedback by please tick the relevant box on the consent form. Individual feedback will not be possible due to interviews being anonymous.

This feedback will be in the form of a one page summary of findings.

This feedback will be available once the thesis has been completed and submitted. This is anticipated to be on or before October 2024.

(12) What if I have a complaint or any concerns about the study?

If there is a problem, please let me know. You can contact me via the University of East Anglia at the following address:

Miss Demi Stroud

School of Education and Lifelong Learning

University of East Anglia

NORWICH NR4 7TJ

d.stroud@uea.ac.uk

Additionally, you can contact my supervisor:

Dr Andrea Honess

School of Education and Lifelong Learning

University of East Anglia

NORWICH NR4 7TJ

a.honess@uea.ac.uk

If you are concerned about the way this study is being conducted or you wish to make a complaint to someone independent from the study, please contact the Head of

School of Education and Lifelong Learning: Professor Yann Lebeau (y.lebeau@uea.ac.uk).

(13) How do I know that this study has been approved to take place?

To protect your safety, rights, wellbeing and dignity, all research in the University of East Anglia is reviewed by a Research Ethics Body. This research was approved by the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee).

(14) What is the general data protection information I need to be informed about?

According to data protection legislation, I am required to inform you that the legal basis for processing your data as listed in Article 6(1) of the UK GDPR is because this allows me to process personal data when it is necessary to perform our public tasks as a University.

In addition to the specific information provided above about why your personal data is required and how it will be used, there is also some general information which needs to be provided for you:

- The data controller is the University of East Anglia.
- For further information, you can contact the University's Data Protection Officer at dataprotection@uea.ac.uk
- You can also find out more about your data protection rights at the Information Commissioner's Office (ICO).
- If you are unhappy with how your personal data has been used, please contact the University's Data Protection Officer at dataprotection@uea.ac.uk in the first instance.

(15) OK, I want to take part – what do I do next?

You need to fill in one copy of the consent form attached and return it via email to the researcher's email address (D.stroud@uea.ac.uk). You will then be contacted via email regarding next steps.

Please keep the letter, information sheet and the second copy of the consent form for your information.

(16) Further information

This information was last updated on 22nd June, 2023.

If there are changes to the information provided, you will be notified by via email.

This information sheet is for you to keep

PARTICIPANT CONSENT FORM (First Copy to Researcher)

I, ... [PRINT NAME], **am** willing to participate in this research study.

In giving my consent I state that:

- I understand the purpose of the study, what I will be asked to do, and any risks/benefits involved.
- I have read the Participant Information Sheet, which I may keep, for my records, and have been able to discuss my involvement in the study with the researchers if I wished to do so.
- The researchers have answered any questions that I had about the study and I am happy with the answers.
- I understand that being in this study is completely voluntary and I do not have to take part. My decision whether to be in the study will not affect my relationship with the researchers or anyone else at the University of East Anglia now or in the future.
- I understand that I may stop the interview at any time if I do not wish to continue, and that unless I indicate otherwise any recordings will then be erased and the information provided will not be included in the study results. I also understand that I may refuse to answer any questions I don't wish to answer.
- I understand that the results of this study may be published but that any publications will not contain my name or any identifiable information about me.
- I understand that personal information about me that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about me will only be told to others with my permission, except as required by law.

I consent to:

Audio-recording   YES ☐   NO ☐

Reviewing transcripts   YES ☐   NO ☐

Would you like to receive feedback about the overall results of this study?

                                 YES ☐   NO ☐

If you answered **YES**, please indicate your preferred form of feedback and address:

☐ Postal: _____

          _____

☐ Email: _____

....
Signature

....
PRINT name

....
Date

PARTICIPANT CONSENT FORM (Second Copy to Participant)

I, ... [PRINT NAME], **am** willing to participate in this research study.

In giving my consent I state that:

- I understand the purpose of the study, what I will be asked to do, and any risks/benefits involved.
- I have read the Participant Information Sheet, which I may keep, for my records, and have been able to discuss my involvement in the study with the researchers if I wished to do so.
- The researchers have answered any questions that I had about the study and I am happy with the answers.
- I understand that being in this study is completely voluntary and I do not have to take part. My decision whether to be in the study will not affect my relationship with the researchers or anyone else at the University of East Anglia now or in the future.
- I understand that I may stop the interview at any time if I do not wish to continue, and that unless I indicate otherwise any recordings will then be erased and the information provided will not be included in the study results. I also understand that I may refuse to answer any questions I don't wish to answer.
- I understand that the results of this study may be published but that any publications will not contain my name or any identifiable information about me.
- I understand that personal information about me that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about me will only be told to others with my permission, except as required by law.

I consent to:

Audio-recording   YES ☐   NO   ☐

Reviewing transcripts   YES ☐   NO   ☐

Would you like to receive feedback about the overall results of this study?

YES ☐   NO ☐

If you answered **YES**, please indicate your preferred form of feedback and address:

☐ Postal: _____

_____

☐ Email: _____

....
Signature

....
PRINT name

....
Date

Appendix E. Resource Email Sent to Participants to Explore the PTMF

Dear,

Thank you for returning the personal details form and participant consent form to me. I look forward to meeting on....

The study will not be providing training on the Power Threat Meaning Framework. Therefore, this means you are expected to have prior knowledge or a self-directed interest in the framework before applying it to the casework of your choice. It can be one or multiple – the option is yours in how you feel it best applies to your work.

I have attached a few resources to check out if you feel it necessary to add to your knowledge base, which I have found useful when learning about the framework.

The following website and attachments may be helpful for you (**please note you are not expected to read/explore them all**):

- **The BPS website for the PTMF page** - https://www.bps.org.uk/member-networks/division-clinical-psychology/power-threat-meaning-framework
- **The BPS Good Practice page** - https://www.bps.org.uk/power-threat-meaning-framework/good-practice
- **Ray Middleton: a series of short films about the PTMF** https://www.bps.org.uk/power-threat-meaning-framework/resources-training
- **Adapted Versions of the PTMF Guided Discussion co-produced with young people** https://cms.bps.org.uk/sites/default/files/2022-09/Jigsaw%20-%20using%20the%20PTMF%20with%20young%20people.pdf
- **Milligan, Elaine (2022) Exploring Educational Psychologists' views and experiences of the Power Threat Meaning Framework**. Other thesis, University of Essex & Tavistock and Portman NHS Foundation Trust. https://repository.essex.ac.uk/33470/
- Incorporating the Power Threat Meaning Framework into an autism and learning disability team Incorporating the Power Threat Meaning Framework into an autism and learning disability team. https://explore.bps.org.uk/content/bpscpf/1/313/42
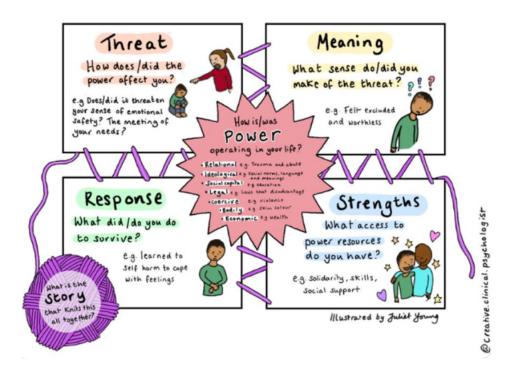
I have attached the following documents to this email:
- The BPS PTMF overview of resources.
- The PTMF Summary
- The PTMF DCP training slides.

I have also found Juliet Young's illustrated infographic on the Power Threat Meaning Framework to be very helpful:

The Power Threat Meaning Framework diagram with sections: Threat ("How does/did the power affect you? e.g. Does/did it threaten your sense of emotional safety? The meeting of your needs?"), Meaning ("What sense do/did you make of the threat? e.g. Felt excluded and worthless"), Power ("How is/was Power operating in your life? Relational e.g. Trauma and abuse; Ideological e.g. Social norms, language and meanings; Social capital e.g. education; Legal e.g. Laws that disadvantage; Coercive e.g. violence; Bodily e.g. skin colour; Economic e.g. wealth"), Response ("What did/do you do to survive? e.g. learned to self harm to cope with feelings"), Strengths ("What access to power resources do you have? e.g. Solidarity, skills, social support"), Story ("What is the story that knits this all together?"). Illustrated by Juliet Young. @creative.clinical.psychologist

The meeting on xxxx is an introductory meeting to discuss any questions you might have before applying to casework and to set an interview date.

I am looking forward to working with you,

Best wishes,
Demi

Appendix F. Example Extract of a Coded Interview
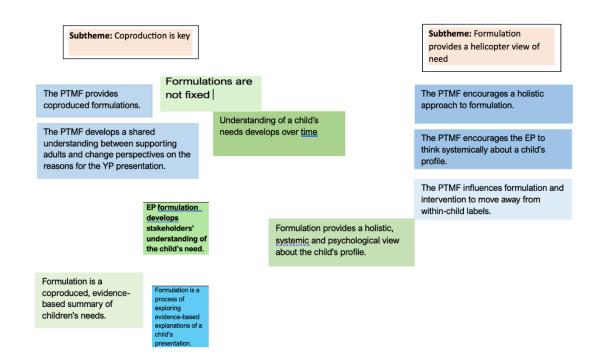
What you were mentioning, there were your formulation and erm you know and Lucy Johnstone stuff, formulations in psychology was a book we were recommended to read when I was training.

Erm so it's kind of erm there.

Educational Psychologist 1:40

Yeah, I think you know formulation can't be done in a vacuum, can it it?

It needs to have that co-construction that curiosity, that sort of erm framework of some questions or some sort of basis that you have in a conversation about something.

But there there needs to be that kind of, erm yeah ((pause))

Time to think ((pause))

Time to really dig down and into what's happening and erm, not just think about those surf, but surface levels.

So it's not just about one problem, it's about all those threads of things and you know, I think

> **DS** Demi Stroud (EDU - Post...
> EP4.c5. Formulation is not a quick process
>
> @mention or reply

> **DS** Demi Stroud (EDU - Post...
> EP4.c6. Formulation provides space for an in-depth understanding of presenting problems.
>
> @mention or reply

> **DS** Demi Stroud (EDU - Post...
> EP4.c8. Formulation identifies interfering factors and impact on the childs need.

as a as an EP, that's one of the key things that we learn, isn't it not to take things on face value erm ((pause))

And I used to be a key thing when I was training as well about not to fall in love with your own hypotheses, erm not to sort of take that that first thought as like the the answer to everything can and almost question everything and.

Researcher 2:31

hm-m

Educational Psychologist 2:39

Erm and yeah, not not take everything erm ((pause))

as given and erm explore.

Researcher 2:45

Yeah

> **DS** Demi Stroud (EDU - Post...
> EP4.c9. Formulation requires the EP to remain open-minded and avoid attachment to preconceived ideas or hypotheses.
>
> @mention or reply

> **DS** Demi Stroud (EDU - Post...
> EP4.c10. Formulation approach involves critical and analytical thinking

Appendix G. Generation of the themes

Potential Theme	Code	Quotes	Reflections
EP formulation is a process applied to complex cases.	EP1.C2 Formulation is usually a process applied to more complex cases.	EP1.C2- but in terms of my EP work, yeah, it's only really the more problematic cases that I would tend to talk to a colleague about or a senior.

EP1.C22 And then for complex cases behavior erm issues and cases where I'm attending multidisciplinary meeting sets, but I'm much more careful to use a framework like 5 PS or PTMF just for my own clarity and to, to make sure you know an accurate picture of the child that I can present to people. | |
	EP1.C16 Recognises the value of formulation for complex cases.	EP1.C16 But I feel like that was a really great experience for me and really kind of made me understand the power and the need for formulation, especially when there's more complex cases.	
Formulation is a process that involves coproduction.	EP1.C1 EP had not attributed EP formulation to be co-produced	EP1.C1 Well, maybe the co-producing bit is new to me.	Stakeholders meaning professionals, EPs, school staff etc., parents, carers,
	EP1.C3 EP interested in formulation being co-produced.	EP1.C3 So it's it's just interesting that that's just interesting that that would be part of all formulation	
	Formulation is a process of co-production and	EP3.c.10 Umm by ((pause)) myself, but also with other people.	

Theme development draft 2
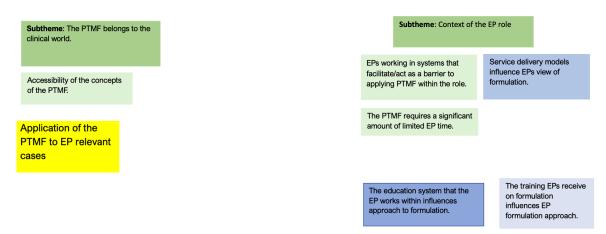
Theme 1: Formulation is a team effort or 'EPs are not the experts'

Subtheme: Coproduction is key

Subtheme: Formulation provides a helicopter view of need

The PTMF provides coproduced formulations.

Formulations are not fixed

The PTMF develops a shared understanding between supporting adults and change perspectives on the reasons for the YP presentation.

Understanding of a child's needs develops over time

The PTMF encourages a holistic approach to formulation.

The PTMF encourages the EP to think systemically about a child's profile.

The PTMF influences formulation and intervention to move away from within-child labels.

EP formulation develops stakeholders' understanding of the child's need.

Formulation provides a holistic, systemic and psychological view about the child's profile.

Formulation is a coproduced, evidence-based summary of children's needs.

Formulation is a process of exploring evidence-based explanations of a child's presentation.

Theme 2: Assessment 'vs' Formulation

Assessment vs Formulation

Subtheme: EP formulation is embedded within the overall assessment process.

Subtheme: Lack of consistent approaches to EP formulation.

The process of EP formulation is different to other professions.

Formulation is not a distinct action; it is embedded within EP assessment.

EPs draw upon a range of frameworks for practice, and psychology to inform formulation approach.

Personal and professional development influences understanding and approach to formulation.

Formulation is a evidence based summary of the YP needs.

EP formulation does not have a clear or consistent process across the profession.

Theme 3: Context is key

Subtheme: The PTMF belongs to the clinical world.

Accessibility of the concepts of the PTMF.

Application of the PTMF to EP relevant cases

Subtheme: Context of the EP role

EPs working in systems that facilitate/act as a barrier to applying PTMF within the role.

Service delivery models influence EPs view of formulation.

The PTMF requires a significant amount of limited EP time.

The education system that the EP works within influences approach to formulation.

The training EPs receive on formulation influences EP formulation approach.

Themes – Draft 3

Theme 1: Formulation is embedded in EP assessment.

Subtheme: Assessment process.
- Formulation is not a distinct action.
- Formulation is an evidence-based summary of the YP needs.
- Formulation starts from referral.
- Formulation is an unconscious, implicit action.
- Formulation informs assessment, and assessment informs formulation.
- The PTMF provides structure and clarity.
- The PTMF principles and ethos underline formulation and assessment approach.
- The process of EP formulation is different to other professionals.

Subtheme: EP formulation is informed by frameworks for practice.
- EPs draw upon a range of frameworks for practice, and psychology to inform formulation approach.
- EP formulation does not have a clear or consistent process.
- Personal and professional development influences understanding and approach to formulation.

Theme 2: Formulation is a team effort.

Subtheme: The coproduction 'dance'
- The PTMF encourages coproduced formulations.
- The PTMF develops a shared understanding between supporting adults.
- Understanding of a child's needs develop over time as more information is gathered.
- Formulations are not fixed.
- Formulation is a co-produced, evidenced based summary of need.
- EP formulation develops stakeholders understanding of the child's needs.

Subtheme: Helicopter view of need
- Formulation provides a holistic, systemic, and psychological view of the child.
- The PTMF encourages a holistic approach to formulation.
- The PTMF encourages the EP to think systemically.
- The PTMF influences formulation to move away from within-child labels.

Theme 3: Context is key.

Subtheme: EPs approach to formulation is influenced by the context they work in
- Service delivery models influence EPs view of formulation.
- The education system that the EP works within influences approach to formulation.
- The training EPs receive on formulation influences EP formulation approach.

Subtheme: Aspects of the EP role influence how EPs can use the PTMF in practice.
- EPs working in systems that facilitate/act as a barrier to applying PTMF within the role.
- The PTMF requires a significant amount of limited EP time.
- Relevance to EP typical roles and responsibilities.
- Adaptions required to make it fit within the EP role.
- The PTMF aligns with EP practice (trauma informed, systemic, holistic, non-medical model).

Theme 4: The PTMF adds extra 'layers' to EPs thinking.

Subtheme: YP are central to the formulation process
- The PTMF focus on the YP making sense of their experiences.
- The PTMF is person-centred.
- The PTMF empowers adults supporting the YP.

Subtheme: Finding clarity in chaos
- PTMF means a comprehensive understanding of need.
- PTMF allows for structure to the formulation/assessment approach.
- PTMF is better applied better to complex cases.
- PTMF enhances EP confidence and skills in formation.
- Encourages the EP to think about impact of power.

Theme: 5 EPs require accessible language to help make sense of and communicate young people's needs during formulation.

Accessible language
- Terminology around formulation.
- Audience of the reports.
- Language used in the PTMF.
- Accessibility of the PTMF concepts.
- Non-medicalised model of describing need.
- The PTMF requires adaptions to the language

Appendix H. Reflective Diary

Deciding on a research topic

October 2022: Attendance at the PTMF interest group: I attended the PTMF interest group and met a few EPs who are currently using the PTMF within their practice, sharing best practices and new research and articles to inspire the use across the profession. I was first initially interested in the PTMF due to its focus on trauma-informed, person-centred, narrative approaches and systemic psychological underpinnings. All of these psychological theories and approaches underpin the core parts of my role as a TEP. I was particularly interested in the social justice aspect of the framework and curious as to how this would fit in with my core values. Lastly, I prefer to work in a social model of disability, focusing on need rather than labels, but also recognise the impact of health diagnosis, context, life experiences and understanding of the world on a person's presentation. Additionally, my personal experiences draw me towards an alternative approach to understanding behaviours.

Throughout my time as a TEP, I have always been interested in how different EPs formulate and explain their thinking. I noticed several different approaches whilst observing a range of EPs and was given a range of different responses regarding what approach they had taken to the assessment and then final formulations. During an observation with a YP involved with the criminal justice system, I observed the EP complete an assessment for a YP. Throughout the whole assessment I had the PTMF in my mind and the quote not 'bad, mad or sad'. I shared my thinking with the EP at the time, and this led to a conversation that changed the perspective on what was happening for that YP.

Therefore, I became interested in how the PTMF can be used during EP formulation and assessment processes. I completed a literature review that highlighted a gap in the area.

Interview Reflection

November 2023, Interview One: The first research interview was completed. This one EP was very conversational, able to share their thoughts and experiences clearly and had time to invest in applying the PTMF within their practice. This interview sparked my passion again for completing the thesis on the PTMF and EP formulation. During this interview I attempted to stay on track following the semi-structured interviews, however, I learnt a lot about how this EP applied the PTMF in practice and then asked additional questions which I kept in mind and used with the following participants. This interview highlighted the importance of the researcher-interview interactions and sharing and developing knowledge, further aligning the social constructions stance taken.

Although I used Microsoft Teams to record and transcribe, this was not very clear or helpful and therefore I had to transcribe via hand. This process meant I was fully immersed in the data set.

Learning points moving forward with the following interviews include:

- o Ensuring technology is set up and working on both ends before starting the interview. Checking the participant can access the team's function.
- o Although very interesting and informative, I often went off track, and this meant the interview transcription was a long process to ensure the correct information was included and analysed for the study research questions.

Data Analysis- Coding

Coding and Themes: How my view of the EP role, formulation and understanding of the PTMF is impacting my code development: I found the coding part difficult. The labelling of the codes and interpreting the data. My supervisor at times said I had over-generalised, and I needed to code more specifically. I completed this process several times for each interview transcript until I was happy with my code labels. I kept in mind that the code needed to make sense alone and be able to stand alone. However, when comparing my codes to my peer's codes I questioned myself a lot. My supervisor reassured me that my codes were ok. Once I was happy with my codes and throughout my coding journey, I reflected on my personal views towards the view of the EP role and how these views might be influencing my interpretation of the coding and making sense of the data. For example, one of my personal views is that EP formulation varies widely depending on professional experience and the use of psychological theories and frameworks. This was also evident within the transcriptions. I reflected on my experiences of how I understand CYP with ASD traits and the use of diagnostic and medical labels within my reports. Sometimes the pressure from parents/carers or other professionals and their expectations and understanding of the EP role can mean that my formulations do not seem 'strong' because they are not using labels. Additionally, on placement one of my supervisors had told me that they do not engage or share their formulations in the summary section, instead, they write as summary of what they did and conclude. One participant in my study also shared this, stating that they do not feel that it is within their right to impose their formulation on stakeholders. I hold a very different view on this and therefore felt it was important to recognise this when transcribing that person's interview and developing my codes to ensure I captured their view.

Appendix I. Ethics

Ethics ETH2223-1599 : Miss Demi Stroud

Date Created	02 Mar 2023
Date Submitted	03 May 2023
Date of last resubmission	23 Jun 2023
Date forwarded to committee	23 Jun 2023
Researcher	Miss Demi Stroud
Category	PGR
Supervisor	Dr Andrea Honess
Faculty	Faculty of Social Sciences
Current status	Approved after amendments made

Ethics application

Applicant and research team

Principal Applicant

Name of Principal Applicant
Miss Demi Stroud

UEA account
wht21veu@uea.ac.uk

School/Department
School of Education and Lifelong Learning

Category
PGR

Primary Supervisor

Name of Primary Supervisor
Dr Andrea Honess

Primary Supervisor's school/department
School of Education and Lifelong Learning

Project details

Project title
Exploring EPs'/TEPs' Views and Experiences of Applying the Power Threat Meaning Framework During Formulation.

Project start date
01 Sept 2023

Project end date

31 Oct 2024

Describe the scope and aims of the project in language understandable by a non-technical audience. Include any other relevant background which will allow the reviewers to contextualise the research.

The Power Threat Meaning Framework (PTMF) is an alternative framework to explore a person's needs through a non-medical lens. It empowers people to understand their emotional well-being needs in a way that makes sense to them. Formulation refers to a joint effort between psychologist and person to summarise and understand a person's difficulties. The literature review highlighted that different professionals apply the PTMF differently such as with the public (Seery et al., 2021), to develop training and therapeutic interventions and training courses. Little is known about applying the PTMF within the Educational Psychologist (EP) role. However, some research shows that the PTMF fits with aspects of the EP role, such as consultation, assessment, intervention, training, and research (Farrell, et al., 2006). The researcher is particularly interested in formulation, and the lack of research within the EP domain also highlights a gap in the EP role and processes around formulation. A recent unpublished thesis by a Trainee EP (TEP) found that many EPs used the PTMF within their formulations, and the PTMF helped to develop their understanding of what was going on for the client (Milligan, 2022). However, details on how the EPs used the PTMF to inform their formulation were not explored. The researcher hopes to explore this in more detail.

The aim of the study is to explore EPs' and TEPs views and experiences of applying the PTMF within their formulation to a piece of the casework of their choice and to understand how the PTMF can be best applied to the EP role.

The study hopes to answer the following research questions:

1) What are EPs/TEPs' views and experience of using the PTMF within formulation?

2) How do EPs/TEPs think the PTMF might be best used in EP practice?

Provide a brief explanation of the research design (e.g. interview, experimental, observational, survey), questions, methodology, and data gathered/analysis. If relevant, include what the participants will be expected to do/experience.

Methodology

A social constructivism paradigm will be applied to the research. This suits the research methodology, as participants will be asked to reflect on their views and experiences of using the PTMF when working collaboratively with professionals, parents, and CYP to develop their formulation. Furthermore, EPs will have different views and experiences of using the PTMF with real CYP (House, 1991 cited in Robertson, 2011). They also have a perspective on their own reality and experiences.

Participants

Participants will be EPs or TEPs who have completed or are in the process of completing an official doctorate course in Educational Psychology in the UK and have HCPC registration or are supervised by an EP with a recognised HCPC registration. The sample size required will be minimum 6 participants. See Appendix A for participant criteria.

Recruitment

Participants will be recruited through the PTMF EP interest group, a social media post on Twitter and EPNET to recruit further participants (see Appendix B).

Design

The study will be a qualitative research design. Interviews will be analysed using Reflective Thematic Analysis values (Braun & Clarke, 2021).

Method

A step-by-step process of what participants will be required to do is included in this ethics application. This includes participants signing the consent form, watching a pre-recorded training video, and reading the BPS summary sheet, participants will be invited 30-minute consultation to talk through any questions about the research and then given 3 months to apply the PTMG to a real-life piece of the casework of their choice or reflect on when they used the PTMF during formulation in the past. Participants will then be invited to a 90-minute online semi-structured interview via Microsoft Teams which will be recorded and transcribed.

Detail how any adverse events arising in the course of the project will be reported in a timely manner.
Any concerns or adverse events will be reported to the researcher's research supervisor at UEA named above.

The researcher will also report the event to the body of ethics approval for the piece of
research.

Furthermore, the researcher will report the adverse event on an ethics monitor or through the use of the UEA new system as stated on the University Ethics Guidance Note for reporting adverse events.

Will you also be applying for Health Research Authority approval (HRA)?
No

Indicate if you are applying for approval for an experiment to be conducted in the School of Economics' Laboratory for Economic and Decision Research (LEDR).
No

Is the project?:
none of the options listed

Does the project have external funding administered through the University's Research and Innovation Services (RIN)?
No

Will the research take place outside of the UK?
No

Will any part of the project be carried out under the auspices of an external organisation, or involve collaboration between institutions?
No

Do you require or have you already gained approval from an ethics review body external to UEA?

No

Does this new project relate to a project which already has ethics approval from UEA?

No

Research categories

Will the project include primary data collection involving human participants?

Yes

Will the project use secondary data involving human participants?

No

Will the project involve the use of live animals?

No

Will the project have the potential to affect the environment?

No

Will the project have the potential to affect culturally valuable, significant or sensitive objects or practices?

No

Will the project involve security sensitive research?

No

Human participants - selection and recruitment

How many Participant Groups are there who will receive tailored participant information?:

Two

Name of Participant Group 1.

Educational Psychologists

Name of Participant Group 2, if applicable.

Trainee Educational Psychologists

How will the participants be selected/recruited?

I will be recruiting through a PTMF EP interest group this is a closed special interest group with an organiser and includes a range of different EPs, TEPs and educational staff.

If I do not get enough participants from the PTMF interest group I will then open my research to TEPs on my course and EPs/TEPs who work in the same placement provider as me.

I will be presenting a talk on the PTMF and my research aims in the interest group and with my fellow TEPs and on a service day on placement.

I will share my advert on the university email thread which includes all my fellow TEPs and my work email thread which includes all my colleagues on my placement.

Furthermore, if I still do not have enough participants will advertise my research through a social media post on Twitter (open group).

I only need 6 participants. So I will start by recruiting through the PTMF EP interest group first. If I then need more participants I will share my advert with my colleagues, fellow TEPs and Twitter to recruit EPs and TEPs on Twitter.

The sample will consist of the first people who apply to be part of the study and have complete consent forms.

In terms of UEA participants only, will you be advertising the opportunity to take part in this project to?:
None of the above (i.e. UEA's Student Insight Review Group (SIRG) does not need to be informed)

What are the characteristics of the participants?
Inclusion criteria:

o Self-directed interest in applying the PTMF to EP role/ and/or completed training regarding the PTMF.

o Some existing knowledge in applying the PTMF.

o Practicing EPs with HCPC accreditation and BPS-approved training or TEP attending an approved professional doctorate course in the UK with a named supervisor who is an EP within their placement and is a registered Educational Psychologist.

o EPs /TEPs working within UK context and engaged in typical EP activities.

o Experience in completing casework, undertaking formulation of needs and having skills to discuss hypotheses made using evidence base.

Relevant DBS checks as part of their normal job requirements.

Exclusion criteria:

o EPs outside the UK.

o Professionals who are not EPs or on an official training programme.

o People/professionals with interest in the PTMF but not a practicing EP or TEP.

o EP's/TEPs who do not work in a LA or private practice where they cannot gather/organize their casework.

o TEPs who are not currently on an approved UK doctorate course in Educational Psychology.

o TEPs who do not have access to placement casework or qualified placement supervisor.

Will the project require the cooperation of a gatekeeper for initial access to the individuals/groups to be recruited?
Yes

Who will be your gatekeeper for accessing participants?
The PTMF interest group is organised by Hayley, Joanne & Sarah Sivers (PTMF Education Special Interest Group Coordinators)- ptmf.education@gmail.com

Imogen Gorman (I.Gorman@uea.ac.uk), and Andrea Honess (A.Honess@uea.ac.uk), the course directors will be contacted to gain permission. Professor Yann Lebeau (Y.Lebeau@uea.ac.uk), Head of School, will be emailed to inform research may be conducted on the students on the course.

Steve Hobbs - Principal Psychologist -Head of Service will be the gatekeeper to my work email.

How and when will a gatekeeper permission be obtained?

The PTMF have already given verbal permission for me to present a talk in one of the sessions following ethics approval. They also promote people to share research and recruit through the group. Following ethics approval, I will email to get written confirmation of the permission to recruit through the PTMF.

If I require more participants, before sending out my email to recruit both the TEP and colleagues in my service I will email the course directors, head of school and principal/head of my service to ask for permission to send out an email to fellow TEPs and colleagues.

I will do this via email once I have gained ethical approval and once I have gained permission via email from the above I will then email TEPs and EPs if needed.

Provide any relevant documentation (letters of invite, emails etc).
How will you record a gatekeeper's permission?

Email response and saved alongside consent forms.

Is there any sense in which participants might be 'obliged' to participate?

Yes

If yes, provide details.

TEPs on my course and colleagues on my placement.

What will you do to ensure participation is voluntary?

Provide information as part of a whole class/ team meeting event. Not directly approach or ask people to participate. No incentives. Remain professional and stick to professional ethics guidelines. Only provide further details if colleagues or fellow TEPs show interest. Inform all potential participants that they are free to choose whether they want to participate and that they can withdraw from the study at any time without any negative repercussions.

There will be a consent form for participants to sign and participants will be told that they are free to leave the project up until the interviews have been transcribed and coded for data purposes.

Will the project involve vulnerable groups?

No

Will payment or any other incentive be made to any participant?

No

If appropriate, upload a copy of the proposed advertisement, including proposed recruitment emails, flyers, posters or invitation letter.
How and when will participants receive this material?

Following ethical approval and consent from gatekeepers. I will attend a PTMF interest group and talk about my research. I will then the email invite to those who attended, fellow TEPs and colleagues using the UEA email and work email.

Participants (EPS and TEPs) will receive the above letter of invitation, poster for research and participant information and consent form in an email.

Include any other ethical considerations regarding participation.

Participants will be told before consenting to the project that they can withdraw themselves and their data from the study up until it has been anonymised, transcribed, and coded. At that point, data will not be able to be linked back to that participant and therefore the researcher will be unable to delete that participant's data accurately.

Human participants - consent options

By which method(s) will consent to participate in the research be obtained?:
Online Participant Information and Consent

Human participants - information and consent

Participant Information and Consent

Will opt out consent for participation in the research be used?
No

You can generate a Participant Information Text and Consent Form for this application by completing information in the Participant Information Text and Consent Form Generator tab. Alternatively you can upload your Participant Information Text and Participant Consent Form which you have already prepared. Confirm below:
Generate automated Participant Information Text and Consent Form.

When will participants receive the participant information and consent request?
When I send the email of invite to participants in the PTMF, TEPs on my course or EPs/TEPs in my work placement I will attach the PIS and consent form. Participants can then download and read/sign and send it back to me as described in the email of the invite. Alternatively if replying to the social media post, participants will be asked to email me their interest and for further information and then I will send the PIS and consent form.

How will you record a participant's decision to take part in the research?
Consent form stored on Microsoft office with the research data/information using password protected files.

Human participants - method

Which data collection methods will be used in the research?:
Interview

If your research involves any of the methods (including Other) listed above, upload supporting materials.
How have your characteristics, or those of the participants influenced the design of the study or how the research is experienced by participants?
I will be interviewing EPs who may have more experience in formulation than me. Therefore the questions are based on eliciting and understanding that experience to inform how the PTMF can be best applied to the EP role.

Will the project involve transcripts?
Yes

Select ONE option below:
By hand

If yes provide details.
I will use the transcription function in Microsoft Teams when recording the interviews. I will then check the transcript provided to check for inaccuracies.
The consent will ask for participants to consent for the recording and transcription of their interview.

Provide an explanation if you are not offering the participant the opportunity to review their transcripts.
Participants will be invited to review their transcripts and given two weeks to amend or make changes.

Will you be capturing photographs or video footage (digital assets) of individuals taken for University business?
No

Is this research using visual/vocal methods where respondents may be identified?
Yes

If yes, confirm what safeguards are in place for participants who are vulnerable or underage.
The interviews will be recorded on Microsoft Teams and will be password protected.

Will it be necessary for participants to take part in the study without their knowledge and consent at the time?
No

Will deception or incomplete disclosure be used?
No

Will the participants be debriefed?
No

Will substances be administered to the participants?

No

Will involvement in the project result in, or the risk of, discomfort, physical harm, psychological harm or intrusive procedures?
No

Will the project involve prolonged or repetitive testing?
No

Will the project involve potentially sensitive topics?
No

Will the project involve elite interviews?
No

Will the project involve any incitement to, encouragement of, or participation, in an illegal act (by participant or researcher)?
No

Will the research involve an investigation of people engaged in or supporting activities that compromise computer security or other activities that may normally be considered harmful or unlawful?
No

Does the research involve members of the public in participatory research where they are actively involved in undertaking research tasks?
No

Does the research offer advice or guidance to people?
No

Is the research intended to benefit the participants, third parties or the local community?
Yes

Provide an explanation.
The hope is that the participants will be able to share experiences of applying the PTMF that will benefit the EP role by providing best practices so others can also learn about how to PTMF can be used in practice.

What procedures are in place for monitoring the research with respect to ethical compliance?
The researcher will be responsible for reporting ethical breaches to the supervisor.

The research supervisor and fieldwork supervisor are also responsible for escalating concerns.

Anyone involved who feels the process is not ethical or experienced ethical breaches can also report concerns to the ethical body.

Does the study involve the use of a clinical or non-clinical scale, questionnaire or inventory which has specific copyright permissions, reproduction or distribution restrictions or training requirements?
No

Include any other ethical considerations regarding data collection methods.
The EPs and TEPs in their interview will be discussing a real life piece of casework involving a child or young person. However, the questions will not involve questions about the young person or any of their personal details. The questions will only ask about how they applied the framework, what works best etc (see interview questions attached). Participants will be told to use fake names if they need to mention the young person.

Health and safety - participants

Is there a possibility that the health and safety of any of the participants in this project including a support person (e.g. a care giver, school teaching assistant) may be in question?
No

Health and safety - researcher(s)

Is there a possibility that the health and safety of any of the researcher(s) and that of any other people (as distinct from any participants) impacted by this project including research assistants/translators may be in question?
Yes

If yes, how have you addressed the health and safety concerns? Describe any safeguards included and relevant protocols.
Online safe working procedures and practices need to be followed. Participants will be sent a secure link via their email address which is only open to me (the researcher) and the participant.

I will be interviewing professional adults (18+) who work for a local authority or a company. This means it will be expected that those adults have a healthy and safe working environment as part of their organisation's health and safety working-from-home regulations.

All participants are working EPs/TEPs in the UK and as part of the criteria will have access to placement supervision if they feel they need support following the interview. The interviews are not aimed to be emotive or speak about a child/young person's individual case/needs and therefore only require the participant to reflect on their practice. This is a core skill and competency expected as an EP/TEP.

Before starting the interviews I will tell participants that they can take a break or pause the interview if they require the toilet or a screen break. I will also check with participants if they are in a confidential and private space either at home or work. It will be the participant's own responsibility to keep themselves safe.

The study will not require participants to do anything out of their ordinary routine. As a TEP or an EP in the UK, you are required to have an up-to-date DBS and practice within your professional competencies.

Risk assessment

Are there hazards associated with undertaking this project where a formal risk assessment will be required?

No

Data management

Will the project involve any personal data (including pseudonymised data) not in the public domain?

Yes

If yes, will any of the personal data be?:

Anonymised and pseudonymised

If using anonymised and/or pseudonymised data, describe the measures that will be implemented to prevent de-anonymisation.

Personal data will not be included in the write up of the results. The transcriptions from the interviews will be anonymised by removing names and any identifiable information such as school placement.

Furthermore, the main themes from the interviews will be included in the write-up, and this will not identify participants. Interviews will be transcribed and participants will be identified using EP followed by a number, or TEP followed by a number.

If not using anonymised or pseudonymised data, how will you maintain participant confidentiality and comply with data protection requirements?

N/A

Will any personal data be processed by another organisation(s)?

No

Will the project involve access to records of sensitive/confidential information?

No

Will the project involve access to confidential business data?

No

Will the project involve secure data that requires permission from the appropriate authorities before use?

No

Will you be using publicly available data from the internet for your study?

No

Will the research data in this study be deposited in a repository to allow it to be made available for scholarly and educational purposes?

No

Provide details.

I will not be storing the data to avoid the data being identifiable by others.

Additionally, my research is based on participants' recent experience of the PTMF and their own practice and therefore will not be helpful for future use.

Who will have access to the data during and after the project?

The researcher

The supervisor

Where/how do you intend to store the data during and after the project?

Raw data (transcripts of the interviews) will be stored on the researcher's UEA one drive with password protection and the findings and results alongside the write up will be stored on the university submission files as per their policy.

How will you ensure the secure storage of the data during and after the project?

10 years

How long will research data be stored after the study has ended?

10 years

How long will research data be accessible after the study has ended?

10 years

How are you intending to destroy the project data when it is no longer required?

All data and information regarding the study will be stored on the UEA Microsoft office system one drive file and will be deleted securely from there.

Generate and upload files

PARTICIPANT INFORMATION TEXT AND CONSENT FORM

Upload the Participant Information Sheet and Consent Form.

Enter Participant Group number and name.

Group 1- Educational Psychologists

Enter Participant Group number and name.

Group 2- Trainee Educational Psychologists

Attached files

Calling all EPs and TEPs who are interested in applying the PTMF to their role..pdf

Email for Invitation to Participate in the study.docx

Calling all EPs and TEPs who are interested in applying the PTMF to their role..pdf

Email for Invitation to Participate in the study.docx

Research questions.docx

Edited EP CF - ETH2223-1599 - Participant Information Sheet and Consent Form (OPT IN) - Interview copy.docx

**Edited TEP CF - ETH2223-1599 - Participant Information Sheet and Consent Form (OPT IN) - Interview copy.docx