

Mr G McKee
Commons Clerk
Joint Committee on the Draft Mental Health Bill
Scrutiny Unit
7 Millbank
London
SW1P 3JAI

15 November 04

Dear Mr McKee

Re: Professions taking on the role of Clinical Supervisor

Thank you for your letter. The Royal College of Psychiatrists supports the views of the committee that currently senior clinical psychologists may have extensive experience and authority in relation to a number of forensic inpatients, particularly in high and medium security, but much less experience in relation to general adult and rehabilitation services.

Within the profession of psychiatry there are consultants whose training would not support their undertaking the role of clinical supervisor in relation to severely mentally ill patients eg consultants in psychotherapy or substance misuse. Equally general adult psychiatrists generally lack the expertise to act as clinical supervisors for learning disabled patients or children.

In other words the College is supportive of a range of suitably trained professionals being able, in principle, to undertake the duties of a clinical supervisor. However Trusts would need to exercise great care in determining who should act as a clinical supervisor in relation to individual or particular groups of patients.

The College notes that the British Psychological Society, in its evidence, suggested that there should be equivalent training for both groups of professionals in relation to clinical supervisor responsibilities. We cannot wholly support this view because the training which underpins the ability to act as clinical supervisor consists of all the person's professional training. The College firmly believes that for the vast majority of severely mental ill patients in general adult and old age services it is essential for the clinical supervisor to have a medical training. A range of medical illnesses play

an important part both in relation to the causes and consequences of psychiatric disorders.

In summary the Royal College is supportive of clinical psychologists undertaking the role of clinical supervisor with those patients where their training and expertise would be effective and where there is little need for more general medical education. This would largely confine their role to non-psychotic patients usually in longer-term forensic settings.

I hope this answer is clear. Please let me know if further clarification is required.

Yours sincerely

A S Zigmond
Vice President
Royal College of Psychiatrists