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Division of Clinical Psychology

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To whom it may Concern

We are writing to issue a collective statement about the position of trainee clinical psychologists and whether their training years should count in terms of MHO Status.

MHO Status and Trainee Clinical Psychologists

We are aware that since the 1990s that some course directors assessed their trainee clinical psychologists as having MHO Status for the purposes of the NHS Pension Scheme and others did not. These judgements were based on assessments of how much of the individual's working week was spent in the direct treatment of or care for NHS patients.

These judgements were made at a time that preceded the guidance about MHO Status published in 2022 (based on the printer's mark in the footer). This states "For Clinical Psychologists, the nature of their work means that a wider, defined range of their duties can count as direct treatment and care for MHO purposes. These include activities such as participating in case conferences, consultations and writing reports relating to clinical work. For this reason, a specific MHO application form is available for Clinical Psychologists – see Process for applying for MHO status later in this factsheet. "

To the best of our knowledge and belief this is significantly more written information than was available in the 1990s. In the 1990s there was little specific guidance on how to assess NHS employees for MHO Status and nothing specific about clinical psychologists or trainee clinical psychologists.

The varible approaches to assessing trainee clinical psychologists meant that for individual trainees it was the "luck of the draw" as to whether they were assessed as having MHO Status. From word of mouth our understanding is that in some geographical areas it is possible that all trainee clinical psychologists would receive MHO Status, in others none would.

In the 1990s all training programmes transformed from either two-year University Masters or the BPS Diploma in-service programmes to three-year Doctoral programmes. This development required significant changes to the programme of study to be made including, changes to the Trainee Clinical Psychologists' pattern of work. Their contracts required them to work the hours necessary for the proper and efficient performance of the duties of their job.

It is perhaps helpful to clarify the working arrangements for trainee clinical psychologists in these three-year Doctoral Programmes. The typical study/work pattern for trainees taking the course was that it comprised 3 days a week placement, working in clinical settings involving patients: 1 day a fortnight on work related study, and 3 days a fortnight teaching. This was a standard pattern for such courses, and this varied from little from region to region.

Trainees work comprised writing reports on real patients who were seeking medical help from the National Health Service. Virtually all of the research they performed was with NHS patients with whom the students had direct contact.

The trainees had contracts under which their weekly working hours were 37.5 hours a week. In practice, they all worked far longer hours than that throughout the three years. Much of the additional hours were in report-writing and preparation for clinical work and on the cases studied in the 3 days a week placement.

Conclusion

In our opinion, those trainee clinical psychologists following the three-year doctoral programmes did meet the test for MHO Status, as we considered participating in case conferences, consultations and writing reports relating to clinical work to be direct treatment of and care for NHS patients. This view is reflected in the 2022 guidance.

Yours Faithfully,

Tony Lavender, Chair BPS Practice Board