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Introduction

This publication summarises national data on the workforce providing Psychology Services in NHSScotland, following the latest census at 30 September 2017. This National Statistics release is accompanied by a number of tables in Excel – see background tables.

This report summarises key aspects of the data released including:

- The number of clinical staff in post – data are available by Staff Group, NHS Board, Profession, Target Age of individuals seen and Area of Work (for definitions of Target Age and Area of Work see the Glossary)
- Characteristics of the workforce- Contracted hours, Contract term (Permanent or fixed term), Age of staff and Agenda for Change pay grades
- The number of vacant posts
- The number of staff in training

Note that figures are presented either as headcount (actual numbers of staff) or, where applicable, by whole time equivalent (WTE) which adjusts to take account of part-time working.

The data are gathered and analysed collaboratively by the Information Services Division (ISD) within National Services Scotland (NSS) and NHS Education for Scotland (NES). Data are collected directly from Psychology services and held within the National Psychology Workforce Information Database held at NSS. The data collected are verified by Psychology Heads of Service, who ISD and NES work closely with to ensure a high level of data accuracy. The information collected and presented is used routinely by NES, the Scottish Government and NHS Boards to support local, regional and national workforce planning, and to support educational training and planning.

In recent years NHSScotland has seen a steadily increasing demand for access to Applied Psychologists and Psychological Therapies due to the growing evidence base for psychological interventions. The term ‘Psychological Therapies’ refers to a range of interventions based on psychological concepts and theory, which are designed to help people understand and make changes to their thinking, behaviour and relationships in order to relieve distress and to improve functioning. The skills and competences required to deliver these interventions effectively are acquired through training, and maintained through clinical supervision and practice.

Contemporary healthcare policy recognises the importance of Psychological and Psychosocial factors for physical and mental health and wellbeing across the life span. Government objectives for health improvement require change in what people (i.e. the public, service users and service providers), individually and collectively, think, feel and do about health and healthcare in Scotland. There is a strong evidence base, recognised in Scottish Intercollegiate Guidelines Network (SIGN) and National Institute for Health and Clinical Excellence (NICE) guidelines for the effectiveness of psychological interventions in delivering positive health change for people with a wide range of clinical conditions.

The NHS Education for Scotland- Scottish Government Report 'The Matrix: A Guide to Delivering Evidence-Based Psychological Therapies in Scotland' summarises and describes the most up-to-date evidence-based psychological therapies. The Matrix report also provides information and advice for NHS Boards on the delivery of effective and efficient therapies and the levels of training and supervision necessary for staff to deliver these safely and effectively.
Main points

Within Psychology Services in NHSScotland at 30 September 2017:

- Clinical psychologists remained the largest staff group within this workforce with 729.5 WTE in post at this census compared to 311.0 WTE at 30 September 2001 – an increase of 134.6%. This represented an annual increase of 3.5% when comparing to the size of the workforce at 30 September 2016 (see Figure 1).

- In respect of all clinical staff within this workforce, there were 1,099.3 WTE (1,333 headcount) in post - 169% higher than reported at the first data collection in 2001. However the rate of growth has slowed since 2010, although more rapid growth was experienced between 2013 and 2014, which was due to a 20% increase in other types of clinician (staff who are are neither clinical or applied psychologists ) - see Figure 1.

- 112.4 WTE posts were vacant and in the process of being advertised, equating to a 9.3% vacancy rate. The majority (64.5%) of the vacancies advertised at this date were to replace staff who had left or were leaving existing posts and just under a third (30.2%) related to new posts.

- Since the 2003 intake there have been a total of 565 graduates from the Doctorate in Clinical Psychology courses in Scotland. Over this period 97.2% of students successfully completed the course.
Results and Commentary

1. Staff in Post

At 30 September 2017, there was a total of 1,099.3 WTE (1,333 headcount) clinical staff in posts within Psychology Services across NHSScotland. Figure 1 shows the growth in this workforce over time, distinguishing between the major professional groups. Overall the latest WTE is 169% higher than reported at the first data collection in 2001; the rate of growth has slowed since 2010, although more rapid growth was seen around 2013 – 2014, due to an increase in other clinical staff (see Figure 1). Clinical psychologists still remain the largest staff group within this workforce with 729.5 WTE in post at this census compared to 311.0 WTE at 30 September 2001 – an increase of 134.6%. Since 30 September 2016 the clinical psychology workforce has grown by 3.5%. The long term growth in the clinical psychology workforce is partly due to the expansion of the NES-commissioned training in Doctoral Clinical Psychology.

The percentage of other clinical staff within psychology services has also increased and is now 28.4% compared to 20.0% when data collection began. This group includes staff that are neither clinical nor other applied psychologists such as Cognitive Behavioural Therapists, Counsellors and Assistant Psychologists (shown in Figure 1 as ‘Other Clinical Staff’). Growth has remained steady within this group over recent years, however there was a period of rapid growth between September 2013 and 2014, when this group increased by 20%. This growth can be attributed in part to the introduction of two NES commissioned training programmes: MSc in Psychological Therapy in Primary Care in 2005 and MSc in Applied Psychology for Children and Young People in 2007, which have increased the number of other types of clinical staff that are supporting these services.

Figure 1: WTE of all Clinical Staff in NHSScotland Psychology Services 30 September 2001 to 30 September 2017.

At 30th September 2017 there were 58.0 WTE (5.3%) staff on maternity leave and 2.2 WTE (0.2%) on long term sick leave. Quarterly data collection began from March 2011. Prior to this there was only an annual census at 30 September. Clinical and Other Applied Psychologists are also referred to as all Applied Psychologists. Further information can be found in the Glossary and Summary of Professional Groups.
1.1 Staff by Profession

Historically, clinical psychologists were the main staff group within psychology services – they still account for 66.4% of all clinical staff. However since 2001, NES in collaboration with the Scottish Government have provided training and expanded the skill mix in order for psychological therapies to be delivered by a range of staff. This is reflected in Figure 2 data where a range of staff groups are involved in services.

Figure 2: WTE of Profession in Psychology Services across NHSScotland at 30 September 2017.

MSc PTPC – MSc Psychology Therapy in Primary Care
MSc APCYP – MSc Applied Psychology for Children and Young People
Other includes: Self Help Workers, Peer Support Workers, Mental Health Nurses and Advanced Psychology Practitioners

MSc PTPC and MSc APCYP graduate numbers are based on entries under 'Professional Group' and are lower than actual numbers of graduates of these courses due to some graduates of these courses being recorded under another Professional Group. The data is being developed to better reflect the Professional Groups of these graduates, including the ability to capture numbers of Clinical Associates in Applied Psychology. The current job titles for Graduates of MSc PTPC and MSc APCYP can be found within Tab 12.1 in the background tables.
1.2 Staff in NHS Boards

Figure 3 compares the WTE of all applied psychologists per 100,000 population in each mainland NHS Board at the latest census with that at 31 March 2011. NHS Greater Glasgow and Clyde still has the largest rate with 17.6 WTE All Applied Psychologists per 100,000 population compared to the national average of 14.6. However, it should be noted that the higher rates in some Boards will be partly due to the provision of regional services including referrals from other Boards. In some instances this may also involve specialist inpatient care where staffing requirements are higher.

![Figure 3: Applied Psychologists in mainland NHS Boards – Change in WTE rates per 100,000 population between 31 March 2011 and 30 September 2017.](image)

Please note that NHS Orkney, NHS Shetland and NHS Western Isles all currently have less than 1.5 WTE Applied Psychologists so are not included in this chart. Further information on services to the islands board can be found in the background notes.

2. Characteristics of the workforce

This section provides information with regard to the overall characteristics of the workforce. For more detailed information on workforce characteristics please refer to the background tables.

2.1 Target Age and Area of Work

Within each professional group, individual staff members may work across several different Areas of Work and Target Ages. Target Age refers to the age group of patients. For Psychology Services the distinct age groups are generally Child & Adolescent (0-18/19 years), Adult (20-64 years), or Older Adult (65+ years). Examining the Target Age is required for
accurate workforce planning in these services to take account of demographic change and the need for services within these age groups.

Figure 4 displays a trend of the WTE staff working across each Target Age back to March 2011 when data was first available. The WTE within each Target Age has increased over this time period. The increase within the older adult target age may partly be due to the introduction of trainees on the Doctorate in Clinical Psychology course having specific alignment to Older People’s Services. The MSc Psychological Therapy in Primary Care course covers both adults and older adults. This has enabled graduates to work in the older adults Target Age on completion, an age group that has been historically short staffed and requires significant staffing increases.

Figure 4: Trend of all clinical staff in Psychology Services by Target Age between 31 March 2011 and 30 September 2017.

Age Non-specific refers to services where clinical staff treat clients across the life span.
Area of Work refers to the specialty area that a clinician works in. The largest Area of Work has consistently been Mental Health, with an average of 57.5% WTE staff working in Mental Health since data collection began in March 2011. In addition to Mental Health, the remaining workforce is distributed across Learning Disabilities, Physical Health, Neuropsychology, Forensic, Alcohol & Substance Misuse and other specialty services, this is shown in Figure 5 below.

**Figure 5: Trend of all clinical staff in Psychology Services by Area of Work between 31 March 2011 and 30 September 2017**
Figure 6 displays a breakdown of the Areas of Work and Target Age. Each of the larger Area of Work categories can be broken down further into more specific specialty areas. As Mental Health is by far the largest area in terms of WTE, the sub categories within this are shown. Understanding the workforce operating in specialty areas is essential for accurate workforce planning, each having different staffing requirements. For example, within Mental Health, the sub category Severe and Enduring Mental Health treatment requires a more intensive level of workforce resourcing than Mild to Moderate services.

See table 3.2 in the background tables for a complete breakdown of categories and sub-categories by Target Age.

Figure 6: WTE Clinical Staff by Area of Work and Target Age at 30 September 2017.

Age non-specific refers to services where clinical staff treat clients across the life span and also includes non-clinical work such as Academic and Teaching roles. The sub-categories for Mental Health area of work have been separated out in Figure 6 these are: General Mental Health, Severe and Enduring (MH), Mild to Moderate (MH), Early Intervention (MH) and Eating Disorders (MH). Please refer to tabs 3.2 and 3.3 in the background tables for a full breakdown of the specialty areas of work.

General Mental Health is the largest area of work for all Target Age categories. (Adult: 43.3%, Older Adult: 49.7%, and Child and Adolescent Target Age: 53.8%). The largest area of work for the Age Non-specific Target Age is Other (30.8%) which includes sub-categories such as Academic and Other (including Management).
### 2.2 Gender and contracted hours

Since March 2011, the majority of the increase seen in WTE can be accounted for by the rise in female staff working within Psychology Services, from a total of 809 females to 1137 females at the current census date (40.5% increase). Females currently contribute 921.1 WTE (83.8%) of the total 1099.3 WTE within NHSScotland Psychology Services.

As the female headcount has risen there has also been a large increase in part-time working; 58.0% of contracts for female staff are part-time at the current census date compared with 41.7% in September 2011. The trend for contract type and gender is illustrated in Figure 7. For more detailed information on contract type and gender by professional group, please refer to Table 5.1 and Chart 5.2 within the background tables.

**Figure 7: Trend of Contract Type and Gender for Psychology Staff within NHSScotland from 31 March 2011 to 30 September 2017, by headcount.**

Please note that Whole-time/Part-time working data is only available from March 2011.
Despite the large increase in the percentage of staff working part-time from 37.3% in March 2011 to 53.6% at the current census, the majority of psychology staff still work 37.5 hours a week or greater overall (50.7%) as at 30 September 2017. This is shown in Figure 8 which displays the current distribution of weekly contracted hours for staff within NHSScotland Psychology Services by headcount, accounting for individuals who have more than one part-time position so that only their combined overall hours per week are included. Most part-time staff work over 16 sessions (0.4 WTE) a week.

**Figure 8: Distribution of weekly contracted whole time equivalent, by headcount at 30 September 2017.**

It should be noted that a contract of 37.5 hours or 40 sessions is the standard working week for one whole-time equivalent staff member under NHS guidelines. While 49.3% of staff still appear to work less than 37.5 hours, please note that some practitioners might hold a part-time position within NHSScotland Psychology Services as well as a part-time position elsewhere. There are a small number of practitioners (n=4), who are known to be working over 40 sessions (1.0 WTE), this is because they hold a number of part time postions in different speciality areas.

### 2.3 Contract Term

Data is collected on whether staff hold a permanent or temporary contract for their position(s). Temporary contracts are grouped into fixed term for less than 2 years or fixed term for 2 years or more. At the current census date 88.7% of staff in NHSScotland Psychology Services were employed on a permanent contract, 10.1% were employed on a fixed term contract less than two years and 3.9% were employed on a fixed term contract of longer than two years duration. The percentage of staff employed on a permanent contract has remained stable since 2011. This information is available by NHS Board and Professional Group, as shown in Table 8 of the background tables.
2.4 Age profile of staff

Figure 9 displays the distribution of the age of clinical staff at 30 September 2010, when data was first available and 30 September 2017. The age distribution has changed over the last 7 years; there are fewer staff aged under 35 at the current census and more staff aged between 35 and 54 than in 2010. The largest age group of staff has moved from 30-34 year old category (21.4% at 30 September 2010) to the 35-39 year old category (21.7% at 30 September 2017). For more detailed information, please refer to table 2 in the background tables.

Figure 9: Age Group of all clinical staff comparison between 30 September 2010 and 30 September 2017.
2.5 Agenda for Change Pay Grades

The distribution of pay grades for the main professional groups is displayed by percentage WTE in Figure 10. It is important to have a range of staff at different Agenda for Change Bands to ensure that there are enough senior staff to fulfill management and supervision requirements. The most common Agenda for Change pay band for Clinical Staff in Psychology Services is Band 8a, which accounts for 32.0% of WTE staff. However the most common band amongst Other Clinical Staff (which includes professional groups such as Assistant Psychologists, Cognitive Behavioural Therapists, Graduates of MSc Psychological Therapy in Primary Care, Graduates of MSc Applied Psychology for Children and Young People and Other Therapists) is Band 7 which accounts for 46.7% of staff within these professions.

Figure 10: Distribution of Agenda for Change pay bands for all clinical staff and main professional groups at 30 September 2017.

Please note that is one clinical psychologist (0.2 WTE) who is paid at consultant level and therefore is not included in Figure 10 above.
3. Vacancies

At 30 September 2017, 112.4 WTE vacancies were being advertised for recruitment. Table 1 shows a breakdown of these by professional group. Note that vacant posts may be a consequence of either staff leaving a post or the creation of new posts. The majority (64.5%) of the vacancies advertised at this census date were to replace staff who had left or were leaving existing posts and just under a third (30.2%) related to new posts. A further 16.9 WTE posts were approved for recruitment but not yet advertised at 30 September 2017.

Table 1: NHSScotland Psychology Services vacancies being advertised by professional group at 30 September 2017.

<table>
<thead>
<tr>
<th>Professional Group</th>
<th>New Posts (WTE)</th>
<th>Replacement Posts (WTE)</th>
<th>Unknown Posts (WTE)</th>
<th>NHSScotland (WTE)</th>
<th>Establishment WTE (total vacancies plus staff in post)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Applied Psychologists;</td>
<td>17.9</td>
<td>52.7</td>
<td>5.0</td>
<td>75.6</td>
<td>862.4</td>
</tr>
<tr>
<td>Clinical Psychologist</td>
<td>17.3</td>
<td>48.2</td>
<td>5.0</td>
<td>70.5</td>
<td>800.0</td>
</tr>
<tr>
<td>Counselling Psychologist</td>
<td>0.6</td>
<td>4.5</td>
<td>-</td>
<td>5.1</td>
<td>51.8</td>
</tr>
<tr>
<td>Other Clinical Staff;</td>
<td>16.0</td>
<td>19.8</td>
<td>1.0</td>
<td>36.8</td>
<td>349.3</td>
</tr>
<tr>
<td>Graduate of MSc PTPC</td>
<td>-</td>
<td>5.0</td>
<td>1.0</td>
<td>6.0</td>
<td>87.3</td>
</tr>
<tr>
<td>Cognitive Behavioural Therapist</td>
<td>1.0</td>
<td>0.8</td>
<td>-</td>
<td>1.8</td>
<td>58.1</td>
</tr>
<tr>
<td>Psychology Assistant</td>
<td>6.0</td>
<td>7.0</td>
<td>-</td>
<td>13.0</td>
<td>67.8</td>
</tr>
<tr>
<td>Other</td>
<td>-</td>
<td>1.0</td>
<td>-</td>
<td>1.0</td>
<td>32.9</td>
</tr>
<tr>
<td>Other Therapist</td>
<td>9.0</td>
<td>6.0</td>
<td>-</td>
<td>15.0</td>
<td>34.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>33.9</strong></td>
<td><strong>72.5</strong></td>
<td><strong>6.0</strong></td>
<td><strong>112.4</strong></td>
<td><strong>1211.7</strong></td>
</tr>
</tbody>
</table>

1. Replacement posts includes vacancies to cover maternity leave and secondments.
2. Due to missing data it is unknown whether these vacancies are for new or replacement posts.
3. Please note the following NHS Boards / Services reported no posts were between advertised and being filled as at the 30 September 2017: NHS Highland neuropsychology service, NHS Shetland and NHS Western Isles.
4. 0.5 WTE vacancies for Neuropsychologists are included within the Clinical Psychologist figures to align with the professional groups regulated by the HCPC.
5. Other includes Psychology Practitioners and Psychological Therapist vacancies where no additional information was provided about professional group.
6. Other Therapist includes psychotherapists, family and couple therapists.
Figure 11 shows how the distribution of new and replacement vacancies has changed since September 2016. There has been an 80% increase in the total number of vacancies within NHSScotland Psychology Services over the last 12 months, from 62.4 WTE in September 2016 to 112.4 WTE at current census date. At each census date the largest proportion of advertised vacancies were for replacement posts, these account for 58.4% of all posts advertised since September 2016. The overall increase in vacancies seen since 31 March 2016 is mainly due to the 154% rise in vacancies for replacement posts during this period. The number of vacancies for new posts has also increased over the past year from 17.7 WTE to 33.9 WTE at the current census date, which is an increase of 91.5%.

**Figure 11: Change in proportion of vacancies for new and replacement posts between September 2016 and September 2017.**

A trend for vacancy rates for all Clinical Staff as far back as September 2011 is shown in Figure 12. A moving average showing the combined rate for the previous 4 census points has been added to the chart to illustrate the underlying trend for all Clinical Staff vacancy rates and adjusting for seasonality. More detailed trend information on vacancies for individual professional groups is shown in table 10 in the background tables.

Despite quarter on quarter variation, the moving average suggests that the overall vacancy rate within all professional groups has remained relatively steady since 31 March 2014, however this rate has increased over the previous 4 quarters and the moving average is now 7.5% which is the highest since 30 March 2013.

It is important to note that the Doctorate in Clinical Psychology course commences in October which has an impact on the Other Clinical staff vacancy levels. This means that those in positions such as Assistant Psychologists will leave their current post to take on further education. Trainees from the Doctorate in Clinical Psychology course graduate in September; these graduates subsequently fill vacant Applied Psychologist posts, which is reflected in the drop in vacancy rates at each December census.
Figure 12: Trend in the vacancy rates (the percentage of establishment that is vacant) for all clinical staff between 30 September 2011 and 30 September 2017.

For the 30 September 2017 census all NHS Boards provided the necessary vacancy data. Please note that not all services provided vacancy information each quarter. Specific information on which services and boards responded can be found in previous publications.

Figures 13 and 14 show a breakdown of these vacancy rates within all applied psychologists and other clinical staff along with a moving average based on the previous four census points. The moving average indicates the rate of vacancies for all applied psychologists has been fairly steady overall since 30 September 2013, however there have been small increases in the rate of vacancies for all applied psychologists each quarter since 30 September 2016 from 5.4% to 8.8% at 30 September 2017. The vacancy rate for all applied psychologists at the current census date, is at the highest since 30 September 2012.

The vacancy rate for other clinical staff working in NHS Psychology Services shows a greater level of variation from quarter to quarter, however the moving average indicates this rate remained between 5.0% and 6.7% from December 2013 to June 2017. This is the third subsequent quarter where there has been an increase in the rates of vacancies for other clinical for staff; which has increased the moving average to 7.9%. The vacancy rate for other clinical staff within NHSScotland Psychology services at the current census date, is also at the highest since 30 September 2012.
Figure 13: Trend in the vacancy rates (the percentage of establishment that is vacant) for all applied psychologists between 30 September 2011 and 30 September 2017.

Figure 14: Trend in the vacancy rates (the percentage of establishment that is vacant) for other clinical staff between 30 September 2011 and 30 September 2017.
4. Staff in training

4.1 Current Trainees

The latest reported number of individuals training towards the Applied Psychology postgraduate qualifications are shown in Table 2 below. NES has responsibility for the pre-registration training of Clinical Psychologists for NHS Scotland i.e. the main source of psychology workforce supply.

In addition to the Doctorate in Clinical Psychology, MSc Psychological Therapy in Primary Care and MSc in Applied Psychology for Children and Young People, NES works in partnership with NHS boards to provide British Psychological Society’s Stage 2 Training in Health Psychology to Health Psychologists in training. Trainees on each of the courses are employed by the NHS during training (for definitions of these training courses see the Summary of Training Courses).

Table 2: Number of Trainees in Applied Psychology at 30 September 2017.

<table>
<thead>
<tr>
<th>Training Course</th>
<th>Headcount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctorate in Clinical Psychology¹²</td>
<td>227</td>
</tr>
<tr>
<td>MSc Psychological Therapy in Primary Care</td>
<td>31</td>
</tr>
<tr>
<td>MSc in Applied Psychology for Children &amp; Young People</td>
<td>18</td>
</tr>
<tr>
<td>BPS Stage 2 Qualification in Health Psychology</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total Number in Training</strong></td>
<td><strong>286</strong></td>
</tr>
</tbody>
</table>

1. In order to meet strategic objectives, some doctorate trainees are aligned to strategic priorities. Of this total of 227, at 30 September 2017, 30 were forensic aligned posts, 29 were aligned to Older People’s services and 42 were CAMHS aligned posts. These are funded by the Scottish Government with an aim of increasing workforce capacity in specific clinical populations.

2. This figure includes trainees from different cohorts so they will be at different stages of their training. Please note that this figure includes 2017 Doctorate in Clinical Psychology course intake from Glasgow University (26 trainees) who started their course in October 2017 and 35 trainees from Edinburgh University who started their course in September 2017. This figure also includes 38 Doctorate in Clinical Psychology Trainees who were due to complete their training in September 2017.

4.2 Course intakes and outputs

The following section explores the number of trainees on these courses further in terms of the intake numbers from each year as far back as data is available, and the completion rates from each course.

Figure 15 displays the intake of trainees on the Doctorate in Clinical Psychology courses in Scotland from 2003 to 2017, which had on average a total intake of 55 trainees per year. There were 61 trainees in the September 2017 intake for the course (26 at the University of Glasgow and 35 at the University of Edinburgh). This is an overall increase of 4 trainees since the previous year and is the largest total intake there has been since 2004.

As illustrated, the last intake of trainees on a 4 year or 5 year course at the University of Edinburgh was in 2012. Since 2013, all trainees have therefore commenced a 3 year course, unless they have previously completed either the MSc APCYP or the MSc PTPC. From the 2014 intake, graduates from these courses have now been given recognition for prior learning at the University of Edinburgh and are able to complete the D Clin Psych course in 2.5 years. This is also the case for trainees starting the D Clin Psych course from the 2017 intake at
the University of Glasgow. This means that trainees are able to qualify more quickly than they were previously.

Figure 15: Intake of Trainees on the Doctorate in Clinical Psychology Course at the University of Edinburgh and University of Glasgow by headcount from 2003 to 2017.

Please note that data is only available from the 2003 intake onwards. Any 2.5 year trainees are included in the 3 year course figures.
Figure 16 shows the number of graduates from the Doctorate courses that achieved Health and Care Professions Council (HCPC) registration after completing the course. HCPC registration is required in order to undertake a post as a Clinical Psychologist within the UK. Overall there has been a total completion rate of 97.2% from the DClin Psych courses in Scotland, excluding trainees who are currently on an extension.

**Figure 16:** Chart to display the headcount number of trainees from each of the DClin Psych courses that have achieved HCPC registration, by year of completion from 2006 to 2016.

Note this data is only available for 2006 onwards. Output data for 2017 is not yet available.
Figure 17 displays the completion rates for trainees that started on the Doctorate in Clinical Psychology Course from 2003 to 2013. This illustrates that more than 89% of trainees from each cohort have graduated from the course. Further information on completion rates for each course are available in the background tables.

**Figure 17: Chart to display the total completion rate for trainees on all of the Doctorate in Clinical Psychology courses by year of intake from 2003 to 2013.**
The intake for the MSc Psychological Therapy in Primary Care is shown in Figure 18, by the year in which trainees commenced the course. The average intake of trainees for this course is 22 each year, and there has been a success rate of 95.7% so far. The last intake in 2017 was for 30 trainees which is the highest intake since this course commenced. This brings the total intake to 287 trainees so far.

Figure 18: The intake of trainees on the MSc PTPC course, from 2005 to 2017.
Figure 19 displays the intake of trainees on the MSc Applied Psychology for Children and Young People course. Since 2007 there has been an intake of 180 trainees in total, with an average intake of 16 trainees each year. Excluding the trainees from the 2017 intake who are due to complete in 2018, there have been 158 graduates from the course. This indicates a success rate of 97.5%.

**Figure 19: The intake of trainees on the MSc APCYP course, from 2007 to 2017.**

The BPS Stage 2 Health Psychology course has had a total intake of 35 trainees since 2008, with an average intake of 3 or 4 trainees each year. The latest intake in 2017 was for 5 trainees which is one more than the previous year. The course has a completion rate of 90.9%, which includes all trainees that finished before 2017.
Glossary

**Agenda for Change (AfC):** The national pay system for NHS Workforce excluding doctors, dentists and very senior managers.

**Applied Psychologists:** Includes clinical, counselling, forensic, health and neuropsychologists.

**Area of Work:** The specialty area that a clinician works in. For a list of areas of work, see table 3.2 in the background tables.

**Clinical Psychologists:** Psychology staff with a Doctorate in Clinical Psychology and registered with the Health and Care Professions Council.

**Clinical Staff:** All staff working in psychology services within NHSScotland.

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

**HCPC:** Health and Care Professions Council. This is a Register for Health and Care Professionals within the UK that are required to meet certain standards of practice. For many professions, including several types of Psychologists, it is a legal requirement to be registered in order to practice in their field.

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

**GG&C:** NHS Greater Glasgow and Clyde

**NES:** NHS Education for Scotland

**Other Clinical Staff:** Includes graduates of the MSc in Psychological Therapy in Primary Care and the MSc Applied Psychology for Children and Young People, counsellors, assistant psychologists, cognitive behavioural therapists, other therapists and other.

**Target Age:** The age group of patients seen by a clinician. For Psychology Services this can be child & adolescent (0-18/19 years), adult (20-64 years), or older adult (65+ years). Age non specific refers to those clinicians who see patients from across the lifespan and can also include non clinical work such as teaching.

**Vacancy:** A post which was vacant and being advertised for recruitment at the census date.

**Whole time equivalent (WTE):** The WTE adjusts headcount figures to take account of part-time working. For example, NHS Agenda for Change staff work 37.5 whole-time hours per week so a staff member working part-time at 30 hours per week would be calculated as 0.8 WTE.
# Summary of Professional Groups within Psychology Services

<table>
<thead>
<tr>
<th>Group</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All Applied Psychologists</strong></td>
<td>This includes Clinical Psychologists, Conselling Psychologists, Health Psychologists, Forensic Psychologists and Neuropsychologists. These staff have completed specific post-graduate training and hold additional qualifications in their field.</td>
</tr>
<tr>
<td>Clinical Psychologist</td>
<td>Psychology staff with a Doctorate in Clinical Psychology and registered with the Health and Care Professions Council.</td>
</tr>
<tr>
<td>Counselling Psychologist</td>
<td>Psychologists who hold a British Psychological Society accredited post graduate qualification in Counselling Psychology and are registered with the Heath and Care Professions Council (HCPC).</td>
</tr>
<tr>
<td>Health Psychologist</td>
<td>Psychologists who hold a British Psychological Society accredited Masters in Health Psychology and as Stage II or Doctorate in Health Psychology.</td>
</tr>
<tr>
<td>Forensic Psychologist</td>
<td>Psychologists who hold a British Psychological Society accredited postgraduate qualification in Forensic Psychology.</td>
</tr>
<tr>
<td>Neuropsychologist</td>
<td>Clinical Psychologists who in addition to their Doctorate in Clinical Psychology qualification hold a Stage II British Psychological Society Neuropsychology qualification.</td>
</tr>
<tr>
<td>Cognitive Behavioural Therapist</td>
<td>Cognitive behavioural therapists use talking therapy to help patients change negative patterns of thinking or behaviour. They have completed accredited training programme in Cognitive Behavioural Therapy.</td>
</tr>
<tr>
<td>Other Therapist</td>
<td>Includes Psychotherapists, family and couple therapists</td>
</tr>
<tr>
<td>Counsellor</td>
<td>Counsellors provide talking therapies to clients and their families. They are trained to listen with empathy and can help people with a range of mental health conditions including: depression, anxiety, long term illnesses, eating disorders and drug misuse. Counsellors come from a range of backgrounds but will all have completed a recognised counselling qualification.</td>
</tr>
<tr>
<td>Psychology Assistant</td>
<td>Psychologists who have completed an undergraduate degree in Psychology and wish to gain experience in a clinical setting. Psychology Assistants often aspire to undertake further training in a specific area of Psychology eg Doctorate or MSc course.</td>
</tr>
</tbody>
</table>
Summary of Training Courses

Doctorate in Clinical Psychology

The Doctorate in Clinical Psychology is a 3 year full time course funded by NES which can be studied at either the University of Edinburgh or the University of Glasgow in Scotland. Entry to the course requires an Honours degree in Psychology (2:1 or above) which has the British Psychological Society (BPS) Graduate Basis for Chartered Membership, alongside relevant clinical or research experience. Specific CAMHS aligned trainee pathways on the Doctorate courses are government-funded places which give trainees greater experience working with CAMHS populations in addition to their main trainee workload. Aligned pathways have been introduced for several clinical populations with the aim of increasing workforce capacity within those areas. On completion, trainees will be fully qualified Clinical Psychologists and are still able to work in areas outwith CAMHS. Both of the Scottish courses are approved by the Health and Care Professions Council as well as the British Psychological Society and represent the highest level of training in Psychology. Further information on the Doctorate as well as links to the University Course websites for Scotland can be found at: http://www.nes.scot.nhs.uk/education-and-training/by-discipline/psychology/training-psychologists/training-programmes.aspx

MSc Psychological Therapy in Primary Care

The MSc in Psychological Therapy in Primary Care is a one-year course that was introduced in 2005. The MSc is funded by NHS Education for Scotland and delivered jointly by the Universities of Stirling and Dundee. Entry to the course requires an Honours degree in Psychology (2:1 or above) which has the British Psychological Society (BPS) Graduate Basis for Chartered Membership, and during training, trainees are employed in NHS Boards and provide clinical services as part of supervised practice. This course was designed to train people to deliver evidence-based psychological therapies to adults in Primary Care by developing knowledge of prevalence, diagnostic criteria, presentation and treatment of common mental health disorders within a Cognitive Behavioural Framework. The course is designed to extend the knowledge of the theoretical foundations of human behaviour and psychological disorders, and to develop the necessary competences to deliver evidence-based psychological therapies to treat common mental health disorders in adults in a primary care setting. Graduates of this course are able to work as Clinical Associates in Applied Psychology (CAAP) in the NHS, or within other clinically related posts in the private or public sector. This allows graduates to enter the workforce quickly and respond to pressing service demands (e.g. support the NHS Boards to meet Psychological Therapies Heat Targets)
Further information can be found online at:
https://www.dundee.ac.uk/study/pg/psychological-therapy-primary-care/
Or https://www.stir.ac.uk/postgraduate/programme-information/prospectus/psychology/psychological-therapy-in-primary-care/#intro

MSc in Applied Psychology for Children and Young People

The MSc in Applied Psychology for Children and Young People is a one-year course that was introduced in 2007 and is funded by NHS Education for Scotland at the University of Edinburgh. Entry to the course requires an Honours degree in Psychology (2:1 or above) which has the British Psychological Society (BPS) Graduate Basis for Chartered Membership, and whilst training trainees are expected to complete a full year clinical placement within an NHSScotland CAMHS setting. The course was introduced to expand the professional skill mix working within CAMHs and other child services, with graduates of the course able to apply for employment as Clinical Associates in Applied Psychology, Child and Adolescent Therapists or Primary Mental Health Workers, for example. Further information can be found at http://www.ed.ac.uk/health/clinical-psychology/studying/msc-applied-psychology

BPS Stage 2 Qualification in Health Psychology

BPS Stage 2 Qualification is a doctoral level qualification in Health Psychology. NHS Education for Scotland (NES) in partnership with Health Boards in Scotland funds Trainee Health Psychologists to explore the contribution health psychology can make in supporting NHSScotland to meet its health improvement targets. This is a two-year programme designed to allow the Trainee Health Psychologists to successfully complete the British Psychological Society’s Stage 2 Training while employed by NHS to undertake a programme of approved work. Entry to the course requires an Honours degree in Psychology (2:1 or above) which has the British Psychological Society (BPS) Graduate Basis for Chartered Membership and a BPS accredited Masters Degree in Health Psychology. NHS-funded Stage 2 training places may also require applicants to have a number of years experience working in relevant areas such as working with people with physical health problems, supporting people to make lifestyle changes, population-based interventions or undertaking research and evaluation. Trainees work with the Public Health departments of their health boards on projects aimed at meeting specific HEAT targets for health improvement and Trainees should receive supervision from an appropriately experienced Health Psychologist during their training. Graduates of this course can work as Chartered Health Psychologists and are registered with the Health and Care Professions Council (HCPC).

Figure 20: Diagram to illustrate the start and end dates of the psychology training courses.

MSc PTPC – MSc Psychology Therapy in Primary Care
MSc APCYP – MSc Applied Psychology for Children and Young People

Stage 2 Health Psychology course usually takes 1 year to complete, however the start dates can vary from year to year.

Please note that some individuals take maternity leave or other periods of leave during training which can impact on the timing of the course completion.
<table>
<thead>
<tr>
<th>Table No.</th>
<th>Name</th>
<th>Time period</th>
<th>File &amp; size</th>
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<tr>
<td>1-12</td>
<td>2017-12-05-Psychology-Workforce-Tables</td>
<td>2001-2017</td>
<td>Excel [750kb]</td>
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<tr>
<td>1.1</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by NHS Board</td>
<td>2010- Sep 2017</td>
<td>-</td>
</tr>
<tr>
<td>1.2</td>
<td>All Clinical Staff (Headcount) employed in Psychology Services by NHS Board</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>1.3</td>
<td>All Clinical Staff (WTE per 100,000 population) employed in Psychology Services by NHS Board</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by Age Group</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>3.1</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by Area of Work</td>
<td>2011- Sep 2017</td>
<td>-</td>
</tr>
<tr>
<td>3.2</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by Area of Work and Target Age</td>
<td>Sep 2017</td>
<td>-</td>
</tr>
<tr>
<td>3.3</td>
<td>All Clinical Staff (WTE) Employed in NHS Scotland Psychology Services by detailed Area of Work and by Professional Group</td>
<td>2011- Sep 2017</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by Target Age</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>All Clinical Staff (Headcount) employed in Psychology Services by Gender</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>All Clinical Staff (Headcount) employed in Psychology Services by Contract Type</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>7</td>
<td>All Clinical Staff (WTE) employed in Psychology Services by Band</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>8</td>
<td>All Clinical Staff (Headcount) employed in Psychology Services by Contract Length</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>9.1</td>
<td>Ethnicity of All Psychology Services Staff</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>9.2</td>
<td>All Psychology Services Staff by Declared Disability</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>10</td>
<td>All Vacancies in Psychology Services by NHS Board</td>
<td>&quot;</td>
<td>-</td>
</tr>
<tr>
<td>11</td>
<td>All Applied Psychologists (Headcount) in Training in NHSScotland</td>
<td>Sep 2017</td>
<td>-</td>
</tr>
<tr>
<td>12</td>
<td>Current Job Titles for Staff in Graduate of MSc Applied Psychology for Children and Young People and the MSc Psychological Therapy in Primary Care professional groups (Headcount)</td>
<td>Sep 2017</td>
<td>-</td>
</tr>
</tbody>
</table>
13 | **Course Intakes and Outputs for trainees on a Doctorate in Clinical Psychology Course in Scotland from the 2003 intake onwards** | Sep 2003-Sep 2017 | - |

14 | **Course Intakes for the MSc Applied Psychology for Children and Young People and MSc Psychological Therapy in Primary Care** | “” | - |
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Further Information
Further information can be found on the ISD website.

Rate this publication
Please provide feedback on this publication to help us improve our services.
Appendices

A1 – Background Information

Statements provided by NHS Boards

Please note that these statements are now included within the background tables. Please see tab “NHS Board Statement” within the background tables. Specifically, information on services to the Islands Boards is held within a separate tab – named “Services to the Islands” within the tables.

Mental Health Policy and Targets

Developments in mental health care have been driven by a series of reports and policy recommendations:

The Scottish Government 10 year Mental Health Strategy 2017-2027 was published in March 2017 (http://www.gov.scot/Publications/2017/03/1750). The strategy highlights the need to increase the supply of the workforce and to ensure the skill mix across a wide range of services meets in the needs of the population.

The Scottish Government has set a standard for the NHS in Scotland to deliver a maximum wait of 18 weeks from a patient’s referral to treatment for Psychological Therapies from December 2014


For more details on psychology forensic services, please refer to the following paper: ‘Psychological Care in the Context of Forensic Mental Health Services: New Responsibilities for Health Boards in Scotland (2011), Report by Heads of Psychological Services in NHSScotland.


In June 2017 the Scottish Government published Part 1 of the National Health and Social Care Workforce Plan. The plan outlines measures that are designed to strengthen and harmonise NHSScotland workforce planning practice nationally, regionally and locally to ensure that NHSScotland has the workforce it will need to address future demand for safe, high quality
services. These measures include the establishment of a National Workforce Planning Group. Parts 2 and 3 of the Plan, to be published later in 2017, will examine how to improve integrated workforce planning in social care and primary care settings. Together these will enable different health and social care systems to move together towards publication of a second full Health and Social Care Workforce Plan in 2018 and beyond.

Links to Related Publications

There is a differing age range of service provision across the boards in child services, for more details of this please refer to CAMHS publication, available at the following link:
http://www.isdscotland.org/Health-Topics/Workforce/CAMHS/

Data on Psychological Therapies waiting times in NHSScotland are available at:
http://www.isdscotland.org/Health-Topics/Waiting-Times/Publications/2017-12-05/2017-12-05-WT-PsychTherapies-Report.pdf

Further information on Mental Health services in NHSScotland can be found on the website:
http://www.isdscotland.org/Health-Topics/Mental-Health/

For further information on training programmes within applied psychology in NHSScotland please see:
http://www.nes.scot.nhs.uk/education-and-training/by-discipline/psychology.aspx
**A2 – Publication Metadata (including revisions details)**

<table>
<thead>
<tr>
<th>Metadata Indicator</th>
<th>Description</th>
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<tr>
<td>Publication title</td>
<td>Psychology Services Workforce in NHSScotland.</td>
</tr>
<tr>
<td>Description</td>
<td>Describes the characteristics of clinical staff employed in psychology services in NHSScotland as at 30 September 2017.</td>
</tr>
<tr>
<td>Theme</td>
<td>Health and Social Care</td>
</tr>
<tr>
<td>Topic</td>
<td>Health Care Personnel, Finance and Performance.</td>
</tr>
<tr>
<td>Format</td>
<td>Excel format.</td>
</tr>
<tr>
<td>Data source(s)</td>
<td>Clinical Psychology Services Workforce Database.</td>
</tr>
<tr>
<td>Date that data are acquired</td>
<td>Approximately two weeks after the census date.</td>
</tr>
<tr>
<td>Release date</td>
<td>05 December 2017</td>
</tr>
<tr>
<td>Frequency</td>
<td>From 2001-2010 publications were produced annually. From March 2011 the publications have been produced quarterly.</td>
</tr>
<tr>
<td>Timeframe of data</td>
<td>Data up to 30 September 2017</td>
</tr>
<tr>
<td>and timeliness</td>
<td></td>
</tr>
<tr>
<td>Continuity of data</td>
<td>In December 2009 information was published by the new Agenda for Change (AfC) classifications for the first time. Historically, NHSScotland workforce information had been published in a format based on the pay structure, namely Whitley for the majority of staff.</td>
</tr>
<tr>
<td>Revisions statement</td>
<td>N/A</td>
</tr>
<tr>
<td>Revisions relevant to this publication</td>
<td>N/A</td>
</tr>
<tr>
<td>Concepts and definitions</td>
<td>Please see the glossary.</td>
</tr>
<tr>
<td>Relevance and key</td>
<td>See link to known uses of the Psychology Data:</td>
</tr>
<tr>
<td>uses of the statistics</td>
<td>Known uses of the Psychology Data</td>
</tr>
<tr>
<td></td>
<td>Previous years have seen an increase in staffing; these figures have attracted considerable media attention in the past due to modernisation of Clinical Psychology training agenda in NHSScotland.</td>
</tr>
<tr>
<td>Accuracy</td>
<td>100% sign off received from Heads of Psychology Services and Heads of Specialities.</td>
</tr>
<tr>
<td>Completeness</td>
<td>100% data returned, all used for analysis.</td>
</tr>
<tr>
<td>Comparability</td>
<td>Psychologists can be compared to psychologists providing services to children and/or adolescents in the CAMHS Workforce Planning Project <a href="http://www.isdscotland.org/Health%2DTopics/Workforce/CAMHS/">http://www.isdscotland.org/Health%2DTopics/Workforce/CAMHS/</a></td>
</tr>
<tr>
<td>Accessibility</td>
<td>It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="http://www.isdscotland.org/Health%2DTopics/Workforce/CAMHS/">published guidelines</a>.</td>
</tr>
</tbody>
</table>
Coherence and clarity: All Psychology tables are accessible via the ISD website in a pdf or excel format at [http://www.isdscotland.org/Health%2DTopics/Workforce/Psychology/](http://www.isdscotland.org/Health%2DTopics/Workforce/Psychology/). Data are presented by: Professional group; NHS Board; Area of work; Target Age and A4C band. Trainee Data is not included in the main workforce tables.

Value type and unit of measurement: Headcount and whole time equivalent (WTE). Numeric.

Disclosure: The [ISD protocol on Statistical Disclosure Protocol](http://www.isdscotland.org/Health%2DTopics/Workforce/Psychology/) is followed.


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Help email: [nss.mentalhealthwf@nhs.net](mailto:nss.mentalhealthwf@nhs.net)

Date form completed: 

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 (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.