

# Publication Report



## NHS Scotland Workforce

Data as at 30 September 2012

Publication date – 27 November 2012



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## About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

## Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

## Introduction

The workforce has a significant role to play in the delivery of quality services that meet the needs of patients and their families and the general public within a modern health service. The Scottish Government published A Force for Improvement in January 2009 as a workforce framework providing a base from which policy and financial decisions can be taken across NHS Boards in partnership with other agencies. A Force for Improvement recognises the importance of workforce data and intelligence in planning the workforce. It needs to be accurate and timely and fit for purpose in supporting planning and decision making at all levels to meet service redesign and delivery needs.

During January 2008 published information changed to reflect the introduction of Agenda for Change. Historically, NHSS workforce information has been published in a format based on the pay structure, namely Whitley for the majority of staff. Agenda for Change is the new, national pay system which has introduced the new pay bands and harmonised terms and conditions for NHS Workers. The main source of workforce statistics is SWISS ([Scottish Workforce Information Standard System](#)). Workforce information was first captured through SWISS in 2007 for the data as at 30th September 2007.

The presentation and format of the published workforce information has been agreed and designed in conjunction with the [ISD Workforce Technical Reference Group](#) which has ISD, NHS Board and Scottish Government representation. It is however recognised that the presentation of the published information will evolve over time as more detailed information is captured via SWISS.

Information available in this release includes;

- All staff in post
- Vacancies (Consultants, Nursing & Midwifery, Pharmacy, and AHPs)
- Nursing and Midwifery student intakes, students in training, and Nursery and Midwifery student attrition rates

As part of the national statistics process, a series of data assurance checks are performed to ensure data due for publication are robust and accurate. However, due to pressures within the ISD Workforce team, it will not be possible to perform all the required checks within the relevant timescales. The content of this release has therefore been reduced, and Turnover will not be published in the Workforce information as at 30<sup>th</sup> September 2012.

Information on Turnover will be published as part of the 26th February 2013 release. This will reflect data as at 30<sup>th</sup> September 2012, and 31<sup>st</sup> December 2012.

As of the 3rd August 2011, National Education for Scotland (NES) has taken responsibility for employing GP Specialty Trainees while they are in the GP component of their training. Previously, these trainees were employed by individual GP practices. As a result the medical staffing, as reported within the ISD Workforce statistics, has increased by; 477 (headcount) and 449.9 (WTE). It is therefore important to take account of these additional medical staff when comparing trends across previous years.

The ISD Workforce Statistics tables that are impacted as a result of the above change include;

- Medical staff in post table;
- HCHS by specialty; and
- HCHS by grade.

As part of on-going IT developments, during 2011 ISD workforce information was migrated in to an ISD workforce data mart. The transfer of these data provided the opportunity to review, and improve, the quality of the information previously reported. However in some instances, for historic workforce data, only the high level staff groupings could be reviewed. For this reason, the numbers presented within the 'Over all staff table' for the staff groups; Medical (HCHS) and Dental (HCHS), for the years 2002, 2005 and 2006, will vary slightly to those numbers published within the more detailed staff grouping tables, including; Medical staff in post table, HCHS by specialty and HCHS by grade.

Over the past year there has been an increasing demand from the public and key stakeholders to have more frequent workforce information reports made available for national use. In response to this, it has been agreed by the [ISD Workforce Statistics Steering group](#) and [ISD Workforce Technical Reference group](#) that workforce statistics should be published on a quarterly basis and this is supported by the Cabinet Secretary for Health, Wellbeing and Cities Strategy. This move will ensure that ISD continues to fully support NHS Boards and the Scottish Government, as part of the on-going planning cycle.

As with all data systems, accuracy of coding is crucial to the quality and credibility of the information captured. It is acknowledged that quality issues exist with regards to workforce information, particularly around the assimilation to AfC, where NHS Boards feel the published data (staff in post) does not truly reflect what is held locally. ISD continue to work with each of the 14 NHS Boards and 8 Special Health Boards, to improve the [data quality](#) of workforce information. Significant progress has been made over the past few years, with ISD now working to address very specific local board data quality issues. The tables within this report present figures in both Headcount numbers and Whole Time Equivalent (WTE). WTEs adjust headcount staff figures to take account of part-time staff. An employee may hold more than one appointment in NHSS. Their appointments may be in more than one NHS organisation, in more than one region, in more than one specialty, or in more than one grade. This issue must be considered when using tables showing Headcount figures as the employee is counted under each organisation / region / specialty / grade they work in but only once in the total. Tables showing WTE figures are not affected.

The headcount and WTE of all medical and dental staff, HCHS medical and dental staff and medical and dental support staff, along with the headcount of General medical Practitioners (GPs) and General Dental Services (GDS) dentists, are also presented.

At present Workforce information published within the ISD workforce website presents staff in post information by Headcount and Whole Time Equivalent. In order to provide additional and more accurate information during the June 2011 National Statistics release, ISD revised methodologies. These changes include the addition of an 'employments' count and revision to the headcount measure. The employment count is available for all Non medical staff, from September 2007 to present.

Definitions for each include;

- Headcount – This refers to the actual number of individuals (employees) working within the NHSS. This eliminates any double counting that may exist as a result of an employee holding more than one post (see employment below).
- Whole Time Equivalent – This is derived by dividing the number of contracted hours by the number of conditioned hours (hours worked). This adjusts headcount staff figures to take account of part time staff.

- Employment - An employee may hold more than one appointment in NHSS. Their appointments may be in more than one NHS organisation, in more than one region, in more than one specialty, or in more than one grade. The 'Employment' variable will count the employee under each organisation / region / specialty / grade they work i.e. the same employee may be counted more than once.

Information presenting 'All NHSS Staff (*including* GPs and GDs)' and 'All NHSS Staff (*excluding* GPs and GDs)' is available as part of this release.

### Revisions

In 2015, the historic workforce files published for September 2012 were reviewed by ISD Scotland. As a result, a number of revisions have been made to the data tables. Revised data and reasons for said changes are highlighted within the affected tables with links provided to the previous figures.

## Key Points

### Annual Comparison: September 2012 to September 2011

- The total number of staff in post (*including* GPs & GDs; headcount) as at 30th September 2012 is 162,234, compared with 161,351 (headcount) as at 30<sup>th</sup> September 2011. This is an increase of 0.5% (883 headcount).
- The total number of staff in post (*excluding* GPs & GDs; WTE) as at 30th September 2012 is 131,845.2, compared with 131,339.6 (WTE) as at 30th September 2011. This is an increase of 0.4% (505.6 WTE).
- The total number of staff in post (*excluding* GPs & GDs; headcount) as at 30th September 2012 is 155,281, compared with 154,541 (headcount) as at 30th September 2011. This is an increase of 0.5% (740 headcount).
- NHS Highland and The Highland Council are working towards developing an integrated model for health and social care and will result in staff transferring between both organisations. As part of the November 2012 publication, 1,491 (headcount) and 1,062.1 (WTE) Highland Council staff are included within the overall table for data at 30th June 2012 and 30th September 2012.
- The number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30th September 2012 is 11,943.9 (WTE), compared to 11,960.7 (WTE) as at 30th September 2011, a decrease of 0.1% (16.9 WTE).
- The number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30th September 2012 is 13,317 (headcount), compared to 13,336 (headcount) as at 30<sup>th</sup> September 2011, a decrease of 0.1% (19 headcount).
- The number of Consultants in post as at 30th September 2012 is 4,476.2 (WTE), compared to 4,428.5 (WTE) as at 30th September 2011, an increase of 1.1% (47.6 WTE).
- The number of Consultants in post as at 30th September 2012 is 4,763 (headcount), compared to 4,719 (headcount) as at 30th September 2011, an increase of 0.9% (44

headcount).

- The number of Nursing and Midwifery staff in post as at 30th September 2012 is 56,263.5 (WTE), compared to 56,309.4 (WTE) as at 30th September 2011, a decrease of 0.1% (45.9 WTE).
- The number of Nursing and Midwifery staff in post as at 30th September 2012 is 65,380 (headcount), compared to 65,448 (headcount) as at 30th September 2011, a decrease of 0.1% (68 headcount).
- The number of Allied Health Professions staff in post as at 30th September 2012 is 9,422.3 (WTE), compared to 9,347.0 (WTE) as at 30th September 2011, an increase of 0.8% (75.2 WTE).
- The number of Allied Health Professions staff in post as at 30th September 2012 is 11,395 (headcount), compared to 11,304 (headcount) as at 30th September 2011, an increase of 0.8% (91 headcount).
- The number of Administrative Services staff in post as at 30th September 2012 is 24,137.1 (WTE), compared to 24,667.5 (WTE) as at 30th September 2011, a decrease of 2.2% (530.4 WTE).
- The number of Administrative Services staff in post as at 30th September 2012 is 28,159 (headcount), compared to 28,859 (headcount) as at 30th September 2011, a decrease of 2.4% (700 headcount).

#### **Quarterly Comparison: September 2012 to June 2012**

- The total WTE staff in post (excluding GPs & GDs) as at 30<sup>th</sup> September 2012 is 131,845.2, compared to 131,425.3 as at 30<sup>th</sup> June 2012. This is an increase of 0.3% (419.8 WTE). The corresponding headcount as at 30<sup>th</sup> September 2012 is 155,281, compared to 154,918 as at 30<sup>th</sup> June 2012, which is an increase of 0.2% (363 headcount).
- As at 30<sup>th</sup> September 2012, total Nursing and Midwifery WTE staff in post increased by 0.1% (79.8 WTE) from 56,183.7 as at 30<sup>th</sup> June 2012, to 56,263.5. The headcount for all Scotland Nursing and Midwifery staff as at 30<sup>th</sup> September 2012 is 65,380, this is an increase of 0.1% (56 headcount) compared to 65,324 as at 30<sup>th</sup> June 2012.
- Across all specialties, the number of Hospital, Community and Public Health Services (HCHS) Medical and Dental staff in post as at 30<sup>th</sup> September 2012 is 11,943.9 (WTE), compared to 11,719.9 (WTE) as at 30<sup>th</sup> June 2012. This is a WTE increase of 1.9% (224.0). HCHS headcount increased by 1.7% (219) to 13,317 in September 2012 compared to 13,098 in June 2012.
- As at 30<sup>th</sup> September 2012, the WTE of Consultants in post is 4,476.2, compared to 4,418.4 at 30<sup>th</sup> June 2012. This is an increase of 1.3% (57.7 WTE). The corresponding headcount for Consultants in post increased by 1.0% (49 headcount) from 4,714 as at 30<sup>th</sup> June 2012 to 4,763 as at 30<sup>th</sup> September 2012.
- Since 30<sup>th</sup> June 2012, the WTE of Allied Health Professions (AHP) staff in post increased by 0.7% (63.6) from 9,358.7 as at 30<sup>th</sup> June 2012 to 9,422.3 as at 30<sup>th</sup>

September 2012. The headcount of AHPs as at 30<sup>th</sup> September 2012 is 11,395, which is an increase of 0.6% (71 headcount) from 11,324 since 30<sup>th</sup> June 2012.

- The number of Administrative Services staff in post as at 30<sup>th</sup> September 2012 is 24,137.1 (WTE), compared to 24,089.8 as at 30<sup>th</sup> June 2012. This is an increase of 0.2% (47.3 WTE). Similarly, the headcount of Administrative Services staff in post increased by 0.2% (55 headcount) to 28,159 as at 30<sup>th</sup> September 2012, compared to 28,104 (headcount) as at 30<sup>th</sup> June 2012.
- Support Services staff in post as at 30<sup>th</sup> September 2012 is 13,703.3 (WTE), this is a decrease of 0.1% (10.5) WTE compared to 30<sup>th</sup> June 2012, when WTE was 13,713.8. Compared to 30<sup>th</sup> June 2012, the corresponding headcount figure as at 30<sup>th</sup> September 2012 decreased by 0.3% (54 headcount) to 18,740 from 18,794.

## Results and Commentary

### Overall Summary

#### Annual Comparison: September 2012 to September 2011

Key points:

- The total number of staff in post (*including* GPs & GDs; headcount) as at 30<sup>th</sup> September 2012 is 162,234, compared with 161,351 (headcount) as at 30<sup>th</sup> September 2011. This is an overall staff headcount increase 0.5% (883 headcount).
- The total number of staff in post (*excluding* GPs & GDs; WTE) as at 30<sup>th</sup> September 2012 is 131,845.2, compared with 131,339.6 (WTE) as at 30<sup>th</sup> September 2011. This is a WTE increase of 0.4% (505.6 WTE). The corresponding headcount for total staff excluding GPs and GDs as at 30<sup>th</sup> September 2012 is 155,281, compared with 154,541 (headcount) as at 30<sup>th</sup> September 2011, an increase of 0.5% (740 headcount).

#### Quarterly Comparison: September 2012 to June 2012

- The total number of staff in post (*excluding* GPs & GDs; WTE) as at 30<sup>th</sup> September 2012 is 131,845.2, compared with 131,425.3 (WTE) as at 30<sup>th</sup> June 2012. This is a decrease of 0.3% (419.8 WTE).
- The total number of staff in post (*excluding* GPs & GDs; headcount) as at 30<sup>th</sup> September 2012 is 155,281, compared with 154,918 (headcount) as at 30<sup>th</sup> June 2012. This is an increase of 0.2% (363 headcount).
- As at September 2012, the largest staff group based on WTE continues to be Nursing & Midwifery, with 42.7% of all NHSScotland staff (excluding GPs and GDs) employed under this staff group. Administrative Services accounts for 18.3%, Support Services 10.4%, and Medical (HCHS) 8.5% (all WTE).

Information is available by NHS Board and region.



Throughout, information is presented as headcount, or whole time equivalent (WTE), or employments. WTE adjusts headcount to take account of part-time staff.

Latest data available is 30th September 2012.

In order to provide additional and more accurate information, ISD have revised methodologies. These changes include the addition of an 'employments' count and revision to the headcount measure. Information available within the overall summary table includes;

- Headcount for years 2007 onwards. Please note due to revisions in the headcount measure, it is not possible to compare data prior to 2007. For this reason, data from 2002 to 2006 is not available.
- WTE for the years 2002 onwards.
- Employments for years 2007 onwards. Please note employments information for Medical and Dental staff is available at a high level staff group only, as presented above. Employments information for Medical and Dental staff at a specialty and grade level is not available.

**Table OAQT1: Overall NHSS workforce summary by staff grouping as at 30th September 2012**

Staff Group	Headcount	WTE	% WTE
<b>All NHSS staff (Inc GPs &amp; GDs)</b>	<b>162,234</b>	<b>..</b>	<b>-</b>
<b>All NHSS staff (Exc GPs &amp; GDs)</b>	<b>155,281</b>	<b>131,845.2</b>	<b>100%</b>
Medical (HCHS)	12,434	11,230.6	8.5%
General medical practitioners (GPs)	4,854	..	-
Dental (HCHS)	886	713.3	0.5%
General dental services	3,060	..	-
Medical & dental support	2,251	1,903.4	1.4%
Nursing & midwifery	65,380	56,263.5	42.7%
Allied health professions	11,395	9,422.3	7.1%
Other therapeutic services	4,122	3,528.8	2.7%
Personal & social care	1,068	896.2	0.7%
Healthcare science	5,863	5,274.0	4.0%
Emergency services	3,751	3,639.7	2.8%
Administrative services	28,159	24,137.1	18.3%
Support services	18,740	13,703.3	10.4%
Unallocated / not known	1,565	1,133.2	0.9%

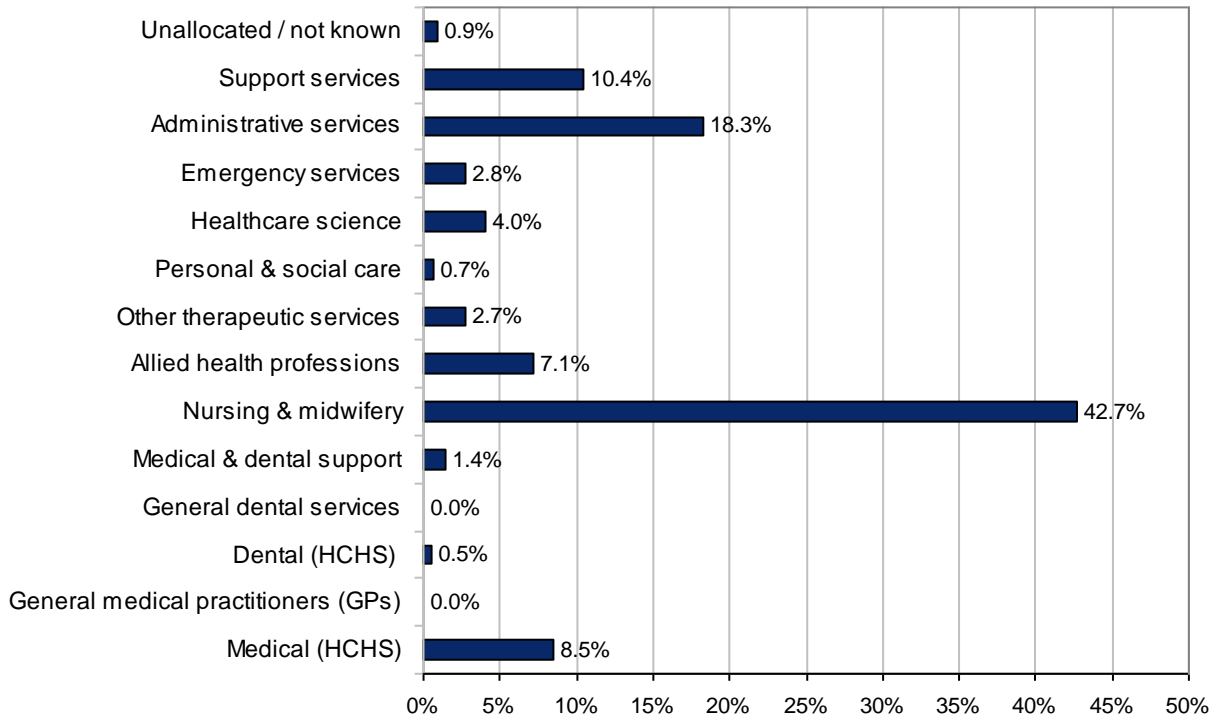
The above table reflects information as at 30<sup>th</sup> September 2012, however additional historic information, for the above table, is available within the ISD Workforce web pages. Notes surrounding this table include;

1. WTE information for general medical practitioners is not available for 2006 onwards. Historical GP WTE figures are coded and need careful interpretation in the light of the coding system. This is explained further at <http://www.isdscotland.org/Health-Topics/General-Practice/GPs-and-Other-Practice-Workforce/Glossary.asp> under "Whole Time Equivalent (WTE)".
2. Information is not collected on the working hours of dentists in the General Dental Service.
3. NHS Highland and The Highland Council are working towards developing an integrated model for health and social care and will result in staff transferring between both organisations. As part of the November 2012 publication, 1,491 (Headcount) and 1,062.1 (WTE) Highland Council staff are included within the overall table for data at 30th June 2012 and 30th September 2012. It is not possible to count these staff within the 'employment' figure as this information is not currently available. In addition, there are a proportion of these staff where no WTE has been recorded and for this reason will not be included within the WTE figure. It is envisaged that details on both employment and missing WTE will be available for future publications.

Source(s): Scottish Workforce Information Standard System (SWISS) – 30<sup>th</sup> September 2012 data extracted 16/10/2012  
 GP Contractor Database (GPCD) – 30th September 2012 extract taken 7th November 2012  
 Management Information and Dental Accounting System (MIDAS) - latest extract taken 15th October 2012.

Chart OAQC1 below shows the distribution of the NHS Scotland workforce by staff group. The largest staff group is Nursing & Midwifery at 42.7%.

**Chart OAQC1: Overall NHSS workforce summary by staff grouping as at 30th September 2012**



[Overall NHSS workforce summary by staff grouping](#)

## Results and Commentary

### Medical and Dental

#### Key points

#### Annual Comparison: September 2012 to September 2011

- The number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30<sup>th</sup> September 2012 decreased by 0.1% (16.9 WTE) to 11,943.9 (WTE). As at 30<sup>th</sup> September 2011, WTE was 11,960.7.
- The headcount number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30<sup>th</sup> September 2012 is 13,317, compared to 13,336 as at 30<sup>th</sup> September 2011, this is a decrease of 0.1% (19 headcount).
- The number of consultants in post as at 30<sup>th</sup> September 2012 is 4,476.2 (WTE), compared to 4,428.5 as at 30<sup>th</sup> September 2011, this is an increase of 1.1% (47.6 WTE). The corresponding headcount figure as at 30<sup>th</sup> September 2012 is 4,763, compared to 4,719 (headcount) as at 30<sup>th</sup> September 2011, which is an increase of 0.9% (44 headcount).
- The consultant vacancy rate as at 30<sup>th</sup> September 2012 is 3.1%, compared to 2.5% as at 30<sup>th</sup> September 2011.
- The number of medical and dental support staff in post as at 30<sup>th</sup> September 2012 increased by 4.1% (74.9 WTE) to 1,903.4, compared to 1,828.5 (WTE) as at 30<sup>th</sup> September 2011.
- The headcount of medical and dental support staff in post as at 30<sup>th</sup> September 2012 is 2,251 compared to 2,165 as at 30<sup>th</sup> September 2011, this is an increase of 4.0% (86 headcount).

#### Quarterly Comparison: September 2012 to June 2012

- The number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30<sup>th</sup> September 2012 increased by 1.9% (224.0 WTE) to 11,943.9 (WTE), compared to 11,719.9 (WTE) as at 30<sup>th</sup> June 2012.
- The headcount number of Hospital, Community and Public Health Services (HCHS) medical and dental staff in post as at 30<sup>th</sup> September 2012 is 13,317, compared to 13,098 as at 30<sup>th</sup> June 2012, this is an increase of 1.7% (219 headcount).
- The number of consultants in post as at 30<sup>th</sup> September 2012 is 4,476.2 (WTE), compared to 4,418.4 as at 30<sup>th</sup> June 2012, an increase of 1.3% (57.7 WTE). The corresponding headcount figure as at 30<sup>th</sup> September 2012 is 4,763, compared to 4,714 (headcount) as at 30<sup>th</sup> June 2012, which is an increase of 1.0% (49 headcount).
- The consultant vacancy rate as at 30<sup>th</sup> September 2012 is 3.1%, compared to 3.0% as at 30<sup>th</sup> June 2012.

- The number of medical and dental support staff in post as at 30<sup>th</sup> September 2012 increased by 2.7% (50.3 WTE) to 1,903.4, compared to 1,853.1 (WTE) as at 30<sup>th</sup> June 2012.
- The headcount of medical and dental support staff in post as at 30<sup>th</sup> September 2012 is 2,251 compared to 2,191 as at 30<sup>th</sup> June 2012, this is an increase of 2.7% (60 headcount).

The figures reported from 2008 onwards are sourced from [SWISS](#) and from the [Practitioner Contractor Database \(PCD\)](#) and [Management Information and Dental Accounting System \(MIDAS\)](#). Figures reported prior to 2008 are sourced from MEDMAN, PCD and MIDAS. Information is presented by staff group, country of qualification, specialty, grade, age group, gender, contract type, NHS Board and region.

## Medical and Dental: Staff in post

Information in this section relates to the medical and dental workforce in NHSS. It describes the Hospital, Community and Public Health Services (HCHS), General Dental, General Practitioner and medical and dental support workforce.

Information available includes staff in post, vacancy and turnover.

Medical and dental services have been changing over the years to meet the needs of an ever evolving health service. In recent years the medical workforce in particular, has been involved in redesigning services to meet the changing demands which is evidenced in the introduction of new roles.

Table MDQT1 shows the headcount of medical and dental staff between September 2002 and September 2012. The number (headcount) of all medical and dental staff has generally been rising steadily over this time period.

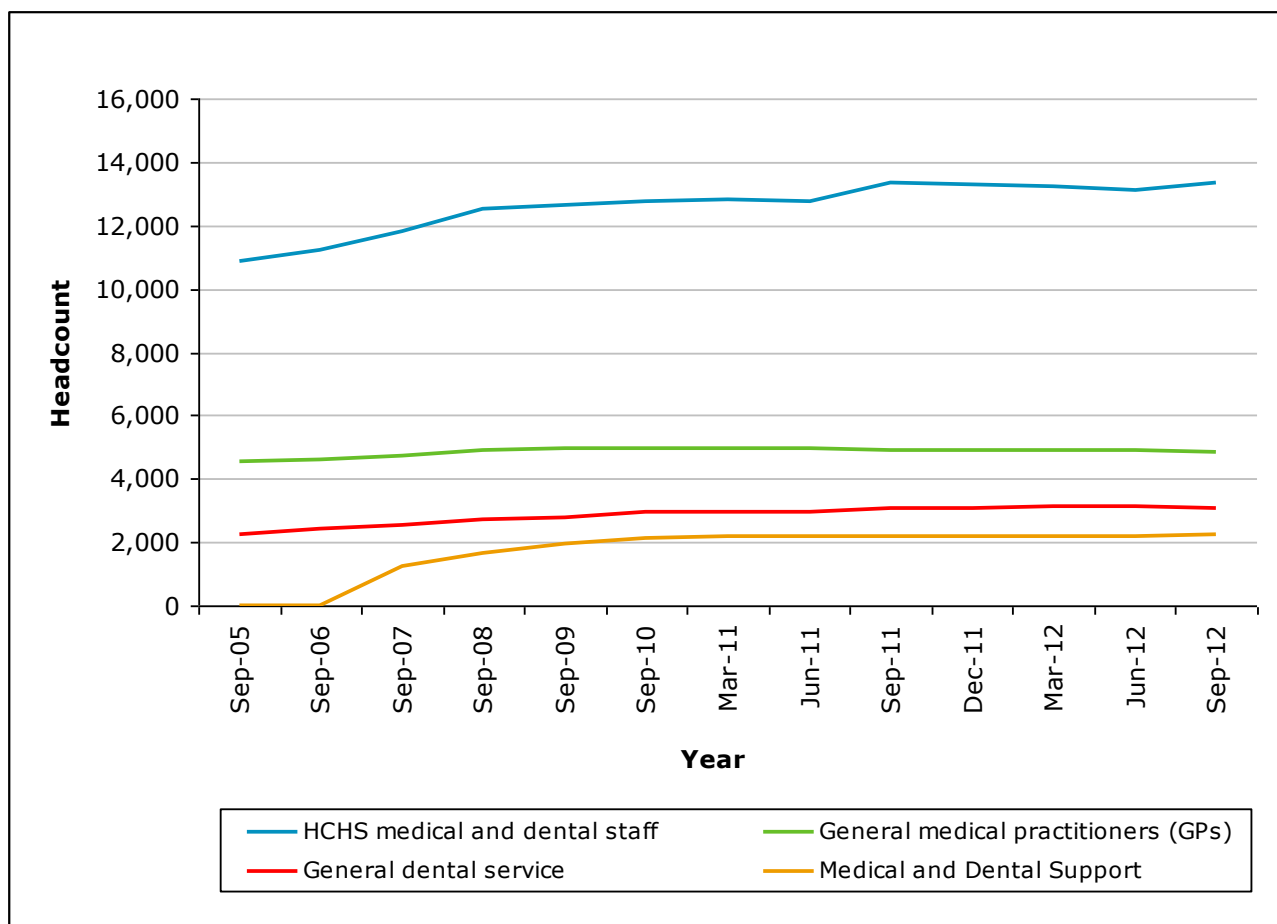
**Table MDQT1: Medical and dental staff (headcount) by year**

Year	HCHS medical and dental staff	General medical practitioners (GPs)	General dental service	Medical and Dental Support
Sept-2002	10,250	4,360	2,078	..
Sept-2003	10,407	4,447	2,112	..
Sept-2004	10,658	4,456	2,156	..
Sept-2005	10,871	4,548	2,267	..
Sept-2006	11,201	4,622	2,434	..
Sept-2007	11,822	4,719	2,546	1,238
Sept-2008	12,534	4,916	2,703	1,667
Sept-2009	12,618	4,942	2,761	1,928
Sept-2010	12,757	4,960	2,968	2,135
Mar-2011	12,786	..	2,940	2,167
Jun-2011	12,736	..	..	2,204
Sept-2011	13,336	4,892	3,048	2,165
Dec-2011	13,312	..	..	2,188
Mar-2012	13,218	..	3,115	2,202
Jun-2012	13,098	..	..	2,191
Sept-2012	13,317	4,854	3,060	2,251

Notes (for Table MDQT1):

1. '..' signifies data is not available.

**Chart MDQC1: Medical and dental staff (headcount) by trend**



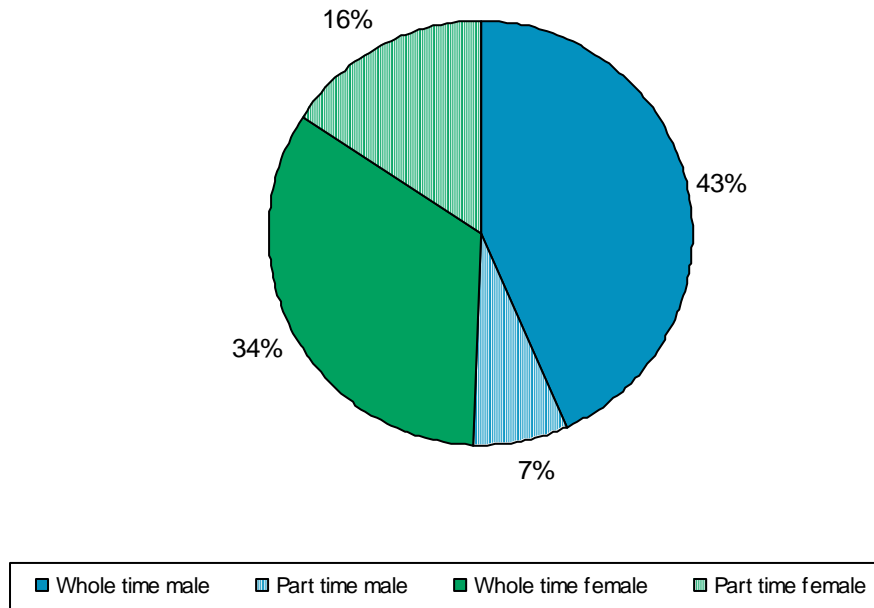
**HCHS medical and dental**

The HCHS medical and dental workforce data presented includes all permanent paid and honorary contracts held by medical and dental staff in post in NHSS. Staff with locum appointments are excluded. The data is sourced from SWISS.

Doctors may hold more than one appointment. Appointments may be in more than one NHS organisation, in more than one region, in more than one specialty, or in more than one grade. In this case, they are counted once under each organisation / specialty / grade but only once in the total.

Chart MDQC2 shows the HCHS medical and dental staff in NHSS by gender and contract type at 30<sup>th</sup> September 2012. This shows that 50% of HCHS medical and dental staff are male and 50% female. Female staff are more likely to have a part time contract compared to males.

**Chart MDQC2: HCHS Medical and dental staff by gender and contract type.**



The number of HCHS medical and dental staff (WTE) is 11,943.9 as at 30<sup>th</sup> September 2012, compared to 11,960.7 as at September 2011, which is a 0.1% (16.9 WTE) decrease. The WTE as at 30<sup>th</sup> June 2012 was 11,719.9, which means there was a 1.9% (224.0 WTE) increase as at 30<sup>th</sup> September 2012.

The corresponding headcount changed to 13,317 as at 30<sup>th</sup> September 2012 compared to 13,098 as at 30<sup>th</sup> June 2012. This is an increase of 1.7%, or 219 headcount. As at 30<sup>th</sup> September 2011, the headcount for HCHS medical and dental staff was 13,336, meaning that since this time last year, HCHS staff in post headcount has decreased by 19 (0.1%).

[Medical & Dental staff in post table](#)

[HCHS medical and dental staff by specialty](#)

[HCHS medical and dental staff by grade](#)



## Results and Commentary

### Consultants

Table MDQT2 shows that the number of HCHS medical and dental consultant staff in post has been increasing since September 2002.

**Table MDQT2: HCHS medical and dental consultant staff in post by year**

Year	Headcount	WTE
Sept-2002	3,411	3,194.8
Sept-2003	3,511	3,283.8
Sept-2004	3,591	3,356.8
Sept-2005	3,719	3,490.9
Sept-2006	3,847	3,624.6
Sept-2007	4,035	3,801.7
Sept-2008	4,581	4,234.4
Sept-2009	4,613	4,252.5
Sept-2010	4,670	4,375.1
Mar-2011	4,714	4,424.9
Jun-2011	4,685	4,400.6
Sept-2011	4,719	4,428.5
Dec-2011	4,712	4,425.7
Mar-2012	4,726	4,427.7
Jun-2012	4,714	4,418.4
Sept-2012	4,763	4,476.2

### Annual Comparison: September 2012 to September 2011

The total number of consultants (WTE) is 4,476.2 as at 30<sup>th</sup> September 2012, compared to 4,428.5 (WTE) as at 30<sup>th</sup> September 2011 (increase of 47.6 WTE, or 1.1%).

The total number of consultants in post (headcount) is 4,763 as at 30<sup>th</sup> September 2012, this is a 0.9% (44 headcount) increase compared 30<sup>th</sup> September 2011 when headcount was 4,719.

Compared to 30<sup>th</sup> September 2011, the WTE for all medical specialties consultants rose by 1.0% from 4,328.7 to 4,373.4 as at 30<sup>th</sup> September 2012. This was an increase of 44.7 (WTE).

The headcount for consultants in all medical specialties also increased since 30<sup>th</sup> September 2011, up by 0.9% from 4,608 (headcount) to 4,650 as at 30<sup>th</sup> September 2012.

As at 30<sup>th</sup> September 2012, the WTE of all dental specialties consultants is 102.7. This is an increase of 2.9% (2.9 WTE) up from 99.8 (WTE) as at 30<sup>th</sup> September 2011.

Similarly, the headcount for consultants working in all dental specialties increased from 113 as at 30<sup>th</sup> September 2011 to 115 as at 30<sup>th</sup> September 2012, this is an increase 1.8% (headcount of 2).

### **Quarterly Comparison: September 2012 to June 2012**

The total number of consultants (WTE) is 4,476.2 as at 30<sup>th</sup> September 2012, compared to 4,418.4 (WTE) as at 30<sup>th</sup> June 2012 (1.3% / 57.7 WTE increase).

The total number of consultants in post (headcount) increased by 49 to 4,763 as at 30<sup>th</sup> September 2012, compared to 4,714 (1.0% increase) as at 30<sup>th</sup> June 2012.

Compared to 30<sup>th</sup> June 2012, the WTE for all medical specialties consultants rose by 1.3% (55.1 WTE) from 4,318.3 to 4,373.4 as at 30<sup>th</sup> September 2012.

The headcount for all medical specialties also rose since 30<sup>th</sup> June 2012 by 48 headcount (1.0%), up from 4,602 to 4,650 as a September 2012.

As at 30<sup>th</sup> September 2012, the WTE of all dental specialties consultants is 102.7. This is a small increase of 2.6%, or 2.6 WTE, up from 100.1 since 30<sup>th</sup> June 2012.

Similarly, the headcount for consultants working in all dental specialties increased from 114 as at 30<sup>th</sup> June 2012 to 115 as at 30<sup>th</sup> September 2012, this was an increase 0.9%.

[HCHS medical and dental consultant staff in post table](#)

## Consultant Vacancy Information

Vacancy management processes to support the implementation of local workforce plans are in place across NHS Scotland. These processes inform vacancy advertising requirements.

Vacancies are therefore defined as 'unfilled posts' as at 30<sup>th</sup> September 2012, which are subject to appropriate recruitment arrangements.

Table MDQT3 shows the number of consultant vacancies (WTE) and total vacancy rate for since September 2002.

**Table MDQT3: HCHS medical and dental consultant vacancies (WTE) by year**

Year	Total vacant posts	of which vacant for less than 6 months	of which vacant for over 6 months	Total vacancy rate
Sept-2002	191.6	124.2	67.5	5.7%
Sept-2003	235.4	113.4	122.0	6.7%
Sept-2004	280.4	167.3	113.1	7.7%
Sept-2005	297.3	137.8	159.5	7.8%
Sept-2006	272.3	107.4	165.0	7.0%
Sept-2007	282.0	118.8	163.2	6.9%
Sept-2008	186.5	117.5	69.0	4.2%
Sept-2009	166.0	88.9	77.1	3.8%
Sept-2010	139.0	77.0	62.0	3.1%
Mar-2011	135.7	95.6	40.1	3.0%
Jun-2011	127.9	87.4	40.5	2.8%
Sept-2011	112.5	72.2	40.3	2.5%
Dec-2011	123.0	91.5	31.5	2.7%
Mar-2012	167.3	131.3	36.0	3.6%
Jun-2012	138.6	92.9	45.7	3.0%
Sept-2012	143.1	95.2	47.9	3.1%

The total vacancy rate increased from 3.0% as at 30<sup>th</sup> June 2012 to 3.1% as at 30<sup>th</sup> September 2012.

[HCHC medical and dental consultant vacancy rate table](#)

## Results and Commentary

### Nursing and Midwifery

These statistics are derived from the new workforce warehouse and sourced from the Scottish Workforce Information Standard System.

Key points:

- As at 30th September 2012, 42.7% of all staff (headcount) in NHSS were employed in the nursing and midwifery staff group.

#### Annual Comparison: September 2012 to September 2011

- The number of nursing and midwifery staff in post as at 30th September 2012 is 56,263.5 (WTE), compared to 56,309.4 as at 30<sup>th</sup> September 2011, this is a decrease of 45.9 WTE (or 0.1%). The corresponding headcount also showed a decrease 0.1% (68 headcount), from 65,448 as at 30<sup>th</sup> September 2011 to 65,380 as at 30<sup>th</sup> September 2012.
- The nursing and midwifery vacancy rate as at 30th September 2012 is 2.4% with 0.5% being vacant for 3 months or more. As at 30<sup>th</sup> September 2012, 'Family Planning Nurses' and 'Other Nurses' have the highest vacancy rates (14.0% and 12.7% respectively). This is an increase from a vacancy rate of 1.1% as at 30<sup>th</sup> September 2011.

#### Quarterly Comparison: September 2012 to June 2012

- The number of nursing and midwifery staff in post as at 30th September 2012 is 56,263.5 (WTE), compared to 56,183.7 as at 30<sup>th</sup> June 2012, this is an increase of 79.8 (or 0.1%) WTE. The corresponding headcount also showed an increase 0.1% (56 headcount), from 65,324 as at 30<sup>th</sup> June 2012 to 65,380 as at 30<sup>th</sup> September 2012.
- The nursing and midwifery vacancy rate has increased to 2.4% as at 30<sup>th</sup> September 2012, from 1.7% as at 30<sup>th</sup> June 2012.

The information in this section presents a summary of the Nursing and Midwifery workforce in NHSS for staff assimilated to the Agenda for Change nursing and midwifery job family.

The nursing and midwifery workforce is presented by location of service delivery and by field or patient group served, based on post descriptors. There is also a fuller breakdown for nurses working in the community. Information is available by band, age group, gender, contract type, NHS Board and region.

Throughout, information is presented as headcount, employment or whole time equivalent (WTE). WTE adjusts headcount staff figures to take account of part-time staff.

## Nursing and Midwifery: Staff in Post

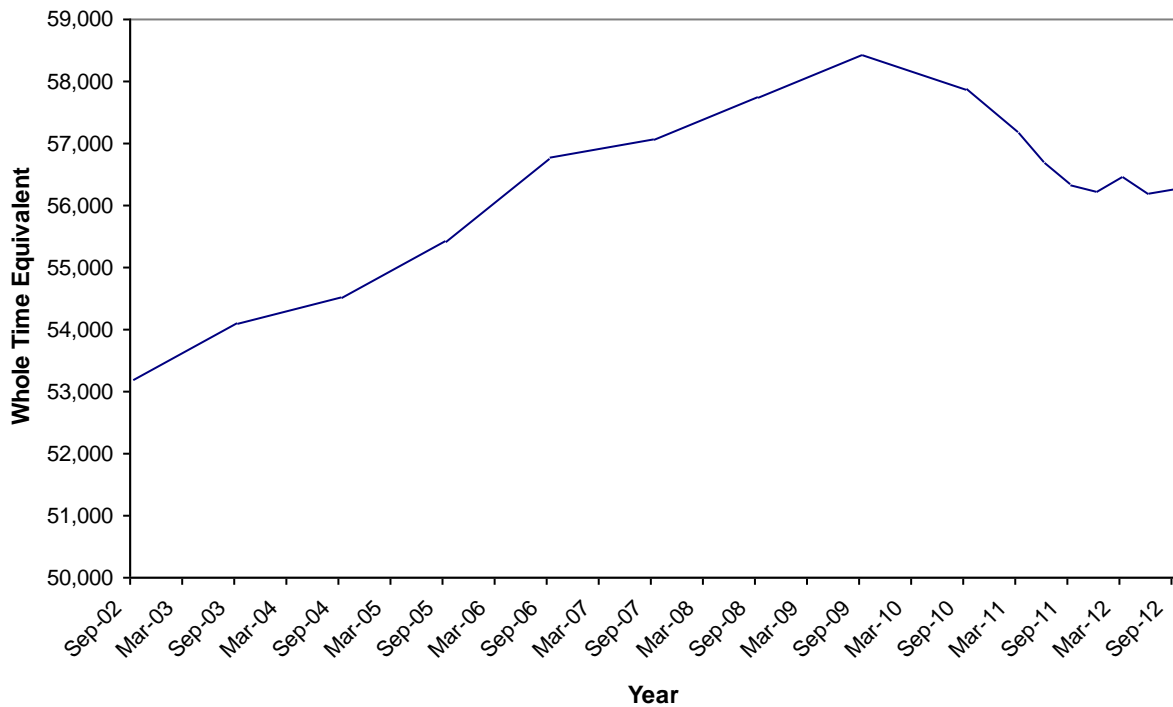
Table NMQT1 shows that the number of nurses over the past decade has increased by 5.8%, from 53,177.5 WTE in September 2002 to 56,263.5 WTE in September 2012. This is an overall increase of 3,086.0 WTE.

**Table NMQT1: Nursing and midwifery staff (WTE) by year; NHS Scotland**

Year	Whole Time Equivalent
Sept-2002	53,177.5
Sept-2003	54,097.0
Sept-2004	54,520.9
Sept-2005	55,434.3
Sept-2006	56,783.2
Sept-2007	57,049.7
Sept-2008	57,748.9
Sept-2009	58,428.4
Sept-2010	57,878.3
Mar-2011	57,166.9
Jun-2011	56,681.2
Sept-2011	56,309.4
Dec-2011	56,238.5
Mar-2012	56,467.3
Jun-2012	56,183.7
Sept-2012	56,263.5

NHS Greater Glasgow and Clyde vacancy information had previously excluded any preferred candidates identified for posts. NHS Greater Glasgow and Clyde define a preferred candidate as those candidates who have been interviewed, successfully appointed and where pre employment checks are being carried out. Pre-employment checks include; references, PVG, OHS and where no confirmed start date has been agreed, pre employment checks can take 3-4 weeks to complete. As part of the September 2012 vacancy return, NHS Greater Glasgow and Clyde have been informed that preferred candidates should be included in their vacancy return. This should be taken into consideration when comparing trend information.

**Chart NMQC1: NHSS nursing and midwifery staff (WTE) by trend**



The information presented in the NHSS Workforce Information pages changed during January 2008 to reflect the introduction of Agenda for Change (AfC). Historically, NHSS workforce information has been published in a format based on the pay structure, namely Whitley for the majority of staff. Agenda for Change is the new, national pay system, which has introduced the new pay bands and harmonised terms and conditions for NHS workers. For this reason it is not possible to compare Nursing and Midwifery specialty information prior to 2007. [However historic tables showing information from 1996 to 2006 is available on the ISD website \(click here\).](#)

[Nursing and midwifery staff by location of service delivery, specialty, band grouping, NHS region and NHS board](#)

## Results and Commentary

### Allied Health Professionals

Key points:

- As at 30<sup>th</sup> September 2012, 7.1% of all staff (WTE) in NHSS were employed in the Allied Health Professions (AHP) staff group (Chart OAQC1).

#### Annual Comparison: September 2012 to September 2012

- The number of Allied Health Professions staff in post as at 30<sup>th</sup> September 2012 is 9,422.3 (WTE), compared to 9,347.0 (WTE) as at 30<sup>th</sup> September 2011, this is an increase of 0.8% (75.2 WTE). The corresponding headcount showed an increase of 0.8% (91 headcount) from 11,304 as at 30<sup>th</sup> September 2011 to 11,395 as at 30<sup>th</sup> September 2012.
- The Allied Health Professions vacancy rate as at 30<sup>th</sup> September 2012 is 4.1% with 0.8% being vacant for three months or more. This is an increase from the vacancy rate as at 30<sup>th</sup> September 2011, which was 2.1% with 0.5% being vacant for three months or more.

#### Quarterly Comparison: September 2012 to June 2012

- The number of Allied Health Professions staff in post as at 30<sup>th</sup> September 2012 is 9,422.3 (WTE), compared to 9,358.7 (WTE) as at 30<sup>th</sup> June 2012, a decrease of 0.7% (63.6 WTE). The corresponding headcount showed an increase of 0.6% (71 headcount) from 11,324 as at 30<sup>th</sup> June 2012 to 11,395 as at 30<sup>th</sup> September 2012.
- The Allied Health Professions vacancy rate increased from 3.2% with 0.8% being vacant for three months or more as at 30<sup>th</sup> June 2012, to 4.1% with 0.8% being vacant for three months or more as at 30<sup>th</sup> September 2012.

Information in this section relates to the AHP workforce in NHSS. The AHP information is sourced from Scottish Workforce Information Standard System (SWISS) and describes the numbers of staff assimilated and not assimilated to the Agenda for Change AHP job family.

Information available includes staff in post, vacancy, and turnover. The AHP workforce is presented by specialty. Information is available by band, band grouping, age group, contract type & gender, NHS Board and region.

Throughout, information is presented as headcount, employment or whole time equivalent (WTE). WTE adjusts headcount to take account of part-time staff.

Latest data available is 30<sup>th</sup> September 2012.

## **Allied Health Professions Vacancy information**

Vacancy management processes to support the implementation of local workforce plans are in place across NHS Scotland. These processes inform vacancy advertising requirements.

Vacancies are therefore defined as 'unfilled posts' as at 30<sup>th</sup> September 2012 which are subject to appropriate recruitment arrangements.

The total AHP vacancy rate as at 30<sup>th</sup> September 2012 is 4.1%, this is an increase from a vacancy rate of 3.2% as at 30<sup>th</sup> June 2012.

[Allied health professions staff by profession, band group, NHS region and NHS board](#)



## Results and Commentary

### Other Therapeutic Staff and Personal and Social Care

Key points:

#### Annual Comparison: September 2012 to September 2012

- The number of Other Therapeutic staff in post as at 30<sup>th</sup> September 2012 is 3,528.8 (WTE), compared to 3,424.3 as at 30<sup>th</sup> September 2011, which is an increase of 3.0% (104.4 WTE).
- The headcount for Other Therapeutic staff in post as at 30<sup>th</sup> September 2012 is 4,122, compared to 4,001 as at 30<sup>th</sup> June 2012, this is an increase of 3.0% (121 headcount).
- The number of WTE Personal and Social Care staff in post as at 30<sup>th</sup> September 2012 is 896.2, compared to 925.4 (WTE) as at 30<sup>th</sup> September 2012, which is a decrease of 3.2% (29.2 WTE). The corresponding headcount figure as at 30<sup>th</sup> September 2012 is 1,068, which is 3.3% (37 headcount) less than as at 30<sup>th</sup> September 2011 when the headcount was 1,105.

#### Quarterly Comparison: September 2012 to June 2012

- The number of Other Therapeutic staff in post as at 30<sup>th</sup> September 2012 is 3,528.8 (WTE), compared to 3,514.8 as at 30<sup>th</sup> June 2012, this is an increase of 0.4% (14 WTE).
- The headcount for Other Therapeutic staff in post as at 30<sup>th</sup> September 2012 is 4,122, compared to 4,096 as at 30<sup>th</sup> June 2012, this is an increase of 0.6% (26 headcount).
- The number of WTE Personal and Social Care staff in post as at 30<sup>th</sup> September 2012 is 896.2, compared to 902.0 (WTE) as at 30<sup>th</sup> June 2012, which is a decrease of 0.7% (5.9 WTE). The corresponding headcount figure as at 30<sup>th</sup> September 2012 is 1,068, which is 0.9% (10 headcount) less than as at 30<sup>th</sup> June 2012 when the headcount was 1,078.

Information in this section relates to the Other Therapeutic and Personal and Social Care workforce in NHSS.

Information is available by trend, band and NHS Board and region.

Throughout, information is presented as headcount, employment and whole time equivalent (WTE).

Latest data available is 30<sup>th</sup> September 2012.

[Other therapeutic staff and personal and social care](#)

Table OTPCQT1 presents trend information for Other Therapeutic Staff and Personal and Social Care.

**Table OTPCT1: Other Therapeutic Staff and Personal and Social Care (WTE) by specialty and year; NHSS**

	Jun-12	Sept-12	Change Jun-12 to Sept-12
<b>Other therapeutic staff</b>	<b>3,514.8</b>	<b>3,528.8</b>	<b>0.4%</b>
Clinical psychology and counselling	1,249.2	1,221.6	-2.2%
Genetic counselling	13.9	13.8	-0.7%
Optometry	42.4	41.5	-2.2%
Pharmacy	2,139.1	2,183.3	2.1%
Play specialists	69.1	68.4	-1.0%
Not assimilated	1.1	0.1	-90.3%
<b>Personal and social care</b>	<b>902.0</b>	<b>896.2</b>	<b>-0.7%</b>
Chaplaincy	67.8	67.2	-0.9%
Health promotion	826.2	821.9	-0.5%
Sexual health	-	-	x
Social work	6.6	5.6	-15.1%
Not assimilated	1.4	1.5	3.8%

Table OPTCQT2 shows that band 8a is the largest band group (WTE) within Other Therapeutic staff and band 6 is the largest band group (WTE) within Personal and Social Care.

**Table OPTCQT2: Other Therapeutic Staff and Personal and Social Care (WTE) by band as at 30<sup>th</sup> September 2012**

Band	Other Therapeutic	Personal and Social Care
<b>Total</b>	<b>3,528.8</b>	<b>896.2</b>
Band 9	21.7	0.0
Band 8d	77.6	6.0
Band 8c	204.9	5.0
Band 8b	279.6	24.8
Band 8a	723.1	61.8
Band 7	567.5	218.6
Band 6	496.2	325.2
Band 5	494.6	159.2
Band 4	324.4	56.9
Band 3	62.6	29.4
Band 2	276.3	8.5
Band 1	0.0	0.0
Not assimilated	0.1	0.9

## Results and Commentary

### Healthcare Scientists

Key points:

- As at 30<sup>th</sup> September 2012, 4.0% of all staff (WTE) in NHSScotland are employed in the Healthcare Scientist staff group (Chart OAQC1).

#### Annual Comparison: September 2012 to September 2011

- The number of Healthcare Scientist Staff in post as at the 30<sup>th</sup> September 2012 is 5,274.0 (WTE), this compares to 5,426.1 WTE as at 30<sup>th</sup> September 2011 which is a 2.8% (152.1 WTE) decrease over the course of the year.
- Compared to 30<sup>th</sup> September 2011, when the headcount of Healthcare Scientist Staff in post was 6,044, total staff headcount decreased by 3.0% (181 headcount) as at 30<sup>th</sup> September 2012, to 5,863.

#### Quarterly Comparison: September 2012 to June 2012

- The number of Healthcare Scientist Staff in post as at the 30<sup>th</sup> September 2012 is 5,274.0 (WTE), this compares to 5,307.6 WTE as at 30<sup>th</sup> June 2012 which is a 0.6% (33.6 WTE) decrease over the quarter.
- Compared to 30<sup>th</sup> June 2012, when the headcount of Healthcare Scientist Staff in post was 5,901, total staff headcount decreased by 0.6% (38 headcount) as at 30<sup>th</sup> September 2012, to 5,863.

Information in this section relates to the Healthcare Scientists workforce in NHS Scotland. Healthcare Scientists workforce information is sourced from the Scottish Workforce Information Standard System (SWISS) and describes the numbers of staff assimilated and not assimilated to the Agenda for Change Healthcare Scientist job family.

The Healthcare Scientist workforce is presented by specialty. Information is available by band, band grouping, age group, contract type & gender, NHS Board and region.

Throughout, information is presented as headcount, employments and whole time equivalent (WTE). WTE adjusts headcount to take account of part-time staff.

Latest data available is 30<sup>th</sup> September 2012.

[Healthcare Science staff by specialty, band, NHS Region and NHS Board](#)

## Healthcare Scientists: Staff in post

Table HCSQT1 presents trend information for Healthcare Scientists and shows the number of healthcare scientists has increased by 2.4% (121.1 WTE) from September 2007 to September 2012.

**Table HCSQT1: NHSS Healthcare Scientists (WTE) by year.**

Year	Whole Time Equivalent
Sept-2007	5,152.9
Sept-2008	5,158.4
Sept-2009	5,593.8
Sept-2010	5,628.0
Mar-2011	5,570.7
Jun-2011	5,474.4
Sept-2011	5,426.1
Dec-2011	5,376.1
Mar-2012	5,356.9
Jun-2012	5,307.6
Sept-2012	5,274.0

Table HCSQT2 shows that the largest staff group (WTE) within the Healthcare science job family work within a Life sciences setting (4,546.4 WTE). The second largest staff group is Physiology Sciences (500.5 WTE).

**Table HCSQT2: NHSS Healthcare Scientists (WTE) by staff group and year.**

Healthcare Scientist Staff	Jun-12	Sept-12	Change Jun-12 to Sept-12
<b>Healthcare science staff</b>	<b>5,307.6</b>	<b>5,724.0</b>	<b>-0.6%</b>
<b>Physiology sciences</b>	<b>502.7</b>	<b>500.5</b>	<b>-0.4%</b>
Clinical physiology	463.5	461.3	-0.5%
Clinical sciences physiology	15.7	15.7	0.0%
Clinical perfusion physiology	23.4	23.4	0.0%
<b>Life sciences</b>	<b>4,569.9</b>	<b>4,546.4</b>	<b>-0.5%</b>
Biomedical sciences life	3,133.4	3,120.0	-0.4%
Clinical sciences life	1,030.9	1,019.7	-1.1%
Clinical technology life	405.6	406.7	0.3%
<b>Physical sciences</b>	<b>213.5</b>	<b>210.7</b>	<b>-1.3%</b>
Clinical sciences physical	55.7	54.4	-2.3%
Clinical technology physical	92.6	90.4	-2.4%
Clinical photographer / illustrator physical	59.2	58.9	-0.4%
Maxillofacial prosthetics physical	6.0	6.9	14.2%
Not assimilated	21.5	16.5	-23.3%

Table HCSQT3 shows the number of Healthcare Scientist staff in NHSS by Agenda for Change bands (WTE) as at 30<sup>th</sup> September 2012. The majority of Healthcare Scientists can be found within Band 6 (34.3%), followed by Band 7 (20.7%) and Band 3 (14.2 %). This pattern is also representative across the majority of NHS Boards.

**Table HCSQT3: Healthcare Scientists (WTE) by band as at 30<sup>th</sup> September 2012**

<b>Band</b>	<b>WTE</b>	<b>Percentage (%)</b>
<b>Total</b>	<b>5,274.0</b>	<b>100.0%</b>
Band 9	15.7	0.3%
Band 8d	55.1	1.0%
Band 8c	82.6	1.6%
Band 8b	181.2	3.4%
Band 8a	330.9	6.3%
Band 7	1,092.0	20.7%
Band 6	1,808.9	34.3%
Band 5	390.0	7.4%
Band 4	239.2	4.5%
Band 3	750.1	14.2%
Band 2	311.9	5.9%
Band 1	0.0	0.0%
Not assimilated	16.5	0.3%

[Healthcare Science staff by specialty, band, NHS Region and NHS Board](#)

## Results and Commentary

### Emergency, Administrative and Support Services

Key points:

#### Annual Comparison: September 2012 to September 2012

- The number of Emergency services staff in post as at 30<sup>th</sup> September 2012 is 3,639.7 (WTE), compared to 3,642.8 (WTE) as at 30<sup>th</sup> September 2011, which is a decrease of 0.1% (3.2 WTE).
- The corresponding headcount of Emergency services staff in post as at 30<sup>th</sup> September 2012 is 3,751, compared to 3,772 as at 30<sup>th</sup> September 2011. This is a decrease of 0.6%, or 21 headcount.
- The number of Administrative services staff in post as at 30<sup>th</sup> September 2012 is 24,137.1 (WTE), this is a 2.2% (530.4 WTE) decrease since 30<sup>th</sup> September 2011, when the WTE for Administrative Services was 24,667.5 (WTE).
- Similarly, the corresponding headcount as at 30<sup>th</sup> September 2012 is 28,159, which compared to 28,859 headcount as at 30<sup>th</sup> September 2011 is a 2.4% (700 headcount) decrease of staff in post.
- The number of Support services staff in post as at 30<sup>th</sup> September 2012 decreased by 0.5% (63.9 WTE) to 13,703.3 WTE, compared to 13,767.3 WTE as at 30<sup>th</sup> September 2011.
- The headcount of Support services staff in post as at 30<sup>th</sup> September 2012 is 18,740, a decrease of 0.1% (27 headcount) in comparison to headcount of 18,767 as at 30<sup>th</sup> September 2011.

#### Quarterly Comparison: September 2012 to June 2012

- The number of Emergency services staff in post as at 30<sup>th</sup> September 2012 is 3,639.7 (WTE), compared to 3,611.9 (WTE) as at 30<sup>th</sup> June 2012, which is an increase of 0.8% (27.8 WTE).
- The corresponding headcount of Emergency services staff in post as at 30<sup>th</sup> September 2012 is 3,751, compared to 3,728 as at 30<sup>th</sup> June 2012. This is an increase of 0.6%, or 23 headcount.
- The number of Administrative services staff in post as at 30<sup>th</sup> September 2012 is 24,137.1 (WTE), this is a 0.2% (47.3 WTE) increase since 30<sup>th</sup> June 2012, when the WTE for Administrative Services was 24,089.8 (WTE).
- Similarly, the corresponding headcount as at 30<sup>th</sup> September 2012 is 28,159, which compared to 28,104 headcount as at 30<sup>th</sup> June 2012 is a 0.2% (55 headcount) increase of staff in post.

- The number of Support services staff in post as at 30<sup>th</sup> September 2012 decreased by 0.1% (10.5 WTE) to 13,703.3 WTE, compared to 13,713.8 WTE as at 30<sup>th</sup> June 2012.
- The headcount of Support services staff in post as at 30<sup>th</sup> September 2012 is 18,740, a decrease of 0.3% (54 headcount) in comparison to headcount as at 30<sup>th</sup> June 2012.

Information in this section relates to the Emergency, Administrative and Support Services workforce in NHS Scotland.

Information is available by trend, band, NHS Board and region.

Throughout, information is presented as headcount, employment and whole time equivalent (WTE).

Latest data available is 30<sup>th</sup> September 2012.

[All other staff in post including trend](#)

## Emergency, Administrative and Support Services: Staff in post

Table AOSQT1 presents trend information for Emergency, Administrative and Support services.

**Table AOSQT1: Emergency, Administrative and Support Services (WTE) by staff group and year; NHSS**

	Jun-12	Sept-12	Change Jun-12 to Sept-12
<b>Administrative services</b>	<b>24,089.8</b>	<b>24,137.1</b>	<b>0.2%</b>
Central functions	11,933.9	12,033.3	0.8%
Support to clinical staff	10,843.8	10,811.5	-0.3%
NHS24 Call Handlers	280.0	291.4	4.1%
Management grades (non AfC)	986.5	948.6	-3.8%
Not assimilated	45.6	52.3	14.6%
<b>Support services</b>	<b>13,713.8</b>	<b>13,703.3</b>	<b>-0.1%</b>
General services	3,374.2	3,365.6	-0.3%
Hotel services	7,838.8	7,827.2	-0.1%
Maintenance and estates	1,783.8	1,785.0	0.1%
Sterile services	710.8	713.8	0.4%
Not assimilated	6.3	11.7	85.3%
<b>Emergency services</b>	<b>3,611.9</b>	<b>3,639.7</b>	<b>0.8%</b>
Ambulance care assistant	829.5	821.7	-0.9%
Auxiliary	0.0	0.0	x
Driver	48.0	43.7	-8.9%
EMDC / control	297.3	297.1	0.0%
Paramedic	1,372.9	1376.7	0.3%
Technician	973.4	1010.4	3.8%
Other	91.0	90.0	-1.1%
Not assimilated	0.0	0.0	x



Table AOSQT2 shows as at 30<sup>th</sup> September 2012 that Band 5 is the largest band group (WTE) within Emergency services, Band 4 is the largest band group (WTE) within Administrative services and Band 2 is the largest band group (WTE) within Support services.

**Table AOSQT2: Emergency, Administrative and Support Services (WTE) by band as at 30<sup>th</sup> June 2012**

<b>Band</b>	<b>Emergency services</b>	<b>Administrative services</b>	<b>Support services</b>
<b>Total</b>	<b>3,639.7</b>	<b>24,137.1</b>	<b>13,703.3</b>
Band 9	-	3.0	-
Band 8d	-	32.4	3.0
Band 8c	-	194.1	16.8
Band 8b	-	357.2	41.0
Band 8a	-	594.4	70.8
Band 7	104.0	1,447.3	200.2
Band 6	250.3	2,174.8	283.4
Band 5	1,193.9	2,524.2	527.7
Band 4	1,124.1	6,743.5	954.1
Band 3	923.6	4,140.5	1,924.9
Band 2	43.7	4,898.6	5,002.9
Band 1	-	29.7	4,669.0
Not assimilated	-	997.3	9.7

[All other staff in post including trend](#)

## Background notes

- Due to technical issues with the Scottish Workforce Information Standard System (SWISS) the 27th November 2012 National Statistics release will not include Turnover statistics as it has not been possible to perform all the required quality assurance checks in time for the publication. Further information on the content of the Workforce Statistics November 2012 release can be found within the Workforce section of the ISD website. <http://www.isdscotland.org/Health-Topics/Workforce/>
- There has been a significant increase in the number of 'Not Known' medical specialties within the HCHS specialty table for NHS Lothian. NHS Lothian are currently working towards implementing the new national HR system (eESS) and have encountered issues when transferring information between their local and the new system. It is for this reason the 'Not Known' medical specialty has increased. NHS Lothian continues to work with the eESS national team to address these issues.
- The increase in the number of bank staff is due to coding issues within NHS Lothian. It is currently unknown if a proportion of these staff hold a bank contract and therefore should not be included within the staff in post information. NHS Lothian is currently working towards resolving these coding issues.
- As of the 1st November 2011, NHSScotland (NHSS) has responsibility for employing Healthcare staff within prisons. Previously, these people were employed directly by the Scottish Prison Service (SPS). This has resulted in approximately 350 staff (Headcount) transferring to NHSS. These staff were included in the figures for 31st December 2011 for the first time, as well as in subsequent releases. It is therefore important to take account of this when comparing trends across previous years. As part of the transfer process, each member of staff will be allocated to an agenda for change (AfC) job family. This will allow these staff to be appropriately counted within their relevant staff group, for example; Nursing and Midwifery or Allied Health Professions. However, NHS Boards are still in the process of allocating these staff to an appropriate job family. At present, some of these staff have not been assigned a job family, and therefore are defined as 'unallocated' and presented within the 'overall' staff in post table only.
- The increase in Practice Nurses in NHS Greater Glasgow and Clyde as at June 2012 is mainly due to SPS staff transferring over to the health board.
- As of the 3rd August 2011, National Education for Scotland (NES) has taken responsibility for employing GP Specialty Trainees while they are in the GP component of their training. Previously, these trainees were employed by individual GP practices. As a result, the medical staffing reported within the ISD Workforce statistics as from September 2011, has increased by; 477 (Headcount) and 449.9 (WTE). It is therefore important to take account of these additional medical staff when comparing trends across previous years.

The ISD Workforce Statistics tables that are impacted as a result of the above change include;

- Medical staff in post table; Doctors in Training staff group
- HCHS by specialty; General Practice staff group
- HCHS by grade; Doctors in Training (no National Training Number) staff group.

- The increase in staff allocated to 'Unallocated / not known' as at March 2012 in NHS Shetland staff is a false inflation. This was due to staff being included in the SWISS system before their contracts had actually begun.

## Glossary

**Headcount** – This refers to the actual number of individuals (employees) working within the NHSS. This eliminates any double counting that may exist as a result of an employee holding more than one post (see employment below).

**Whole Time Equivalent** – This is derived by dividing the number of contacted hours by the number of conditioned hours (hours worked). This adjusts headcount staff figures to take account of part time staff.

**Employment** - An employee may hold more than one appointment in NHSS. Their appointments may be in more than one NHS organisation, in more than one region, in more than one specialty, or in more than one grade. The 'Employment' variable will count the employee under each organisation / region / specialty / grade they work i.e. the same employee may be counted more than once.

AfC	Agenda for Change
AHP	Allied Health Professional
GDS	General Dental Service
HCHS	Hospital, Community and Public Health Services
ISD	Information Services Division
NHSS	National Health Service Scotland
SWISS	Scottish Workforce Information Standard System

## List of Tables

### Overall Summary

Report table no.	Name	Time period	File & size
	<a href="#">Overall NHSS workforce summary by staff grouping</a>	September 2012	Excel [10,899kb]
	<a href="#">Total level trend summary</a>	September 2012	Excel [38kb]

### Medical and Dental

Report table no.	Name	Time period	File & size
	<a href="#">Medical &amp; Dental staff in post table</a>	September 2012	Excel [7,481kb]
	<a href="#">HCHS medical and dental staff by specialty table</a>	September 2012	Excel [17,724kb]
	<a href="#">HCHS medical and dental staff by grade table</a>	September 2012	Excel [6,869kb]
	<a href="#">HCHS medical and dental consultant staff in post table</a>	September 2012	Excel [1,587kb]
	<a href="#">HCHS medical and dental consultant vacancy rate table</a>	September 2012	Excel [18,514kb]
	<a href="#">HCHS medical and dental consultant contract table</a>	September 2012	Excel [934kb]

### Nursing and Midwifery

Report table no.	Name	Time period	File & size
	<a href="#">Nursing and midwifery staff by location of service delivery, specialty, band grouping, NHS region and NHS board</a>	September 2012	Excel [29,427kb]
	<a href="#">Nursing &amp; midwifery vacancies by location of service delivery, specialty, band, NHS region and NHS Board</a>	September 2012	Excel [13,433kb]

**Nursing and Midwifery cont.**

Report table no.	Name	Time period	File & size
	<a href="#">Clinical Nurse Specialists</a>	September 2012	Excel [7,066kb]

**Nursing and Midwifery student uptake and attrition**

Table No.	Name	Time period	File & size
	<a href="#">Nursing and Midwifery attrition rates</a>	September 2012	Excel [332kb]
	<a href="#">Nursing and Midwifery - student intakes and students in training</a>	September 2012	Excel [38kb]

**Allied Health Professions**

Table No.	Name	Time period	File & size
	<a href="#">Allied Health Professions - Staff in post</a>	September 2012	Excel [8,565kb]
	<a href="#">Allied Health Professions - Vacancies</a>	September 2012	Excel [4,413kb]

**Other Therapeutic and Personal Social Care**

Table No.	Name	Time period	File & size
	<a href="#">Other therapeutic staff and personal social care</a>	September 2012	Excel 5,648kb]

**Healthcare Scientists**

Report table no.	Name	Time period	File & size
	<a href="#">Healthcare Science staff by specialty, band, NHS Region and NHS Board</a>	September 2012	Excel [4,716kb]

**Emergency, Administrative and Support services: Staff in post**

Table No.	Name	Time period	File & size
	<a href="#">All other staff in post including trend</a>	September 2012	Excel [6,611kb]

## Dental Workforce

Table No.	Name	Time period	File & size
	<a href="#">GDS, Community and Hospital Dentists</a>	September 2012	Excel [836kb]

## Pharmacy Workforce

Table No.	Name	Time period	File & size
	<a href="#">Pharmacy Vacancies</a>	September 2012	Excel [1,670kb]

For the full list of tables released with this publication, please see the full [list of tables](#) web page

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## Further Information

Further information can be found on the [ISD website](#)

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## Appendix

### A1 – Background Information

The main source of workforce statistics is the Scottish Workforce Information Standard System (SWISS). Workforce information was first captured through SWISS in 2007 for the data as at 30th September 2007. It included all workforce data with the exception of the medical and dental data.

During July 2008 Medical and Dental information was migrated from the MEDMAN web based system to the Scottish Workforce Information Standard System (SWISS). This alignment provided the opportunity to capture all NHSS staff in post information in the one system, which has resulted in more robust information being captured and reported. Due to this improved recording, trend information is not directly comparable for 2007 and 2008.

Further background information on [data sources and collections](#) can be found within the ISD Workforce Statistics web pages.

#### Trend Information

As SWISS is a dynamic system, the workforce information captured is subject to change and the quality of the data is continually improving. As a result the trend information presented within the ISD Workforce web pages should be interpreted with caution. To aid with interpretation, please refer to the following documents:

[Non-medical staff movement](#)  [134kb]

[Medical & Dental staff movement](#)  [154kb]

Trend data for the medical and dental workforce (excluding medical and dental support) has continued. During 2008, information from the [medical and dental \(MEDMAN\)](#) system which includes information on all medical and dental staff working in hospitals, the community and public sector was migrated to the [Scottish Workforce Information Standard System \(SWISS\)](#).

The figures reported from 2008 onwards are sourced from [SWISS](#) and from the [Practitioner Contractor Database \(PCD\)](#) and [Management Information and Dental Accounting System \(MIDAS\)](#). Figures reported prior to 2008 are sourced from [MEDMAN](#), PCD and MIDAS.

For all other staff, trend information has been provided where possible. Please note that the 2007 figures for the total level trend include staff who were previously excluded e.g. chaplains. As a result trend information should be treated with caution.

#### Staff Turnover

Turnover analysis is not included in this publication.

- Turnover contains information on staff leaving and joining NHSS, NHS Regions, NHS Boards and staff groups. The data is extracted from Scottish Workforce Information Standard System (SWISS).

Due to technical issues with the Scottish Workforce Information Standard System (SWISS) the 27th November 2012 National Statistics release will not include Turnover

statistics as it has not been possible to perform all the required quality assurance checks in time for the publication. Further information on the content of the Workforce Statistics November 2012 release can be found within the Workforce section of the ISD website. <http://www.isdscotland.org/Health-Topics/Workforce/>

Changes to the methodology of [Turnover](#) statistics can be found within the ISD Workforce web pages. The reporting of these statistics will be subject to further revisions in 2011.

## Changes to Workforce Publications

To further enhance the recording and reporting of current and future Workforce Statistics, as well as ensuring the information within the ISD Workforce Statistics web pages continues to support local, regional and national workforce planning, several changes have been made.

Details of [current and planned changes](#) to Workforce Information are available within the ISD Workforce Statistics web pages.

## Workforce 'Counts'

The tables present figures in both Headcount numbers and Whole Time Equivalents (WTE). WTE adjust headcount staff figures to take account of part-time staff. Information on WTE for GPs and GDS is not available, so figures that include GPs and GDS are reported for headcount only. For all other staff groups, WTE information is available.

An employee may hold more than one appointment in NHSS. Their appointments may be in more than one NHS organisation, in more than one region, in more than one specialty, or in more than one grade and will therefore be double counted in some tables.

## Workforce 'Counts' Revisions

There have been changes made to [workforce counts](#) that will ensure the on-going enhancement of the recording and reporting of workforce information.

At present Workforce information published within the ISD workforce website presents staff in post information by Headcount and Whole Time Equivalent. In order to provide additional and more accurate information, ISD have revised current methodologies. These changes include the addition of an 'employments' count and revision to the headcount measure. The employment count is available for all Non medical staff, from September 2007 to present.

## Data Quality

- The published Workforce Statistics presents information by AfC job families and sub job families. It is however recognised that the published information does not always reflect the data used at Board and Regional level when planning and presenting the workforce. As with all data systems, accuracy of coding is crucial to the quality and credibility of the data and NHS Boards have been encouraged to ensure that there are measures in place to confirm and sustain data quality.

However it is acknowledged that [quality issues](#) remain, particularly around the assimilation to AfC, where NHS Boards believe that the published data (staff in post) does not truly reflect what they hold on their local systems. In an attempt to address these on-going data quality issues, during 2009 ISD, in conjunction with the [ISD Workforce Reference Group](#), and [ISD Workforce Statistics Steering Group](#), developed a Workforce Statistics [Data Quality six steps](#) project plan.

The aim of the [Data Quality six steps](#) plan is to not only address data quality issues, but also explore historical practices and cultural issues. To date this plan has ensured that more robust and accurate information on the NHSS Workforce is captured and reported.

- To ensure that the quarterly release of workforce information continues to be successful, it is important that nationally published data reflects that of NHS Board local systems. An area where data quality continues to remain a concern is the recording and capture of the medical workforce. Whilst ISD has continued to work with each of the 14 NHS Boards and 8 Special Health Boards to improve the quality of medical workforce information, feedback from NHS Boards has indicated that quality issues still exist.

To continually ensure that ISD publish accurate information, a one off audit of the medical consultant workforce has been undertaken for data as at 31<sup>st</sup> March 2012. Improvements in data quality as a result of this exercise will be highlighted in future ISD publications.

- NHS Highland and The Highland Council are working towards developing an integrated model for health and social care and will result in staff transferring between both organisations. As part of the November 2012 publication, 1,491 (Headcount) and 1,062.1 (WTE) Highland Council staff are included within the overall table for data at 30th June 2012 and 30th September 2012. It is not possible to count these staff within the 'employment' figure as this information is not currently available. In addition, there are a proportion of these staff where no WTE has been recorded and for this reason will not be included within the WTE figure. It is envisaged that details on both employment and missing WTE will be available for future publications.
- As of the 1st November 2011, NHSScotland (NHSS) has responsibility for employing Healthcare staff within prisons. Previously, these people were employed directly by the Scottish Prison Service (SPS). This has resulted in approximately 350 staff (Headcount) transferring to NHSS. These staff were included in the figures for 31st December 2011 for the first time, as well as in subsequent releases. It is therefore important to take account of this when comparing trends across previous years. As part of the transfer process, each member of staff will be allocated to an agenda for change (AfC) job family. This will allow these staff to be appropriately counted within their relevant staff group, for example; Nursing and Midwifery or Allied Health Professions. However, NHS Boards are still in the process of allocating these staff to an appropriate job family. At present, some of these staff have not been assigned a job family, and therefore are defined as 'unallocated' and presented within the 'overall' staff in post table only.
- The increase in Practice Nurses in NHS Greater Glasgow and Clyde as at June 2012 is mainly due to SPS staff transferring over to the health board.

- The increase of bank staff in NHS Lothian as at March 2012 and June 2012 is a false inflation due to incorrect coding. These staff will be allocated to the correct staff grouping in future publications.
- The increase in staff allocated to 'Unallocated / not known' as at March 2012 in NHS Shetland staff is a false inflation. This was due to staff being included in the SWISS system before their contracts had actually begun.

### Key Priorities

The Workforce Information Programme is responsible for all aspects of workforce statistics within ISD. The programmes [Key Priorities](#) can be found within the ISD Workforce Statistics web pages.

## A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	NHS Scotland Workforce - Staff in Post
Description	Annual update of headcount, employments and whole time equivalent of staff employed by NHSS.
Theme	Health and Social Care
Topic	Workforce Staff in Post Information
Format	Excel workbooks
Data source(s)	<a href="#">Scottish Workforce Information Standard System (SWISS)</a>
Date that data are acquired	16 <sup>th</sup> October 2012
Release date	27 <sup>th</sup> November 2012
Frequency	Quarterly
Timeframe of data and timeliness	Data as at 30 <sup>th</sup> September 2012
Continuity of data	Non-Medical staff has a break in 2006 due to the introduction of Agenda for Change. Medical Staff continuous from 1990. However during July 2008 Medical and Dental information was migrated from the MEDMAN web based system to the Scottish Workforce Information Standard System (SWISS). This alignment provided the opportunity to capture all NHSS staff in post information in the one system, which has resulted in more robust information being captured and reported.
Revisions statement	High level summary historical trend information was revised in light of the introduction of AfC. This provided the user with comparable trends. It is however, worth noting that pre-AfC historical trends remain available.
Concepts and definitions	Each excel workbook contains detailed definitions pertinent to the particular staff group of interest.
Relevance and key uses of the statistics	Information published is used to support local, regional and national workforce planning.
Accuracy	Workforce information is captured through the <a href="#">Scottish Workforce Information Standard System (SWISS)</a> - Workforce Information Repository. Further information on this <a href="#">system</a> , data capture and <a href="#">accuracy</a> can be found within the ISD Workforce Web pages.
Completeness	Information on all NHSS employees is captured (100%) within SWISS. However it is acknowledged that certain fields within the system are better captured than others. ISD continues to work with the SWISS project team and NHS Boards to improve <a href="#">data quality</a> .
Comparability	Workforce data are comparable and regularly used in both UK and international comparison reports (eg EUROSTAT)
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a> .
Coherence and clarity	All Workforce tables are accessible via the ISD. Workforce statistics are presented within Excel spreadsheets of staff groupings, where appropriate. Staff groups are split by band, age, gender and contract type. This should minimise the number of spreadsheets a user has to go through to

	find data, as well as ensure that they are selecting the correct data. Geographical hierarchies are also presented using drop down menus. Spreadsheet formats have been altered for increased clarity by introducing drop-down menus.
Value type and unit of measurement	Headcount, Employment and WTE = Number, rate, percentage.
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Official Statistics designation	National Statistics.
UK Statistics Authority Assessment	Completed assessment by UK Statistics Authority. Report published May 2010.
Last published	28 <sup>th</sup> August 2012
Next published	26 <sup>th</sup> February 2013
Date of first publication	Paper publications since 1970s, web publications since 1996
Help email	<a href="mailto:nss.isdwfdinfo@nhs.net">nss.isdwfdinfo@nhs.net</a>
Date form completed	19 November 2012

Metadata Indicator	Description
Publication Title	NHSS Workforce - Vacancies
Description	Annual census of vacancies in Nursing & Midwifery, Allied Health Professions and Consultants.
Theme	Health and Social Care
Topic	Workforce Vacancy Information
Format	Excel workbooks
Data source(s)	<a href="#">Scottish Workforce Information Standard System</a> (SWISS)
Date that data is acquired	16 <sup>th</sup> October 2012
Release date	27 <sup>th</sup> November 2012
Frequency	Quarterly
Timeframe of data and timeliness	Data as at 30 <sup>th</sup> September 2012
Continuity of data	Non-Medical staff has a break in 2006 due to the introduction of Agenda for Change. Medical Staff continuous from 1990. However during July 2008 Medical and Dental information was migrated from the MEDMAN web based system to the Scottish Workforce Information Standard System (SWISS). This alignment provided the opportunity to capture all NHSS staff in post information in the one system, which has resulted in more robust information being captured and reported"
Revisions statement	During 2010, ISD, in conjunction with the ISD Workforce Technical Reference Group, will be discussing future requirements of this data collection. This will ensure these data are still fit for purpose and fulfil workforce planning requirements.
Concepts and definitions	Each excel workbook contains detailed definitions pertinent to the particular staff group of interest.
Relevance and key uses of statistics	Information published is used to support local, regional and national workforce planning.
Accuracy	Information is signed off by the relevant Director (eg Medical Director, Nurse Director etc.)
Completeness	All NHS Boards in Scotland return information.
Comparability	Workforce data are comparable and regularly used in both UK and international comparison reports (eg EUROSTAT)
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a> .
Coherence and clarity	All Workforce tables are accessible via the ISD website. Workforce statistics are presented within Excel spreadsheets of staff groupings, where appropriate. Staff groups are split by band, age, gender and contract type. This should minimise the number of spreadsheets a user has to go through to find data, as well as ensure that they are selecting the correct data. Geographical hierarchies are also presented using drop down menus. Spreadsheet formats have been altered for increased clarity by introducing drop-down menus.
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Value type and unit of	WTE = Number, rate, percentage

measure	
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Official Statistics designation	National Statistics.
UK Statistics Authority Assessment	Completed assessment by UK Statistics Authority. Report published May 2010.
Last published	28th August 2012
Next published	26th February 2013
Help email	<a href="mailto:nss.isdwfinfo@nhs.net">nss.isdwfinfo@nhs.net</a>
Date form completed	19 November 2012



## **A3 – Early Access details (including Pre-Release Access)**

### **Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

#### **Standard Pre-Release Access:**

Scottish Government Health Department  
NHS Board Chief Executives  
NHS Board Communication leads

#### **Extended Pre-Release Access**

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)

#### **Early Access for Quality Assurance**

These statistics will also have been made available to those who needed access to help quality assure the publication:

NHS Board Workforce Planners and HR Directors.

## A4 – ISD and Official Statistics

### About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

### Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.