

Frequently asked questions about CAP's (updated March 2024)

Acknowledgments:

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- **What are Clinical Associates in Psychology (CAPs)?**

CAPs are psychology graduates who currently undergo Masters level training which usually takes up to 18 months in order to become a skilled professional applied psychologist, working within their scope of practice, under the direct supervision of an applied psychologist. Typically, 3 days per week of their training is spent on the job using the Clinical Psychology training model of “teaching-placement synchronisation” so that CAP trainees can put their academic teaching into practice. Although the CAP role is useful in a broad range of settings, and CAPs can be trained to work with a wide variety of clinical populations, in practice individual CAPs are trained to work with one population during their training. The training utilises problem-based learning and supervised clinical practice as the medium through which trainees develop competence in working with a specific clinical population. As such trainee CAPs have at least a full year of supervised clinical practice, in a service and a clinical team, before they graduate to become a CAP. CAPs are very suited to apprenticeship training models.

- **What are Degree Apprenticeships (England only)?**

Apprenticeships are noted as a key part of the NHS Long Term Workforce Plan: *“Apprenticeship offer important opportunities for widening social participation in the NHS workforce. They also provide career ladders for staff to develop their skills, expand the contribution they can make to patient care and strengthen their commitment to continue working for the NHS”* p81, NHS Long Term Plan, 2018.

This information applies to England only as separate arrangements apply in Scotland, Northern Ireland, and Wales. Degree apprenticeships are a new way of training where apprentices combine work with studying. A Degree Apprenticeship will involve the apprentice completing a university degree as part of the apprenticeship either at Level 6 or Level 7. Usually, all training costs are paid for by the employer. All employers with an annual pay bill of over £5m now have to pay an apprenticeship levy which is a form of tax used to fund apprenticeships.

The proceeds of the levy are held in a digital account that employers can use to pay for apprenticeship training costs. The levy cannot be used for salary or backfill costs. This means funding for Clinical Psychology training will not be directly affected as a result of CAPs training costs.

Degree apprentices are employed to train through the apprenticeship scheme and the tuition fees are paid from the apprenticeship levy. (For more information see [Apprenticeship funding rules 2023 to 2024 \(publishing.service.gov.uk\)](https://publishing.service.gov.uk))

All apprentices are required to complete an end-point assessment at the end of training. This is simply a way to assess competences of trainees.

- **Is CAP training only available as a Degree Apprenticeships?**

CAPs can be trained outside of the levy funding envelope, such as self-funding or organisational funding, and do not have to be trained as a degree apprentice.

- **Are CAPs a threat to the future of Clinical / Applied Psychology?**

CAPs provide our profession with an exciting opportunity to expand the applied psychological workforce. This development has been nationally driven by employers in response to the challenge of recruiting a sufficient workforce to meet Mental Health delivery targets. CAPs are very much an opportunity for our profession; this new role has had a positive impact on enhancing the current workforce provision serving the mental and physical health needs of the nation. The CAPs are a flexible workforce, competent in the planning, delivery and evaluation of evidence-based psychological interventions. The CAP role finally bridges the gap that has existed between unqualified Assistant Psychologists and autonomous and registered Applied Psychologists.

- **What is the Agenda for Change banding of CAPs?**

When training, CAPs are paid at AfC band 5 and when trained they are paid at AfC band 6. The Employing Trust may create new Applied Psychology posts (at AfC 7 or above) to support the development and supervision of CAPs. Although many providers have independently matched their CAP job descriptions with this banding result, there is currently no national A4C banding profile for CAPs.

- **Will this damage the profession of Clinical Psychology/harm my employment or career prospects as a Clinical Psychologist?**

It is very unlikely that career and employment prospects will be harmed by the emergence of a well-trained and well supervised new professional psychological workforce. If anything, this provides an opportunity for psychology services to have a greater presence in clinical teams and to help improve the level of psychological-mindedness in the NHS workforce. As such supervising this new workforce is a good opportunity for many as it provides a new role supervising a qualified workforce. The Division of Clinical Psychology of the BPS (DCP) recognizes this offers a good safeguard and provides clinical psychologists opportunities to enhance their delivery of care, *“It is stated in the introduction [of the occupational standards] that people in these roles will be supervised by clinical psychologists. This is a very positive proposal and supports good governance and safe and effective practice.”* CAPs are aligned with NHSE development of new

roles in meeting a substantial future demand for applied psychological practitioners.

- **How many CAPs are there and who pays for their training?**

In October 2018, 15 CAP trainees started training with Exeter University working in Cornwall. There are now CAP programmes across England, with programmes in Exeter, London (UCL), Plymouth, Essex (EPUT), East Anglia (UEA), Kent, Nottingham Trent, Keele, and Bath. Currently it's estimated that there are 850 CAPs either qualified or in training.

- **Is this dumbing down of Clinical Psychology training and a dilution of Standards?**

This development is absolutely not driven by a desire to undermine our profession or to dismantle Clinical Psychology Doctoral training. It is high quality training and it provides the NHS with access to a highly skilled, highly motivated pool of talented psychology graduates.

Each year at least 20,000 students graduate with Psychology degrees from our universities. Many of these graduates seek to pursue a career in applied psychology. While the number of training places in Clinical Psychology have increased in recent years, there are still many more applicants than places. Data from the Clearing House indicates that over the past five years rates have increased from 15 percent of applicants to 25 percent of applicants being successful in gaining a place on Clinical Psychology training. Despite the increase, there are a significant number of graduates who wish to pursue a career in applied psychology, who may not be successful in doing so. The new CAP role creates a greater range of opportunities for Psychology graduates, alongside the other new roles in the psychological professions. These new roles reflect the increased recognition of the value of psychological approaches in health and mental health care, and the consequent need for a significant expansion in this workforce.

Programmes delivering the MSc CAP training are accredited by the BPS in the same way that the doctoral level Clinical Psychology programmes are. The MSc CAP training includes the requirement for professional codes of conduct, ethics and practice to be part of the curriculum, as well as core research skills and the principles of evidence-based practice. Furthermore, with the requirement for CAPs to be supervised by a registered Practitioner Psychologist, CAPs work very closely with Clinical Psychologists; they work 'in conjunction with' rather than 'instead of' their Clinical Psychology colleagues.

- **Are CAPs the same as the Scottish CAAPs (Clinical Applied Associate Psychologists)?**

The Clinical Associate Psychologist (CAP) development in England is separate from the Clinical Associate in Applied Psychology (CAAP) in Scotland. The service needs and contexts are different, meaning that the Associate Psychologist role has been developed with different workforce roles in mind. While the BPS training standards are common to both roles, the CAPs and CAAPs sit on separate

registers with the professional body to recognise the difference in where the roles have been designed to fit in the wider psychological workforce.

- **Do CAPs need to be HCPC registered?**

CAPs are not subject to statutory registration with the Health and Care Professions Council (HCPC). Where registration is statutory, this means that it is a legal requirement to be registered and that you may not use the title without being on the statutory register. This is the case for Practitioner Psychologists. However, CAPs who have completed an accredited training and who meet the other requirements are able to join the British Psychological Society (BPS) wider workforce register. From a legal perspective, this is a voluntary professional register rather than a statutory register, however it is most likely that CAPs will be required to be registered to work in the NHS. The BPS wider psychological workforce register is accredited by the Professional Standards Authority (PSA). The PSA accredits registers so that the public can be confident when using the services provided by health and care practitioners on those registers. The register therefore supports public protection and confidence that those on the register have completed the necessary training and abide by the relevant codes of conduct. For more information visit the BPS website section on registration: [Wider Psychological Workforce Registration | BPS](#)

- **How are CAPs accredited?**

Clinical Associate in Psychology (CAP) training programmes are accredited by the British Psychological Society. This means that the programme is required to meet the Standards for the Accreditation of Applied Psychology Programmes for Associate Psychologists (Associate Psychologists - Standards for Accreditation.pdf (bps.org.uk)).

If a CAP has completed an accredited training programme then they may register on the BPS wider psychological workforce register. In order to meet the registration requirements they will need to have completed an accredited training programme, they will have to meet the standards for supervision and continuing professional development, they will need to be working within their scope of practice and they will need to abide by the BPS Fitness to Practice Framework and act in accordance with the BPS Code of Ethics and Conduct. There is further information on the requirements for registration as a CAP on the BPS website: *Wider Psychological Workforce Registration | BPS*.

Whilst registration is not a statutory requirement for CAPs, employers may choose to include registration within the person specification for CAP job roles.

- **Wouldn't we be better sticking with assistant psychologists instead of CAPs?**

The CAP role has been developed to bridge the gap between unqualified APs and Applied Psychologists.

CAPs are not intended to replace Assistant Psychologists. The CAP role is different in that Assistant Psychologists have no nationally agreed training nor are they exposed to a national curriculum. The more in-depth training and exposure to supervised practice under the guidance of Applied Psychologists offers a better

development opportunity for people than the majority of Assistant Psychologist posts. For many people, the CAPs role provides an alternative career opportunity to work as a professional psychologist.

- **Are there advantages of apprenticeship programmes?**

There are numerous advantages to developing skills and knowledge through Apprenticeship training. You are able to focus your learning on specific areas of practice within a clinical environment. On your apprenticeship, you will be learning, and regularly practising, a particular skill set in a real-life setting with professionals. Apprenticeships can be flexible with regard to personal commitments and responsibilities. You earn a salary while you are learning, and do not incur any further student debt. You are usually able to access the same benefits offered to permanent employees, such as lease car, travel, equipment and access to CPD. You work under appropriate supervision and guidance in the context that you will ultimately work in once qualified. You train for one specific role. You will usually be studying to fill a specific role, which means by the time you complete your apprenticeship, you will be familiar with the specific work environment, colleagues and the employing organisation. Once you complete your Apprenticeship, continuing to gain work experience in your specific field of practice can enable you to advance your career, develop further skills or embark on further learning and development opportunities.

- **Can CAPs work autonomously and carry a caseload independently?**

While in training, CAPs are closely supervised and have an expectation of at least an hour of supervision weekly with a practitioner psychologist. During training their caseload needs to be monitored to ensure that it is meeting their training requirements, and overall responsibility for their work needs to sit with qualified professionals, whether this be their clinical supervisor, workplace mentor, or line manager. While trainee CAPs will make autonomous decisions up to a certain level – for example, particular therapeutic interventions to try on a week by week basis with specific clients – broadly speaking as trainees they need to not be considered as autonomous professionals.

Once qualified, CAPs are best understood as ‘semi-autonomous’ professionals. They work autonomously with support and under the supervision of a practitioner psychologist. Over time they are likely to require less supervision than during training, reflecting an expectation that with experience they will become more capable of taking autonomous decisions at a higher level – for example, they may make most decisions about the nature of an intervention, including when a client can be discharged, independently. As with all psychology professional roles, they are expected to work within the boundaries of their competence, skills, knowledge and experience and to have appropriate supervisory oversight for their level of work. The clinical supervision expectations of the BPS as their registering body are higher than most autonomous professionals, and the broader approach that they take to their work will continue to require oversight from a practitioner psychologist.

What are the added responsibilities when supervising a CAP trainee or qualified CAP when compared to trainee Clinical Psychologists?

Whilst there are many similarities between supervising CAP Apprentices and Trainee Clinical / Counselling Psychologists, there are also some differences. As CAPs train within their workplace, the Supervisor (or Clinical Educator in Apprenticeship language!) is responsible for monitoring their competency development and, ultimately, signing CAPs off as competent to complete their EPA (the final assessment on this training route). It is the supervisor's role to support the learning and development of the CAPs under their supervision. Where CAPs are new to a team or context, this may also include championing the new role and support the context to make best use of CAPs time. They may also be involved in the assessment of the CAP (including through portfolio development, recordings or observations of clinical practice or alike). The supervision requirement for CAPs, as directed by the BPS, is 1 hour per week as a minimum. Whilst an apprentice, the CAP trainee must have a designated mentor who is able to contribute to the regular tripartite reviews carried out that include the employer, apprentice and training provider. These are an ESFA funding requirement.

The University courses offer support to supervising psychologists as well as to apprentices/trainee CAPs, offering a more bespoke experience.

- **Who can supervise CAPs as apprentices and once qualified?**

CAP apprentices are required to be supervised by a registered Practitioner Psychologist, most often a clinical or counselling psychologist. Once qualified they should continue to be supervised by a registered Practitioner Psychologist. As for all psychology profession roles, CAPs should work within the boundaries of their competence, skills, knowledge and experience and have appropriate supervisory oversight for that level, which will obviously vary according to their level of experience.

- **Do qualified CAPs need their notes and letters countersigned?**

There is no regulatory direct answer to this so ultimately this would be a decision led by the employer.

The CAP occupational standard notes that CAPs are 'able to practice autonomously with appropriate support, working within their scope of practice, under the supervision of an appropriately registered HCPC practitioner psychologist'. In this document there is nothing suggesting that CAPs, as Band 6 qualified professions, need their written records countersigned.

The BPS registration for qualified CAPs describes the CAP as 'a semi-autonomous practitioner' who provides specific clinical activities with the support of, and under clinical supervision from an HCPC registered practitioner psychologist.' BPS CAP registration makes no mention of the need for clinical notes to be countersigned.

Qualified CAPs, are practising at band 6 and are, by definition, Masters level qualified. They have passed all requirements of the training programme, including clinical requirements and being signed off by a HCPC registered Practitioner Psychologist. They should be registered with the BPS.

Given the above there are no clear grounds for why qualified CAPs should automatically be having letters and notes countersigned.

- **Are there limitations to the scope of practice of a qualified CAP?**

Yes. BPS accredited CAP training in England prepares trainee CAPs to work either with Children and Young people, or with Adults (which can include Older adults), but not with both. Child qualified CAPs should not be working in Adult focused services and vice versa, this is reflected in how the BPS register for CAPs has been established. Outside of this split it should be recognised that the training of CAPs includes much common focus on the development of core duties/competencies, such as assessment and formulation skills, intervention skills, service development, research etc., which clearly cross many areas of work. Given the nature of the apprenticeship model during their training CAPs are often working in one particular service meaning much of their training is focused to that service need. For example, during training a child CAP might work exclusively in a Community Neurodevelopmental service or an Adult CAP might work in an Inpatient setting. However, all qualified CAPs will have completed all aspects/duties of their training programme and shown all relevant competencies. This means that in practice CAPs can, and are able to move between services within their training route. To ensure transparency around training and scope of practice the BPS register requires CAPs to state their area of training and provide details regarding this. This enables future employers to use this information as part of their recruitment and selection process.

- **Can CAPs provide therapies?**

CAPs are trained to provide psychological interventions under the supervision of a qualified practitioner psychologist. They are trained to work with a specific population, using specific psychological theory and evidence to find the best intervention to meet their needs. CAPs create a psychological formulation of needs, and apply specific intervention theory and skills to meet the identified needs. In training, this will include at least one accepted model of psychological intervention, but whether this training meets the specific criteria for any therapy intervention registration is dependent on the training course. The IfATE occupational standard states that CAPs will develop the following skills:

- Assess individuals and/or families using a variety of approaches and a range of psychological assessment methods to assess baseline and change post-intervention.
- Implement best practice by conducting assessments and treatment interventions according to evidence-based practice where there are limited treatment protocols to guide practice.
- Apply a range of psychological interventions consistent with assessment and diagnosis/formulation.
- Deliver psychological treatments appropriate to the level of patient need and provide treatment at an appropriate level of frequency and duration in the context of distress and complexity.
- Plan and implement evidence-based psychological treatment models and protocols while providing an individual patient rationale.

- **How long is the training for CAPs?**
 CAPs training is typically between 12-18 months. This is often split into 2 periods. The first is focused on developing and demonstrating the required clinical competencies under the supervision of a practitioner psychologist. At the end of this period, apprentices go through 'gateway' which is a process where their employer sign them off as operating at the level of a qualified CAP. Once through gateway, apprentices are able to complete the End Point Assessment (EPA) and which forms the final assessment of their training.
- **What would be an expected case load for a trainee CAP/how many people do they see in a week?**
 This will depend on the service in which they are training, the nature of their work in the service, and their level of experience. 'Case load' as a part of their overall work load should be agreed with their supervisor and in line with recent BPS guidance.
- **Can CAPs work in Learning Disability and Older Adult services?**
 CAPs are well-suited to working in specialist environments such as Learning Disability services. CAP apprenticeships mean that much of their skills development is through shadowing qualified staff and learning under observation. They can focus their learning and skills development on the specific area of specialism or practice. There have been developments in Masters CAP training courses that focus on Neurodiversity and Learning Difficulty services, and trainees who have a particular interest in the behavioural, interpersonal and cognitive challenges facing people with neurodiversity and learning needs can specialise in these areas of clinical practice.
- **Can CAPs work in inpatient settings?**
 CAPs are well-suited to work in in-patient settings and have worked successfully on wards in Essex and other Mental Health Trusts. Work has included after-hours and weekend group activities that have enabled consistency in support and treatment over periods that are sometimes perceived by service users as being unstructured or resulting in gaps in support provision. They have worked jointly with Occupational Therapists, Social Workers and qualified Psychologists, and as well as improving the amount of 1:1 work carried out on wards. In-patient environments are well-suited to observation of practice, and multidisciplinary learning.
- **What is the career pathway for a CAP?**
 Following qualification, CAPs can continue their professional development along three broad routes:

 - Psychological Therapies e.g. High Intensity Worker (HIW TT), Family Therapist, CBT therapist, psychotherapist
 - Leadership roles e.g. Team Lead, service lead, Director, CEO
 - Practitioner Psychologist e.g. Clinical or Forensic Psychology

- **Where are CAPs currently based and what different roles do CAPs work in?**
 CAPs are part of the wider psychological workforce and therefore CAP posts will be found in a wide range of settings ranging from services for young people, to schools, to secondary care community mental health services, to inpatient settings and specialist services. However, individual CAPs are trained to work with a specific service user group, which will be linked to their training setting. Across England, CAPs are currently found, for example, in PCN Mental Health teams, Community Mental Health Complex Care Teams, In-patient wards, Schools, Early Intervention in Psychosis teams, Eating Disorders teams, Neurodiversity Services (ASD and ADHD), Perinatal Services, Learning Disabilities teams, Forensic Services, Clinical Health Psychology Services, etc.
- **Can a CAP be employed at band 7?**
 Not currently
- **Is there an Advanced CAP role?**
 Not at present, however this does not exclude the potential to develop further CAP roles, and the Trailblazer Group is actively considering the development of this.
- **Is there a national CAP JD/PS?**
 As a new role, there is no current Agenda for Change National Profile for Clinical Associate in Psychology apprenticeship or qualified roles. However, the CAP Job Description and Person Specification has been matched by numerous independent provider organisations, through independent job matching panels, and all have resulted in matching to Band 5 as an Apprentice Trainee CAP, and at Band 6 as a qualified CAP. It is the responsibility of the Job Evaluation Group (JEG) to manage and maintain the national job profiles. JEG is a subgroup of the NHS Staff Council and consists of representatives of both the NHS trade unions and NHS organisations, including NHS employers. In exceptional circumstances JEG can accept requests for new national profiles from professional or other bodies representing occupational groups. This is one of the tasks that the CAP Trailblazer Group seeks to pursue, however it is recognised that it would be better to do this once CAPs are better established throughout England.
- **What is the difference between a CAP and an AP?**
 There are a number of key differences between CAPs and Assistant Psychologists (APs). Firstly, APs require an undergraduate degree in psychology to perform their duties, and will not necessarily have received any specific professional training regarding the work they are expected to undertake, while a CAP also has an undergraduate degree in psychology and additional extensive professional training related directly to their work tasks. This gives a higher level of assurance about the work that can be expected of them. Secondly, CAPs are applied psychological practitioners, with a skillset that allows semi-autonomous formulation-informed assessment and intervention. In comparison, AP roles are more likely to be about supporting other people's clinical work, undertaking service-based tasks and processes, or else undertaking some direct clinical work with a greater degree of clinical supervision than a CAP. Finally, the AP role is generally understood to be a stepping-stone into further clinical training, instead of

being a career job role. In comparison, the CAP role is an appropriate full time and permanent employment in its own right.

- **What is the difference between a CAP and a Mental Health Wellbeing Practitioner (MHWP)?**

There are many important differences between CAPs and MHWPs, however the main difference is that CAPs are Applied Psychologists and have a degree in psychology recognised by the British Psychological Society (BPS). This foundation level training in psychology supports and enables them to go on to complete a Master's degree level training in applied psychology. CAPs are trained to deliver high-quality evidence-based psychological assessments and psychologically informed interventions often working within a multi-disciplinary setting with service users who have multiple difficulties. CAPs can also contribute to service improvement and service-based research, as well as undertaking clinical work as an autonomous and accountable practitioner, under the supervision of a registered Applied Psychologist.

MHWPs do not need a psychology degree or any previous experience in working in mental health, they are trained to postgraduate or graduate certificate level to provide evidence-based interventions and to co-ordinate care plans for adults with severe mental health problems. They do not provide psychological therapy but help people recover and improve their lives by delivering effective wellbeing interventions.

- **What's the difference between a CAP and a Clinical Psychologist or Psychological therapist?**

A CAP is trained to deliver high-quality evidence-based psychological assessment and psychologically informed intervention often working within a multi-disciplinary setting with service users who have multiple difficulties. However, unlike a Clinical Psychologist, CAPs are trained to work with a specific service-user group and therefore work within a more restricted scope of practice. CAP training typically takes 18 months via the apprenticeship route and is a Masters-level qualification whereas Clinical Psychology training takes 3 years and is a doctoral level qualification, typically with substantial prior experience expected. Clinical Psychologists are required to be registered with the Health and Care Professions Council and hold clinical responsibility for their work. Clinical Psychology posts usually carry additional responsibilities for clinical supervision, service development, leadership and research, and tend to work with the most complex clinical presentations. While CAPs may well contribute to service improvement and service-based research, as well as undertaking clinical work as an autonomous and accountable practitioner, this would all fall under the supervision of a registered Clinical Psychologist.

- **Is there an example of a job plan?**

Yes. A number of services have specific job plans that are appropriate to their context. These can be obtained from NHS Trusts that employ CAPs.

- **Is the CAP considered a core profession?**

As there is no specific or defined explanation or definition of a “core profession” in NHS policy and practice that we know of, there is no reason why CAPs should not be considered a Core Profession. The role is acknowledged as an applied psychologist in the NHS Psychological Professions taxonomy.

- **Who would be well-suited to apply for CAP training?**

CAP training would be a good fit for someone with a Psychology degree who is interested in working in a ‘hands-on’ clinical role. It is a valued role in its own right with opportunities for ongoing career development. It may be a good fit if you would prefer not to undertake doctoral level training, which has a strong research emphasis and requires a three-year intensive period of training. The CAP training is a Masters level training so does require significant level of post-graduate academic ability; however there is typically a wider range of degree classes accepted in the MSc CAP entry criteria, meaning that this route is more accessible to those who may not have demonstrated their full potential in their undergraduate degree.

- **How do we define a CAP and what makes them unique?**

CAPs are psychology graduates who have undertaken professional training to allow them to undertake formulation-informed psychological work with a specific clinical population, with a set of skills that allow them to support the evaluation and development of the service they work within and support the colleagues they work alongside. They are unique amongst the typical psychology graduate roles in their capacity to develop and utilise individualised formulations, though their training with a single clinical population and their capacity for semi-autonomous rather than autonomous work are two of the main things that separate them from registered Practitioner Psychologists. A paper discussing this in more detail highlights what CAPs and employers see as unique about CAPS (see Table 3) <https://osf.io/preprints/osf/ujztd>

- **How are CAPS different to therapists and other MH roles?**

CAPs are trained to deliver psychological interventions informed by individualised formulations. Although these interventions may often hold a therapeutic process that has analogies with other formal therapies, there are key differences. Firstly, most Psychotherapists will have undertaken extensive training in delivering therapy through a specific therapeutic model’s lens. CAPs do not have this depth of training in any one model, and so would not be expected to perform at the same level of competence and expertise in any single model as their Psychotherapist colleagues would do (without having taken additional training).

- **How can employers book places on a CAP course?**

Employers should speak with CAP training providers in their area to see what training routes and pathways they have available and timescales for new cohorts. A list of CAP apprenticeship providers is here: Training providers for Clinical associate in psychology (CAP) (integrated degree) (level 7) (education.gov.uk) Whilst there are considerable overlaps, given the need for all programmes to adhere to BPS and apprenticeship standards, different programmes have some differences in terms of requirements at entry so check directly. However all

employers will need to ensure they have a Band 5 funded Trainee CAP post for their new staff member to go into, access to a means to fund the training component (normally the apprenticeship levy) and access to a HCPC registered practitioner psychologist to cover supervision requirements.

CAP courses can normally support with understanding these requirements and when these are in place employers can move to thinking about recruitment, which is normally done jointly with the CAP course.

- **What are the entry requirements for CAP training?**

In order to apply for an MSc Clinical Associate in Psychology apprenticeship training you will need to have a Psychology degree, and have the ability to take on a robust and demanding academic Masters level training. This would usually be a BSc (Hons) in Psychology or a Masters Psychology conversion course (or equivalent). Whatever Psychology degree you have, you need to be eligible for Graduate Basis for Chartered Membership (GBC) of the British Psychological Society (BPS). You can find more information about GBC on the BPS website: <https://www.bps.org.uk/>

To complete the apprenticeship you will also need to evidence that you have passed English and Maths at level 2. This is equivalent to a GCSE grade A-C. Please be aware that not all qualifications are considered equivalent for these purposes. If you do not have the necessary evidence of achieving these English and Maths qualifications you will need to undertake some additional learning alongside the MSc qualification in order to achieve the relevant 'level 2' qualification. Already holding a bachelor or post-graduate degree does not supersede this requirement.

- **What are the limitations of CAP training wrt other NHSE funded courses?**

NHSE will not pay for further NHSE-funded training for a period of 2 years after the end of the NHSE-funded training course. CAPs are included in this agreement, as the apprenticeship levy is considered to be equivalent to public funding. Therefore CAPs completing an apprenticeship training will not be able to apply for a course funded by NHSE (such as Clinical Psychology Training) for a period of 2 years after they qualify.

- **What is the role of OFSTED in training of CAPs?**

As a degree level apprenticeship training programme, CAPs is subject to OFSTED oversight. This means that CAP training providers will be periodically visited by OFSTED to ensure they are providing excellent training opportunities. Following visits they will be given an OFSTED rating and also feedback on what they do well and what they could do to improve.

- **Can CAPs go on to train as Clinical Psychologists? Or other applied psychologists?**

Yes, but see limitations discussed above

- **Are there good resources or websites that tell us more about CAPs?**

Institute for Apprenticeships and Technical Education -

<https://www.instituteforapprenticeships.org/>

British Psychological Society - <https://www.bps.org.uk/>

NHS Health Careers - <https://www.healthcareers.nhs.uk/>

Clinical Associate in Psychology Degree Apprenticeship Video:

https://www.youtube.com/watch?time_continue=2&v=oNGm2kh9siM&embeds_referring_euri=https%3A%2F%2Fwww.uea.ac.uk%2Fcourse%2Fapprenticeship%2Fclinical-associate-in-psychology-masters-apprenticeship-children-and-young-people&embeds_referring_origin=https%3A%2F%2Fwww.uea.ac.uk&source_ve_path=MzY4NDIsMjg2NjY&feature=emb_logo

Example FAQs included in recruitment for CAP Trainees:

What is a CAP?

A Clinical Associate in Psychology is trained to work as an accountable professional within the wider psychological workforce. The broad purpose of the CAP role is to provide high quality evidence based psychological interventions, drawing on psychological assessments and formulations.

CAPs work autonomously in their day to day practice, with support and under the supervision of a registered Clinical Psychologist.

CAPs are trained to work with specific population groups rather than across the full range of the lifespan and therefore have a more restricted role than that of a Clinical Psychologist. CAPs fill the workforce gap between Assistant Psychologists and Clinical Psychologists. CAPs often work within the context of a multidisciplinary team and may work with service users who have multiple long-standing difficulties. CAPs may also contribute to service-based audit and research, along with training and supervision of other staff, within their scope of practice.

What training is required?

In order to qualify as a CAP, a Masters level training is required. This could be either a self-funded MSc Clinical Associate in Psychology (which includes clinical placement experience as a part of the degree) or a degree apprenticeship leading to an MSc Clinical Associate in Psychology qualification.

The MSc Clinical Associate in Psychology degree apprenticeship is an 18-month course and is a paid role that includes work-based learning. CAP training programmes are accredited by the British Psychological Society. This means that CAP programmes are required to meet the training standards set out by the BPS and are subject to an approval process.

What is a degree apprenticeship?

A degree apprenticeship is a full-time paid job where learning involves a combination of work-based 'on-the-job' training and academic learning through a training provider. Apprentices undertaking a degree apprenticeship are required to complete academic assignments and attend teaching much as they would for any other university degree; however, a substantial part of their learning takes place as part of their job role. All clinical work is undertaken under the supervision of a registered Clinical Psychologist.

What qualifications do I need to apply?

In order to apply for a MSc Clinical Associate in Psychology apprenticeship training you will need to have a **Psychology degree**, and have the ability to take on a robust and demanding academic Masters level training. This would usually be a BSc (Hons) in Psychology or a Masters Psychology conversion course (or equivalent). Whatever Psychology degree you have, you need to be eligible for **Graduate Basis for Chartered**

Membership (GBC) of the British Psychological Society (BPS). You can find more information about GBC on the BPS website: <https://www.bps.org.uk/>

[To complete the apprenticeship you will also need to evidence that you have passed English and Maths at level 2. This is equivalent to a GCSE grade A-C. Please be aware that not all qualifications are considered equivalent for these purposes. If you do not have the necessary evidence of achieving these English and Maths qualifications you will need to undertake some additional learning alongside the MSc qualification in order to achieve the relevant 'level 2' qualification. Already holding a bachelor or post-graduate degree does not supersede this requirement.](#)

What if I don't have a Psychology degree?

If you are interested in a career as a CAP but don't have a Psychology degree, there is further information on the BPS website about options for conversion degrees. These are usually one-year courses available to people who hold a degree in a different subject and who wish to convert to a Psychology degree. The BPS website has a list of all accredited Psychology conversion courses:

<https://www.bps.org.uk/public/become-psychologist/accredited-courses?type=CONV&status=C>

How much experience is needed?

We'd expect CAP apprentices to bring some experience relevant to their future work as a CAP. This may be experience gained alongside or after you completed your undergraduate degree. It may be experience you bring from time in a related career. It may be experience of work within your community. We'd expect to see how you have learned from work and voluntary experience.

What kind of experience counts?

Any experience that is relevant to working in a mental health or healthcare setting, and/or experience working with people experiencing psychological distress would be helpful. We will take into consideration paid and unpaid experience, including voluntary work that you might have undertaken in local community organisations. We are also interested in experience that you might have had in a previous career or role, as well as lived experience you might have as a carer or service user.

What about diversity? Will I fit in?

We are actively seeking to ensure that the psychological workforce reflects the ethnic, gender, social and economic diversity of the wider population it serves. There are many possible pathways into a CAP apprenticeship post and therefore we anticipate there being a mix of people in the training cohorts, including some who may have worked in a different role previously and now seek a career change.

Can I also apply for Clinical Psychology Training?

You cannot apply for Clinical Psychology training while you are training as a CAP apprentice. The CAP apprenticeship training is publicly funded via the Education Skills

Funding Agency. You should not apply for another publicly funded training post (such as the Doctorate in Clinical Psychology) that will commence while you are undertaking the degree apprenticeship. You also should not apply for an apprenticeship post if you are currently undertaking other publicly funded training that won't be completed at the start of the apprenticeship training.

Please be aware that NHSE have recently introduced some additional limitations that restrict access to publically funded training courses until **two years post qualification** in another publically funded programme. This affects programmes such as PWP, High Intensity CBT training, CAPs and Clinical Psychology. Please check the Clinical Psychology Clearing House website for more information about this.

What are the career progression prospects for CAPs?

Once qualified, you may apply for a Band 6 CAP post. In this post you would work as an autonomous practitioner, within your area of training, supervised and supported by a registered Clinical Psychologist. A Band 6 CAP post will offer you scope to undertake substantial clinical work (including delivering psychological assessment and interventions), as well as to work within a multi-disciplinary team, contributing to the supervision, support and training of others.

Once you have gained experience working as a qualified CAP in a Band 6 post there will be opportunities to progress further if you wish to. For example, you may wish to undertake further CPD (Continuing Professional Development) to support you in progressing to a team management position, or in gaining further accreditation in a specific psychological therapy. You may also wish to consider applying for further doctoral level training to progress to a Clinical Psychology or Counselling Psychology qualification once you have worked as a qualified CAP for a period of time.

Are CAPs registered practitioners?

While CAPs are fully trained, accountable practitioners expected to abide by the professional practice and ethical guidance of the British Psychological Society, CAPs are not subject to statutory (legal) registration under the Health and Care Professions Council. Therefore, CAPs are required to work under the supervision of an HCPC registered Practitioner Psychologist. CAPs **are** eligible to join the professional register with the British Psychological Society when they qualify, and this is likely to be required by employers in the NHS.

What is the difference between a CAP and a High Intensity Therapist?

Psychological Wellbeing Practitioners and High Intensity Therapists who work within IAPT (Improving Access to Psychological Therapies) are trained to use problem-specific treatment protocols and model-specific interventions, usually within the context of treating common mental health difficulties (such as anxiety and depression). While CAPs will draw on problem-specific interventions (such as CBT for depression), as a CAP you will be trained to use the wider evidence-base, to formulate interventions and to inform the management of psychological distress associated with multiple co-existing difficulties and long term conditions. You will deliver formulation-lead interventions, within your area of training (e.g. Adult Mental Health) often with service users with long-standing and co-

existing difficulties. You may also use community-based approaches and work indirectly by supporting other colleagues in drawing on psychological perspectives in their work.

What is the difference between a CAP and a Clinical Psychologist?

A CAP is trained to deliver high-quality evidence-based psychological assessment and psychologically informed intervention often working within a multi-disciplinary setting with service users who have multiple difficulties. However, unlike a Clinical Psychologist, CAPs are trained to work with a specific service-user group and therefore work within a more restricted scope of practice. CAP training typically takes 18 months via the apprenticeship route and is a masters-level qualification whereas Clinical Psychology training takes 3 years and is a doctoral level qualification, typically with substantial prior experience expected. Clinical Psychologists are required to be registered with the Health and Care Professions Council and hold clinical responsibility for their work. Clinical Psychology posts usually carry additional responsibilities for clinical supervision, service development, leadership and research, and tend to work with the most complex clinical presentations. While CAPs may well contribute to service improvement and service-based research, as well as undertaking clinical work as an autonomous and accountable practitioner, this would all fall under the supervision of a registered Clinical Psychologist.

More information about the CAP apprenticeship, with specific information detailing the occupational role of CAPs, can be found on the Institute for Apprenticeship website:

[https://www.instituteforapprenticeships.org/apprenticeship-standards/clinical-associate-in-psychology-\(cap\)-\(integrated-degree\)-v1-0](https://www.instituteforapprenticeships.org/apprenticeship-standards/clinical-associate-in-psychology-(cap)-(integrated-degree)-v1-0)

How do I apply for a CAP apprenticeship?

As these are apprenticeship posts, the recruitment is done via the services themselves rather than through the training provider. In most cases CAP apprentice posts are advertised on the NHS Jobs website and usually also via the Trust website. For posts in EPUT have a look at our 'Working Here' and 'Latest Jobs' links. The CAP posts are usually listed under 'Allied Health Professionals'.

Please feel free to distribute these FAQs wherever needed, and add them to any media associated with information regarding CAPs. Any further queries can be sent to greg.wood@nhs.net

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