NHS Workforce Statistics

March 2020
Published 25 June 2020

Monthly figures for headcount and full time equivalent (FTE) NHS Hospital and Community Health Service (HCHS) staff groups working in NHS Trusts and CCGs in England.

The latest figures and previous reports are available on the NHS Workforce Statistics series page [here](#).
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notes on changes to publications</td>
<td>4</td>
</tr>
<tr>
<td>Summary</td>
<td>4</td>
</tr>
<tr>
<td>Further Information</td>
<td>5</td>
</tr>
<tr>
<td>Revisions and Issues</td>
<td>5</td>
</tr>
<tr>
<td>Introduction</td>
<td>6</td>
</tr>
<tr>
<td>Data Quality</td>
<td>7</td>
</tr>
<tr>
<td>Methodology</td>
<td>10</td>
</tr>
<tr>
<td>Data Summary</td>
<td>11</td>
</tr>
</tbody>
</table>
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All official statistics should comply with the UK Statistics Authority’s Code of Practice which promotes the production and dissemination of official statistics that inform decision making.

Find out more about the Code of Practice for Statistics at www.statisticsauthority.gov.uk/code-of-practice

This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.
Notes on changes to publications

- The regional hierarchy used within the data tables in these HCHS workforce publications has changed from Health Education England (HEE) regions to NHS England and NHS Improvement regions from January 2020 onwards as HEE now organise their work in line with the seven NHS England and NHS Improvement regions. Further information on changes in NHS regional mapping from April 2020 can be found here.

Restructuring and reductions in the NHS Digital workforce may impact the frequency and volume of work produced on the HCHS workforce. Various options are being considered and notice of any changes will be included here.

Summary

These monthly NHS workforce statistics reflect the changes and developments following a consultation. For more information please refer to the Introduction.

Major changes following the consultation include:

- Focussing this publication on staff in English NHS Trusts and CCGs
- The quarterly publication of staff in NHS Support Organisations and Central Bodies in England
- Data on staff in Social Enterprises and Community Interest Companies have moved to the NHS Digital Independent Healthcare Provider workforce publication
- The removal of records that are not receiving earnings for activity, for example staff who hold contracts but are on maternity leave during the period covered by these statistics
- The removal of some non-service contracts, for example Widow or Non-Executive Directors
- The reclassification of some staff to different staff groups.

The latest figures and previous reports are available here. They provide monthly figures for headcount and full time equivalent (FTE) NHS Hospital and Community Health Service (HCHS) staff groups working in NHS Trusts and CCGs in England. They are published every month for 30 September 2009 onwards.

Quarterly Staff Earnings and monthly Sickness Absence reports are also available.

Additional statistics on staff in Trusts and CCGs and information for NHS Support Organisations and Central Bodies are published each;

September (showing June statistics)
December (showing September statistics)
March (showing December statistics)
June (showing March statistics)
Recent responses to requests for additional analysis

Every month NHS Digital produces a range of additional work for customers that may be of interest to other users of NHS workforce statistics. This work is available on the NHS Digital Supplementary information webpage which is continually updated.

Further Information

If you are interested in statistics that are not contained within our publications or wish to discuss any related matter please contact NHS Digital with your requests, comments and suggestions via:

Email: enquiries@nhsdigital.nhs.uk
Telephone: 0300 303 5678
Post: NHS Digital, 1 Trevelyan Square, Boar Lane, Leeds, LS1 6AE

Revisions and Issues

As expected with monthly statistics, some figures may be revised as issues are uncovered and resolved. Historical revisions and issues are highlighted in previous editions of this publication.

All monthly workforce publications include NHS Trust and CCG staff in England on ESR (and the single non-ESR NHS Foundation Trust).

From September 2016 a separate Data Quality Annex document is included, which highlights issues NHS Digital are aware of that may have an impact on the data contained in the monthly HCHS workforce statistics publications.

This annex should not be considered a complete list of all issues and should be treated with caution as it represents the information available to NHS Digital at the time of its publication. It may be revised in future as further information becomes available and it will be updated monthly where appropriate. We welcome feedback to inform this process via the contact details in the Further Information section.
Introduction

Please note, this publication presents the new style of the healthcare workforce following the results of an NHS workforce consultation carried out by the HSCIC (first published 30 March 2016).

These changes have been made public and will show a significant impact on the figures in comparison to previously published data.

All previous months (back to September 2009) have been reconfigured and are available either within the accompanying Excel tables or as CSVs (published with the March 2016 report on 22 June 2016 and available here).

The data within this report relates to monthly HCHS workforce statistics for staff in NHS Trust and CCGs in England on ESR (and the single non-ESR NHS Foundation Trust – see below). ESR is a payroll and human resources system which, since April 2008, contains staff records for all NHS employed staff in England.

The following NHS staff groups are not included on the ESR system

- GPs, GP Practice staff and other Primary Care providers e.g. Dentists
- Chesterfield Royal Hospital NHS Foundation Trust which does not use ESR
- Staff groups affected by Transforming Community Services (TCS) where services are now provided by non-NHS organisations

The changing nature of organisations that provide NHS services as part of Transforming Community Services (TCS) may impact on the overall totals as a greater number of providers external to the NHS are excluded from the figures.

The statistics presented in this Bulletin relate to monthly HCHS workforce data. It is not possible to produce compatible figures before September 2009.

These data are published monthly, and every 3 months a supplemental publication of detailed statistics providing further granularity across staff groups and work areas are included. These more detailed data are also available on request in those months it is not placed on the website. It includes specific topic areas or service priority areas to investigate the data and associated data quality issues at a detailed level e.g. staff groups by grade. We welcome comments and suggestions for special topics of interest from users of workforce information.
Data Quality

Data Quality Annex:

Accompanying each monthly report is a separate data quality document that highlights issues NHS Digital is aware of which may have an impact on the data contained in the monthly HCHS workforce statistics publications.

Accuracy:

A provisional status was originally applied to this information. This was because data flows are from a live operational system which could potentially change over time due to ongoing updates. However, the data has proved to be of enough quality to cease using this term. From March 2018 the term provisional has been dropped. Current analyses have shown that data for the same time frame, extracted 6 months later has a difference at a National level of less than 0.1%.

As expected with monthly statistics, some figures may be revised as issues are uncovered and resolved. No refreshes of the data will take place either as part of the regular publication process, or where minor enhancements to the methodology have an insignificant impact on the figures at a national level, however revisions may occur if it is determined that a refresh of data is required after initial release. When this occurs, it will be clearly documented in the publications.

NHS Digital seeks to minimise inaccuracies and the effect of missing and invalid data but responsibility for data accuracy lies with the organisations providing the data. Methods are continually being updated to improve data quality.

The changing nature of organisations that provide NHS services as part of Transforming Community Services (TCS) may impact on the overall totals as a greater number of providers external to the NHS are excluded from the figures.

A monthly data extract from ESR is put through several validation processes. Specific issues are highlighted, and reports sent to each organisation informing them of their levels of data quality and any issues they can address. This has meant that more Trusts are willing to update data to save future validation work. The aim is for this to become the norm within NHS organisations to ensure greater emphasis is placed on improving data validation at source.

Figures are an accurate summary of the data supplied and validated as above. However, given the size of the NHS workforce, its changing composition, and the nature and timing of local data entry and checking processes, there will always remain some uncertainty in the true position of the NHS workforce.

Relevance:

Relevance of NHS workforce information is maintained by reference to working groups who oversee both data and reporting standards. Major
changes to either are subject to approval by an NHS-wide Standardisation Committee for Care Information (SCCI).

Significant changes to workforce publication (e.g. frequency or methodology) are subject to consultation, in line with recommendations of the Code of Practice for Official Statistics.

**Comparability and Coherence:**

This is the latest publication of the monthly series of HCHS workforce statistics using data from the ESR. NHS Digital welcomes feedback on the methodology, plus the content and accuracy of tables within this publication. Data will only be revised if there is enough reason to do so. When this occurs, it will be clearly documented in the publications.

**Timeliness and punctuality:**

The ESR data will be published within 3 months of the data time stamp. Data was historically published on the 21st of each month, unless that fell on a Friday, Saturday, Sunday or Monday in which case it was the first Tuesday thereafter, (or first Wednesday thereafter if a Bank Holiday Monday is involved) to allow for 24-hour pre-release access.

However, following a public consultation on aligning publication dates, from June 2018 onwards publications will, where possible, be aligned on a specific topic with the intention of releasing most publications on a Thursday. This may move the traditional publication dates for this report by a few days. More information is available [here](#).

**Accessibility:**

The monthly publication consists of high-level HCHS NHS Trust and CCG staff in England at National, region and organisational level by major staff groups. Tables of headcount and FTE are available. Further detailed analyses may be available on request, subject to resource limits and compliance with disclosure control requirements.

**Performance cost and respondent burden:**

The statistics use administrative data from ESR for all but a single trust, creating no burden on most trusts. The non ESR trust provides standard extracts from their own staff record systems.

**Confidentiality, Transparency and Security:**

The standard NHS Digital data security and confidentiality policies have been applied in the production of these statistics.

**General issues to consider:**

**1 non-ESR Trust**

There is one Foundation Trust not on ESR (Chesterfield Royal Hospital NHS Foundation Trust). Their data is collected on a quarterly basis and added into the monthly publication. This data is not suitable for creating turnover statistics. Prior to November 2018 one other Foundation Trust (Moorfields Eye Hospital NHS Foundation Trust) was not using ESR.
Transforming Community Services (TCS)

The changing nature of organisations that provide NHS services as part of Transforming Community Services (TCS) may impact on the overall totals as a greater number of providers external to the NHS are excluded from the figures.

Staff who work at different locations

Some staff are on one Trust’s payroll but work within a different Trust. This should be reflected in the ESR system and is used for publishing purposes to show where staff carry out work. If Trusts do not record this then the staff will be reflected as working at the employing organisation rather than the workplace organisation.

Definitions of Headcount and FTE

This section states the definitions used within this monthly publication. The methodology for the monthly publication will count a doctor who works across 2 hospitals, 0.2 of their time at Trust A and 0.8 of their time at Trust B, as shown in the table below:

<table>
<thead>
<tr>
<th>Headcount</th>
<th>FTE</th>
</tr>
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<tbody>
<tr>
<td>Trust A</td>
<td>1</td>
</tr>
<tr>
<td>Trust B</td>
<td>1</td>
</tr>
<tr>
<td>Regional</td>
<td>1</td>
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- Headcount refers to the total number of staff in either part time or full-time employment within an organisation or area of work. Subtotals such as by region or areas of work are unlikely to add up to national figures because these would only count an individual once. It is possible for that individual to be working in two part time roles in more than one location or area of work. In this case they would appear once in each location or area of work.

- Full time equivalent (FTE) is based on the proportion of time staff work in a role. FTE does not, therefore, measure the total hours in which work is carried out. For example, a doctor may be expected to work 48 hours in a week, which would be an FTE of 1. A nurse is usually expected to work 37.5 hours each week, this is also 1 FTE. In both cases they may work longer, and some staff may do overtime. That is not captured in the data used in this publication. Earnings statistics show pay for additional work.
Methodology

There are several steps taken to add value, improve data quality and assist classification of staff groups prior to publication.

1. Only staff who have a contracted full time equivalent (FTE) greater than zero are extracted from ESR.

2. The data is divided into a separate non-medical dataset and a medical and dental dataset using the set of known medical pay scales as the initial determining field.

3. Successive tests using corroborative fields within the data to confirm or reclassify records between the medical and non-medical sets.

4. Fields within the data are used to determine the grade of the medical staff.

5. Occupation codes are used to classify non-medical staff into staff groups, and these are checked to ensure that the grades of staff are appropriate to their role. Where it is not, a new staff group is assigned based on other information within the person’s record. Where that is not possible the person is classed as having an unknown staff group.

6. Each job of each person is allocated to the organisation where they work. This can differ to the trust holding their record.

7. The data is matched against earnings data. Where a person is not earning, or they are not a recent starter in post, the record is not included in statistics showing staff who provide services.

8. The data is split into classifications based on the organisation staff work in. This determines whether a job is shown as at an NHS Trust or CCG, at an NHS Support Organisation or Central Body, or is an Independent Healthcare Provider that is using ESR. This also determines which publication a record is included in.
Data Summary

Tables containing the data are published in Excel or csv formats on our website and include the following on a monthly basis:

Excel tables

- National level tables of headcount (HC) and FTE by major staff groups – time series
- Region and organisation staff numbers (HC and FTE), including medical grades and staff groups – latest month only
- Total staff (HC and FTE) by organisation – time series
- Staff groups (FTE) by care setting and level – time series
- Doctors (FTE) by grade and specialty – time series
- Organisation turnover benchmarking tools (HC and FTE) – time series

CSV files

- Medical staff (FTE) by grade, specialty and organisation – latest month only
- NHS staff (excluding medical) (FTE) by staff group, care setting, level and organisation – latest month only
- From June 2019 – Staff groups (HC and FTE) by:
  - NHS England regions – time series (all months)
  - Organisation – time series (specified months)

The following data are produced on a quarterly basis:

- Reasons for leaving (all staff) and compulsory/voluntary redundancy for professionally qualified staff group.
- Additional quarterly data for staff in NHS trusts, CCGs and support organisations.

There are also occasional one-off special/in-depth reports such as the mental health workforce report most recently published in March 2019 and statistics on pay equality by gender and ethnicity published in June 2019.
Information and technology for better health and care

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