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This is an Official Statistics Publication

As of 1st October 2019, NHS Education for Scotland (NES) has taken responsibility for some national workforce data, statistical & intelligence functions.

NHS Education for Scotland (NES) is NHSScotland's education and training body. It is the authoritative source of information on the people who work for NHSScotland. NES became an accredited provider of [Official Statistics](#) in December 2019 and as such this release is produced in accordance with the UK Statistics Authority's [Code of Practice for Statistics](#). NES voluntarily applied the Code of Practice for the publication released on 3 December 2019.

1 Introduction

This publication summarises national data on the workforce providing Psychology Services in NHSScotland, following the latest census at 31 March 2022. When describing the size of a particular staff group, figures are presented either as [headcount](#) (actual number of staff) or [whole time equivalent \(WTE\)](#), which adjusts the headcount to take account of part-time working.

This report summarises key aspects of the data including:

- The number and characteristics of clinical staff in post
- Vacant posts
- Staff in training

The data are collected directly from Psychology services and held within the National Services Scotland (NSS) National Psychology Workforce Information Database. The data are verified by Psychology Heads of Service, who work closely with NES to ensure a high level of 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, 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 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.

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.

In conjunction with this report, comprehensive workforce data as at 31 March 2022 are shared across the following outputs:

1.1 Dashboards

- The [psychology dashboards](#) present quarterly data on staff in post in NHSScotland psychology services, vacant posts and staff in training.
- The dashboards present a breadth of data, including staff WTE and headcount; WTE per 100,000 population; age band; target age and area of work; gender and contract type; Agenda for Change (AfC) band; contract length; ethnicity and disability; turnover; vacant posts; staff in training; and the retention of trainees in the workforce.

1.2 Data Tables

The psychology [background tables](#) include:

- Supplementary long-term trend data for staff in post, vacancies and trainees.
- Quarterly updates to staff in post tables.
- Biannual updates on Clinical Psychology training courses
- Annual updates on:
 - Staff ethnicity and disability status
 - Staff turnover

Due to varying sources and frequency of data collection, not all published tables are updated at this time of year.

2 Main Points

As at 31 March 2022:

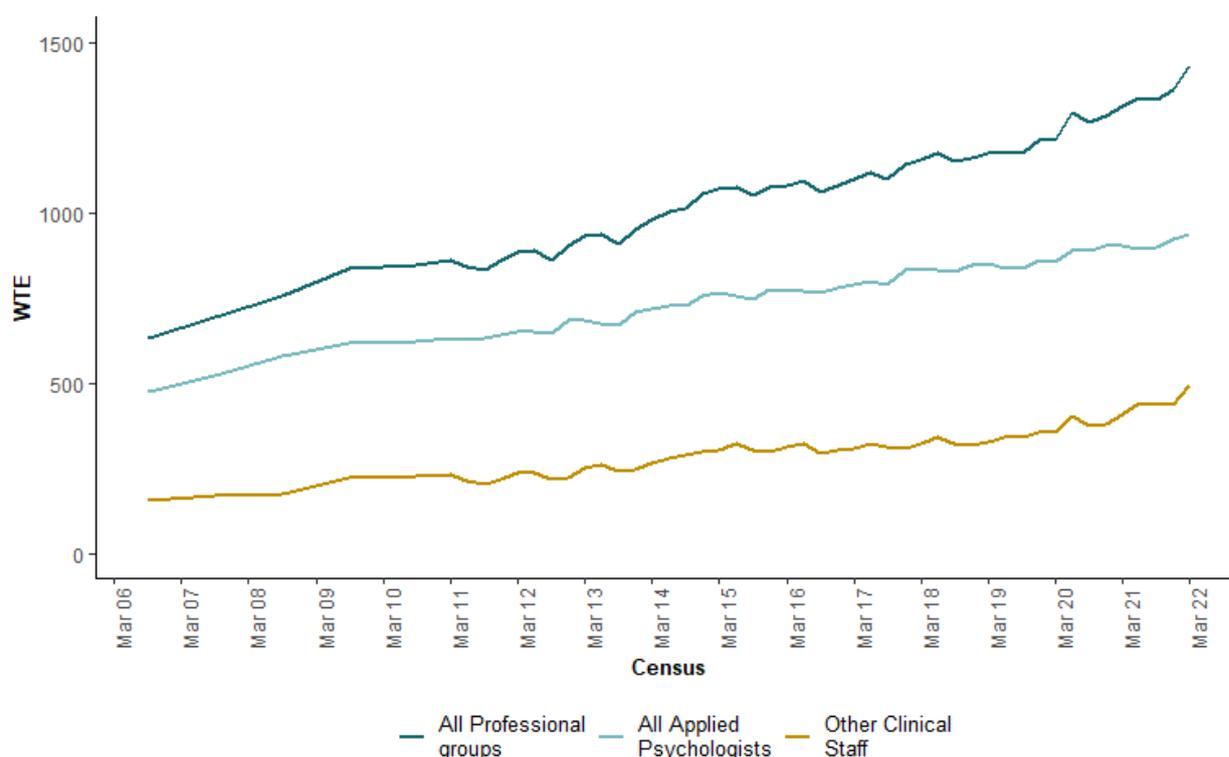
- There were a total of 1431.1 WTE (1714 headcount) clinical staff in post. This is 9.2% (120.5 WTE) higher than reported 12 months previously. Since the last quarterly census, the WTE of staff in post has increased by 5.3% (71.9 WTE).
- Clinical Psychologists remain the largest staff group in this workforce, accounting for 59.2% (846.9 WTE) of clinical staff in post. Since 31 March 2021, this staff group has grown by 23.1 WTE (2.8%).
- Out of the total of 264.9 WTE advertised vacancies, 72% (190.6 WTE) had been advertised for less than three months, 19.1% (50.6 WTE) for three to six months and 8.9% (23.7 WTE) for longer than six months. The vacancy rate was 15.6%, compared to 12.3% at 31 December 2021 and 10.7% at 31 March 2021.
- In early 2022, 37 students graduated from the MSc in Psychological Therapy in Primary care, and 30 graduated from the MSc in Applied Psychology for Children and Young People. This compares with an average yearly graduation figure of 24 for the MSCPTPC and 19 for the MSCAPCYP. The probabilities of completing these courses within two years of starting are 0.95 and 0.97 respectively.

3 Staff in Post

At 31 March 2022, there were a total of 1431.1 WTE (1475 headcount) clinical staff in post within Psychology Services across NHSScotland. Bespoke data collection for this workforce began with an initial pilot collection in 2001, with more complete data collection commencing in 2002.

Figure 1 shows the increase in this workforce since March 2011, overall and split by All Applied Psychologists and Other Clinical Staff. Since 2011, the overall workforce has increased by 66.2% (570 WTE). In the past 12 months there has been an overall increase of 9.2% (120.5 WTE), and since the last quarterly census, there has been an increase of 5.3% (71.9 WTE).

Figure 1: WTE of all Clinical Staff in NHSScotland Psychology Services



Notes

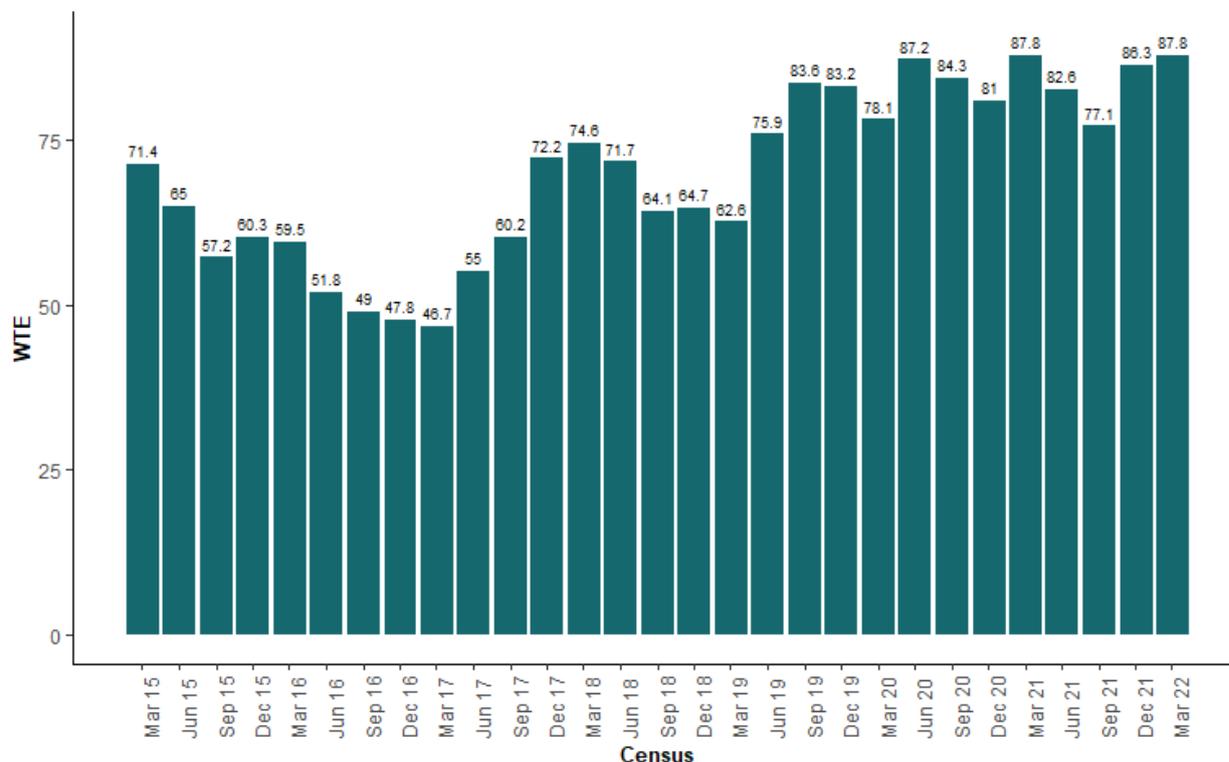
Quarterly data collection began from March 2011. Prior to this there was only an annual census at 30 September.

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](#).

As at 31 March 2022 there were 77 WTE (5.4%) staff on maternity/paternity leave and 10.8 WTE (0.9%) on long term sick leave.

Figure 2 illustrates the WTE of staff on maternity/long-term sick leave, quarterly since March 2015. Numbers under 5.0 WTE have been suppressed.

Figure 2. WTE of Staff in NHSScotland Psychology Services on Maternity and Long-term Sickness Absence, Quarterly from March 2015 to 31 March 2022.



3.1 Whole Time Equivalent (WTE) per 100,000 population

Figure 3 shows the Whole Time Equivalent (WTE) of all clinical staff employed in NHSScotland Psychology Services per 100,000 population as at 31 March 2022.

NHS Borders and NHS Dumfries and Galloway currently have the largest WTE per 100,000 population, with 39.5 and 32.3 respectively, compared to the overall NHSScotland rate of 26.2.

The higher rates in some boards are 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. Health boards with higher levels of deprivation will have a greater demand for services.

Figure 3: Whole Time Equivalent (WTE) of All Clinical Staff per 100,000 population as at 31 March 2022

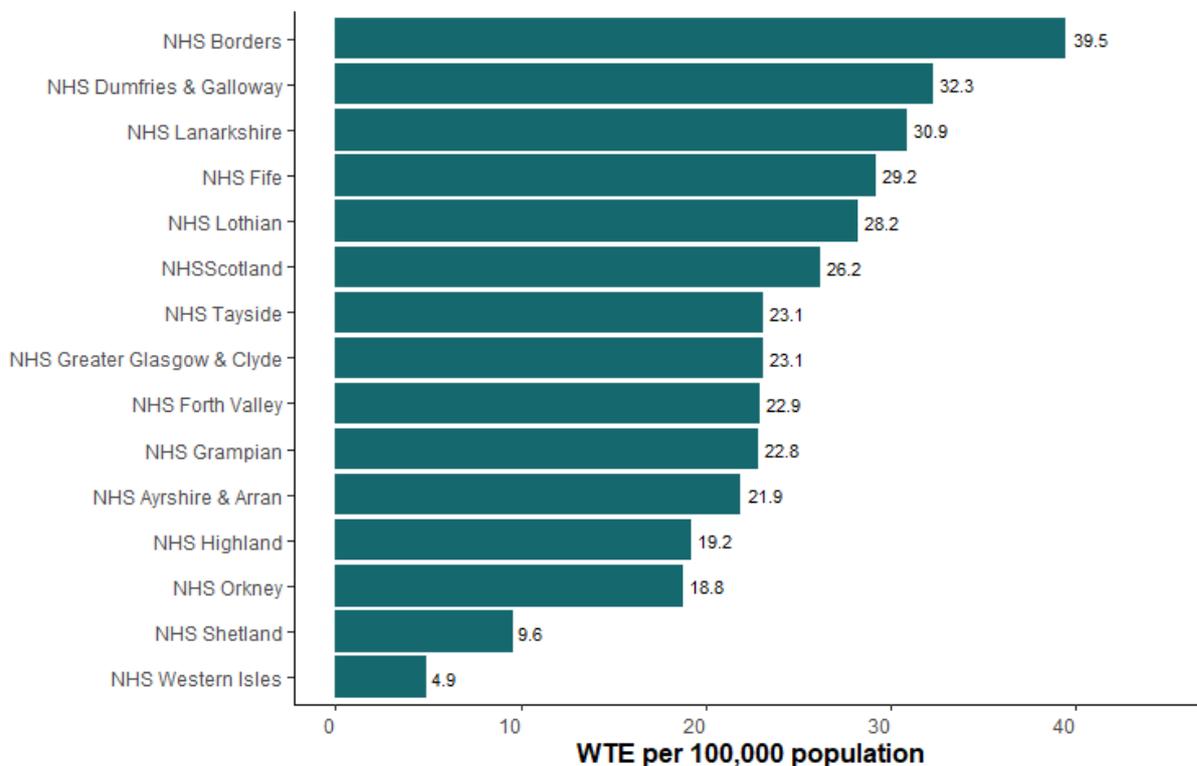
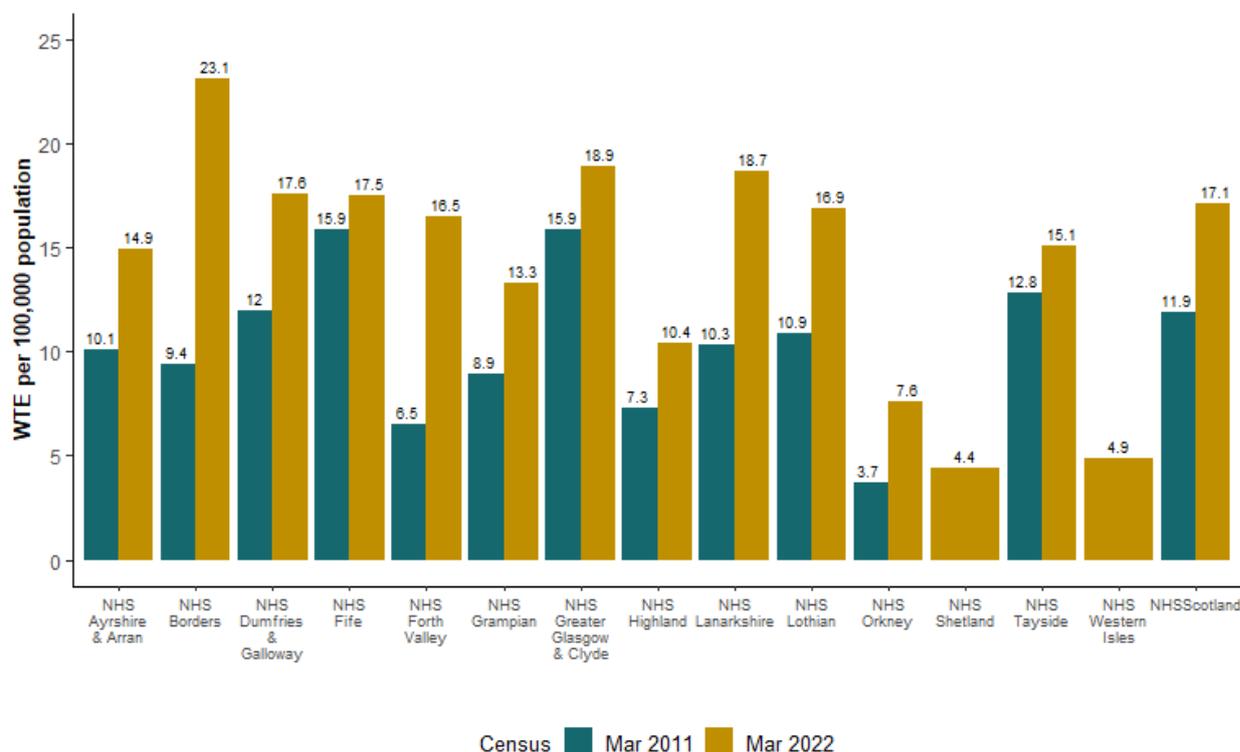


Figure 4 compares the Whole Time Equivalent of all Applied Psychologists employed per 100,000 population in NHS boards at 31 March 2011 and 31 March 2022. NHS Borders currently has the highest number of Applied Psychologists employed per 100,000 population (23.1 WTE).

Figure 4: Whole Time Equivalent per 100,000 population of Applied Psychologists in NHSScotland Psychology Services as at 31 March 2011 and 31 March 2022



3.2 Staff by Professional Group

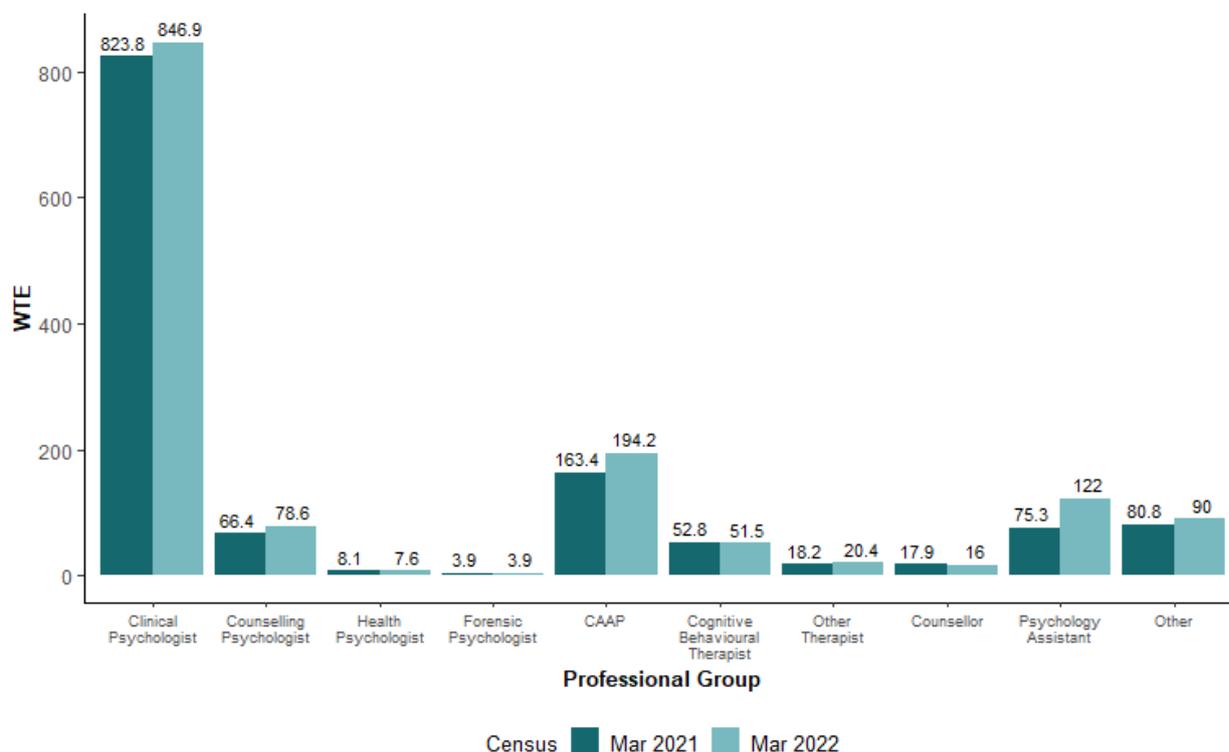
At 31 March 2022, All Applied Psychologists comprised 65.5% of the workforce (937 WTE) and Other Clinical Staff 34.5% (494.2 WTE).

Figure 5 shows the Percentage of the different Professional Groups in NHSScotland. Clinical Psychologists were the largest staff group, comprising 59.2% (846.9 WTE) of the workforce. This is 2.8% (23.1 WTE) higher than at 31 March 2021 and 1.4% (11.9 WTE) higher than the previous quarter. The WTE of Counselling Psychologists increased from the previous year by 18.3% (12.2 WTE), the WTE of Health Psychologists decreased by -6.2% (-0.5 WTE), while the WTE of Forensic Psychologists did not change.

The WTE of most Other Clinical Staff groups also increased between 31 March 2021 and 31 March 2022, particularly Psychology Assistants, which rose by 62.1%, (46.8 WTE) over that year. The WTE of Clinical Associates in Applied Psychology increased by 18.8% (30.8 WTE) and the WTE of the Other staff category increased by, 11.4%, (9.2 WTE).

Small decreases were seen in the number of Cognitive Behavioural Therapists -2.4%, (-1.3 WTE) and Counsellors -10.6%, (-1.9 WTE).

Figure 5: WTE of Professional Groups in NHSScotland Psychology Services as at 31 March 2021 and 31 March 2022



Notes

Other includes: Mental Health Clinicians, Self Help Workers, Peer Support Workers, Primary Mental Health Workers, Mental Health Nurses, Psychological Therapists and Child and Adolescent Therapists.

The professional group Clinical Associate in Applied Psychology (CAAP) has been recorded since 31 December 2017. Previously, these staff would have been included in either the Graduate of the MSc Psychological Therapy in Primary Care or Graduate of the MSc Applied Psychology for Children and Young People professional groups, which have now been removed. While data quality checks and updates are ongoing, some CAAPs are still being recorded in the Other professional group. Increasingly NHS Boards are employing graduates of the MSc PTPC under roles other than CAAP. These individuals are recorded under 'CBT Therapist', 'Other Therapist' and 'Other'.

3.3 Staff by Target Age and Area of Work

This section provides further information on the specialty areas and patient groups cared for by the psychology workforce. For more detailed information please refer to the [background tables](#).

Within each professional group, individual staff members may work across several different Target Ages and Areas of Work. Target Age refers to the age group of patients being cared for. For Psychology Services, the distinct age groups are generally Child & Adolescent (0-18 years), Adult (19-64 years), or Older Adult (65+ years).

Area of Work refers to the broad specialty area that the clinician works in. For definitions of each Area of Work please refer to the [Glossary](#).

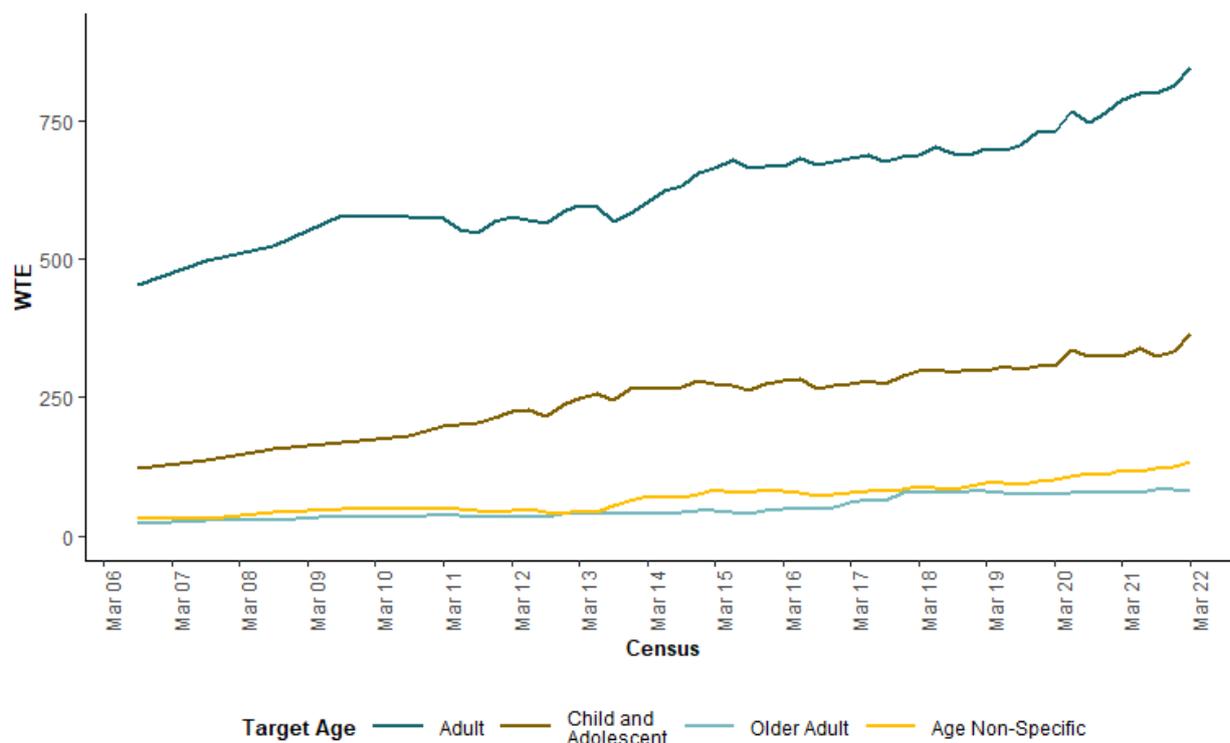
3.3.1 Target Age

Figure 6 displays the quarterly WTE of staff working across each Target Age, between September 2006 and 31 March 2022. The largest Target Age group continues to be Adult, which accounts for 59.3% (848.5 WTE) of the Psychology workforce at 31 March 2022. The Child and Adolescent Target Age accounts for 25.7% (367.3 WTE) of the workforce, Older Adults 5.7% (82 WTE) and Age Non-Specific 9.3% (133.4 WTE).

The Adult Target Age category has seen the largest growth of WTE since March 2011, an increase of 47.7% (274.1 WTE). The largest percentage increases were seen in the Age Non-Specific and Older Adult categories, with increases of 170.9% (84.2 WTE) and 110.9% (43.1 WTE) respectively. 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 Adult Target Age on completion, an age group for which historically there have been fewer staff assigned.

The WTE of staff working within the Child and Adolescent Target Age has increased by 84.9% (168.6 WTE) over this time period, although the proportion of staff has remained similar, accounting for around a quarter of the total staff WTE.

Figure 6: Whole Time Equivalent of All Clinical Staff in Psychology Services by Target Age between 31 December 2011 and 31 March 2022



Notes

There is a differing age range of service provision across the boards in child services. For more details, please see the Age of Service Provision table within the CAMHS publication, available [here](#).

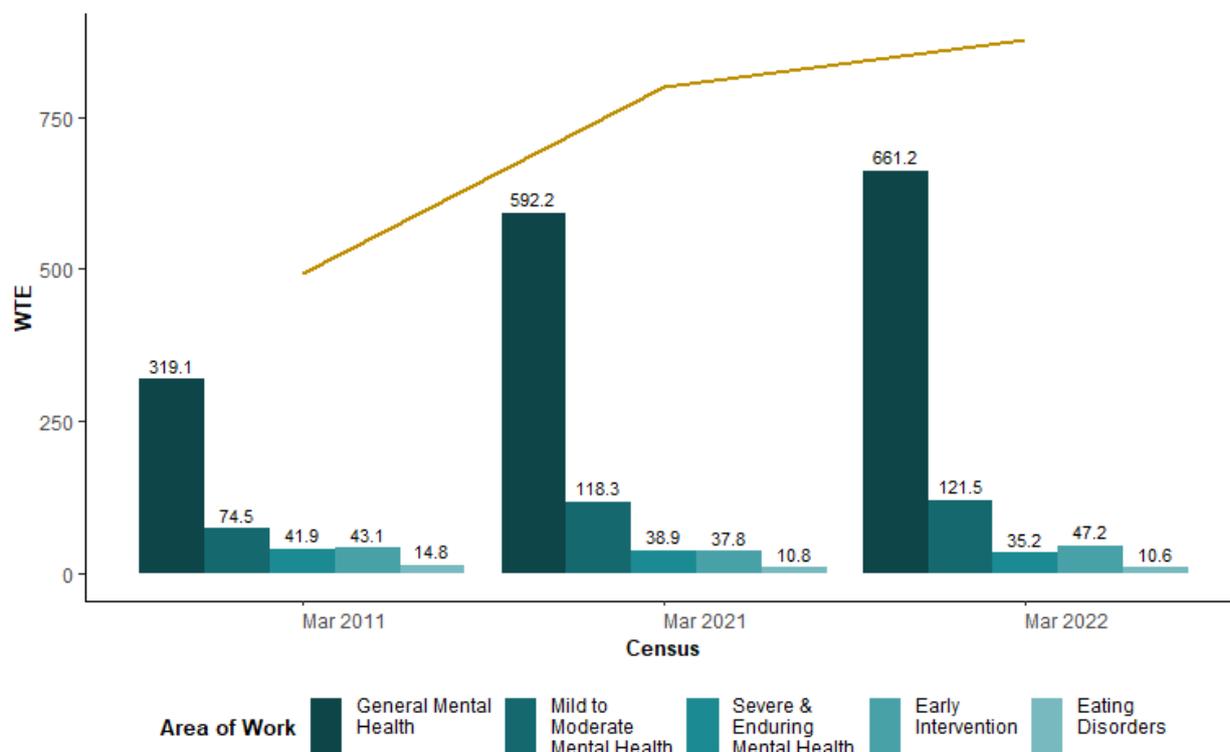
3.3.2 Area of Work

Area of Work refers to the broad specialty area of the services that a clinician provides - the areas being Mental Health, Learning Disabilities, Physical Health, Neuropsychology, Forensic, Alcohol & Substance Misuse and Other specialty services.

Figure 7 shows the WTE for the Mental Health Area of Work, broken down into sub-specialties (General, Mild to Moderate, Severe and Enduring, Eating Disorders, and Early Intervention) at March census dates since 2013. Different specialty areas have different staffing requirements. For example, the subcategory Severe and Enduring Mental Health requires a more intensive level of staffing than Mild to Moderate services. For definitions of each Area of Work, including the subcategories for Mental Health, please see the [Glossary](#).

By far the largest area of work is General Mental Health, which accounted for 46.2% (661.2 WTE) of the workforce at 31 March 2022. Mild to Moderate Mental Health accounted for 8.5% (121.5 WTE) of the workforce, Early Intervention for 3.3% (47.2 WTE), Severe and Enduring Mental Health for 2.5% (35.2 WTE), and Eating Disorders for 0.7% (10.6 WTE).

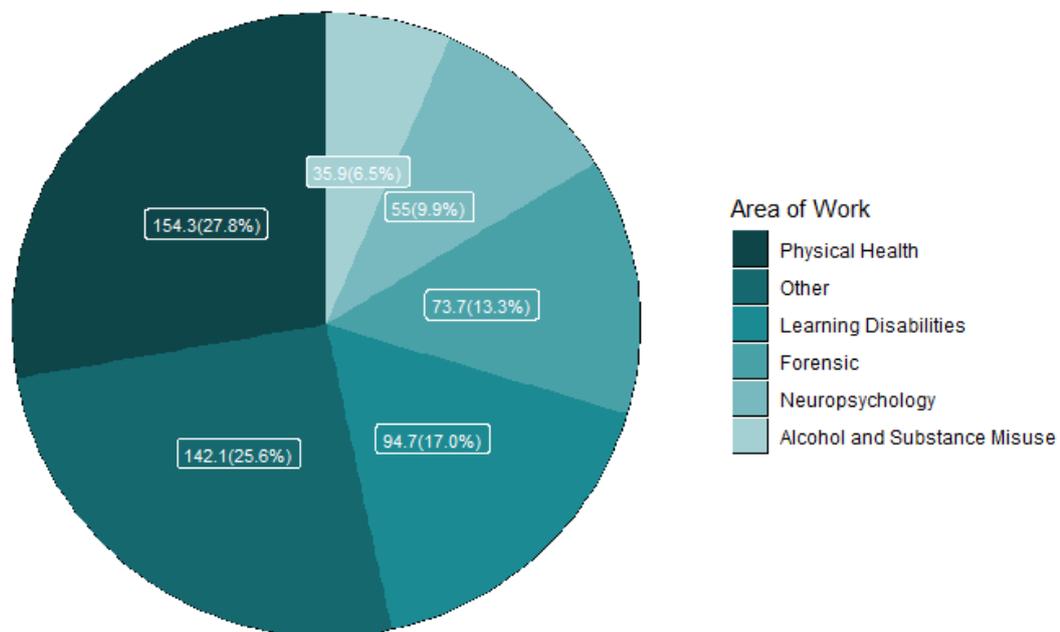
Figure 7: WTE of Staff in Post in the Mental Health Area of Work, Overall and by Subcategory, as at 31 March 2011, 31 March 2021 and 31 March 2022



The WTE of the majority of Mental Health subcategories has increased since March 2021; General Mental Health by 11.6% (69 WTE), Early Intervention by 24.8% (9.4 WTE) and Mild to Moderate Mental Health by 2.7% (3.2 WTE). Conversely, the WTE of the Severe and Enduring Mental Health subcategory has decreased by -9.3% (-3.6 WTE), and Eating Disorders by -1.6% (-0.2 WTE).

Figure 8 shows the WTE of non-Mental Health areas of work. The largest of these is Physical Health, accounting for 10.8%, (154.2 WTE). The second largest is the Other category (9.9%, 142 WTE), which incorporates sub-categories such as Healthcare for the Elderly and Dementia, Academic, Teaching and Management, Trauma Services, Autistic Spectrum Disorders, Self-help Workers, Prison Services and Gender-based Violence. This is followed by Learning Disabilities (6.6%, 94.7 WTE), Forensic (5.1%, 73.7 WTE), Neuropsychology (3.8%, 55 WTE), and Alcohol and Substance Misuse (2.5%, 35.9 WTE).

Figure 8: WTE/Percentage of Staff in Post in the Non-Mental Health Areas of Work, as at 31 March 2022



4 Characteristics of the Workforce

4.1 Gender and Contracted Hours

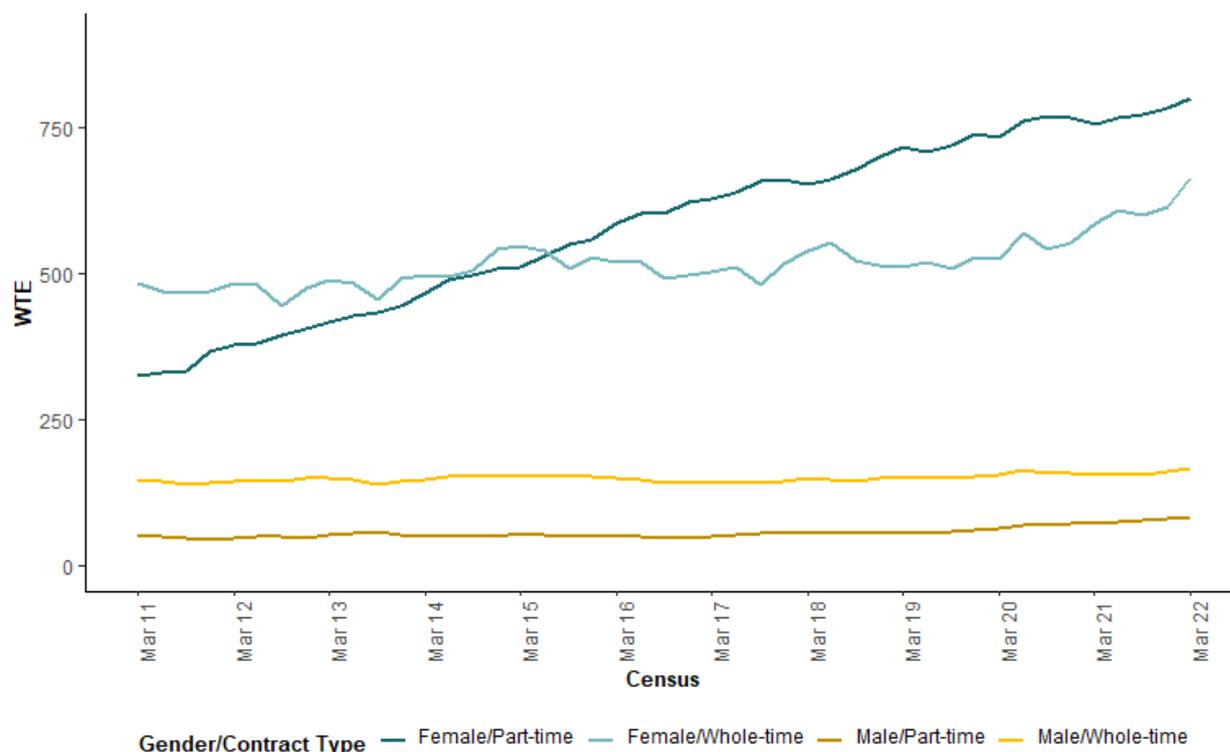
Since March 2011, the majority of the increase seen in WTE can be accounted for by the rise in female staff working within Psychology Services, from a total of 809 headcount in March 2011 to 1466 headcount at the current census date (+657 headcount, a 81.2% increase). The number of male staff has remained relatively stable: 248 headcount as at the current census, increasing from 194 (+54 headcount, 27.8%).

Over the past 12 months, the headcount of female staff has increased by 123 (9.2%). Female staff currently contribute 1206.2 WTE (84.3%) of the total 1431.1 WTE within NHSScotland Psychology Services.

Overall, 51.5% of posts were part-time at the latest census compared to 37.3% at 31 March 2011. The majority of this increase can be attributed to the increase in part-time female staff, with 54.6% of contracts for female staff being part-time at the current census date compared to 40.2% in March 2011.

The trend for contract type and gender is illustrated in Figure 9. For more detailed information on contract type and gender by professional group, please refer to Table 6.1 within the [background tables](#).

Figure 9: Trend of Contract Type and Gender for Psychology Staff within NHSScotland from 31 March 2011 to 31 March 2022

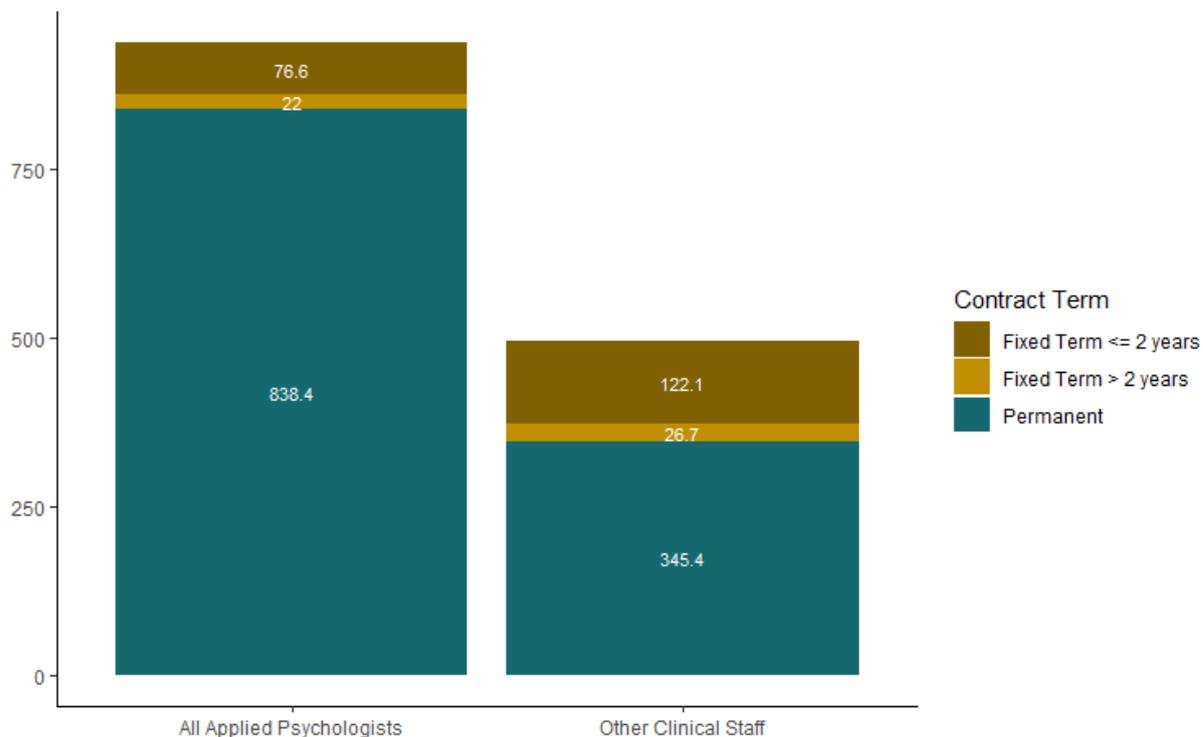


4.2 Contract Term

At 31 March 2022, 82.7% (1183.8 WTE) of staff in NHSScotland Psychology Services were employed on a permanent contract, 13.9% (198.7 WTE) were employed on a fixed term contract of less than two years' duration and 3.4% (48.7 WTE) were employed on a fixed term contract of longer than two years' duration.

Figure 10 shows the WTE of staff employed on a permanent contract as at 31 March 2022. While 89.5% (838.4 WTE) of All Applied Psychologists held a permanent contract, this number was lower for Other Clinical Staff (69.9%, 345.4 WTE). The percentage of Applied Psychologists on permanent contracts has declined from 92.7% (585 WTE) at March 2011, while the percentage of Other Clinical Staff holding permanent contracts has increased from 57.6%, (132.5 WTE).

Figure 10: WTE of Applied Psychologists and Other Clinical Staff on Permanent and Fixed Term Contracts, as at 31 March 2022



4.3 Age Profile of Staff

Figure 11 shows the age distribution of male and female staff as at 31 March 2022, and Figure 12 shows the mean WTE of male and female staff by age category. These two charts show that, while the largest group of staff by age category is female staff aged 35-39 (314 headcount), the average wte of this group is 0.8, compared to 0.93 for male staff.

Figure 11: Age distribution of female and male staff as at 31 March 2022

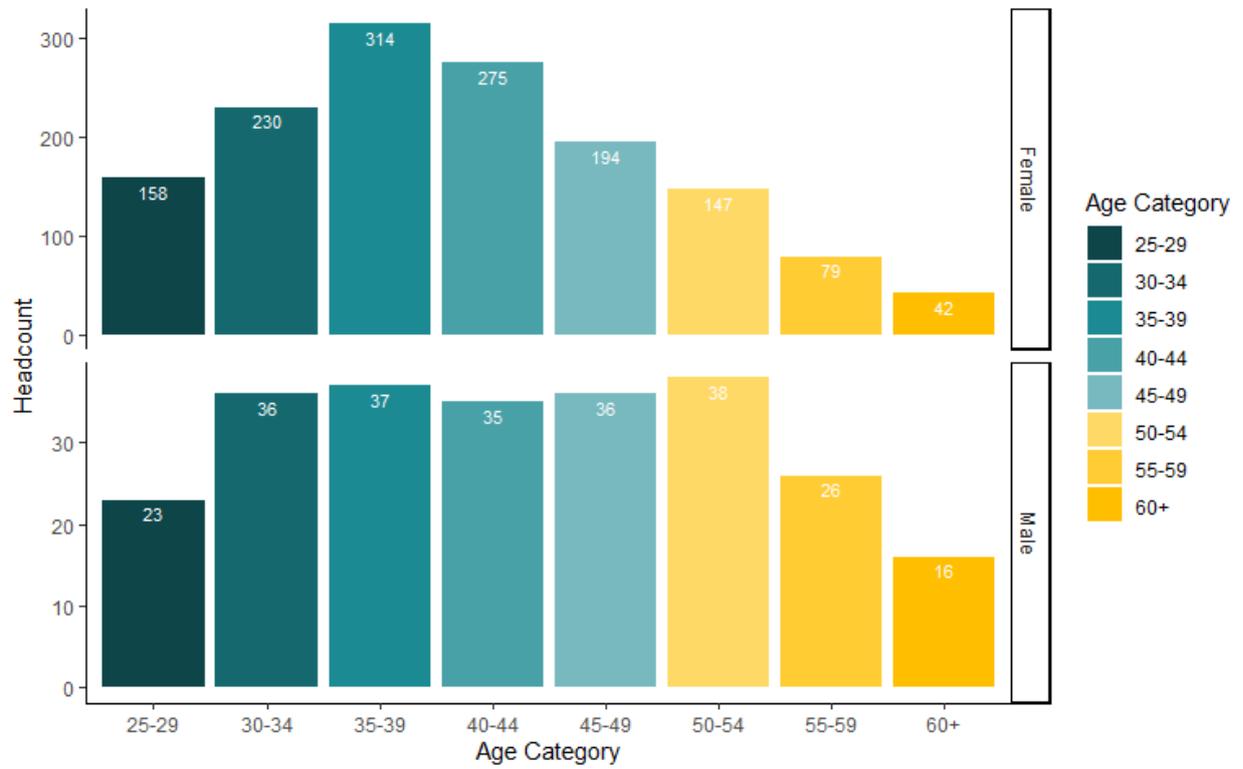
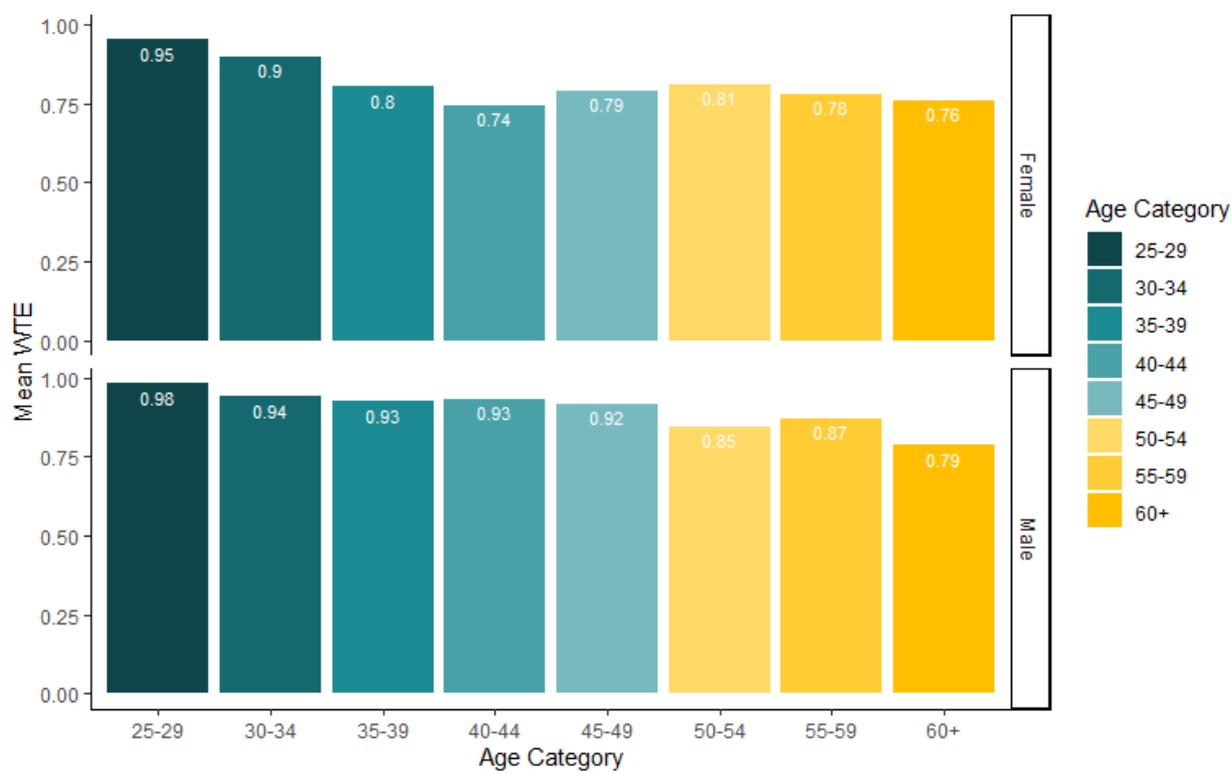


Figure 12: Mean WTE of female and male staff by age band, as at 31 March 2022

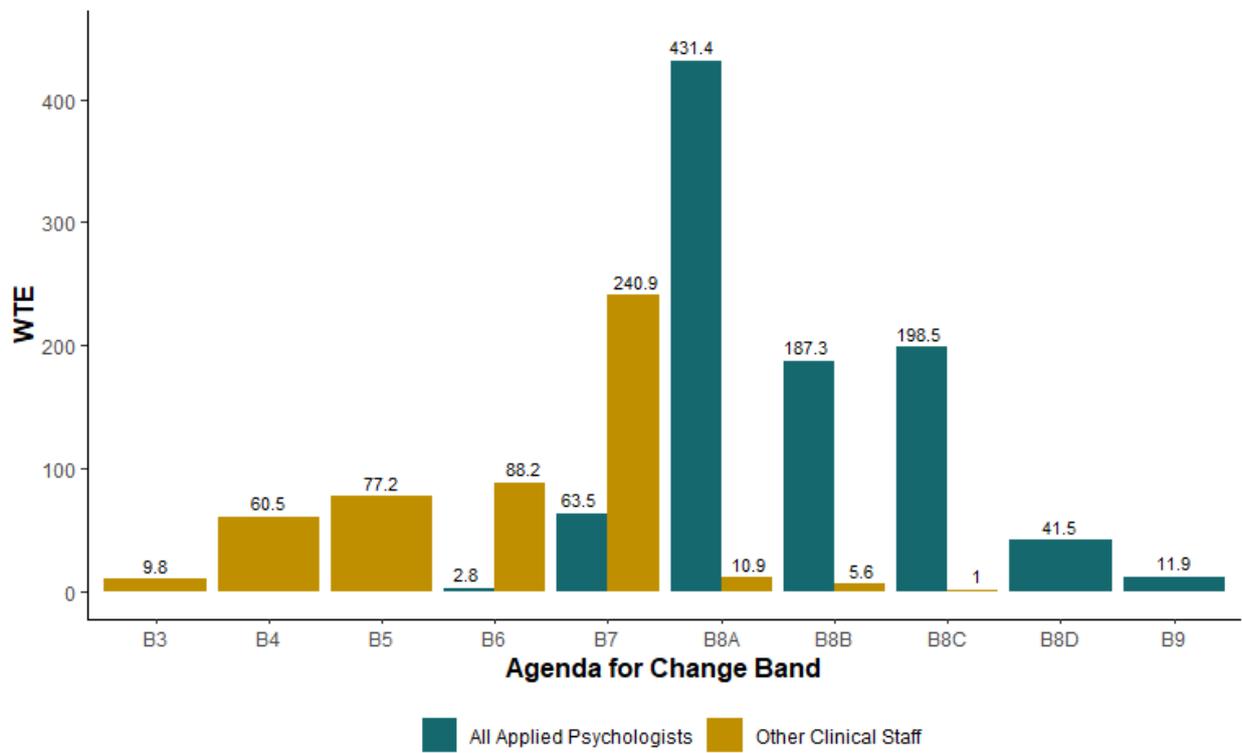


4.4 Agenda for Change Pay Bands

The AfC Pay Band of a clinician reflects their level of training and expertise as well as the duties of the post, including the potential responsibilities in terms of the supervision and management of other staff. As a consequence, Clinical or Applied Psychologists are generally banded higher than other clinical professionals working in these services, with the majority of psychologists on Band 8a or higher (870.7 WTE, 92.9%) as at 31 March 2022.

Figure 13 shows the WTE of All Applied Psychologists and Other Clinical Staff, by band, as at 31 March 2022.

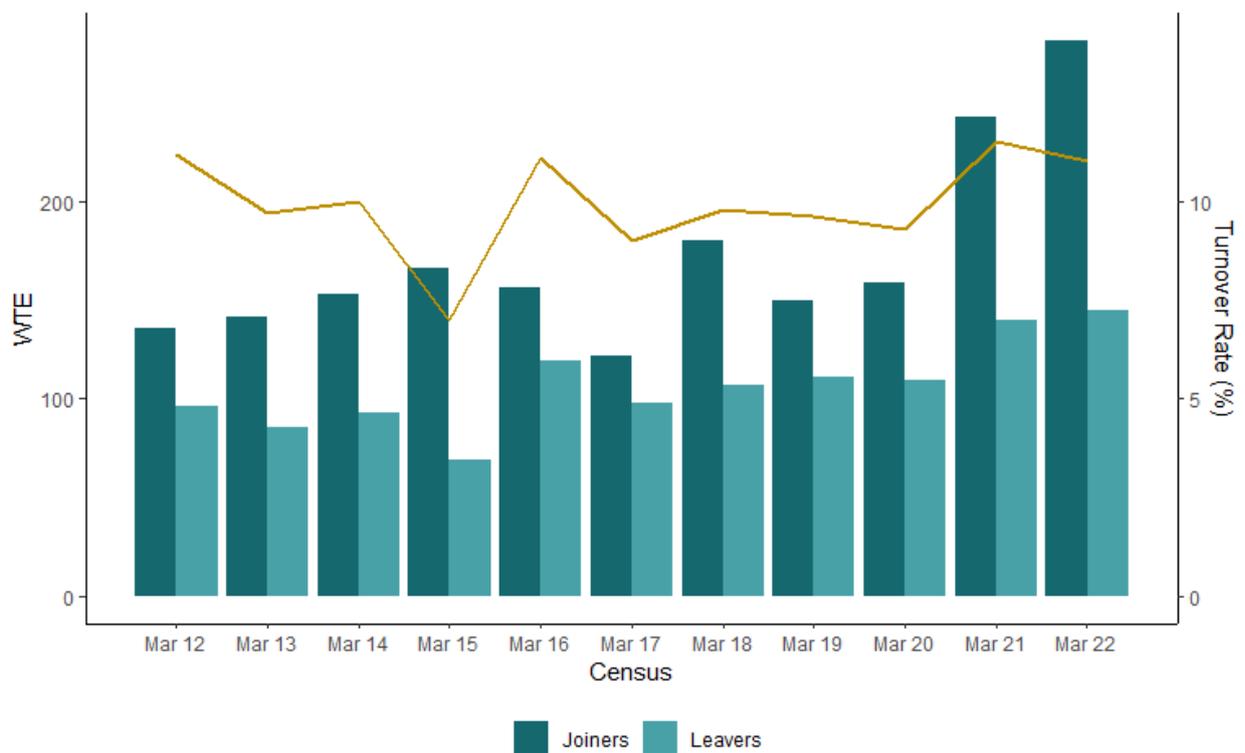
Figure 13: Clinical Psychology staff by Agenda for Change Band, at 31 March 2022



5 Staff Turnover

Figure 14 shows joiners, leavers and the turnover rate in NHSScotland, at March Census dates between 2012 and 31 March 2022. For further breakdowns by NHSBoard and Professional Group, please see the [psychology dashboards](#).

Figure 14: Annual Joiners, Leavers and Staff Turnover in NHSScotland Clinical Psychology Services



6 Vacant Posts

6.1 Vacancy Rates

At 31 March 2022, the WTE of posts being advertised for recruitment was 264.9 WTE, or 15.6% of the establishment.

Figure 15 shows vacancy rates (percentage of the establishment that was vacant) between March 2012 and 31 March 2022, quarterly and annually. The current vacancy rate of 15.6% is high compared to the rate of 10.7% in March 2021. Figure 16 shows the annual vacancy rate since 2011.

Figure 15: Quarterly Vacancy Rates in NHSScotland Psychology Services.

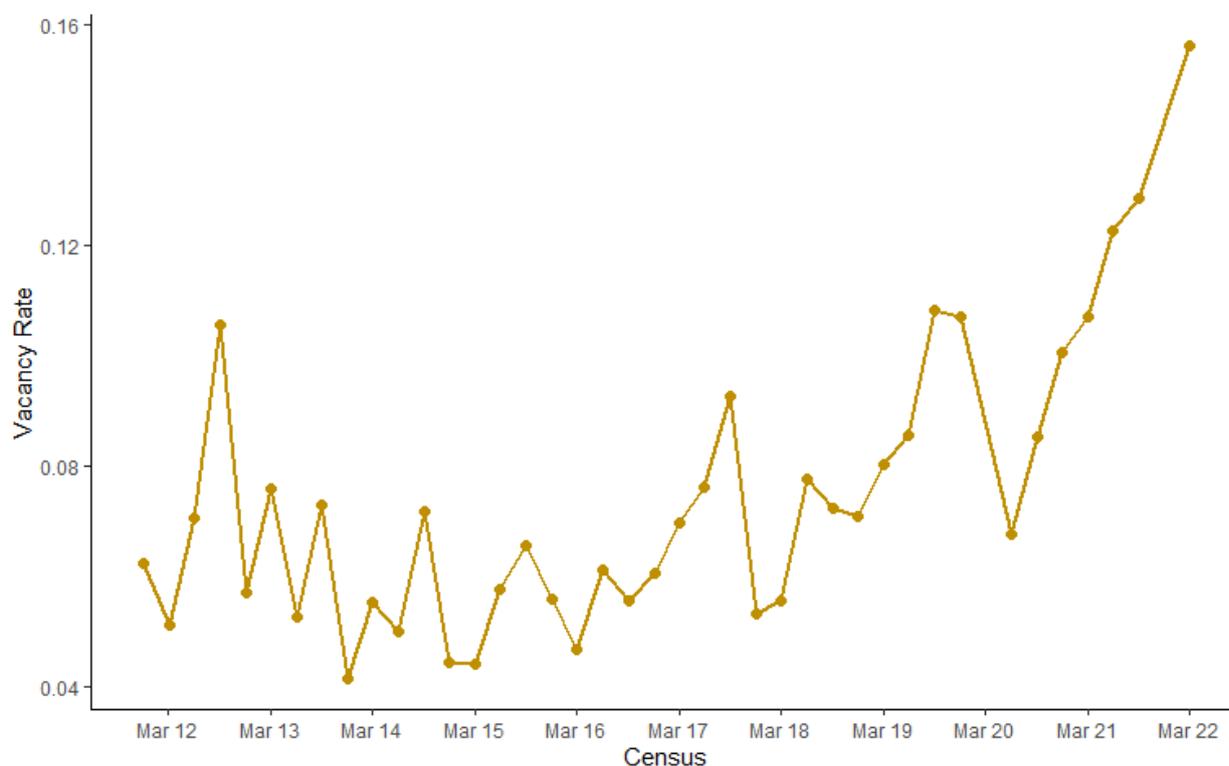
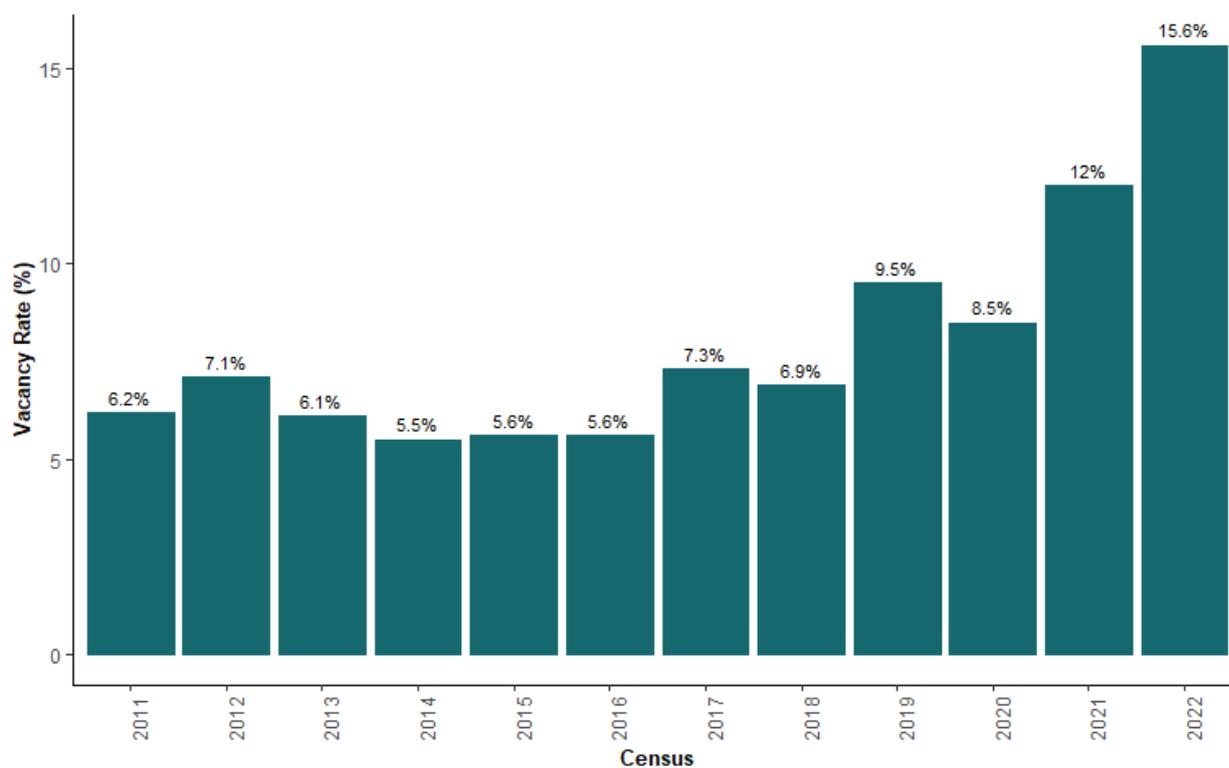


Figure 16: Annual Vacancy Rates in NHSScotland Psychology Services.

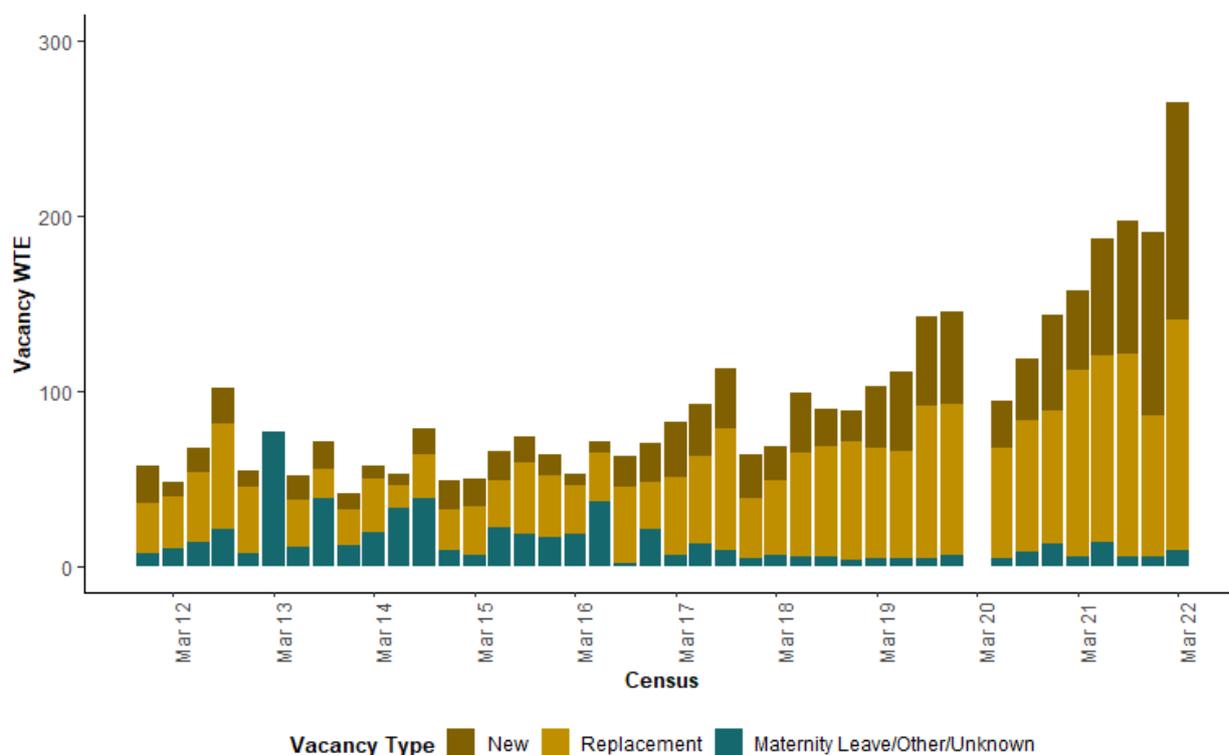


6.2 Vacancy Types

Figure 17 shows the vacancy WTE for new, replacement and maternity leave/other/unknown posts between December 2011 and 31 March 2022. As at 31 March 2022, 47% (124.5 WTE) of vacancies were for new posts, 49.5% (131.2 WTE) were for replacement posts and 3.5% (9.2 WTE) were classified as Maternity Leave Cover/Other/Unknown.

The percentage of replacement posts has fallen from 67.7% (106.5 WTE) in 31 March 2021, while the percentage of new posts has risen from 29% (45.7 WTE).

Figure 17: NHSScotland Psychology Services Vacancies by Type



Notes

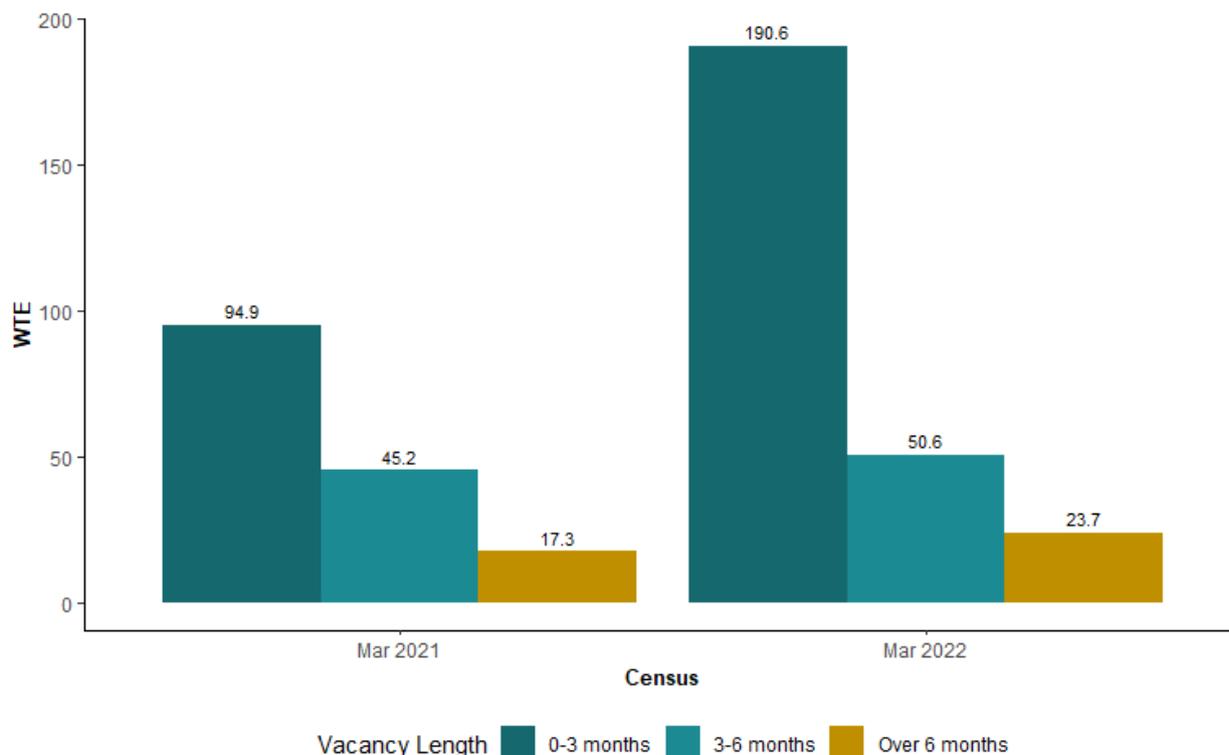
Vacancy Data are unavailable for March 2020, due to the Covid-19 pandemic.

6.3 Vacancy Length

The time period for which vacancies had been advertised prior to the census date (vacancy length) has been captured for most vacancies from December 2017 onwards.

Figure 18 shows this information for 31 March 2022 compared to 31 March 2021. At 31 March 2022, 72% (190.6 WTE) had been advertised for less than three months, 19.1% (50.6 WTE) for three to six months and 8.9% (23.7 WTE) for longer than six months.

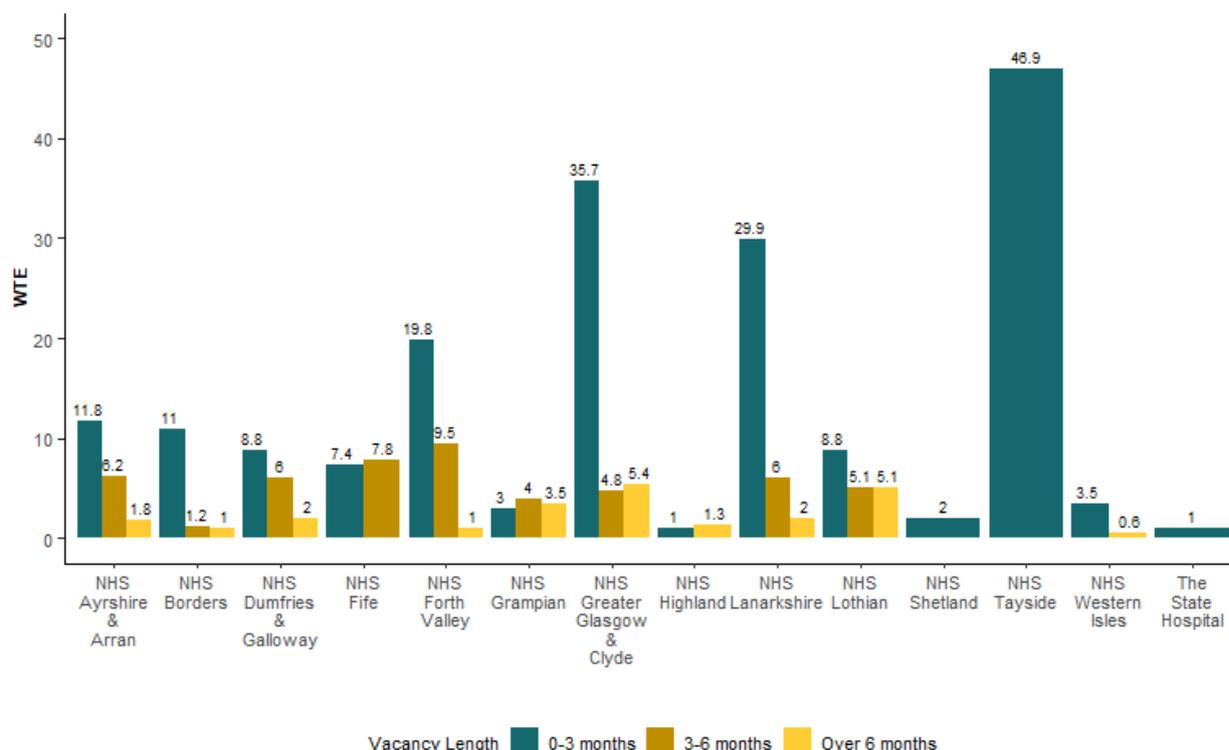
Figure 18: Clinical Psychology Vacancies by Length of Time Advertised, as at 31 March 2021 and 31 March 2022



6.4 Vacancy Length by Health Board

Figure 19 shows the WTE of vacant posts by vacancy length and health board. NHS Tayside had the largest number of posts advertised for less than 3 months as at 31 March 2022 (46.9 WTE), while NHS Greater Glasgow and Clyde had the largest number of vacant posts advertised for longer than six months (5.4 WTE).

Figure 19: Clinical Psychology Vacancies in NHSScotland Health Boards by Length of Time Advertised, as at 31 March 2022



7 Staff in Training

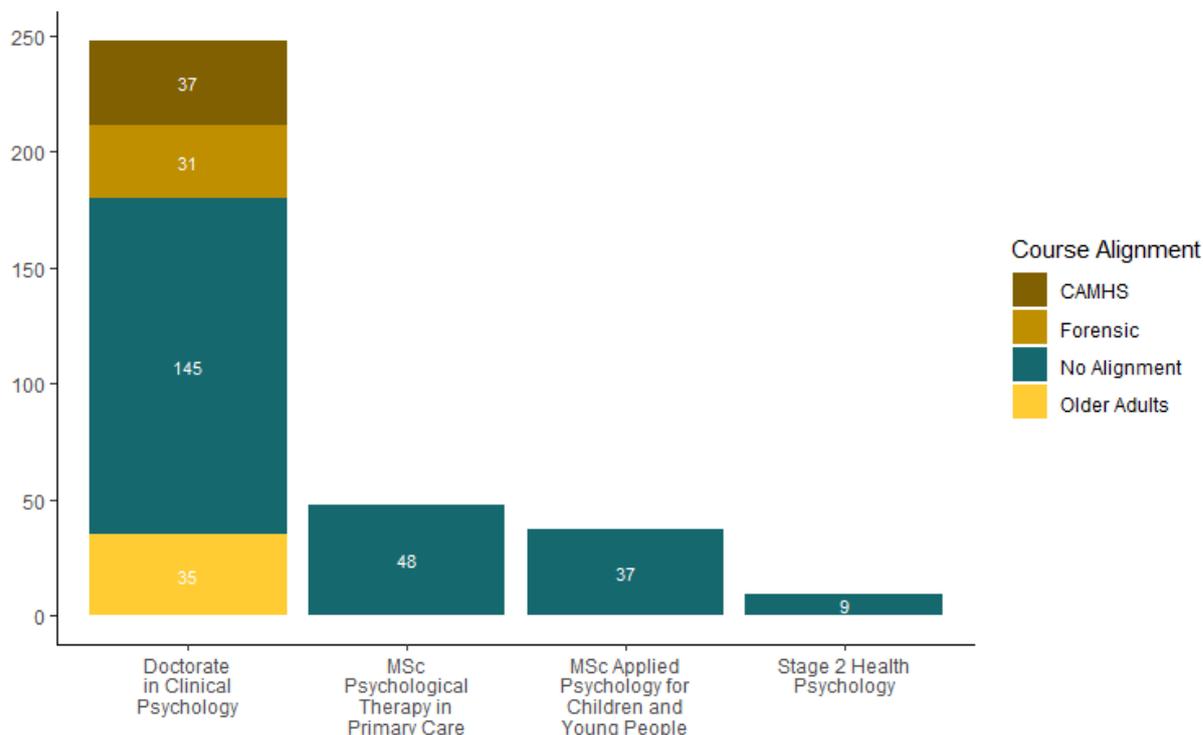
NES has responsibility for commissioning the pre-registration training of Clinical Psychologists for NHSScotland, the main source of psychology workforce supply. In addition to the Doctorate in Clinical Psychology (DClinPsych), MSc Psychological Therapy in Primary Care (MSc PTPC) and MSc in Applied Psychology for Children and Young People (MSc APCYP), NES works in partnership with NHS boards to provide the British Psychological Society’s Stage 2 Training in Health Psychology. Trainees on each of these courses are employed by the NHS during training. For definitions of these training courses see the [Summary of Training Courses](#).

7.1 Current Trainees

The numbers of staff in training towards Applied Psychology postgraduate qualifications are shown in Figure 20.

Since 2009, aligned training pathways on the DClinPsych have been funded by the Scottish government, with the aim of increasing capacity in specific areas of the psychology workforce. At the current census, of the 248 trainees working towards the Doctorate in Clinical Psychology, 14.9% (37 headcount) were aligned to CAMHS, 12.5% (31 headcount) to Forensic Psychology and 14.1% (35 headcount) to Older Adults

Figure 20: Headcount of Staff in Training on Clinical Psychology Courses at Scottish Universities



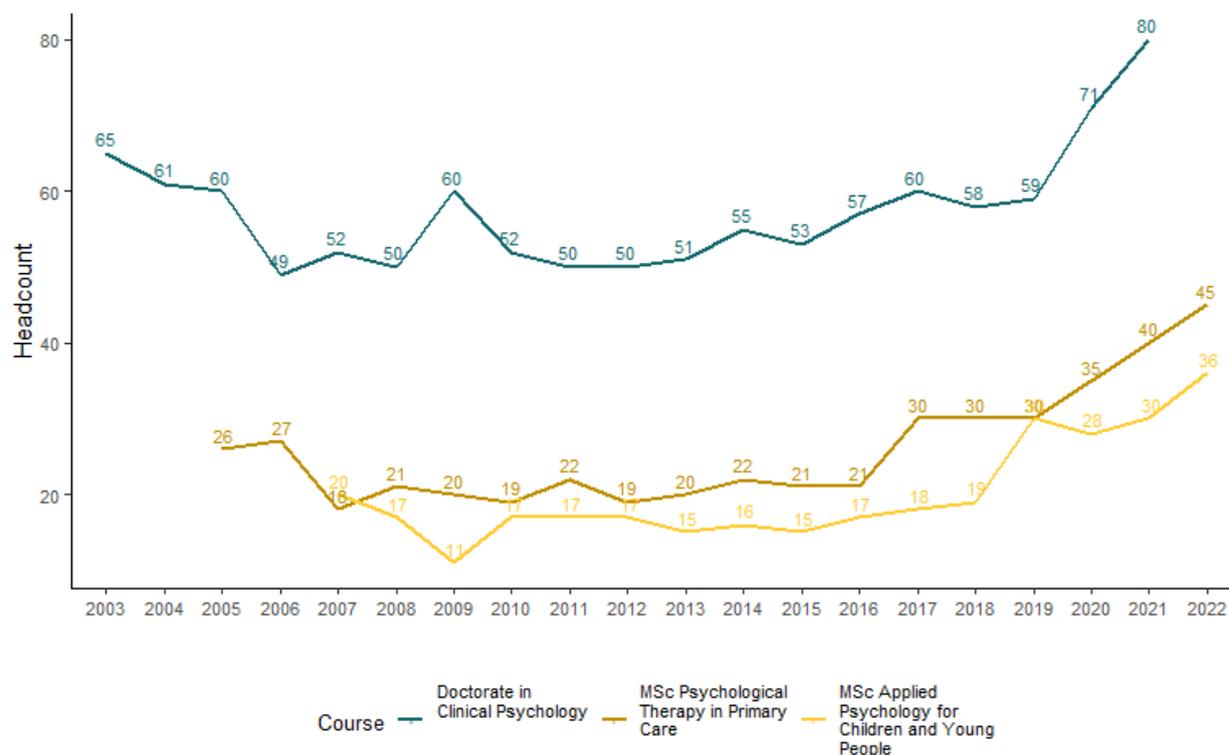
7.2 Course Intakes and Completion

7.2.1 Course Intakes

Figure 21 displays the intake of trainees on the DClInPsych, the MSc Psychological Therapy in Primary Care (MSc PTPC) and the MSc Applied Psychology for Children and Young People (MSc APCYP) in Scotland between 2003 and 2022. The average DClInPsych intake between 2003 and 2020 was 58 trainees per year. There were 80 trainees at the latest intake in September 2021 (34 at the University of Glasgow and 46 at the University of Edinburgh).

The last intake of trainees on either a four or five year DClInPsych course at the University of Edinburgh was in 2012. Since 2013, all trainees have therefore commenced a three-year course, unless they have previously completed either the MSc APCYP or the MSc PTPC. Graduates from these courses have now been given recognition for prior learning and are able to complete the DClInPsych course in 2.5 years. This came into effect from the 2014 intake at the University of Edinburgh and the 2017 intake at the University of Glasgow.

Figure 21: Intake of Trainees on Clinical Psychology Courses in Scottish Universities by headcount.

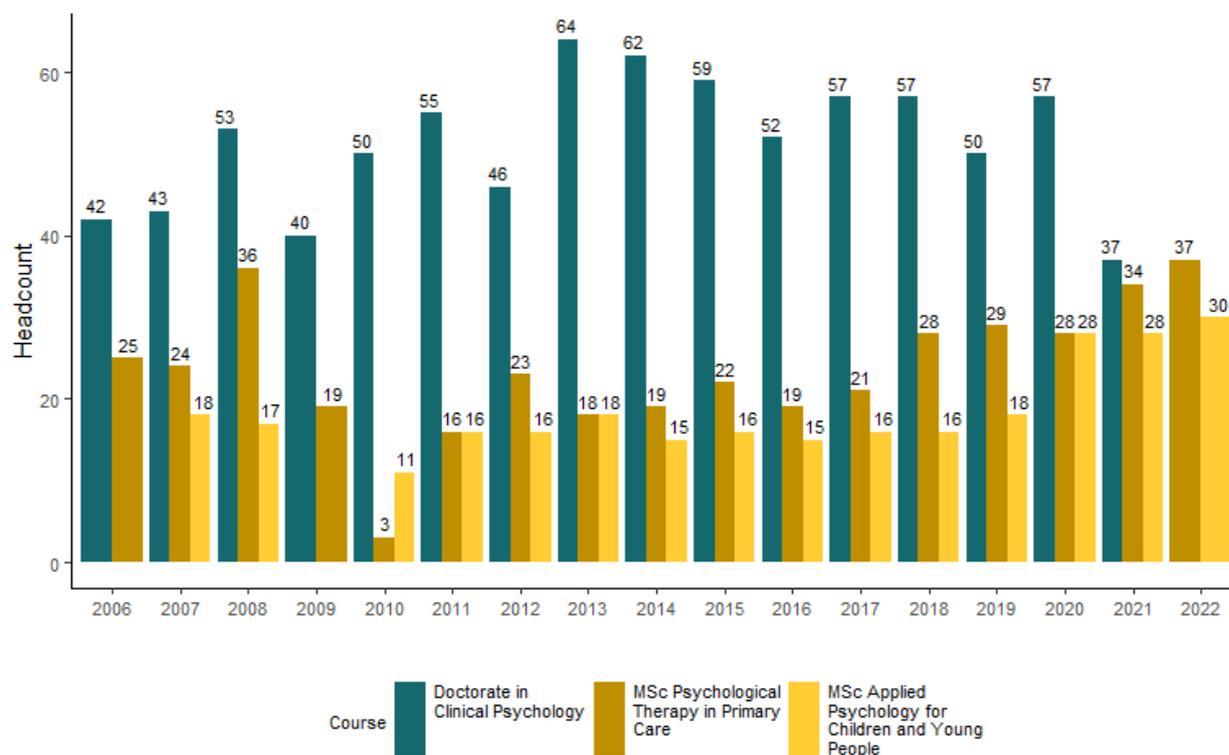


The average intake of trainees to the MSc Psychological Therapy in Primary Care course between 2005 and 2022 was 26 trainees per year. There were 45 trainees at the latest intake in January 2022. The average intake of trainees to the MSc Applied Psychology for Children and Young People course between 2007 and 2022 was 20 trainees per year. There were 36 trainees at the latest intake in February 2022.

7.2.2 Course Completion

Figure 22 shows the number of students graduating from the DClinPsych, MSc Psychological Therapy in Primary Care and MSc Applied Psychology for Children and Young People courses between 2006 and 2022.

Figure 22: Number of Graduates from Clinical Psychology Courses in Scottish Universities, by headcount.



Figures 23 and 24 display the Kaplan-Meier completion estimates for trainees on the Edinburgh and Glasgow DClinPsych, the MSc Psychological Therapy in Primary Care and the MSc Applied Psychology for Children and Young People courses over time.

Within 3 years of starting the 3 year Edinburgh DClinPsych course, 37% of students graduate, rising to 67% within 3.1 years, 84% within 4 years and 93% within 5 years. Within 3 years of starting the 3 year Glasgow DClinPsych course, 46% of students graduate, rising to 80% within 3.1 years, 87% within 4 years and 95% within 5 years. Within 1 year of starting the MSc APCYP course, 91% of students graduate, rising to 97% after 2 years. Within 1 year of starting the MSc PTPC course, 89% of students graduate, rising to 95% after 2 years .

Figure 23: Kaplan-Meier completion probabilities by years since starting course.

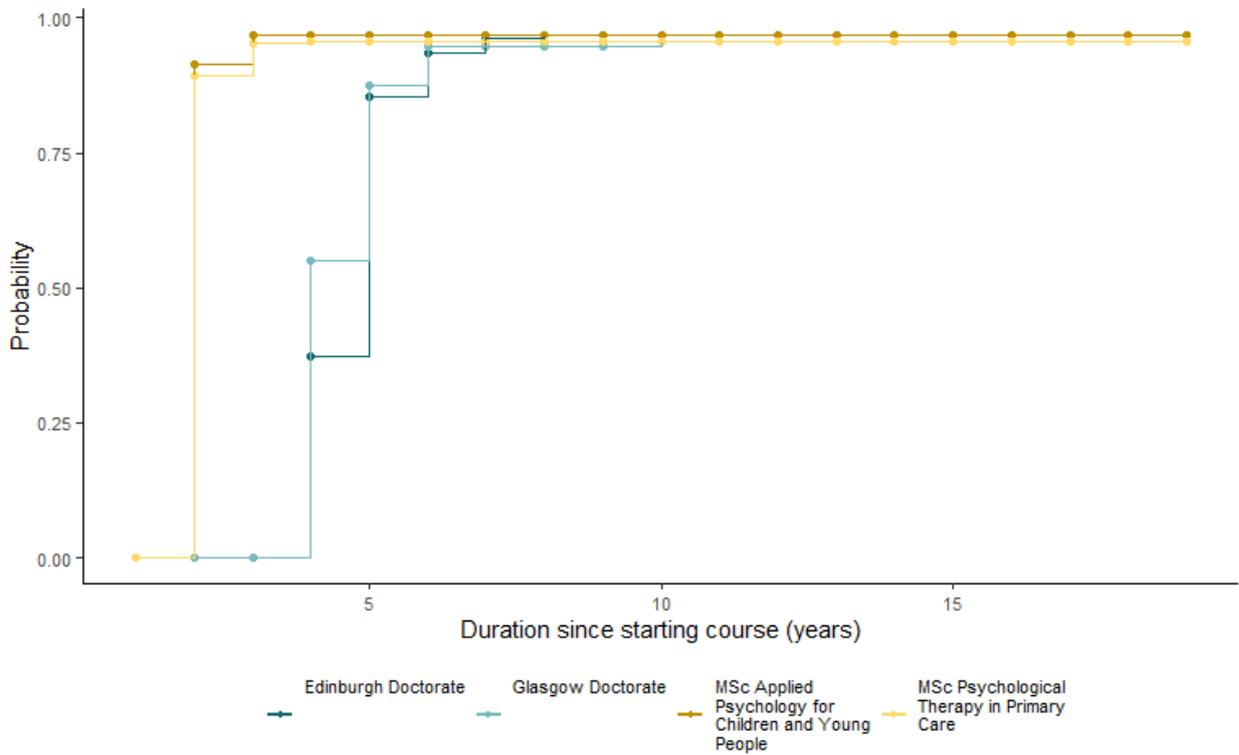
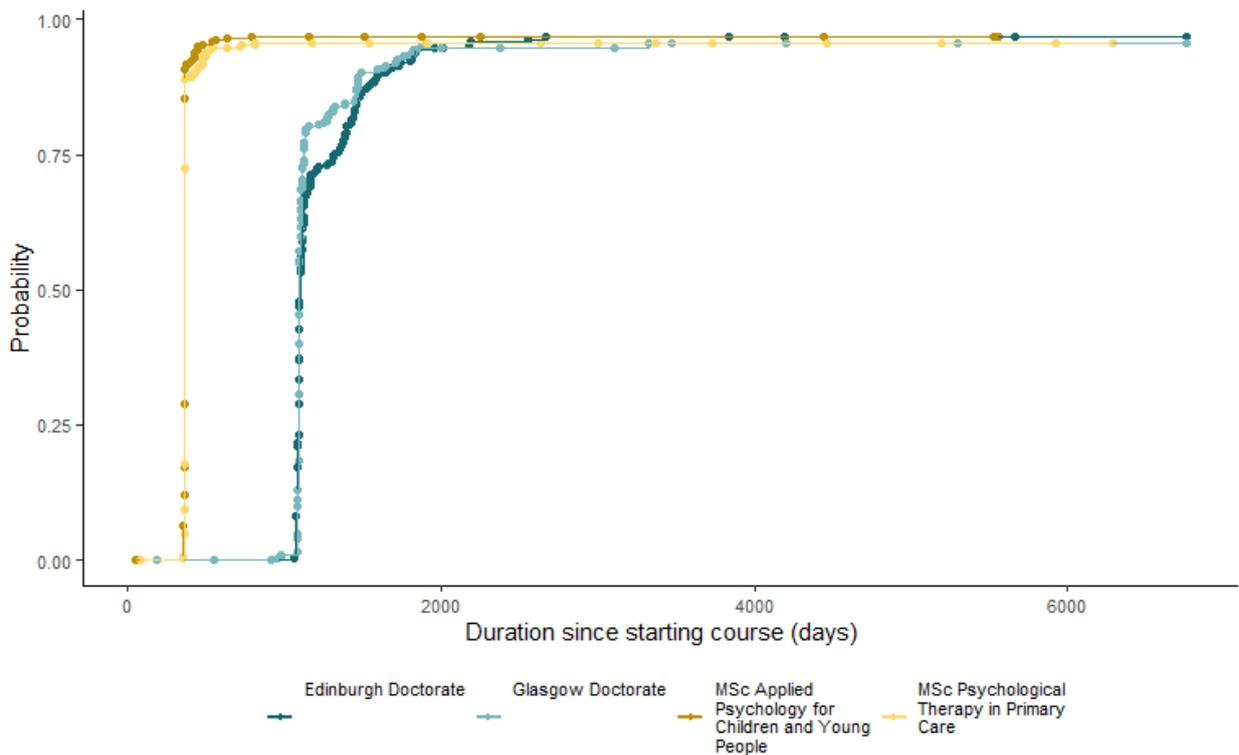


Figure 24: Kaplan-Meier completion probabilities by days since starting course.



7.3 Trainee Retention

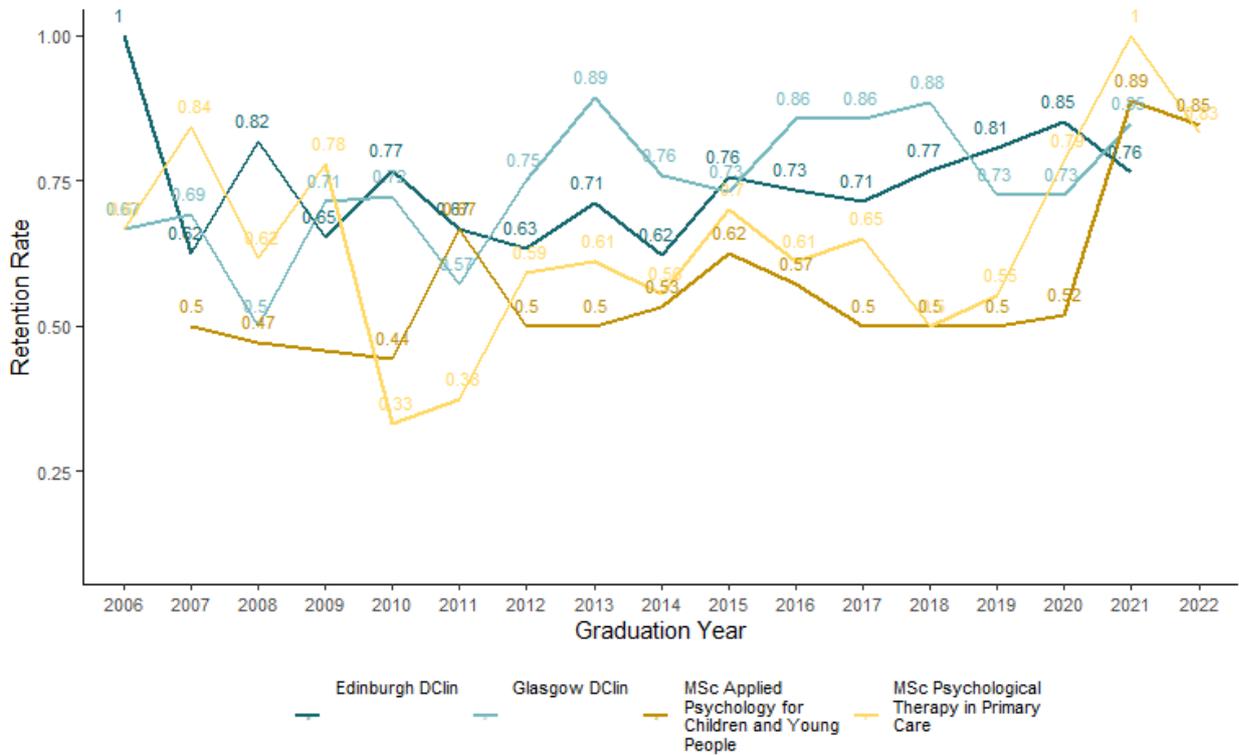
Between 2007 and 2022 there were 782 successful graduates from the Clinical Psychology Doctorate. National Insurance numbers are available for 760 graduates, of whom 561 are currently employed in NHSScotland, an overall retention rate of 0.74.

Between 2007 and 2022 there were 278 successful graduates from the MSC APCYP course. National Insurance numbers are available for 262 graduates, of whom 156 are currently employed in NHSScotland, an overall retention rate of 0.6.

Between 2006 and 2022 there were 401 successful graduates from the MSc PTPC course. National Insurance numbers are available for 367 graduates, of whom 247 are currently employed in NHSScotland, an overall retention rate of 0.67.

Figure 25 illustrates the proportion of graduates currently employed in NHSScotland, by graduation year since 2006. Any reduction in retention could be due to a number of factors such as graduates taking a career break before beginning permanent employment in Scotland, taking up employment in NHSScotland outwith Psychology Services, moving to NHS England or further abroad, or choosing to work in the private sector. Information on graduate retention by NHSScotland health board is available in the [psychology dashboards](#).

Figure 25: Percentage of graduates from psychology training courses in Scotland retained in the NHSScotland workforce.



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. See the [Summary of Professional Groups](#) within Psychology Services for definitions of each.

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](#). Below are definitions of the sub categories under 'Mental Health' and the other areas of work:

Mental Health - mild to moderate: *A mild mental health problem is when a person has a small number of symptoms that have a limited effect on their daily life. A moderate mental health problem is when a person has more symptoms that can make their daily life much more difficult than usual.*

Mental Health - severe and enduring: *People with recurrent or severe and enduring mental illness, for example schizophrenia, bipolar affective disorder or organic mental disorder, severe anxiety disorders or severe eating disorders, have complex needs which may require the continuing care of specialist mental health services working effectively with other agencies. Many people with severe mental illness are treated in the community with the support of primary care staff. A range of services is needed in addition to primary care - specialist mental health services, employment, education and training, housing and social support. Needs will fluctuate over time, and services must be able to anticipate and respond to crisis.*

Mental Health - early intervention: *A multidisciplinary, coordinated system of service provision to identify risk situations and/or likelihood of psychological ill health.*

Mental Health - eating disorders: *Eating disorders are a group of disorders in which abnormal feeding habits are associated with psychological factors. Characteristics may include a distorted attitude toward eating, handling and hoarding food in unusual ways, loss of body weight, nutritional deficiencies, dental erosion, electrolyte imbalances, and denial of extreme thinness. The most common conditions include anorexia nervosa and bulimia nervosa. Persons with eating disorders of this kind characteristically misperceive themselves as either overweight or of normal weight.*

Treatment of eating disorders is often on an outpatient basis unless severe malnutrition and electrolyte imbalances are present, severe depression and suicidal tendencies endanger the patient, or there is evidence that the patient cannot cope with daily living without resorting to abnormal eating patterns. Additionally, the family and home environment may be creating unbearable tension because of a power struggle over the patient's abnormal eating pattern.

Alcohol & Substance Misuse: Treatment of individuals with a maladaptive pattern of a drug, alcohol or other chemical agent that leads to social, occupational, psychological or physical health problems.

Forensic: Forensic psychology deals with the psychological aspects of legal processes, including applying theory to criminal investigations, understanding psychological problems associated with criminal behaviour. Forensic Psychologists work in a range of NHS settings. They work in high and medium security hospitals in the assessment and treatment of those detained under the Mental Health Act. They also work within the community and in child and family settings where issues of risk assessment and offence related work may be critically important. In addition to the NHS, a significant number of forensic psychologists work in the prison service.

Learning Disabilities: A learning disability is a reduced intellectual ability and difficulty with everyday activities, e.g. delayed childhood development, socialising, or physical tasks, which affects someone for their whole life. The level of support someone needs depends on the individual; those with a severe learning disability or profound and multiple learning disability (PMLD), will need more care from a multi disciplinary team and with areas such as mobility, personal care and communication.

Neuropsychology: Neuropsychology looks at the relationship between the physical brain and its various functions, dealing with topics such as sensory perception, memory, and the biological basis for conditions like depression. Psychologists within this field also help with the assessment and rehabilitation of people with brain injury or other neurological conditions, such as strokes, dementia, and degenerative brain disease.

Physical Health: Psychologists working in physical health deal with the psychological and emotional aspects of health and illness as well as supporting people who are chronically ill.

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 posts often taken up by graduates of the MSc in Psychological Therapy in Primary Care and the MSc Applied Psychology for Children and Young People e.g. Clinical Associates in Applied Psychology counsellors, assistant psychologists, cognitive behavioural therapists, other therapists and other professionals.

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

All Applied Psychologists

This includes Clinical Psychologists, Counselling Psychologists, Health Psychologists, Forensic Psychologists and Neuropsychologists. These staff have completed specific post-graduate training and hold additional qualifications in their field.

Clinical Associate in Applied Psychology

(CAAP) Graduates of the MSc Applied Psychology for Children and Young People or the MSc Psychological Therapy in Primary Care are qualified to work as CAAPs. They are trained in the delivery of evidence-based psychological therapies for common mental health problems in primary care, or in the delivery of tier two psychology assessments in a range of services for children and young people.

Clinical Psychologist

Psychology staff with a Doctorate in Clinical Psychology (see [Summary of Training Courses](#)) and registered with the Health and Care Professions Council.

Counselling Psychologist

Psychologists who hold a British Psychological Society accredited post graduate qualification in Counselling Psychology and are registered with the Health and Care Professions Council (HCPC).

Health Psychologist

Psychologists who hold a British Psychological Society accredited Masters in Health Psychology and as Stage II or Doctorate in Health Psychology.

Forensic Psychologist

Psychologists who hold a British Psychological Society accredited postgraduate qualification in Forensic Psychology.

Neuropsychologist

Clinical Psychologists who in addition to their Doctorate in Clinical Psychology qualification hold a Stage II British Psychological Society Neuropsychology qualification.

Cognitive Behavioural Therapist

Cognitive behavioural therapists use talking therapy to help patients change negative patterns of thinking or behaviour. They have completed an accredited training programme in Cognitive Behavioural Therapy.

Other Therapist

Includes Psychotherapists, family and couple therapists.

Counsellor

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.

Psychology Assistant

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 e.g. Doctorate or MSc course.

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:

<https://www.nes.scot.nhs.uk/our-work/applied-psychology-professional-training-programmes/>.

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>

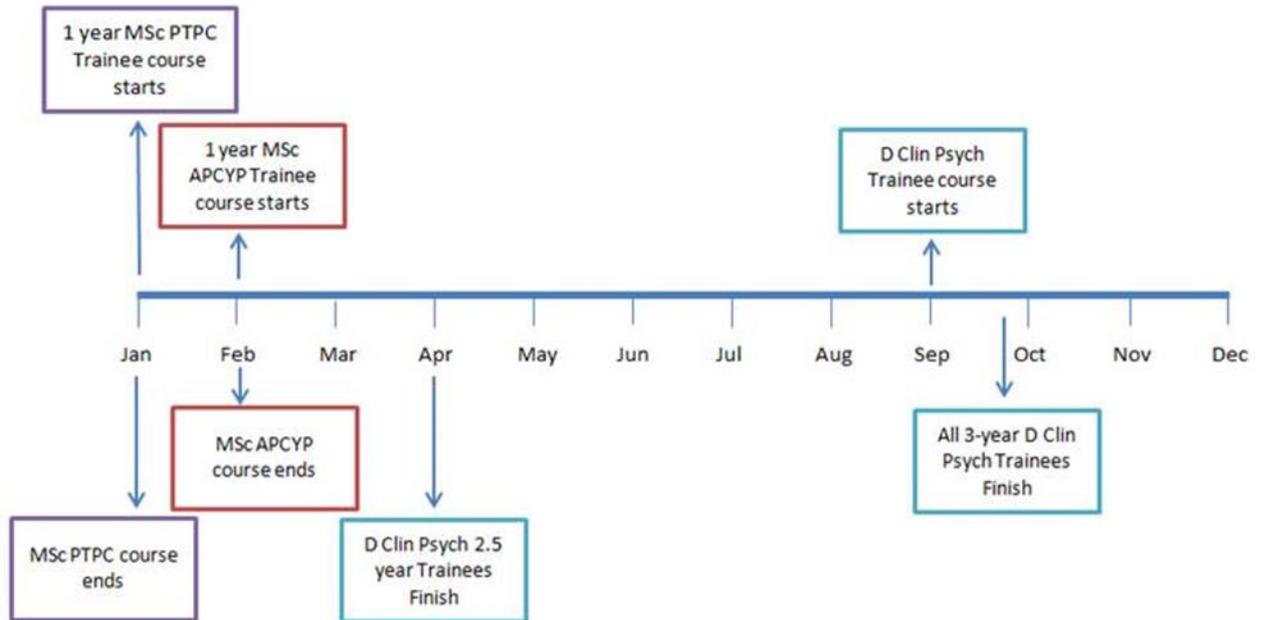
MSc in Applied Psychology for Children and Young People

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). Further information can be found at: <https://www.nes.scot.nhs.uk/our-work/applied-psychology-professional-training-programmes/>

Figure 26: 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

Notes

The stage 2 Health Psychology course usually takes 2 years to complete, however the start dates can vary from year to year.

List of Background Tables

Table No.	File Name	Time Period
1-14	2022-06-07-Psychology-Workforce-Tables	2006-2022
1.1	Table 1.1: All Clinical Staff (WTE) employed in Psychology Services by NHS Board	2010-Mar 2022
1.2	All Clinical Staff (Headcount) employed in Psychology Services by NHS Board	“
1.3	All Clinical Staff (WTE per 100,000 population) employed in Psychology Services by NHS Board	“
2.1	All Clinical Staff (WTE) employed in Psychology Services by Age Group	“
2.2	All Clinical Staff (Headcount) employed in Psychology Services by Age Group	“
3.1	All Clinical Staff (WTE) employed in Psychology Services by Area of Work	2011-Mar 2022
3.2	All Clinical Staff (WTE) employed in Psychology Services by detailed Area of Work and Target Age	“
4.1	All Clinical Staff (WTE) employed in Psychology Services by Target Age	“
4.2	All Clinical Staff (WTE or Headcount) employed in Psychology Services by Target Age, Area of Work and Professional group	“
5.1	All Clinical Staff (Headcount and WTE) employed in Psychology Services by Gender	“
6.1	All Clinical Staff (Headcount and WTE) employed in Psychology Services by Contract Type and Gender	“
7.1	All Clinical Staff (WTE) employed in Psychology Services by Band	“
7.2	All Clinical Staff (Headcount) employed in Psychology Services by Band	“
8.1	All Clinical Staff (Headcount) employed in Psychology Services by Contract Length	“
8.2	All Clinical Staff (WTE) employed in Psychology Services by Contract Length	“
9.1	All Clinical Staff Employed, Joiners, Leavers and Turnover Rates in NHSScotland Psychology Services	Mar 2010-Mar 2022

List of Background Tables

Table No.	File Name	Time Period
10.1	Ethnicity and Declared Disability of All Psychology Services Staff	Sep 2011-Sep 2021
11.1	All Vacancies (WTE) in Psychology Services by NHS Board	Dec 2011-Mar 2022
11.2	Length of Vacancies for Clinical Staff in Psychology Services, WTE by Professional Group and NHS Board	“
12.1	All Applied Psychologists (Headcount) in Training in NHSScotland	March 2022
13.1	Course Intakes, Outputs and Completion Rates for trainees on a Doctorate in Clinical Psychology Course in Scotland from the 2003 intake onwards	2003-2022
13.2	Graduates of Doctorate in Clinical Psychology (Headcount) in Workforce in NHSScotland Psychology Services	2007-2022
14.1	Course Intakes, Outputs and Completion Estimates for the MSc Applied Psychology for Children and Young People and MSc Psychological Therapy in Primary Care	2005-2022
14.2	Graduates of MSc Psychological Therapy in Primary Care and MSc Applied Psychology in Children and Young People (Headcount) in Workforce or Doctorate in Clinical Psychology Courses in Scotland	2006-2022

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Appendices

Appendix 1 - Background information

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.

The Psychological Therapies 'Matrix' is a guide to planning and delivering evidence-based Psychological Therapies within NHS Boards in Scotland. It provides a summary of the information on the current evidence base for various therapeutic approaches, a template to aid in the identification of key gaps in service, and advice on important governance issues.

<https://www.nes.scot.nhs.uk/our-work/matrix-a-guide-to-delivering-evidence-based-psychological-therapies-in-scotland/>

Further information on Older People's Psychology Services can be found in the paper: 'The Challenge of Delivering Psychological Therapies for Older People in Scotland' (2011), a report of Older People's Psychological Therapies Working Group.

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.

For more information on Psychology Services in NHSScotland please see the 'Applied Psychologists and Psychology in NHSScotland: Working Group Discussion Paper' available at:

http://www.sehd.scot.nhs.uk/mels/CEL2011_10.pdf

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.

[Part 2](#) of the workforce plan was published in December 2017 and outlined a framework for improving workforce planning in social care. [Part 3](#) was then published in April 2018 to cover the primary care setting.

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 later in 2019 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 the [CAMHS publication](#).

For further information on training programmes within applied psychology in NHSScotland please see: <https://www.nes.scot.nhs.uk/our-work/applied-psychology-professional-training-programmes/>

Appendix 2 - Early access details

Pre-Release Access

Under terms of the “Pre-Release Access to Official Statistics (Scotland) Order 2008”, HPS is 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

Early Access for Management Information

These statistics will also have been made available to those who needed access to ‘Management Information’, i.e. as part of the delivery of health and care:

- Scottish Government Health Department – Mental Health Division
- Health Improvement Scotland – Improvement Advisor.

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email alformats@nes.scot.nhs.uk to discuss how we can best meet your requirements.