

Specialist Perinatal Mental Health Workforce Census 2024: Frequently Asked Questions

1. Why should I participate in this census?

The purpose of this data collection is to establish a current national workforce position within specialist perinatal mental health services across England.

For 2024, the NHS England Workforce, Training and Education directorate have commissioned the NHS Benchmarking Network (NHSDN) to undertake a second annual census and analysis of the specialist perinatal mental health workforce across England, following on from a successful 2023 iteration.

This second iteration of the census will provide detailed tracking of the specialist perinatal mental health workforce across occupations, so that we can understand the extent to which we are achieving our goals for growth, as well as equality, diversity and inclusion factors. Data will be used to support workforce planning and transformation to support the existing and future workforce and improve the quality of service for patients.

2. Which organisations are in scope?

We would ask that you complete the data collection template in line with specialist perinatal mental health services offered by your organisation. We anticipate submissions from primarily NHS Trusts, but also the independent and VCSE (voluntary, community and social enterprise) sectors are in scope.

3. Which service areas are in scope?

The template includes the following service areas:

- Organisation Information, Service Information, and Peer Support Workers: all organisations to complete.
- Four Inpatient tabs: to be completed by organisations delivering care in **Mother and Baby inpatient units**
- Four Community tabs: to be completed by organisations delivering care in **specialist community perinatal mental health services**
- Four MMHS tabs: to be completed by organisations delivering care in **maternal mental health services**

Do not include staff employed by other organisations working within your organisation as part of a service agreement - these staff should be captured by the relevant employing organisation. Only include staff in the census that are directly employed by your organisation.

4. What if staff work across more than one service area included in the census?

If staff work across multiple settings, please apportion their time in line with the time they spend in each service. Please provide details in the comments tab.

5. What if staff only spend some of their time working in services within the scope of this census?

If staff only spend some of their time working on services within the scope of the project, please complete their WTE to reflect how much time they spend working on those services – e.g., in this case, their WTE would be counted as part-time, so if only working 1 day a week, it would be 0.2 WTE.

6. Which trainees should I include in this census?

The job roles within in the census include relevant trainee roles.

7. Which staff should be included this census?

Please include all staff in post as per the definition for 'In post WTE' on the data template. Please exclude those on career breaks and maternity leave, however those on sick leave should be included.

8. Staff in my service have retired and returned, how should I record them as leavers?

Please use the 'retired' category to record the apportioned WTE which is lost to service, the WTE currently worked would be included in staff in post.
For example: 1 full time staff member retired and is now working 2 days per week
Workforce tab – In post WTE = 0.4, Metrics tab – Leavers WTE (Retired) = 0.6

9. My service is overstaffed in some roles, how do I record this?

We are able to accept negative vacancies in the instance that staff in post is higher than funded establishment. This will be flagged in validation so please include a note in the comments tab.

10. How should I include leavers and staff retention if a staff member changes role?

Please include staff who have left their role and moved to a different role within the same organisation, as a leaver. Please include in the category of remained within NHS commissioned services.

11. The services provided by my Trust, LA, Independent provider, VCSE cover two ICS's, should I produce one return for the Trust as a whole or split the returns in two?

You should submit one return per organisation for adults and one for CYP services. If your team provides services across multiple ICSs, please provide details of the top 5 including an estimate of your service provision you provide to each. For example, if you provide services across three ICSs with most of your services related to one ICS and a small amount to two others the proportion might look like 80%, 10%, 10%. Please state any supporting information in the relevant narrative question.

12. I have a small team and am worried that due to this we will be identifiable, especially through our demographics. Can you confirm that the data I will be submitting will not be used or shared in a way that can make my team or me identifiable?

Data that is made publicly available is anonymised and/or aggregated. No individual staff member or individual organisation will be identifiable.

13. How is my data being protected?

Data that we receive is encrypted at rest and in transit and backed up to the cloud. All data in the cloud is within the EU. All of our resources are password-protected and require appropriate permissions and circumstances to obtain access.

14. I am unable to meet the deadline of the 24th of May what support is there for me?

The deadline of the 24th of May is in place to enable us to provide validated outputs to NHSE WT&E and providers within a timely manner on the Specialist Perinatal Mental Health workforce. The outputs will include analysis at national, regional, and local level, raising their profile, and enabling the tracking of progress, with implications on future investment and workforce planning conversations. If your organisation has any difficulties meeting the deadline, please reach out to us at nhsbn.perinatal@nhs.net and we will work with you directly to accommodate an extension to the deadline to support a submission.

- Support we have in place:
- We have an email address (nhsbn.perinatal@nhs.net) for any queries and concerns.
- Launch event on Wednesday 10th April 10:00 – 10:45, link available [here](#).
- This regularly updated Frequently Asked Questions document.
- Drop-in sessions taking place weekly across the data collection period, available on the [project webpage](#).

15. How do I account for staff employed via an SLA?

Our general guidance is to only include staff that are directly employed by your organisation to prevent double counting, but in the instance of an SLA, please also include these staff members in your return. If, for example, your organisation delivers MMHS using staff from both a mental health trust and an acute trust, please include these staff members in your return. If you have any queries, please don't hesitate to contact us.

16. What is the difference between Nurse Registered General and Nurse Registered Adult?

There is no difference between these two roles. Nurse Registered General is the historical job role name, and Nurse Registered Adult is the current job role name. We will merge these two roles together during the validation and analysis stage of the project.