



Llywodraeth Cymru
Welsh Government

STATISTICS, DOCUMENT

NHS vacancy statistics: 30 June 2024 (official statistics in development)

This release provides estimates of staff vacancies and vacancy rates within NHS Wales on the last day of June 2024.

First published: 16 October 2024

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Introduction

The statistics in this release are classified as official statistics in development as data is collected from a relatively new source, with known data **quality issues**. These statistics are published as there is wide public interest and **we welcome feedback** on their use.

Any change over time analysis should compare the same date in each year due to the seasonal variations in staff recruitment. Estimates are published by staff group and organisation level.

The statistics only include vacancies for staff who would be directly employed by NHS Wales. They do not include primary care contractors such as general medical practitioners (GPs) and NHS dental practitioners.

All data included in this release is published on StatsWales.

Main points

On 30 June 2024

- The estimated number of **full-time equivalent** (FTE) vacancies across NHS Wales was 5,684 and the estimated vacancy rate was 5.8% The vacancy rate was 0.4 percentage points lower than on the same date in the previous year.
- When comparing staff groups, the vacancy rate ranged from 3.8% for the scientific, therapeutic and technical staff group to 10.4% for the medical and dental staff group (excluding trainees).
- When comparing NHS organisations, the vacancy rate ranged from 1.8% in Cardiff and Vale to 11.5% in Digital Health and Care Wales.

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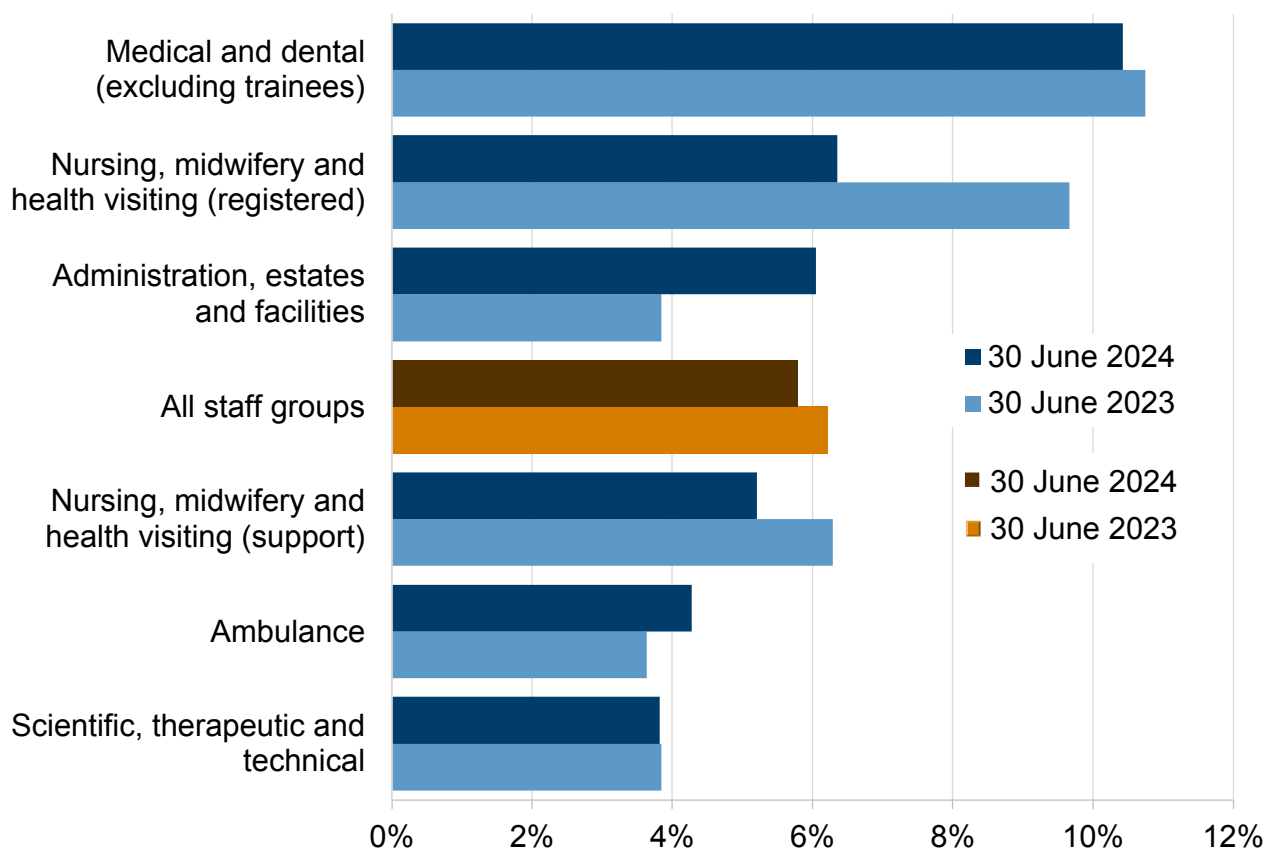
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A number of data quality issues are highlighted in the [quality and methodology information](#) section. On balance, it is likely that these statistics slightly underestimate the number of vacancies in NHS Wales.

Vacancy rate by staff group

Figure 1: Vacancy rate by NHS Wales staff group, 30 June 2023 and 2024 [Note 1]



Description of Figure 1: Bar chart showing the vacancy rate varied between different staff groups, with the highest rate in the medical and dental staff group (excluding trainees), more than double the group with the lowest rate, the

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scientific, therapeutic and technical staff group. The vacancy rate decreased or stayed the same in all but two of the staff groups (administration, estates and facilities, and ambulance) when compared with the same date last year.

[Note 1] Excludes medical and dental trainees, medical and dental single lead employer trainees, and pharmacy single lead employer trainees.

Source: NHS vacancy data collection, Welsh Government

NHS staff vacancies by organisation, staff group and date on StatsWales

On 30 June 2024, the estimated number of full time equivalent (FTE) vacancies by each staff group was:

532 in medical and dental staff (excluding trainees), with an estimated vacancy rate of 10.4%; a decrease of 0.3 percentage points compared to the same date in the previous year.

1,778 in registered nursing, midwifery and health visiting staff, with an estimated vacancy rate of 6.3% a decrease of 3.3 percentage points compared to the same date in the previous year.

705 in nursing, midwifery and health visiting support staff, with an estimated vacancy rate of 5.2%; a decrease of 1.1 percentage points compared to the same date in the previous year.

665 in scientific, therapeutic and technical staff, with an estimated vacancy rate of 3.8%; unchanged from the same date in the previous year.

1,863 in administration, estates and facilities staff, with an estimated vacancy rate of 6.1%; an increase of 2.2 percentage points compared to the same date in the previous year.

142 in ambulance staff, with an estimated vacancy rate of 4.3%; an increase of

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0.6 percentage points compared to the same date in the previous year.

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Vacancy rate by NHS organisation

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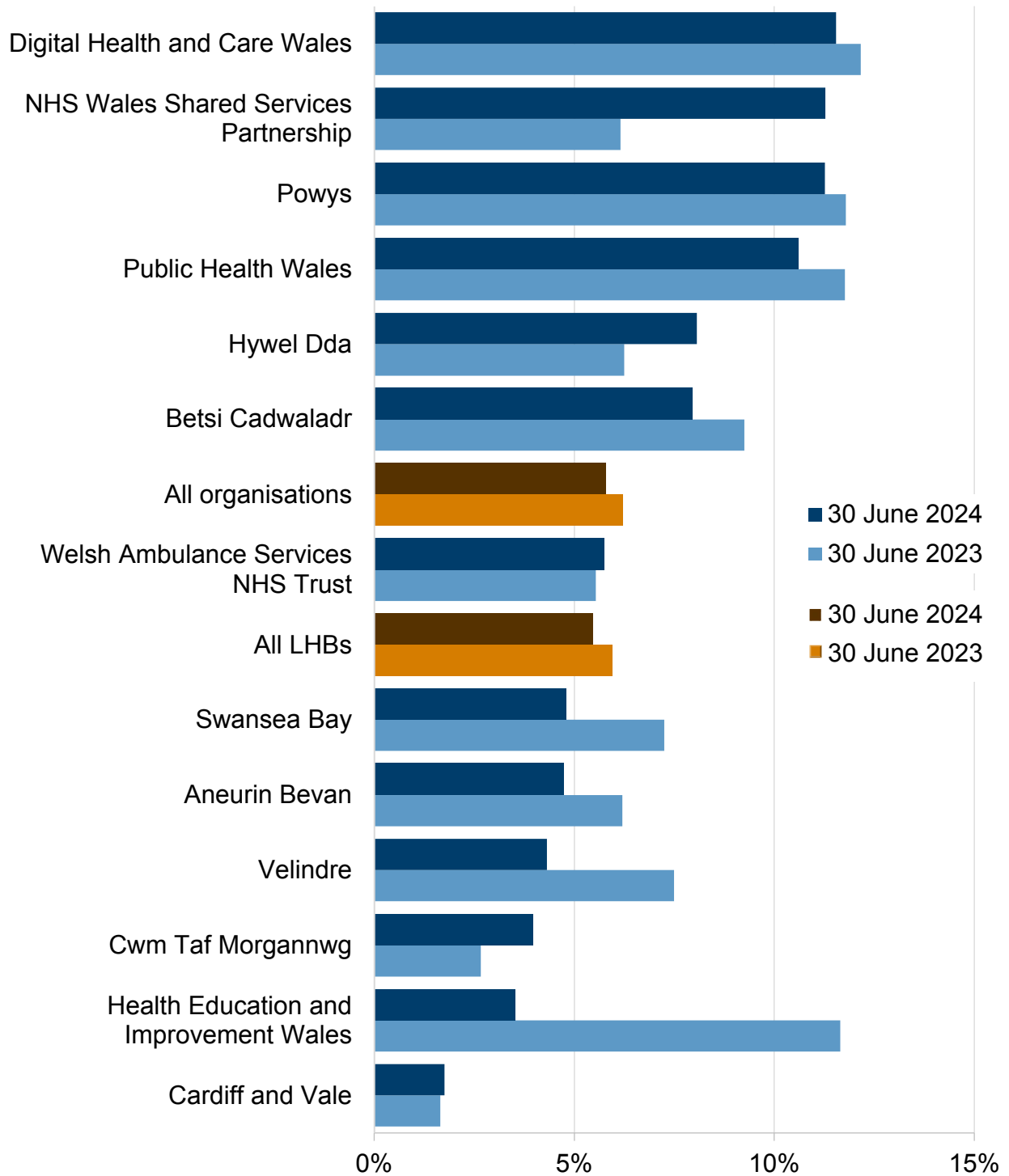
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Figure 2: Vacancy rate by NHS organisation, 30 June 2023 and 2024 [Note 1]

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Description of Figure 2: Bar chart showing large variation in the vacancy rate

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among NHS organisations; the rate was lowest in Cardiff and Vale, almost 10 percentage points lower than the organisation with the highest rate, Digital Health and Care Wales.

[Note 1] Excludes medical and dental trainees, medical and dental single lead employer trainees, and pharmacy single lead employer trainees.

Source: NHS vacancy data collection, Welsh Government

NHS staff vacancies by organisation, staff group and date on StatsWales

On 30 June 2024, the estimated vacancy rates were lower in 8 of the 13 NHS organisations when compared with the same date last year. The annual change in vacancy rate ranged from an increase of 5.1 percentage points in NHS Wales Shared Services Partnership to a decrease of 8.1 percentage points in Health Education and Improvement Wales.

The vacancy rate for the seven local health boards combined was 5.5%, with the highest health board rate in Powys (11.3%) and the lowest health board rate in Cardiff and Vale (1.8%). The local health board average was marginally lower than the rate for all NHS organisations and 0.5 percentage points lower than the same date in the previous year.

Vacancy rate by staff group and NHS organisation

Organisations with budgets for fewer than ten FTE staff in the staff group are not included in the charts but data for all organisations and staff groups are published on StatsWales.

No chart is included for the ambulance staff group as the large majority of staff in

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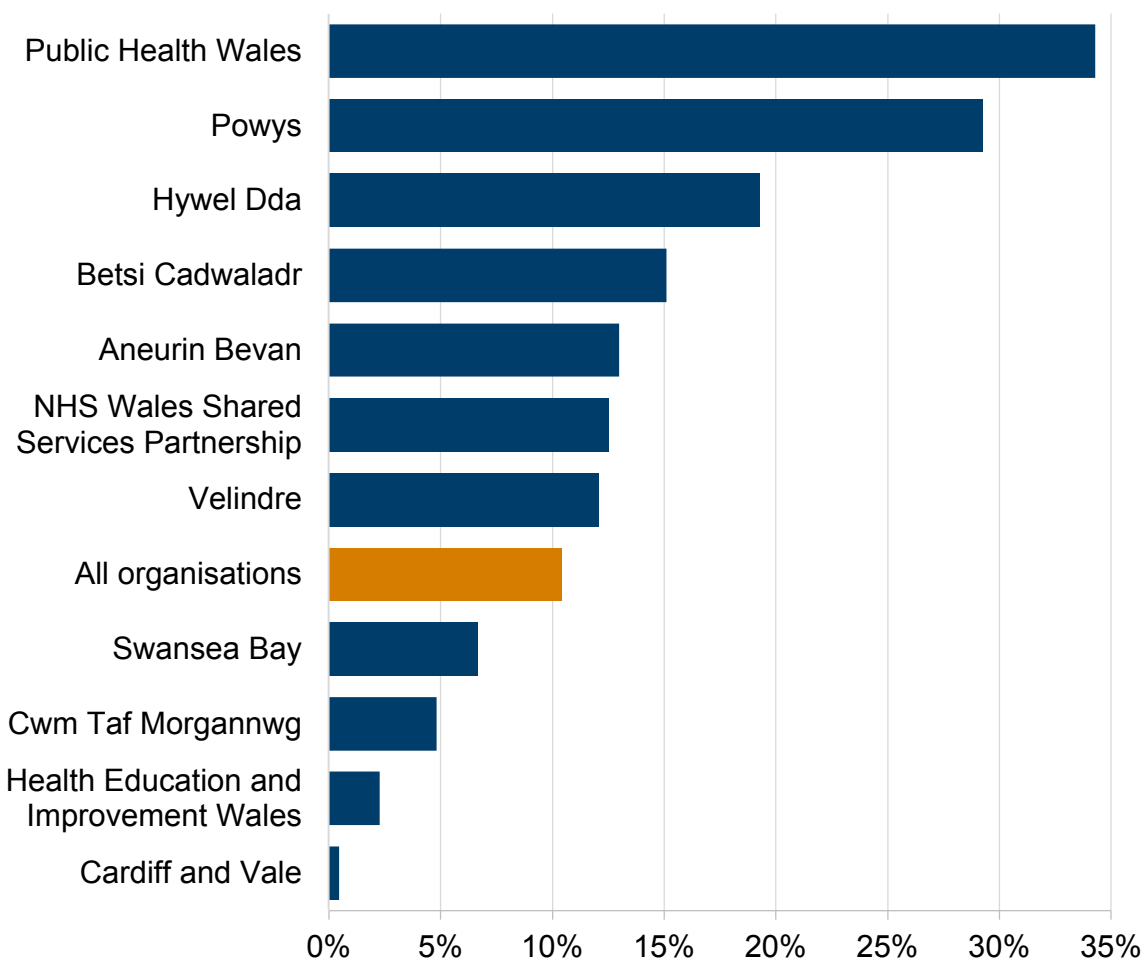
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this group are employed by the Welsh Ambulance Services NHS Trust, which is shown in Figure 2.

Negative vacancy rates can occur where the number of FTE staff in post exceeded the budgeted number of FTE staff. Some reasons why this may happen are explained in the [quality and methodology information](#) section.

Figure 3: Vacancy rate by organisation, medical and dental staff (excluding trainees), 30 June 2024 [Note 1]



Description of Figure 3: Bar chart showing large variation in the vacancy rate for

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the medical and dental staff group among NHS organisations. The average vacancy rate was 10.4%, but it ranged from 0.5% in Cardiff and Vale to 34.3% in Public Health Wales.

[Note 1] Welsh Ambulance Services NHS Trust is not shown in the chart as its budget for medical and dental staff was fewer than ten FTE. Other organisations are not shown as they had no budget for this staff group.

Source: NHS vacancy data collection, Welsh Government

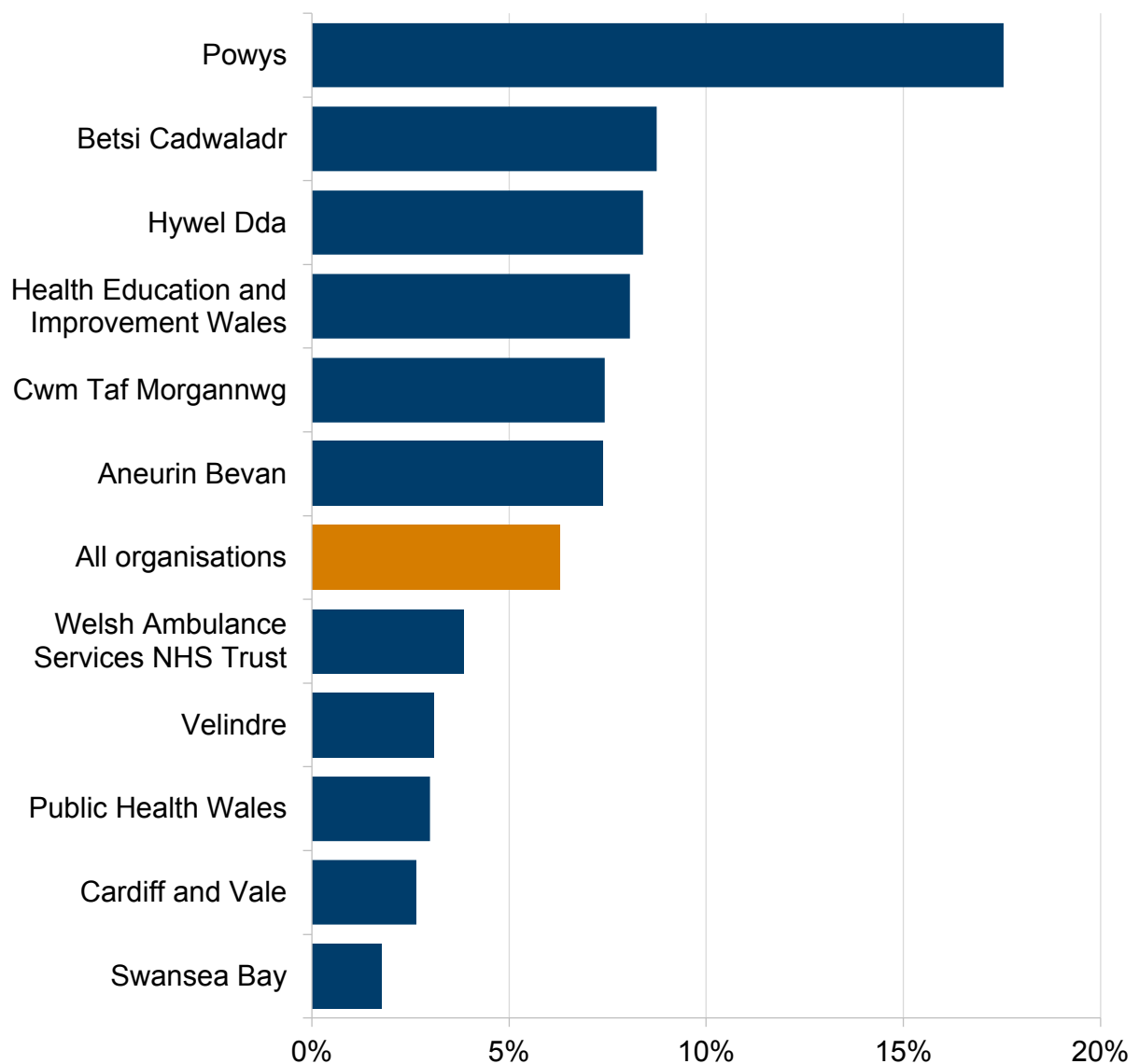
[NHS staff vacancies by organisation, staff group and date on StatsWales](#)

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Figure 4: Vacancy rate by organisation, registered nursing, midwifery and health visiting staff, 30 June 2024 [Note 1]



Description of Figure 4: Bar chart showing large variation in the vacancy rate for the registered nursing, midwifery and health visiting staff group among NHS

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organisations. The average vacancy rate was 6.3% but it ranged from 1.8% in Swansea Bay to 17.5% in Powys.

[Note 1] NHS Wales Shared Services Partnership is not shown in the chart as its budget for registered nursing, midwifery and health visiting staff was fewer than ten FTE. Other organisations are not shown as they had no budget for this staff group.

Source: NHS vacancy data collection, Welsh Government

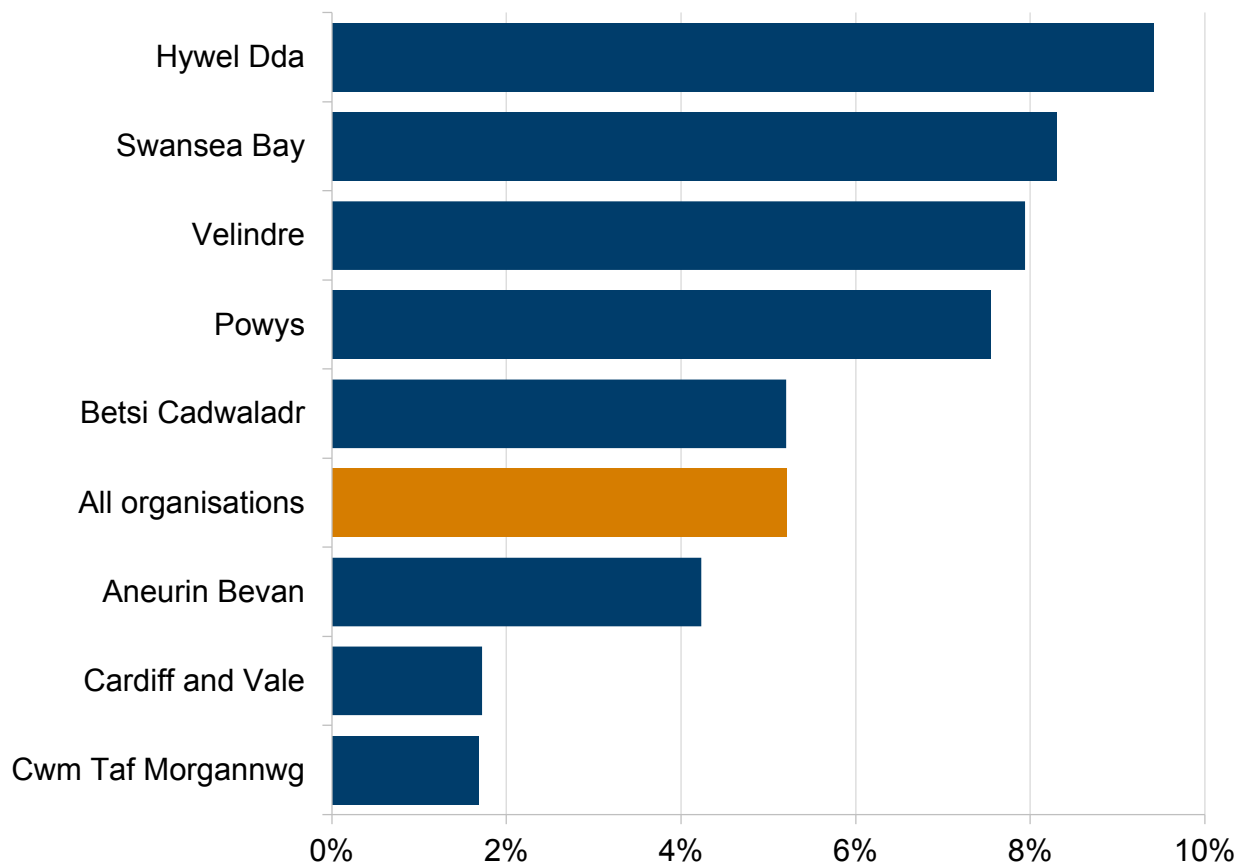
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Figure 5: Vacancy rate by organisation, nursing, midwifery and health visiting support staff, 30 June 2024 [Note 1]



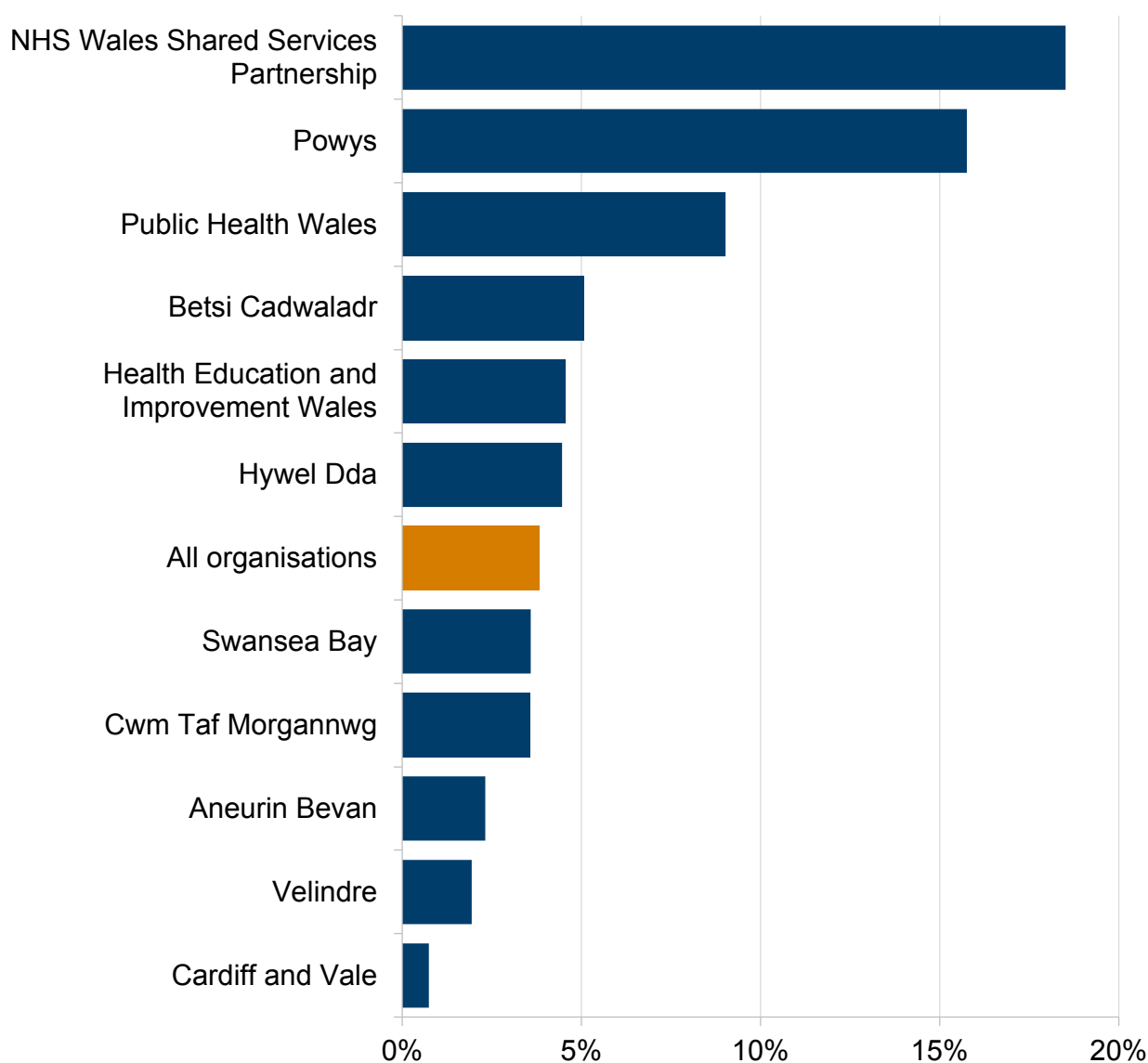
Description of Figure 5: Bar chart showing large variation in the vacancy rate for the nursing, midwifery and health visiting support staff group among NHS organisations. The average vacancy rate was 5.2%, but it ranged from 1.7% in Cwm Taf Morgannwg and Cardiff and Vale to 9.4% in Hywel Dda.

[Note 1] Other organisations are not shown as they had no budget for this staff group.

Source: NHS vacancy data collection, Welsh Government

[NHS staff vacancies by organisation, staff group and date on StatsWales](#)

Figure 6: Vacancy rate by organisation, scientific, therapeutic and technical staff, 30 June 2024 [Note 1]



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Description of Figure 6: Bar chart showing large variation in the vacancy rate for the scientific, therapeutic and technical staff group among NHS organisations. The average vacancy rate was 3.8%, but it ranged from 0.7% in Cardiff and Vale to 18.5% in NHS Wales Shared Services Partnership.

[Note 1] Welsh Ambulance Services NHS Trust is not shown in the chart as its budget for scientific, therapeutic and technical staff is fewer than ten FTE. Other organisations are not shown as they had no budget for this staff group.

Source: NHS vacancy data collection, Welsh Government

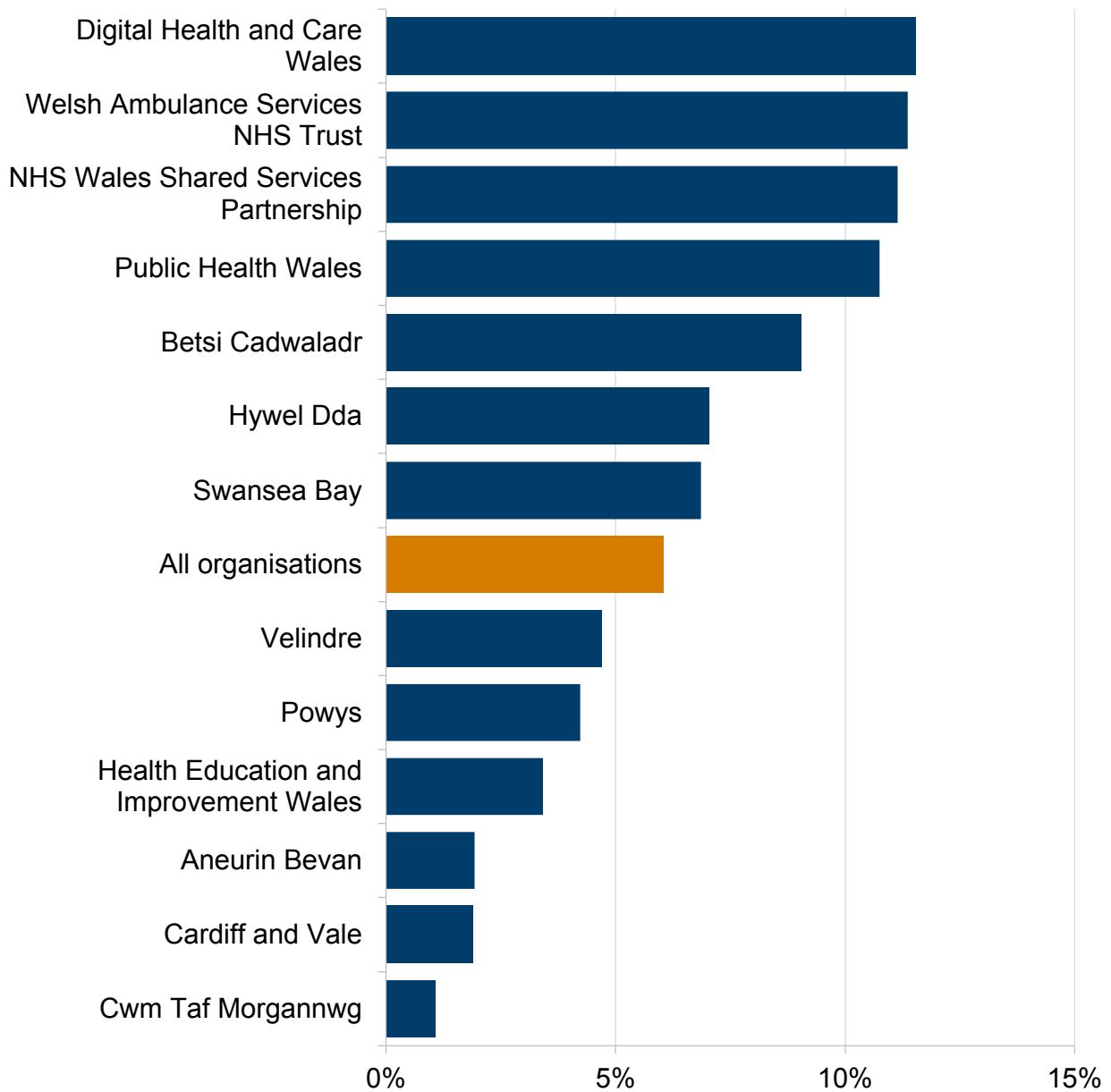
[NHS staff vacancies by organisation, staff group and date on StatsWales](#)

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Figure 7: Vacancy rate by organisation, administration, estates and facilities staff, 30 June 2024



Description of Figure 7: Bar chart showing large variation in the vacancy rate for the administration, estates and facilities staff group among NHS

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organisations. The average vacancy rate was 6.1%, but it ranged from 1.1% in Cwm Taf Morgannwg to 11.5% in Digital Health and Care Wales.

Source: NHS vacancy data collection, Welsh Government

[NHS staff vacancies by organisation, staff group and date on StatsWales](#)

Quality and methodology information

For the purpose of this statistical release a 'vacancy' is defined as the difference between the number of funded full-time equivalent (FTE) posts as recorded on the finance general ledger, and the number of FTE staff in post as recorded on the NHS Electronic Staff Record (ESR) at a point in time. The vacancy rate is the number of vacancies divided by the number of funded FTE posts recorded on the general ledger.

One FTE is the equivalent of a person working the standard hours for their grade. For the majority of directly employed staff a standard working week is 37.5 hours if full-time. A further definition of FTE is provided in the [Staff directly employed by the NHS Quality Report](#).

Staff groups are determined by the subjective code which is a data item in both the finance general ledger and ESR. It has the same defined list of values which should be applied consistently between both sources.

The percentages in this release are rounded to the nearest 0.1. Percentage point changes are calculated based on the unrounded numbers.

Data quality

These statistics are classed as official statistics that are undergoing a

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development (formerly known as 'experimental statistics'). This means that they are in the testing phase and not yet fully developed.

A number of data quality issues have been identified which are highlighted below and will be worked on in coming months.

1. The methodology has been applied consistently across the majority of NHS organisations. One local health board (Aneurin Bevan) has been unable to supply the number of funded FTE posts through the finance general ledger to date. For the data supplied referring to 30 June 2024, data for the registered nursing, midwifery and health visiting staff group and the nursing, midwifery and health visiting support staff group has been supplied based on 'establishment control' through the ESR. This method is similar to obtaining funded FTE posts through the general ledger and is likely to be broadly comparable to the method used in other NHS organisations. Data for funded posts for all other staff groups has been supplied by asking the departments directly, which is unlikely to be consistent with the method used in all other NHS organisations.
2. In two other health boards (Cwm Taf Morgannwg and Cardiff and Vale) the agreed data collection method has been implemented but has resulted in both organisations reporting a very low number (or a negative number) of vacancies across some staff groups, for some points in time. The number of vacancies reported in these two health boards is potentially under-estimated.
3. Any staff recorded as doctors in training, dentists in training, or pre-registration pharmacists, are not included in this release. There are complexities in counting 'vacancies' of these types of posts as local health boards hold a budget for these staff but the majority will be employed by NHS Wales Shared Services Partnership through the Single Lead Employer scheme. Health boards can also employ staff coded as trainees directly, without being formal trainees through the Single Lead Employer. A method for measuring trainee 'vacancies' is currently being explored and updates will be provided in future statistical releases.
4. There can be a negative number of vacancies or vacancy rate if the number

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of staff in post on ESR exceeds the budgeted number of staff through the finance general ledger. This can happen for a number of reasons including where: an NHS organisation knowingly over-recruits staff, for example where they expect a high turnover of staff; certain non-recurring, short-term/ temporary, or capital funding for posts is not included in the budget for posts on the finance general ledger; staff budgets are allocated to a staff group on the finance general ledger, but in practice the budget is used to fund staff in multiple staff groups; internationally recruited nurses are temporarily recorded as support staff until registered with the Nursing and Midwifery Council.

5. FTE staff in post on ESR do not normally include bank, agency, contractors or other non-payroll staff. This may result in a small over-estimate of the number of vacancies and vacancy rate as there may have been staff delivering services but not recorded on ESR on the reference date.
6. The number of vacancies in the medical and dental staff group may be over-estimated due to differences in how FTEs are counted between the finance general ledger and ESR. A full-time member of this staff group may count as 1 FTE on ESR through their contract defined as 10 sessions per week. However, in practice some staff may work 12 sessions per week and may be recorded as 1.2 FTE on the finance general ledger. This would create a 'vacancy' of 0.2 through this data collection process, but in practice there is no vacancy as the staff member worked longer than their contracted hours.
7. Data for 30 June 2024 does not include the NHS Wales Executive (which is hosted by Public Health Wales); in December 2022 it was estimated that about 180 FTE staff were employed in NHS Wales Executive. It is planned that this will be included in future editions of this statistical release.
8. As staff move posts, updates to FTEs per subjective code may be more timely on the finance general ledger than they are to the staff in post numbers through ESR. Therefore, there may be a small discrepancy in the number of vacancies reported and the actual number of vacancies on the reference date.
9. Not all services within local health boards aim to recruit the full number of

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FTE budgeted staff. Some services may choose to use their staff budget flexibly to deliver their priorities and/or may choose to use their pool of temporary staff (nurse bank, locums, agency) flexibly throughout the year as demands on the service change. Therefore, a small number of reported 'vacancies' are planned in some circumstances.

10. Allocating staff to a subjective code in both the finance general ledger and on ESR involve manual processes and may result in a small number of staff having a mismatch of subjective codes between the two sources.
11. There are likely to be seasonal effects on the number of vacancies and the vacancy rate, which particularly effects 'medical and dental' and the 'registered nursing, midwifery and health visiting' staff groups as newly qualified staff graduate (and become available for recruitment) at set times in the year.
12. Statistics on NHS vacancies are published by the other UK countries: **NHS England** vacancy statistics; **NHS Scotland** workforce statistics; and the **Northern Ireland Health and Social Care** vacancy statistics. All four UK countries use different data collection methods to produce these statistics, reflecting the complex challenge of producing vacancy statistics, and are therefore not directly comparable. NHS England produce four different methods to calculate vacancies and related recruitment information for the NHS in England. Out of all the methods used in the other three UK countries, the NHS England (NHSE) method is most similar to how the data has been collected in Wales and more work is planned to assess the comparability between both of these methods.

Data on **Staff directly employed by the NHS** and **Sickness absence in the NHS** is also published on a quarterly basis. Note that there are differences in how staff groups are defined between these releases.

Workforce data on **general medical practitioners (GPs)** (StatsWales) and **NHS dental practitioners** (StatsWales) are not included in this release and are published separately as they are independent NHS contractors.

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Statement of compliance with the Code of Practice for Statistics

Our statistical practice is regulated by the Office for Statistics Regulation (OSR). OSR sets the standards of trustworthiness, quality and value in the Code of Practice for Statistics that all producers of official statistics should adhere to.

All of our statistics are produced and published in accordance with a number of statements and protocols to enhance trustworthiness, quality and value. These are set out in the Welsh Government's [Statement of Compliance](#).

These official statistics in development demonstrate the standards expected around trustworthiness, quality and public value in the following ways.

Trustworthiness

Quarterly information detailing the number of funded full-time equivalent (FTE) posts as recorded on the finance general ledger and the number of FTE staff in post as recorded on the Electronic Staff Record (ESR) on the last day of the quarter, by staff group is submitted directly from NHS organisations on Excel spreadsheets.

The published figures are compiled by professional analysts using the latest available data and applying methods using their professional judgement and analytical skillset.

These statistics are pre-announced on the [Statistics and Research area of the Welsh Government website](#). Access to the data during processing is restricted to those involved in the production of the statistics, quality assurance and for operational purposes. Pre-release access is restricted to eligible recipients in line with the [Code of Practice \(UK Statistics Authority\)](#).

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Quality

Our statistics are produced to high professional standards and are produced free from any political interference.

Validation checks are performed by Welsh Government statisticians and queries referred to NHS organisations where necessary. Staff groups are determined by the subjective code which is a data item in both the finance general ledger and ESR. It has the same defined list of values which should be applied consistently between both sources.

The statistical release is approved by senior statisticians before publication. Data is published in line with [statement on confidentiality and data access](#) each quarter. All known data quality issues are explained in the quality and methodology section of this release.

Value

The purpose of the statistical release is to inform users about vacancies for staff who would be directly employed by NHS Wales. This information is published alongside data on [staff directly employed by the NHS in Wales](#) and [sickness absence in the NHS](#) to give a more complete picture of the staff directly employed by the NHS workforce.

Statistics are published quarterly with a three-month lag between the reference period of the latest statistics and publication. The statistics are published with brief analysis and commentary, in addition to open data format tables which are published on [StatsWales](#).

You are welcome to contact us directly with any comments about how we meet these standards. Alternatively, you can contact OSR by emailing

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regulation@statistics.gov.uk or via the OSR website.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural wellbeing of Wales. The Act puts in place seven wellbeing goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators (“national indicators”) that must be applied for the purpose of measuring progress towards the achievement of the wellbeing goals, and (b) lay a copy of the national indicators before Senedd Cymru. Under section 10(8) of the Well-being of Future Generations Act, where the Welsh Ministers revise the national indicators, they must as soon as reasonably practicable (a) publish the indicators as revised and (b) lay a copy of them before the Senedd. These national indicators were laid before the Senedd in 2021. The indicators laid on 14 December 2021 replace the set laid on 16 March 2016.

Information on the indicators, along with narratives for each of the wellbeing goals and associated technical information is available in the [Wellbeing of Wales report](#).

Further information on the [Well-being of Future Generations \(Wales\) Act 2015](#).

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local wellbeing assessments and local wellbeing plans.

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