

# North West Psychological Professions Network New Roles in Psychological Professions Clinical Associates in Psychology (CAPs) Workshop Feedback form

**Thursday 7<sup>th</sup> November 2019**

Please rate each of the sessions in terms of how relevant they were to you and your service - (Tally of results and collated comments below):

*Evaluation key:*

1 = Little relevance    2 = Some relevance    3 = Relevant    4 = Very relevant

**“New Roles and the NHS Long Term Plan – Psychological Professions Workforce Expansion” – Dr Gita Bhutani:**

1	2	3	4
		7	12

**Comments:**

- Helpful overview
- Video probably not necessary as I am guessing the audience understands the context
- Helpful background – video is a brilliant resource for promotional & schoolwork
- Good intro to set the scene – useful
- Useful overview
- Good intro to the session – well pitched
- Liked the animation particularly

**“What are Clinical Associates in Psychology (CAPs)? Development and Implementation of the Role in the South West of England” – Professor Eugene Mullan:**

1	2	3	4
			18

**Comments:**

- Helpful narrative of the journey so far. Would have liked more but links to other slides / pdf's will be helpful
- Excellent - Exactly what we needed from a HEI perspective
- Very interesting outline of the journey

- Really useful but ran over time – would have been helpful to keep to time
- Really helpful overview of the development of CAP beyond information provided on IFATE website
- Excellent presentation that answered everything I had in my mind and raised more food for thought
- This was very informative and answered most of the questions I had arrived with
- Really useful to understand roles / developments and how this has progressed at pace
- Very interesting & opens up a lot of opportunities and led to some really useful debates
- Really informative – easy to get a sense of where we might go

**“Accreditation Standards for Associate Psychologists” – Laura Smith:**

1	2	3	4
1	1	7	10

**Comments:**

- Bit jargon filled and vague
- Useful to think about how things sit with the BPS and reassuring to hear about where things are up to
- Helpful
- Very informative
- Very useful

**Round table discussion:**

1	2	3	4
	1	5	12

**Comments:**

- Helpful as good mix on table
- Very helpful but needed more time – ended up squashed due to earlier running over
- Raised plenty of questions
- Helpful as table had mix of three HEI’s and 3 NHS delegates
- This was very helpful
- Some very useful conversations, lots of food for thought
- Really useful to get such a range of perspectives
- Really useful to talk to colleagues about “the art of the possible” & how this can be used to generate holes to increase the access to psychological therapies

- Brilliant to have this time and space to discuss with colleagues from other areas

**Feedback & Action planning:**

1	2	3	4
	2	7	4

**Comments:**

- Actions internal at Uni first, then with NHS later
- I would be really pleased to hear more about the developments in this area

**What personal actions are you taking away from the event?**

- To discuss further with senior leads in my trust & GM CCG
- Meetings with colleagues to discuss further & get together a plan of action
- To work with colleagues about how to develop and implement this
- Discuss and read back to wider team
- Potentially discuss with professional education team in trust
- Further liaisons with local trusts
- Feedback to clinical psychology colleagues
- Continue discussions with senior management
- Link with BPS developments

**How would you rate this venue (location, parking, facilities etc)?**

- Nearest parking (the aquatics centre) was full, other parking somewhat farther away
- Good location
- Good
- Close to a station so great for me
- Parking was a nightmare – waited 40 minutes in “Q” to get into car park
- Very good for me – 10 minutes’ walk from the office
- Difficult to park – carparks nearby full
- Great – handy for the train
- Good venue and facilities. Difficult parking and the one-way system around Oxford Road make for difficulty in driving to the venue

**Other comments:**

- A follow up with the same delegates in 6 months would be interesting
- More of this please
- Thank you, very well organised and pitched
- It would have been good to have more time for networking with colleagues – this could have been a full day event. The tabletop discussion needed more time

**Sli.do Round table feedback:**

- Thanks for a great event - interesting and food for thought
- Need a HEE strategy re commissions for clinical psychology training in relation to the development of CAPs. Aspirational collaboration between HEIs in the North West re development of CAPs programmes.
- Concerns around expectations of a band 6 CAP in certain services where there are other band 6 HCPs who manage huge caseloads and acute risk. Is this going to add more to sometimes difficult political situations within teams?
- What are the possibilities for developing CAPs roles in Trusts without having a clinical psychologist in the service, e.g. model where supervision is provided through the HEI?
- Will Assistant Psychologist roles disappear? Any implications? Will there be cohort effects - later CAPs cohorts might be more likely to be those wanting to do clinical psychology training.
- Do we need to think about APEL - CAPs to clinical psychology training? Implications for office/desk space/I.T. etc for CAPs trainees. Implications for job plans for clinical psychologists supervising CAPs and for recruitment of additional clinical psychologists required
- How do we address the necessary cultural change needed to deliver more psychological approaches via CAPs.
- Geographical considerations - CAPs need to be part of a broader psychological workforce strategic plan.
- Discussion around where the distinction exists between PWP and CAP roles. Discussion around the investment that is needed to make this happen. Suggest this would need to be done as regional workforce development.
- Suggest lead-in time to create new CAPs programmes would be in the order of 2 years to getting trainees started on a programme. Also recognise that ultimately will need career progression onwards.

- Concerns about whether existing MSc Clin courses will become obsolete. Where will current MSc courses fit once CAP courses are accredited? Can they complement one another? Different focuses? - CAPs great for widening participation - CAPs will route ground people in practice - potential to broaden psychological thinking - benefits at every level in terms of workforce challenges.
- Disseminate information about CAPs to HEE ICS / STP facing teams to raise awareness and support local action
- PPN Action - We will set up a CAPs information / resource web page to support clinical leads and service managers to have local conversations - materials will be sent out and then web page available after 12th Dec 2019 (post-election)
- Need to have good links with regional HEE - in the SW they were supportive, but development was able to progress as it's an employer led initiative
- Colleagues working with Assistant Psychologists currently very interested in applying for CAPs training. Looking at where the gaps are in services to see where CAPs might fit. What might they do? Differences between current Assistant Psychologist role and CAP role. Can CAPs role enable more service users to receive a psychological service?
- NHS England working to create routes to train relevant staff in delivering psycho-social interventions. Requires culture change within services so that 'talking' therapies become therapy of choice as opposed to medication. Want to train every person within health care team in psychosocial interventions.
- Some obstacles are within profession - divisions of psych within BPS have different views on this. Events like this open the conversation.