

NHSScotland Workforce Information

Quarterly update of Staff in Post and Vacancies at 30 June 2016

Publication date – 6 September 2016



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Introduction

The NHSScotland workforce has a significant role to play in the delivery of quality services that meet the needs of patients, their families and the general public in a modern health service.

The main source of information on staff employed by NHSScotland is the Scottish Workforce Information Standard System (SWISS) which brings together HR and Payroll information. In addition to this, ISD collects a range of information directly from NHS Boards. This is published by the Information Services Division (ISD) to support NHS Boards and the Scottish Government in their local, regional and national workforce planning.

This release provides an updates of the following NHSScotland workforce information as at 30 June 2016:

- All staff in post
- Vacancy numbers for nursing and midwifery, allied health professions and consultants

Figures are presented as headcount (actual numbers of staff) and whole time equivalent (WTE) which adjusts the figures to take account of part-time working.

This publication is supported by a number of tables. A new set of tables showing data for Health Visitors (Health visiting staff on Agenda for Change (AfC) Band 6 and above) has been added for this release. A review of the accuracy of data on community nursing staff categories, including health visitors, was undertaken in 2014 to ensure more accurate and consistent reporting for these staff groups. These tables show information on band, age, contract type, gender, board and region and vacancies for each census point following this review (March 2015 onwards) and can be found on the ISD website:

[Health visitors](#)

In addition, ISD were asked by the Scottish Government to review the current published number of health visitors in post as at 31 March 2014 i.e. before the data cleansing exercise on community nursing staff categories was undertaken. This is to allow the recruitment of additional health visitors to be monitored. Data from March 2015 has therefore been used to produce a range of how many health visitors were likely to be in post in March 2014 (Scotland level only). The estimates and methodology is explained in more detail [here](#).

Revisions

Please note this publication includes revisions to March 2016 nursing and midwifery vacancies. This is due to a resubmission by NHS Dumfries and Galloway of an additional 4.1 WTE vacancies in mental health compared to the figure that had previously been reported. This revision affects the following tables:

[Nursing and Midwifery Vacancies J2016](#)
[Non-Medical Trend J2016](#)

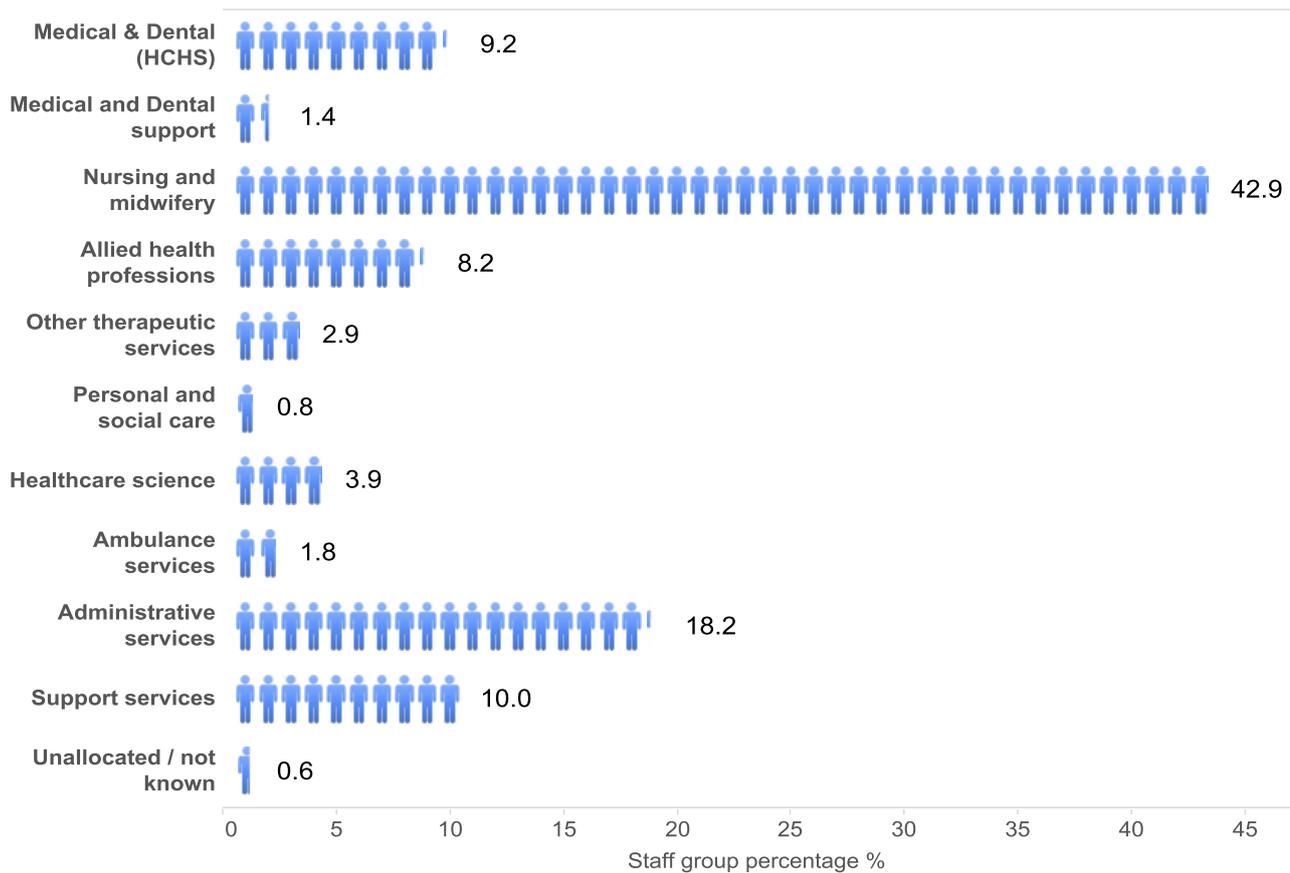
Main points

- The number of staff employed by NHSScotland was 161,329 (headcount) which is equivalent to 138,125.4 WTE, increases of 0.4% and 0.5% respectively compared to June 2015. This continues the steady upward trend in workforce numbers which began in June 2012.
- The number of Medical (Hospital, Community and Public Health Services) staff in post was 12,041.1 WTE, an increase of 2.1% (243.2 WTE) compared to June 2015 and 56.3% (4,339.7 WTE) higher than in September 2000.
- The number of consultants in post was 5,077 WTE, an increase of 2.7% (134.0 WTE) compared to June 2015 and 70.3% (2,095.0 WTE) higher than in September 2000.
- There were 414.2 WTE vacant consultant posts. This represents a vacancy rate of 7.5%, a slight decrease from the rate of 8.3% observed at June 2015. There were 3.4% of posts (188.7 WTE) vacant for six months or more which is a similar level to the rate observed at June 2015 (3.5%; 188.0 WTE).
- The number of nursing and midwifery staff in post was 59,188.7 WTE, an increase of 0.2% (115.1 WTE) compared to June 2015 and 15.4% (7,897.1 WTE) higher than in September 2000.
- There were 2,566.3 WTE vacant nursing and midwifery posts. This represents a vacancy rate of 4.2%, an increase from the rate of 3.7% observed at June 2015.

Number of Staff in Post

The following chart shows the NHSScotland workforce as at 30 June 2016 by staff group. The largest group in the workforce remains nursing and midwifery, with 59,188.7 WTE, which accounted for 42.9% of all staff. Administrative services were the next largest group, accounting for 18.2% of all staff, followed by Support services (10.0%) and Medical and Dental (9.2%).

Figure 1: NHSScotland workforce staff group percentages (WTE) at 30 June 2016



* HCHS - Hospital, Community, and Public Health Services

More detailed information on staff group, age, gender, contract type, board and region can be found on the ISD website in the following tables:

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

[Overall trend](#)

[Medical trend](#)

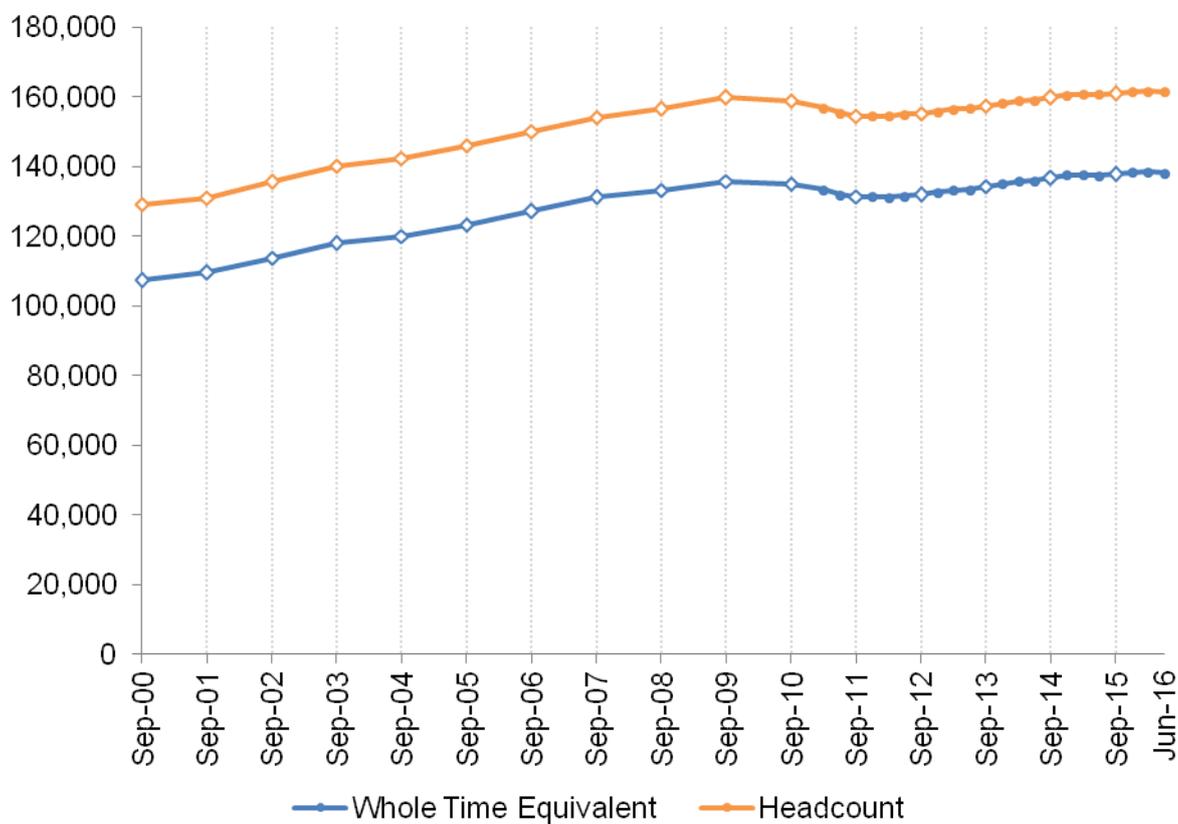
[Non-medical trend](#)

Trend in Staff Numbers

As at 30 June 2016 there were 138,125.4 WTE staff employed by NHSScotland, an increase of 28.8% (30,859.1 WTE) since September 2000. Figure 2 shows the trend in WTE and headcount over this period.

The workforce increased steadily from 107,266.4 WTE to 135,826.0 WTE between 2000 and 2009 before decreasing to 131,172.1 WTE as at March 2012. Since then, the workforce has steadily increased up to the current level. There has been a slight decrease of 0.2% (332.8 WTE) compared to the March 2016 figure.

Figure 2: NHSScotland total workforce trend ¹



1. Data is annual as at September until 2010 and then quarterly from March 2011.

Figure 3 shows the trend in whole time equivalent since 2000 for selected staff groups.

The number of Medical (HCHS) staff has steadily increased by 56.3% (4,339.7 WTE) since September 2000 to 12,041.1 WTE at June 2016.

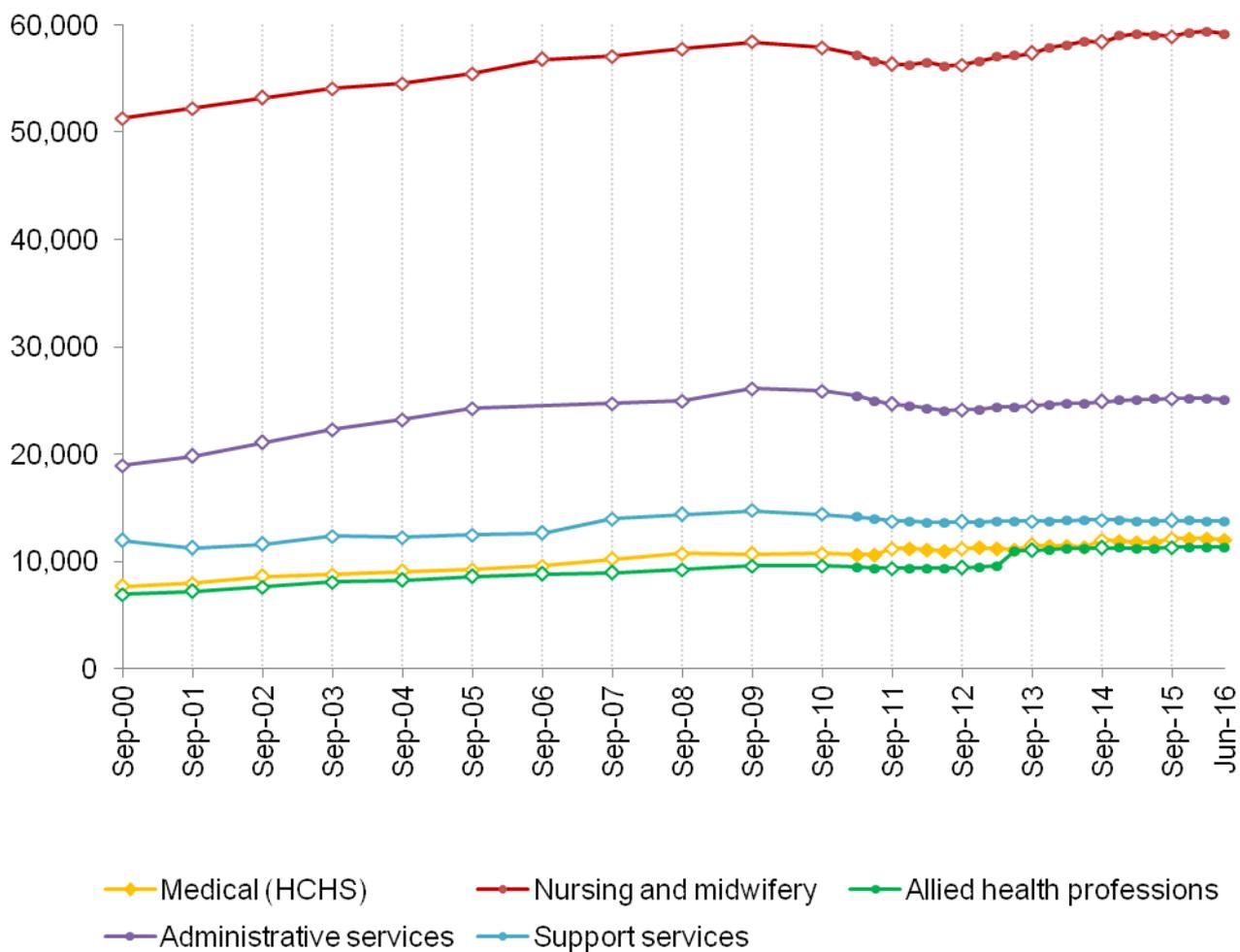
Nursing and midwifery staff increased between 2000 and 2009 from 51,291.6 WTE to 58,428.4 WTE before falling to 56,183.7 WTE at June 2012. Since then the figures have risen steadily to 59,188.7 WTE at June 2016. The overall increase between September 2000 and June 2016 was 15.4% (7,897.1 WTE).

The number of allied health professions staff has increased steadily from 6,955.9 WTE to 11,386.4 WTE between September 2000 and June 2016. The sharp increase between March 2013 and June 2013 was as a result of the reclassification of paramedics from ambulance services to allied health professions.

Administrative services staff increased between 2000 and 2009 from 18,943.8 WTE to 26,107.1 WTE before falling to 24,089.8 at June 2012. The figures have since increased at a slower rate to 25,151.4 WTE at June 2016.

The number of support services staff increased from 11,942.2 at September 2000 to 14,761.0 WTE between September 2000 and September 2009 before a steady decrease to 13,703.3 WTE at September 2012. Since then the figures have remained at a similar level with 13,820.1 WTE support services staff as at June 2016.

Figure 3: Trend in selected staff groups (WTE)^{1,2}



1. Data is annual as at September until 2010 and then quarterly from March 2011.
2. To allow a comparable trend with 2007 information, adjustments have been made to administrative services. For the period 2001 to 2005 ambulance control officers have been excluded. 2006 information is not available due to discrepancies with these data.
3. To allow a comparable trend with 2007 information, adjustments have been made to allied health profession. For the period 2001 to 2006 play staff/specialists and rehabilitation/clinical support assistants have been excluded.
4. From 1 April 2013, paramedics have been reclassified from ambulance services staff to allied health professions.

Table 1 shows a summary of the staff in post figures with comparisons to the previous year and previous quarter, broken down by staff group. Between June 2015 and June 2016, there was a 0.5% (704.8 WTE) increase in staff overall. The majority of this increase was seen in HCHS medical staff (243.2 WTE), allied health professions (141.9 WTE) and personal & social care (116.7 WTE).

Table 1: NHSScotland workforce trend (WTE) by staff group

Staff Group	Jun-15	Mar-16	Jun-16	% change Mar-16 to Jun-16	% change Jun-15 to Jun-16
All NHSScotland staff	137,420.7	138,458.2	138,125.4	-0.2%	0.5%
Medical (HCHS) ¹	11,797.9	12,174.6	12,041.1	-1.1%	2.1%
Dental (HCHS) ¹	662.3	657.0	653.9	-0.5%	-1.3%
Medical & dental support	1,821.6	1,879.9	1,922.8	2.3%	5.6%
Nursing & midwifery	59,073.6	59,372.4	59,188.7	-0.3%	0.2%
Allied health professions	11,244.5	11,394.9	11,386.4	-0.1%	1.3%
Other therapeutic services	3,924.7	4,026.7	4,028.0	0.0%	2.6%
Personal & social care	995.1	1,092.9	1,111.8	1.7%	11.7%
Healthcare science	5,429.8	5,458.1	5,447.5	-0.2%	0.3%
Ambulance services	2,444.6	2,482.2	2,519.5	1.5%	3.1%
Administrative services	25,161.1	25,199.9	25,151.4	-0.2%	0.0%
Support services	13,828.8	13,816.2	13,820.1	0.0%	-0.1%
Unallocated / not known ²	1,036.5	903.3	854.0	-5.5%	-17.6%

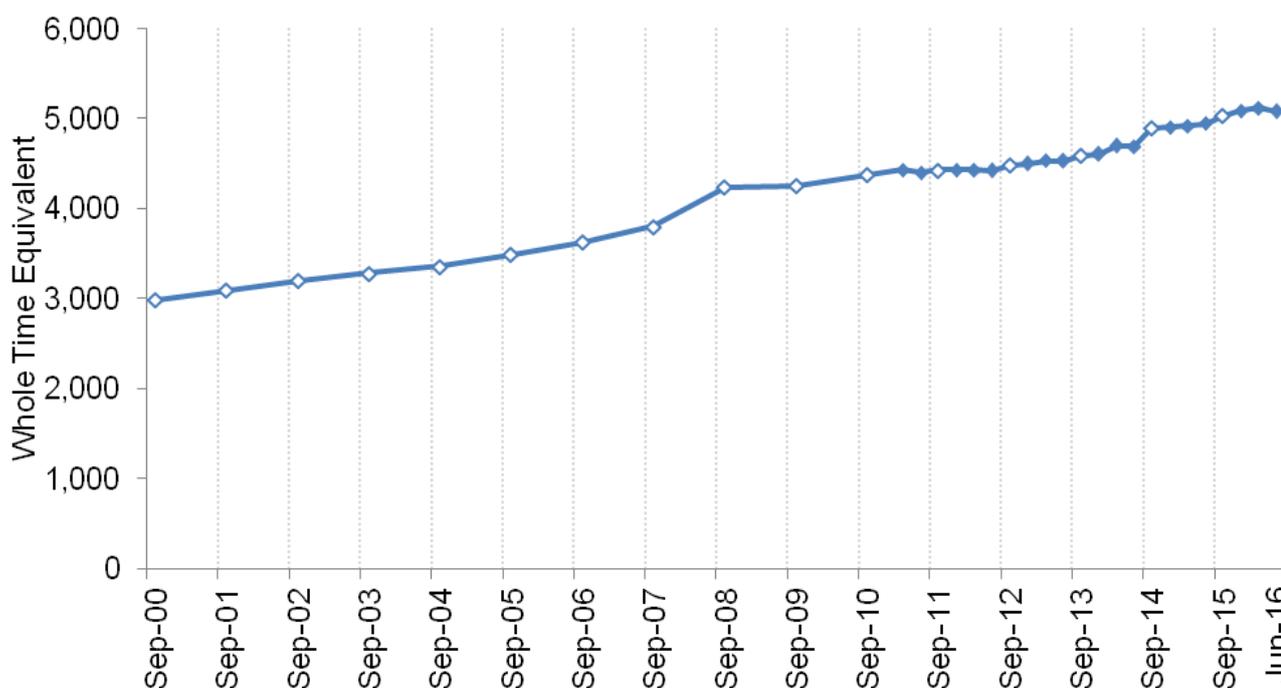
Source: Scottish Workforce Information Standard System (SWISS)

1. HCHS - Hospital, Community, and Public Health Services
2. NHS Highland and Highland Council are currently developing an integrated model for health and social care. Staff involved in the delivery of core integrated services started to transfer from Highland Council to NHS Highland in June 2012. Staff who have transferred into NHS Highland but have not yet been assimilated to AfC are currently recorded as unallocated / not known. As at June 2016, of those unallocated staff: 103.2 wte (121 hc) are in administrative services; 1.0 wte (1 hc) in allied health professions; 706.3 wte (971 hc) in personal and social care; and 29.8 wte (33 hc) in support services.

Medical & Dental Consultants

Since 30 September 2000, the number of medical and dental consultant staff in post has increased by 70.3% (2,095.0 WTE). Figure 4 shows the trend over this period.

Figure 4: NHSScotland medical and dental consultants trend (WTE)^{1,2}



1. Includes Directors of Public Health.
2. Data is annual as at September until 2010 and then quarterly from March 2011.
3. Part of the increase in the number of consultants in post as at September 2014 was due to boards reviewing their data, near the end of 2014, as they migrated to the new national HR system, the electronic Employee Support System (e:ESS). This led to more consultants being identified with the correct grade.

More recently the number of medical and dental consultant staff in post has increased by 2.7% (134.0 WTE) since June 2015 to 5,077 WTE. While there has been a decrease of 0.8% (38.5 WTE) since March 2016 it should be noted that a slight decrease in numbers between March and June has been a consistent pattern in recent years. It should also be noted that the total number of posts (establishment) has risen when compared to both the June 2015 and March 2016 figures.

At 30 June 2016, 7.5% (414.2 WTE) of consultant posts were vacant. This represents a decrease from the rate of 8.3% at June 2015 but an increase from the rate of 6.5% last quarter. Of these vacancies, 188.7 WTE were vacant for more than six months. This is a similar figure to June 2015 but an increase of 22.6 WTE since March 2016.

Table 2: NHSScotland consultant¹ establishment, staff in post and vacancies (WTE)

	Jun-15	Mar-16	Jun-16	% change Mar-16 to Jun-16	% change Jun-15 to Jun-16
Establishment ²	5,390.5	5,470.9	5,491.2	0.4%	1.9%
Staff in post	4,943.0	5,115.6	5,077.0	-0.8%	2.7%
Total vacancies ³	447.5	355.4	414.2	16.6%	-7.4%
Vacant 6 months or more	188.0	166.1	188.7	13.6%	0.4%
Total vacancy rate	8.3%	6.5%	7.5%	16.1%	-9.1%

Sources: Scottish Workforce Information Standard System (SWISS), ISD(M)36

1. Includes Directors of Public Health.
2. Establishment is calculated as number of staff in post plus total vacancies.
3. Vacancies are counted as posts that have been cleared for advert after being through the redeployment process (internal or external advert) and remain as a vacancy until an individual starts in the post. A post marked as a vacancy may still be occupied by the previous incumbent and so also included within the staff in post figure. Therefore establishment may include double counting.

Table 3 shows the breakdown of the number of consultants in post by specialty group. The majority of the increase in consultants since last year was seen in the Medical specialties (48.9 WTE) and Surgical specialties (37.0 WTE).

Table 3: NHSScotland consultants¹ in post (WTE) by specialty groups

	Jun-15	Mar-16	Jun-16	% change Mar-16 to Jun-16	% change Jun-15 to Jun-16
All specialties	4,943.0	5,115.6	5,077.0	-0.8%	2.7%
All medical specialties	4,849.3	5,027.8	4,981.1	-0.9%	2.7%
Emergency medicine	200.4	210.3	208.9	-0.7%	4.2%
Anaesthetics	717.3	734.0	722.3	-1.6%	0.7%
Obstetrics and gynaecology	238.1	251.4	251.6	0.1%	5.7%
Clinical laboratory specialties	609.8	629.0	625.1	-0.6%	2.5%
Medical specialties	1,143.6	1,181.5	1,192.5	0.9%	4.3%
Psychiatric specialties	535.1	548.2	548.5	0.1%	2.5%
Surgical specialties	914.9	975.0	951.9	-2.4%	4.0%
Paediatrics specialties	293.9	306.8	304.7	-0.7%	3.7%
Other medical specialties ²	196.2	191.7	175.6	-8.4%	-10.5%
All dental specialties	93.7	87.8	95.9	9.2%	2.3%

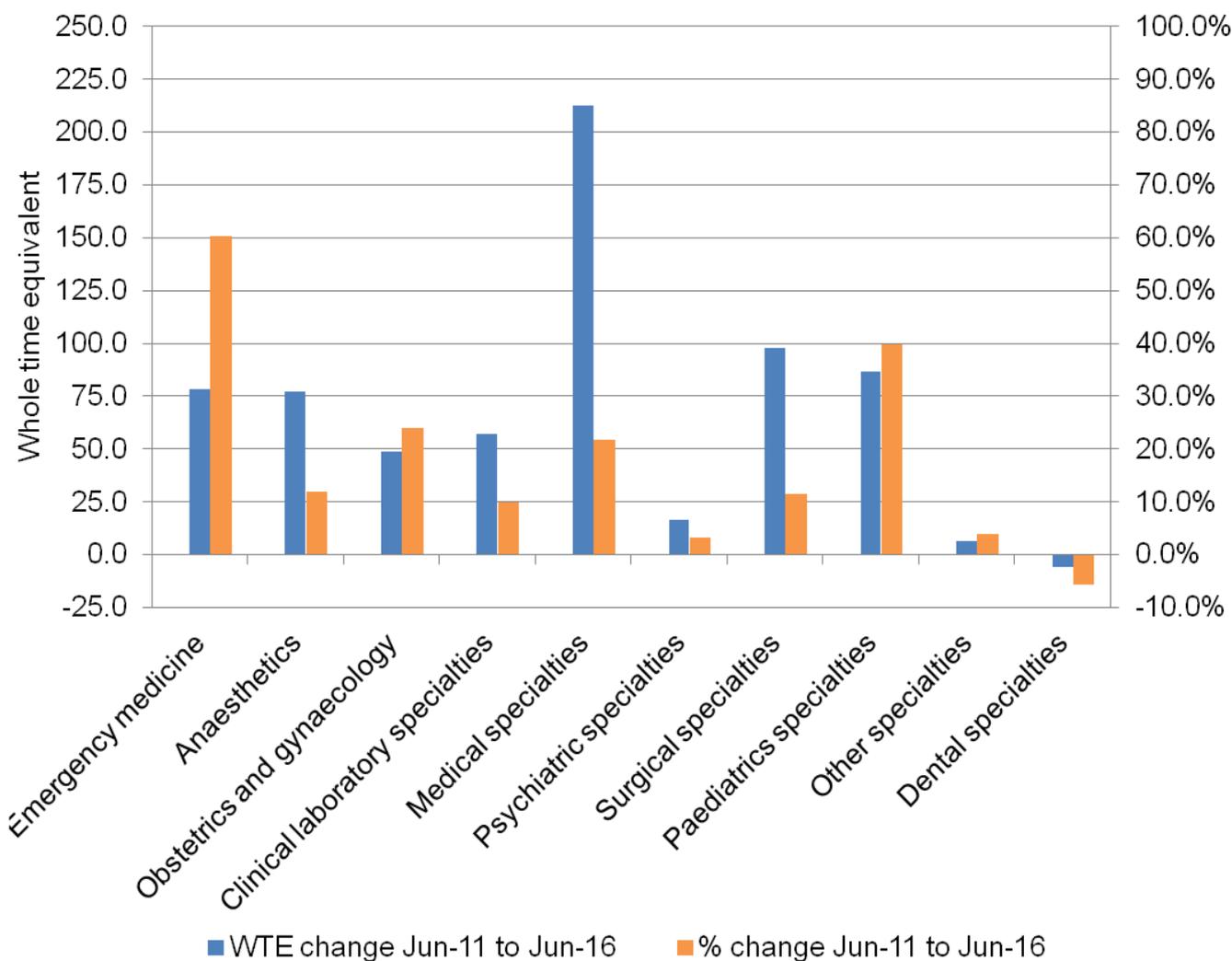
Source: Scottish Workforce Information Standard System (SWISS)

1. Includes Directors of Public Health
2. Other specialties group includes intensive care medicine, public health medicine, occupational medicine, community sexual and reproductive health, general practice and consultants with a not known medical specialty.

Figure 5 shows the number (WTE) and percentage change of consultants in post since June 2011 (the year that quarterly publications began) and is broken down by specialty group.

During this period the overall number of medical and dental consultants has increased by 15.4% (676.4 WTE). The majority of this increase was in the medical specialties (212.6 WTE; 21.7%) and surgical specialties (98.1 WTE; 11.5%). The biggest percentage increases were seen in emergency medicine (60.2%; 78.5 WTE) and paediatric specialties (39.8%; 86.8 WTE). Dental consultants saw a slight decrease of 5.7 WTE (5.6%).

Figure 5: Change of NHSScotland consultants¹ in post between June 2011 and June 2016 by specialty group

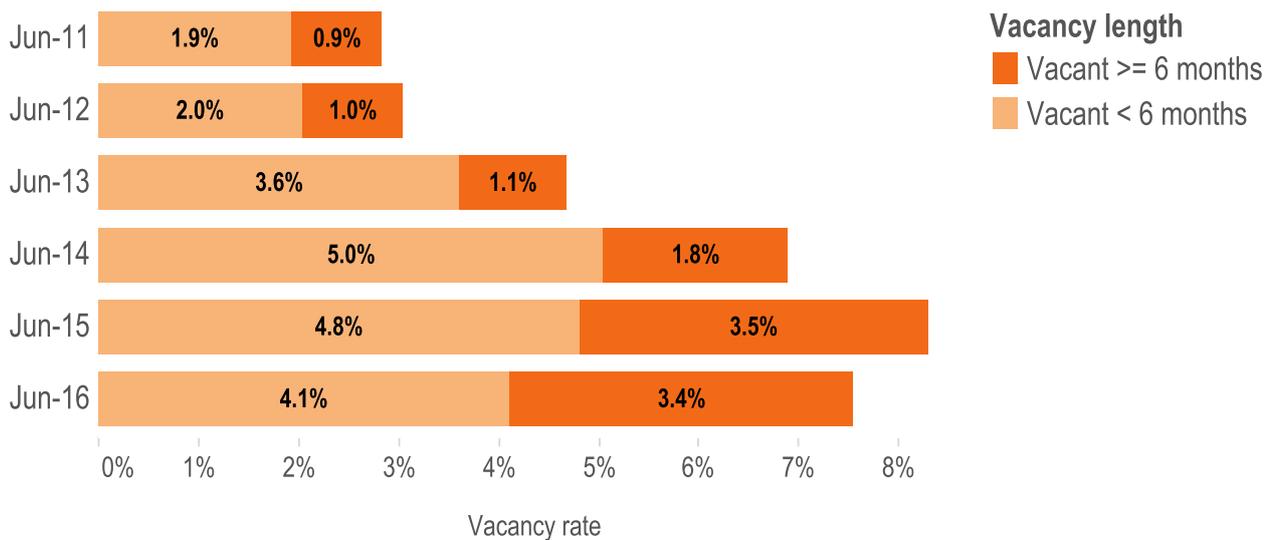


1. Includes Directors of Public Health
2. Other specialties group includes intensive care medicine, public health medicine, occupational medicine, community sexual and reproductive health, general practice and consultants with a not known medical specialty.

Figure 6 shows the vacancy rate of consultant posts as at 30 June from 2011 to 2016. Consultant vacancies are split into 'vacant for less than six months' and 'vacant for six months or more'.

The total vacancy rate at June 2011 was 2.8% with 0.9% of posts lying vacant for six months or more. The rates then increased each year until 2015 when the total vacancy rate was 8.3% with 3.5% of posts vacant for six months or more. At June 2016 the total vacancy rate had decreased to 7.5% with 3.4% of posts vacant for six months or more.

Figure 6: Consultant vacancy rates by length of vacancy¹



1. Does not include proportion (%) of vacancies with unknown length of vacancy.

The highest numbers of vacancies were recorded in Clinical radiology (43.1 WTE; 11.9% vacancy rate), Anaesthetics (36.5 WTE; 4.8%), General psychiatry (29.0 WTE; 8.0%), General (acute) medicine (26.7 WTE; 15.2%) and Emergency medicine (22.5 WTE; 9.7%).

A further breakdown of this data can be found on the ISD website in the following table:

[Consultant staff in post](#)

[Consultant vacancies](#)

Nursing and Midwifery

The number of nursing and midwifery staff in post has increased by 0.2% (115.1 WTE) since 30 June 2016 to 59,188.7 WTE. This is a slight decrease of 0.3% (183.7 WTE) when compared to the March 2016 figure.

At 30 June 2016, 4.2 % (2,566.3 WTE) of nursing and midwifery posts were vacant, an increase from the rate of 3.7% at June 2015. Of these vacancies, 598.7 WTE posts were vacant for more than three months, a decrease of 32.2 WTE since June 2015 but an increase of 155.5 WTE compared to March 2016.

Table 4: NHSScotland nursing and midwifery establishment, staff in post and vacancies (WTE)

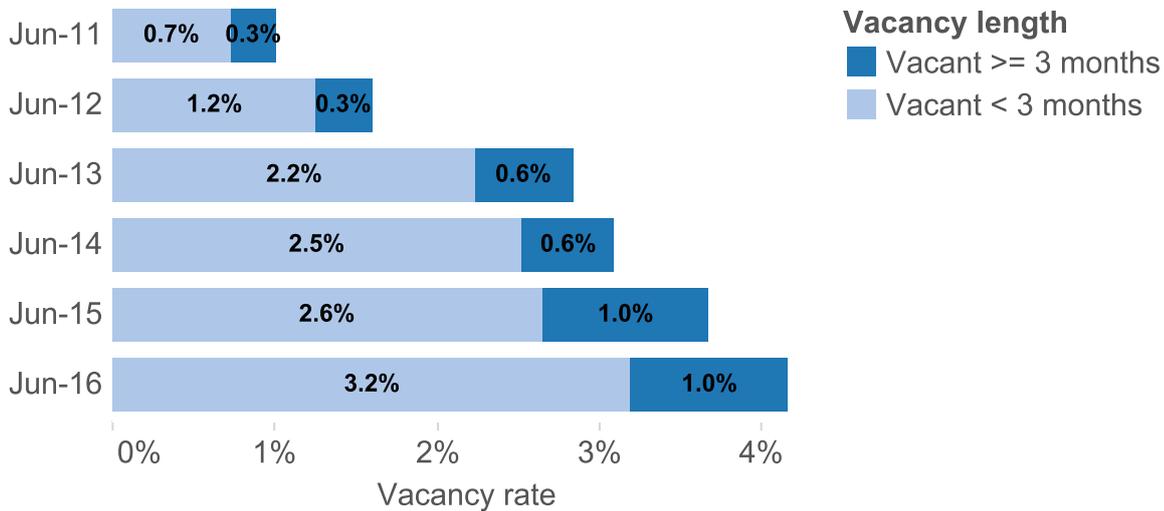
	Jun-15	Mar-16	Jun-16	% change Mar-16 to Jun-16	% change Jun-15 to Jun-16
Establishment ¹	61,329.6	61,583.9	61,755.0	0.3%	0.7%
Staff in post	59,073.6	59,372.4	59,188.7	-0.3%	0.2%
Total vacancies ²	2,251.9	2,211.4	2,566.3	16.0%	14.0%
Vacant 3 months or more	630.9	443.2	598.7	35.1%	-5.1%
Total vacancy rate	3.7%	3.6%	4.2%	17.0%	13.5%

Sources: Scottish Workforce Information Standard System (SWISS), ISD(M)36

1. Establishment is calculated as number of staff in post plus total vacancies.
2. Vacancies are counted as posts that have been cleared for advert after being through the redeployment process (internal or external advert) and remain as a vacancy until an individual starts in the post. A post marked as a vacancy may still be occupied by the previous incumbent and so also included within the staff in post figure. Therefore establishment may include double counting.

Figure 7 shows nursing and midwifery vacancy rates as at 30 June for 2011 to 2016. Vacancies are split into 'vacant for less than three months' and 'vacant for three months or more'. The total vacancy rate at June 2011 was 1.0% with 0.3% of posts vacant for three months or more. The rates have since increased steadily each year to a total vacancy rate of 4.2% with 1.0% of posts vacant for three months or more at June 2016.

Figure 7: Nursing and midwifery vacancy rates by length of vacancy¹



1. Does not include proportion (%) of vacancies with unknown length of vacancy.

The highest vacancy rates were recorded in School nursing (9.2%) and Paediatric (9.0%).

A further breakdown of this data can be found on the ISD website in the following tables:

[Nursing and midwifery staff in post](#)

[Community nurses](#)

[Nursing and midwifery vacancies](#)

Allied Health Professions

The number of allied health professionals in post has increased by 1.3% (141.9 WTE) since June 2015 to 11,386.4 WTE. There has been a slight decrease of 0.1% (8.5 WTE) since March 2016.

At 30 June 2016, 4.4% (521.4 WTE) of allied health profession posts were vacant, a slight increase from the rate of 4.1% at June 2015. Of these vacancies, 120.6 WTE were vacant for more than three months which represents an increase of 34.9 WTE since June 2015.

Table 5: NHSScotland allied health professions establishment, staff in post and vacancies (WTE)

	Jun-15	Mar-16	Jun-16	% change Mar-16 to Jun-16	% change Jun-15 to Jun-16
Establishment ¹	11,724.8	11,830.1	11,907.8	0.7%	1.6%
Staff in post	11,244.5	11,394.9	11,386.4	-0.1%	1.3%
Total vacancies ²	480.3	435.1	521.4	19.8%	8.6%
Vacant 3 months or more	85.7	113.9	120.6	5.9%	40.7%
Total vacancy rate	4.1%	3.7%	4.4%	19.6%	7.3%

Sources: Scottish Workforce Information Standard System (SWISS), ISD(M)36

1. Establishment is calculated as number of staff in post plus total vacancies.
2. Vacancies are counted as posts that have been cleared for advert after being through the redeployment process (internal or external advert) and remain as a vacancy until an individual starts in the post. A post marked as a vacancy may still be occupied by the previous incumbent and so also included within the staff in post figure. Therefore establishment may include double counting.

Figure 8 shows allied health professions vacancy rates as at 30 June for 2011 to 2016. Vacancies are split into 'vacant for less than three months' and 'vacant for three months or more'. The total vacancy rate at June 2013¹ was 3.9% with 0.9% of posts vacant for three months or more. The rates have been at similar levels in subsequent years with a total vacancy rate of 4.4% and 1.0% of posts lying vacant for three months or more at June 2016.

Figure 8: Allied health professions vacancy rates by length of vacancy¹



1. Does not include proportion (%) of vacancies with unknown length of vacancy.

2. Paramedics were reclassified from ambulance services to allied health professions from 1 April 2013 therefore comparisons have been made to June 2013 and not June 2011 as in previous sections of this report.

The highest numbers of vacancies in June 2016 were recorded in Physiotherapy (176.1 WTE; 5.9%), Diagnostic radiography (103.9 WTE; 5.0%) and Occupational therapy (101.7 WTE; 4.4%).

A further breakdown of this data can be found on the ISD website in the following tables:

[Allied health professions staff in post](#)

[Allied health professions vacancies](#)

Glossary

Agenda for Change (AfC): The national pay system for NHS workforce.

Establishment: Term used in calculating NHSScotland vacancy information to describe the total filled and vacant posts. Establishment is calculated by adding the number of staff in post to the number of vacant posts.

Headcount: The actual number of individuals working within NHSScotland. The Scotland figure eliminates any double counting that may exist as a result of an employee holding more than one post.

Scottish Workforce Information Standard System (SWISS): The main source of NHSScotland workforce statistics. (See Appendix A1 for further information).

Whole time equivalent (WTE): The WTE is calculated by dividing the number of contracted hours by the number of hours worked (conditioned hours). WTE is sometimes a more useful measurement than headcount because it adjusts headcount figures to take account of part time working; e.g. one person may work 20 hours a week, so just using headcount could make the workforce appear larger than it is. WTE is sometimes referred to as full time equivalent (FTE).

A full Workforce information glossary is available on our website [here](#).

List of Tables

Table No.	Name	Time period	File & size
1	Overall trend	Jun 2016	Excel [518kb]
2	Medical trend	Jun 2016	Excel [15,126kb]
3	Non-medical trend	Jun 2016	Excel [18,024kb]
4	Overall NHSScotland workforce summary by staff grouping	Jun 2016	Excel [8,271kb]
5	Staff turnover	Mar 2016	Excel [354Kb]
6	Medical & dental staff in post	Jun 2016	Excel [11,996kb]
7	HCHS medical and dental staff by specialty	Jun 2016	Excel [25,354kb]
8	HCHS medical and dental staff by grade	Jun 2016	Excel [10,118kb]
9	Consultant staff in post	Jun 2016	Excel [1,340kb]
10	Consultant vacancies	Jun 2016	Excel [8,073kb]
11	Consultant contract	Sep 2015	Excel [306kb]
12	Nursing and midwifery staff in post	Jun 2016	Excel [52,095kb]
13	Community nurses	Jun 2016	Excel [8,979kb]
14	Health visitors	Jun 2016	Excel [1,970kb]
15	Nursing and midwifery vacancies	Jun 2016	Excel [2,373kb]
16	Clinical nurse specialists	Sep 2015	Excel [6,312kb]
17	Bank and agency nursing and midwifery comparison (capacity)	Mar 2016	Excel [1,236kb]
18	Nursing and midwifery - student intakes and students in training	Sep 2015	Excel [39kb]
19	Nursing and midwifery progression rates	Sep 2015	Excel [360kb]
20	Allied health professions staff in post	Jun 2016	Excel [10,332kb]
21	Allied health professions vacancies	Jun 2016	Excel [3,057kb]
22	Other therapeutic staff and personal social care staff in post	Jun 2016	Excel [5,881kb]
23	Healthcare science staff in post	Jun 2016	Excel [7,735kb]
24	All other staff in post	Jun 2016	Excel [12,752kb]
25	Pharmacy vacancies	Sep 2015	Excel [3,558kb]
26	Sickness absence	Mar 2016	Excel [174kb]
27	Equality and Diversity	Mar 2016	Excel [439kb]

28	Dentists	Mar 2016	Excel [809kb]
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Further Information

The Information Services Division publishes a wide range of workforce statistics. You can find out more by visiting our [workforce homepage](#).

NHS Performs

A selection of information from this publication is included in [NHS Performs](#). NHS Performs is a website that brings together a range of information on how hospitals and NHS Boards within NHSScotland are performing.

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Appendices

A1 – Background Information

The main source of workforce statistics is the Scottish Workforce Information Standard System (SWISS). SWISS brings together HR and Payroll information into one system.

A new national HR system, electronic Employee Support System (e:ESS), is currently being rolled out across all boards. As boards migrate to the new system, their data captured in e:ESS continues to feed into SWISS.

Data is shown in AfC job families. More information on what is included in each of the job families can be found [here](#).

Further information on current data sources and collections can be found on the ISD Workforce Statistics [Frequently Asked Questions](#) page.

Vacancies

Vacancies are counted as posts that have been cleared for advert after being through the redeployment process (internal or external advert) and remain as a vacancy until an individual starts in the post.

The number of vacancies is a measure of how many posts are being recruited to. Figures may reflect a variety of circumstances within a board such as a gap in staffing or the establishment or growth of services in which new staff are being recruited to.

However, note that a post marked as a vacancy may still be occupied by the previous incumbent and so also included within the staff in post figure. In contrast, some NHS Boards may not recruit where the post is currently being covered by a locum. NHS Boards are currently working with ISD to improve the consistency and accuracy of vacancy recording.

Health and social care integration

NHS Highland and Highland Council are currently developing an integrated model for health and social care. Staff involved in the delivery of core integrated services started to transfer from Highland Council to NHS Highland in June 2012. Staff who have already transferred into NHS Highland but have not yet been assimilated to AfC are currently recorded as unallocated / not known. Figures are noted on table 1 above.

Data quality

Workforce information is sourced from each board's HR and payroll systems. These are dynamic, operational systems in which the data can change over time due to their live status, and potential additional updates made by individual boards.

It is recognised that the published information does not always reflect the data used at board and regional level when planning and presenting the workforce. Accuracy of coding is crucial to the quality and credibility of the data, and ISD seeks to minimise such data inaccuracies. However, responsibility for data accuracy lies with the boards providing the data.

The ISD workforce team work with boards throughout the year in an attempt to improve data quality. Published information may change over time to reflect these improvements.

e:ESS is being introduced across NHSScotland in phases, with each board at a different stage in the process. A number of boards have migrated their data to e:ESS, and this affects data on location of service delivery, medical grade and medical specialty. Changes have been seen in these as boards review their data as part of the migration process.

A review of community nursing staff data, including district nurses and health visitors, was undertaken in 2014/15 to ensure the availability of more accurate and consistent data reporting for these staff groups. The main section of the review is now complete and workforce information for these staff groups is now available in a separate table. Please see the relevant nursing and midwifery tables for further information.

Scottish Government – Workforce Vision

In June 2013, the Scottish Government launched the [2020 Workforce Vision "Everyone Matters"](#) to ensure that everyone who works for NHSScotland is: treated fairly; empowered to influence the way they work; supported to work to the best of their ability; supported to keep their skills and knowledge up to date.

The [2020 Workforce Vision Implementation Framework and Plan 2014-15](#) sets out the key ambitions, as well as the main challenges, facing the future provision of healthcare services in Scotland. The programme also sets out a framework of what the workforce needs to look like in order to deliver against those ambitions and achieve the 2020 Vision for Healthcare in Scotland.

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	NHSScotland Workforce – Staff in Post and Vacancies.
Description	Quarterly update of NHSScotland staff in headcount and whole time equivalent.
Theme	Health and Social Care.
Topic	Workforce Staff in Post and Vacancies Information.
Format	Excel workbooks.
Data source(s)	Scottish Workforce Information Standard System (SWISS), ISD(M)36.
Date that data are acquired	Staff in Post - 12 July 2016. Vacancies – 22 July 2016.
Release date	6 September 2016
Frequency	Quarterly.
Timeframe of data and timeliness	Data as at 30 June 2016.
Continuity of data	Non medical and dental staff data has a break in 2006 due to the introduction of Agenda for Change (AfC). Medical and dental staff data are continuous from 1990.
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.
Revisions relevant to this publication	Nursing and midwifery vacancy table – updated to reflect revision to NHS Dumfries and Galloway’s March 2016 returns. The non medical trend table has also been updated.
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 staff in post information is captured through the Scottish Workforce Information Standard System (SWISS) - Workforce Information Repository. Further information on this system, data capture and accuracy can be found within the ISD Workforce Web pages. Vacancy information is signed off by the relevant Director (e.g. Medical Director, Nurse Director etc.).

Completeness	<p>Staff in post information on all NHSScotland 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 each individual board to improve data quality.</p> <p>All NHS Boards in Scotland return vacancy information.</p>
Comparability	<p>Workforce data are comparable and regularly used in both UK and international comparison reports (e.g. EUROSTAT).</p>
Accessibility	<p>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines.</p>
Coherence and clarity	<p>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.</p>
Value type and unit of measurement	<p>Headcount and WTE = number, rate, percentage.</p>
Disclosure	<p>The ISD protocol on Statistical Disclosure Protocol is followed.</p>
Official Statistics designation	<p>National Statistics.</p>
UK Statistics Authority Assessment	<p>Completed assessment by UK Statistics Authority. Report published May 2010.</p>
Last published	<p>7 June 2016</p>
Next published	<p>6 December 2016</p>
Date of first publication	<p>Paper publications since 1970s, web publications since 1996.</p>
Help email	<p>nss.isdwfdinfo@nhs.net</p>
Date form completed	<p>August 2016</p>

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.

Standard Pre-Release Access:

Scottish Government Health Department

NHS Board Chief Executives

NHS Board Communication leads

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 (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. 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.