

**Pensions Remedy Project Team
HM Treasury**

Response for the Chartered Society of Physiotherapy

The Chartered Society of Physiotherapy (CSP) is the professional, educational and trade union body for the UK's 59,000 chartered physiotherapists, physiotherapy students and support workers.

Physiotherapists are autonomous practitioners, able to independently assess, diagnose and prescribe medicines. The contribution of physiotherapy can be seen at many points of a care pathway as physiotherapists work as clinical leaders, first contact practitioners and multi-professional team members, to support patients in hospital, home, community and leisure environments.

We are responding to this consultation on behalf of our members, employed within the NHS and those that provide NHS services and are members or ex members of the NHS pension scheme.

1. The proposal to provide the option for members to choose between receiving legacy or reformed scheme benefits during the period between 1 April 2015 and 31 March 2022. (The remedy period)

- 1.1 The CSP welcomes the option for all our members that are or have been active in the NHS pension scheme and in scope of the consultation to be provided the option of receiving the benefits accrued in their legacy or reformed scheme
- 1.2 CSP members in scope of the consultation, having retired and accessed their NHS pension benefits should be prioritised by offering them the choice of benefits as soon as is reasonably practicable
- 1.3 CSP members in scope of the consultation and are deferred members of the NHS pension scheme should be prioritised by offering them the choice of benefits as soon as is reasonably practicable
- 1.4 We welcome and agree that any proposed remedy will be applicable to all CSP members in scope of the consultation, regardless of whether they have lodged a discrimination claim or not

2. Proposed mechanism for making the choice of benefits, 1. An immediate choice, 2. A deferred choice underpin

- 2.1 The CSP believes that a deferred choice underpin is the best and most appropriate mechanism for CSP members to make their choice of benefits
- 2.2 Members cannot be worse off by using a deferred choice underpin approach to the remedy
- 2.3 Deferred choice underpin enables members to see their entire career pathway and therefore the implications of taking benefits from their legacy or the reformed scheme

- 2.4 Deferred choice underpin supports members to take into account the effect of future pay increases and therefore the implications of taking benefits from their legacy or the reformed scheme
- 2.5 Deferred choice underpin supports members to take into account the effect of future inflation on taking the benefits from their legacy or the reformed scheme
- 2.6 Deferred choice underpin supports members in making an informed choice of deciding on taking the benefits from their legacy or the reformed scheme as they will be making that choice with the firm knowledge of their retirement age
- 2.7 Deferred choice underpin spreads the cost of remedy over a long period of time, thus meaning there is no “big hit” to the public purse
- 2.8 An immediate choice can only be based on forecasts and assumptions, all of which may change between the period of making a choice and members retiring
- 2.9 An immediate choice may end up being detrimental for scheme members at retirement and is therefore inappropriate to use as a mechanism for remedy

3. Future pension provision

- 3.1 The CSP understands the proposal for all NHS pension scheme members to be moved into the 2015 scheme as of 1 April 2022
- 3.2 We note the plans for all NHS pension scheme members to be moved into the 2015 scheme following the end of the transitional arrangements in February 2022
- 3.3 We would highlight the number of CSP members and other NHS employees that will remain in the 1995 scheme as at 30 March 2022
- 3.4 The CSP is concerned that the plans to transition these NHS pension scheme members into the 2015 scheme on 1 April 2022 may see many leave the scheme and continue to work, or to leave the NHS and retire and thus have a negative impact on an already strained NHS workforce
- 3.5 The CSP has concerns whether the proposed timescale is achievable given the amount of work required to finalise an outcome, consultation and negotiation with the public sector scheme advisory boards, interactions with the cost cap mechanism, further consultation requirements and the statutory legislation requirements

Claire Sullivan
Director
Employment Relations and Union Services
Chartered Society of Physiotherapy
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For further information on anything contained in this response, please contact:

Jim Fahie
Assistant Director
Employment Relations and Union Services
The Chartered Society of Physiotherapy
14 Bedford Row
London
WC1R 4ED
Website: www.csp.org.uk