

Health Education England NHS Talking Therapies for Anxiety and Depression Workforce Census

National Report
January 2023

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We would also like to thank Julian Emms, Chair of the NHSBN Mental Health Reference Group, for his ongoing support for this project and the wider Health Education England workstream.

Additionally, we are grateful for the contribution made by the project oversight group, inclusive of representatives from NHS England, who were instrumental in shaping the 2022 national and regional findings.

Finally, we would like to thank the services who participated in the project this year, with 200 submissions received from 100% of CCG areas in England (as of 31st March 2022, prior to dissolution), thus allowing a national position to be established.

Introduction to NHS Talking Therapies for Anxiety and Depression (previously known as IAPT)

The NHS Talking Therapies for Anxiety and Depression (previously known as Improving Access to Psychological Therapies - IAPT) programme began in 2008 and has transformed the treatment of adult anxiety disorders and depression in England. NHS Talking Therapies is widely-recognised as the most ambitious programme of talking therapies in the world and in 2020-21 more than one million people accessed NHS Talking Therapies services for help to overcome their depression and anxiety, and better manage their mental health.

NHS Talking Therapies services provide evidence-based treatments for people with depression and anxiety disorders, and comorbid long-term physical health conditions (LTCs) or medically unexplained symptoms (MUS). NHS Talking Therapies services are characterised by three key principles:

1. Evidence-based psychological therapies at the appropriate dose: where NICE recommended therapies are matched to the mental health problem, and the intensity and duration of delivery is designed to optimise outcomes.
2. Appropriately trained and supervised workforce: where high-quality care is provided by clinicians who are trained to an agreed level of competence and accredited in the specific therapies they deliver, and who receive weekly outcomes focused supervision by senior clinical practitioners with the relevant competences who can support them to continually improve.
3. Routine outcome monitoring on a session-by-session basis, so that the person having therapy and the clinician offering it have up-to-date information on the person's progress. This helps guide the course of each person's treatment and provides a resource for service improvement, transparency, and public accountability.

Services are delivered using a stepped-care model, which works according to the principle that people should be offered the least intrusive intervention appropriate for their needs first. Many people with mild to moderate depression or anxiety disorders are likely to benefit from a course of low intensity treatment delivered by a psychological wellbeing practitioner (PWP). Individuals who do not fully recover at this level should be stepped up to a course of high intensity treatment. Further details about NHS Talking Therapies services can be found in the [NHS Talking Therapies Manual](#).

Introduction to NHS Talking Therapies - workforce roles

The NHS Talking Therapies workforce consists of low intensity practitioners and high intensity therapists who together deliver the full range of NICE-recommended interventions for people with mild, moderate and severe depression and anxiety disorders, operating within a stepped-care model. Guidance suggests working towards a model where 35% of the workforce in a core NHS Talking Therapies service should be PWPs and 65% high intensity therapists. For NHS Talking Therapies-LTC services, it is recommended that there is a slightly stronger focus on high intensity interventions with the workforce being 30% PWPs, 60% high intensity therapists and 10% senior therapists (such as clinical health psychologists) who have expertise in Long Term Conditions/Persistent Physical Symptoms and can manage more complex problems as well as providing supervision to others. All current NHS Talking Therapies curricula and training materials can be found on the [NHS Talking Therapies section of the HEE website](#).

Low intensity workforce

Psychological wellbeing practitioners (PWPs) deliver low intensity interventions for people with mild to moderate depression and anxiety disorders. All PWPs should have completed an NHS Talking Therapies training course or be in the process of doing so, with linked professional registration with the relevant professional body following training. The core NHS Talking Therapies low intensity courses for PWPs are accredited by the British Psychological Society. PWPs are required to be registered with either the British Psychological Society or the British Association for Behavioural and Cognitive Psychotherapies (BABCP). PWPs who work with LTC services are also expected to have completed the relevant NHS Talking Therapies continuing professional development (CPD) course for working with LTCs.

High intensity workforce

High intensity therapists deliver a range of NICE-recommended evidence-based therapies. Therapists need to have been trained in the particular therapy or therapies that they deliver in NHS Talking Therapies, with linked professional accreditation with the relevant professional body. NICE recommends cognitive behavioural therapy (CBT) for anxiety disorders and six different high intensity therapies for depression (CBT, interpersonal psychotherapy, brief psychodynamic therapy, counselling for depression, couple therapy, and mindfulness based cognitive therapy). NICE recommends both trauma focused CBT and eye movement desensitisation and reprocessing for post-traumatic stress disorder.

Project background

The NHS Benchmarking Network was re-commissioned by Health Education England (HEE) to deliver the NHS Talking Therapies for Anxiety and Depression workforce census for 2022. The census is a detailed workforce stocktake involving NHS Talking Therapies services from all CCG areas in England (as of 31st March 2022, prior to dissolution), inclusive of both NHS and non-NHS organisations.

The NHS Benchmarking Network (NHSBN) is the in-house benchmarking service of the NHS, hosting wide ranging work programmes covering commissioning, community healthcare, acute and mental health sectors. NHSBN is a membership organisation that includes all statutory mental health providers in England as well as national bodies such as the Department of Health and Social Care, NHS England, and Health Education England.

The Adult NHS Talking Therapies workforce census is now in its fourth annual project cycle and continues to provide a snapshot of the size and shape of NHS Talking Therapies service staffing in England as of 31st March. Throughout this report comparisons will be drawn between the four census dates – 2019 (30th June census date), 2020, 2021 and 2022. To note, there have been several changes to terminology/job role categorisations within the latest census, with the introduction of additional roles such as lead PWP, along with the removal of applied psychologists, with services instead asked to include these staff within their specific modalities.

The aim of this work is to provide a detailed profile of the NHS Talking Therapies workforce and service delivery including:

- Service provision and activity
- Therapy modality capacity
- Adoption of digital technologies
- Workforce size and composition
- Workforce demographics
- Vacancies and temporary staffing

200 data submissions were received from services spanning all CCG areas in England (configuration as of 31st March 2022, prior to dissolution). 65% of submissions were returned by NHS services (130 returns) with the remaining 70 returns received from non-NHS services.

Two services who participated in the project in 2021 were unable to provide data for their equivalent positions as of 31st March 2022. Their 2021 workforce positions have been included within the latest findings in order to allow for accurate year-on-year comparisons, with the presumption of zero growth evidenced over the past twelve months.



The NHS Talking Therapies workforce in summary as of 31st March 2022



38% increase in staff (WTE) working within NHS Talking Therapies services between 30th June 2019 and 31st March 2022 – 4% growth evidenced from 2021 to 2022



200 data submissions received, spanning 100% of CCG areas in England (as of 31st March 2022)



2,979 trainees (WTE) in post; a 12% increase from the 2021 census position



Qualified high intensity therapists* comprised 4,317 staff (WTE) – 38% of the 2022 NHS Talking Therapies workforce nationally (excluding trainees)



Between 2021 and 2022, qualified psychological wellbeing practitioner** staff numbers (WTE) rose by 6%



Ratio of 39% qualified PWPs reported to 61% qualified HITs



80% of NHS Talking Therapies staff are from a White ethnic background compared to 83% of wider UK population. 20% from Black, Asian, Mixed, Chinese and other ethnic minority backgrounds



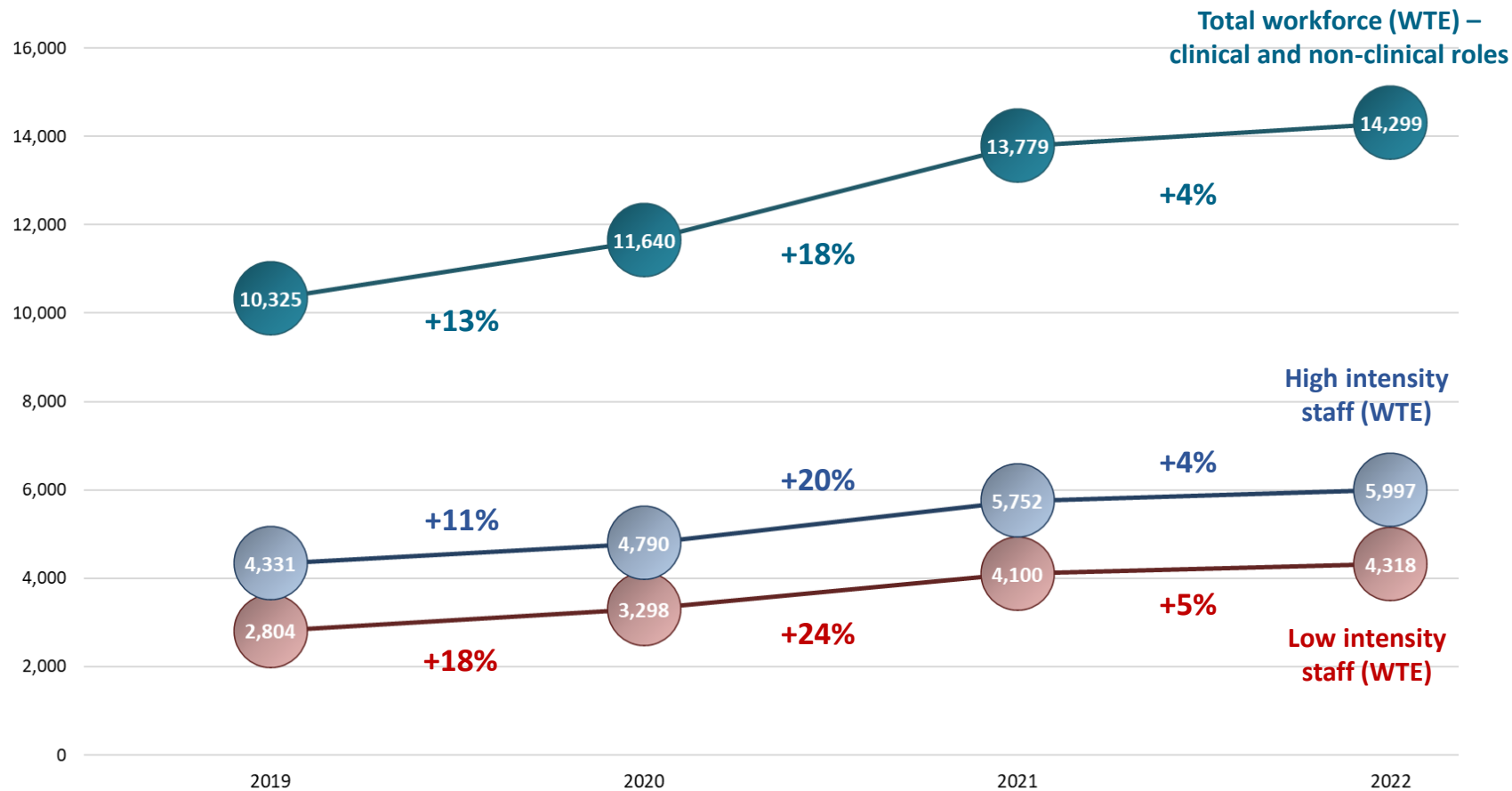
13% leaver rate reported in 12 months to 31st March 2022 (10% in 12 months to 31st March 2021). 39% of leavers were confirmed as no longer working in NHS-commissioned NHS Talking Therapies services

*Qualified high intensity therapists: qualified HITs – CBTs and other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors)

**Qualified psychological wellbeing practitioners: qualified PWPs, senior PWPs and lead PWPs



National NHS Talking Therapies workforce overview - timeseries



The adjacent chart illustrates the growth in the adult NHS Talking Therapies Workforce nationally from the commencement of the workforce benchmarking series in 2019, through to the latest position as of 31st March 2022.

On the census date of 31st March 2022, there were 14,299 staff (WTE) in post (across clinical and non-clinical workforce roles) reported by 200 services. Though this represents a 4% increase from the 2021 position, it does not align with the heightened levels of growth evidenced in previous years.

5,997 staff (WTE) were reported within high intensity roles, also marking a 4% uplift from 2021 figures.

The low intensity workforce comprised 4,318 staff (WTE) in 2022, representing an increase of 5% from 2021.



National NHS Talking Therapies workforce overview 2019-2022

	2019	2020		2021		2022		Cumulative change (2019-2022)
	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	
Low intensity staffing total	2804	3298	18%	4100	24%	4318	5%	54%
High intensity staffing total	4331	4790	11%	5752	20%	5997	4%	38%
Total low and high intensity staff	7135	8088	13%	9852	22%	10315	5%	45%
Employment support Total	360	363	1%	373	3%	353	-5%	-2%
Additional roles Total	374	390	4%	269	-31%	264	-2%	-29%
Total patient-facing staff	7869	8841	12%	10493	19%	10933	4%	39%
Total non-patient facing roles	2456	2799	14%	3287	17%	3366	2%	37%
Total staffing in IAPT services	10325	11640	13%	13779	18%	14299	4%	38%

The above table illustrates the change in the national NHS Talking Therapies workforce from 30th June 2019 to 31st March 2022, categorised by overarching staff groups, with more granular breakdowns by individual job role demonstrated on subsequent pages. All figures relate to Whole Time Equivalent (WTE) data, unless stated.

Between 2019 and 2022, total staff numbers (WTE) working within NHS Talking Therapies services across England have risen by 38%; comprised of a 39% increase in patient-facing staff, and a 37% uplift in non-patient facing roles. Though there have been notable increases in staff numbers across both the high and low intensity workforce, low intensity posts have undergone the largest increase of these staff groups, demonstrating 54% growth from 2019 to 2022.



National NHS Talking Therapies workforce overview 2019-2022 – breakdown by role (1)

	2019	2020		2021		2022		Cumulative change (2019-2022)
Qualified and trainee low intensity	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	
Psychological wellbeing practitioner	1713	1747	2%	2149	23%	2225	4%	30%
Senior psychological wellbeing practitioner	314	350	11%	431	23%	428	17%	60%
Lead psychological wellbeing practitioner						74		
Qualified PWP's subtotal	2028	2097	3%	2580	23%	2728	6%	35%
Low intensity trainees (e.g. Trainee psychological wellbeing practitioner)	777	1201	55%	1520	27%	1590	5%	105%
Qualified and Trainee low intensity Total	2804	3298	18%	4100	24%	4318	5%	54%
High intensity								
CBT Therapists		2762		3331	21%	3387	2%	23%*
Other High Intensity Therapists	2804	304	9%	243	-20%	292	20%	-4%*
Counsellors	801	855	7%	1006	18%	929	-8%	16%
Applied psychologist - Clinical	216	155	-28%	112	-28%			-
Non-trainee HIT Therapists subtotal	3822	4077	7%	4692	15%	4609	-2%	21%
High intensity trainees (e.g. Trainee CBT therapist / trainee counsellor e.g. CfD/IPT)	509	714	40%	1060	48%	1389	31%	173%
High intensity Total	4331	4790	11%	5752	20%	5997	4%	38%
Total low and high intensity staff	7135	8088	13%	9852	22%	10315	5%	45%

*: 2020 – 2022 cumulative change

Workforce numbers are broken down above and over the next three pages by job role, with new categorisations shown in green text. Lead psychological wellbeing practitioner was an additional categorisation included for the first time in 2022, with 74 staff (WTE) reported in this role. Though this has led to a small decrease in the number of senior psychological wellbeing practitioners reported, when the two categorisations are collated, this resulted in a 17% annual increase in senior/lead PWP numbers (based on assumption that lead PWP's would have sat within senior PWP categorisation between 2019 and 2021). Overall, qualified PWP staff numbers underwent a 6% increase annually, with a 35% cumulative increase evident between the 2019 and 2022 census dates.



National NHS Talking Therapies workforce overview 2019-2022 – breakdown by role (2)

To allow for greater granularity, CBT therapists have been split out from other high intensity therapists within this workforce timeseries breakdown (based on *assumption that anyone in high intensity therapists (HITs) categorisation in year 1 would go into one of either CBT therapists or other high intensity therapists categorisations from year 2 onwards*). This does, however, remove the capability to compare cumulative 2019 to 2022 positions, and so it is worth noting that the cumulative change positions for these roles instead relate to 2020 (not 2019) to 2022 comparisons.

As highlighted within the project background information, several changes to terminology/job role categorisations were made for the 2022 data specification template, particularly in relation to high intensity roles such as other high intensity therapists, which have been categorised as follows over the project timeseries to date:

- 2019: included within totality of high intensity therapists
- 2020 and 2021: segregated as other high intensity therapists – both NHS Talking Therapies and non-NHS Talking Therapies accredited
- 2022: segregated as other high intensity therapists (not recognised by NHS Talking Therapies)

Additionally, the previously utilised applied psychologist categorisation was removed from the 2022 data specification, with services instead asked to include these staff within their specific modalities.

When non-trainee HIT therapist numbers are reviewed in their totality, a 21% increase in staff numbers is evident from the 2019 to 2022 census dates.

Overall, low and high intensity staff numbers increased by circa 45% between 2019 and 2022; rising from 7,135 staff (WTE) to 10,315 staff (WTE) on 31st March 2022.

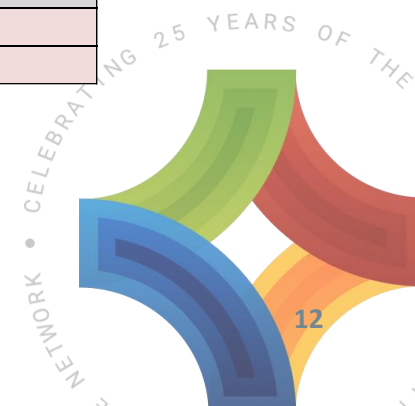


National NHS Talking Therapies workforce overview 2019-2022 – breakdown by role (3)

	2019	2020		2021		2022		
Employment Support	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Employment support advisor	188	264	41%	300	13%	288	-5%	-2%
Senior employment support advisor						65		
Externally contracted employment advisor/coordinator	172	99	-43%	73	-26%			
Employment Support Total	360	363	1%	373	3%	353	-5%	-2%
Additional roles								
Psychological wellbeing practitioner (not NHS Talking Therapies qualified or in NHS Talking Therapies training)						37	-	-
Other low intensity worker e.g. assistant PWP						186	-	-
PWP workers (not NHS Talking Therapies qualified)	155	280	81%	198	-29%			-
Other low intensity counsellors	73							-
Other low intensity therapists	78							-
Other low intensity staffing subtotal	306	280	-8%	198	-29%	223	13%	-27%
Other trainees	68	110	62%	71	-36%			-
Peer support worker (paid)						41	-	-
Additional roles Total	374	390	4%	269	-31%	264	-2%	-29%
Total patient-facing staff	7869	8841	12%	10493	19%	10933	4%	39%

The senior employment support advisor role represents a further addition to the 2022 data specification, which has likely impacted employment support advisor numbers with some staff previously categorised here now likely placed within this new role. Overall, employment support staff numbers have undergone a 5% reduction between 2021 and 2022, with 353 staff (WTE) in post on the latest census date.

Further, additional low intensity roles were reclassified for 2022, with 13% growth evidenced by this staff cohort in the 12-month period. Staff numbers (WTE) within the overarching additional roles categorisation have remained largely in line with 2021 figures, though it is worth noting that this finding is heavily impacted by the removal of the previously utilised other trainee category. Other trainees accounted for 71 staff (WTE) during 2021, though this category was removed within the 2022 specification with services asked to categorise trainees into either low/high intensity roles.



National NHS Talking Therapies workforce overview 2019-2022 – breakdown by role (4)

	2019	2020		2021		2022		
Non-patient facing roles <i>Including time spent by clinical staff providing supervision</i>	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Supervisors - NHS Talking Therapies supervisor trained	540	782	45%	929	19%	981	6%	82%
Supervisors - supervisors who have not undertaken NHS Talking Therapies supervision module/training	137	66	-52%	70	6%	51	-27%	-63%
Management / leadership roles	438	500	14%	789	58%	815	3%	86%
Admin and clerical staff inc. data analysts	1019	1189	17%	1270	7%	1360	7%	33%
Other job roles	322	261	-19%	228	-13%	159	-30%	-51%
Total non-patient facing roles	2456	2799	14%	3287	17%	3366	2%	37%
Total staffing in NHS Talking Therapies services	10325	11640	13%	13779	18%	14299	4%	38%

95% of staff (WTE) time allocated to supervisory roles/duties was comprised of supervisors who had undertaken NHS Talking Therapies supervisory training. There has been a steady decline in the number of supervisors who have not undertaken the NHS Talking Therapies supervision module/training since the project inception in 2019, with numbers reducing cumulatively in that time by 63% - from 137 to 51 staff (WTE).

Other job roles accounted for a small proportion of NHS Talking Therapies workforce numbers, totalling 159 staff (WTE) on 31st March 2022. Responses by services detailed various roles categorised within this cohort, ranging from marketing/communications positions to referral co-ordinators.

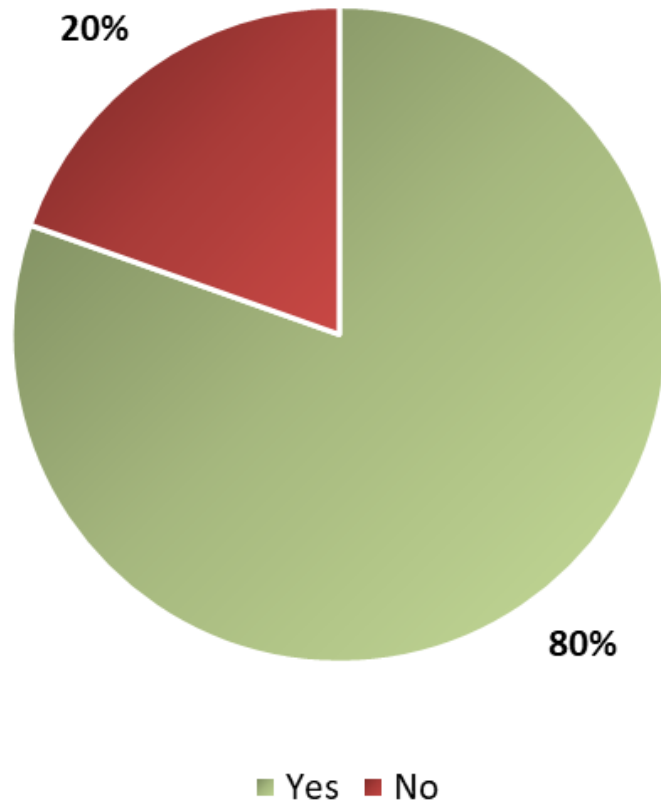
As previously described, when viewing NHS Talking Therapies workforce numbers in their totality, staff levels have increased by 4% between the 2021 and 2022 census dates. Since the workforce benchmarking series commenced in June 2019, NHS Talking Therapies services have seen a 38% cumulative increase nationally.

Project findings

NHS Talking Therapies service provision and activity

NHS Talking Therapies-LTC

Do you provide NHS Talking Therapies-LTC?



80% of respondents to this metric confirmed an NHS Talking Therapies-LTC offer, comprising 156 of 194 responses. NHS Talking Therapies-LTC services aim to allow improved access to NHS Talking Therapies treatments for patients with long term physical health conditions.

Coverage has increased between the 2021 and 2022 census dates, with 72% of services confirming an NHS Talking Therapies-LTC offer in 2021, compared to 80% in 2022.



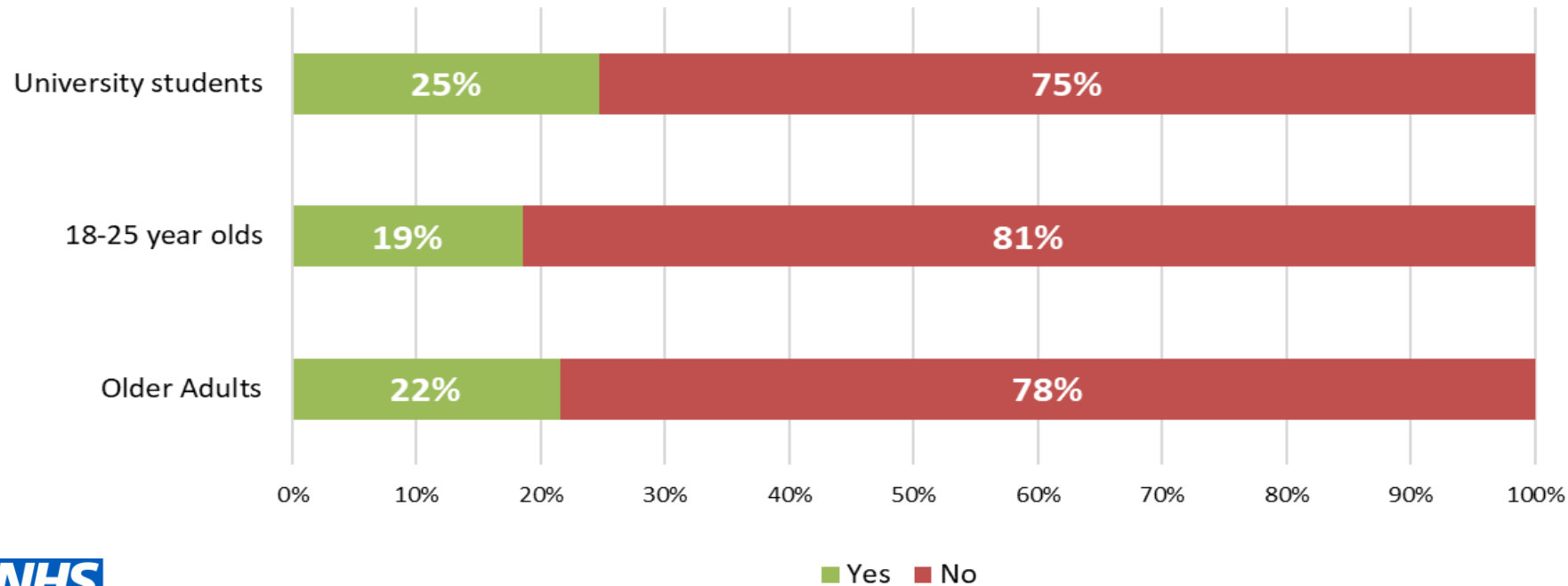
Service provision – access

In addition to capturing data regarding the composition of the adult NHS Talking Therapies workforce nationally, the census also included metrics relating to the wider service offer, for example, the provision of tailored pathways for patients within specific cohorts such as university students, 18-25 year olds, and older adults aged 65+.

As of 31st March 2022, 19% of NHS Talking Therapies services reported specific pathways for 18-25 year olds, marking a continued year-on-year increase from the 15% proportion of services who confirmed these pathways were in place in 2020.

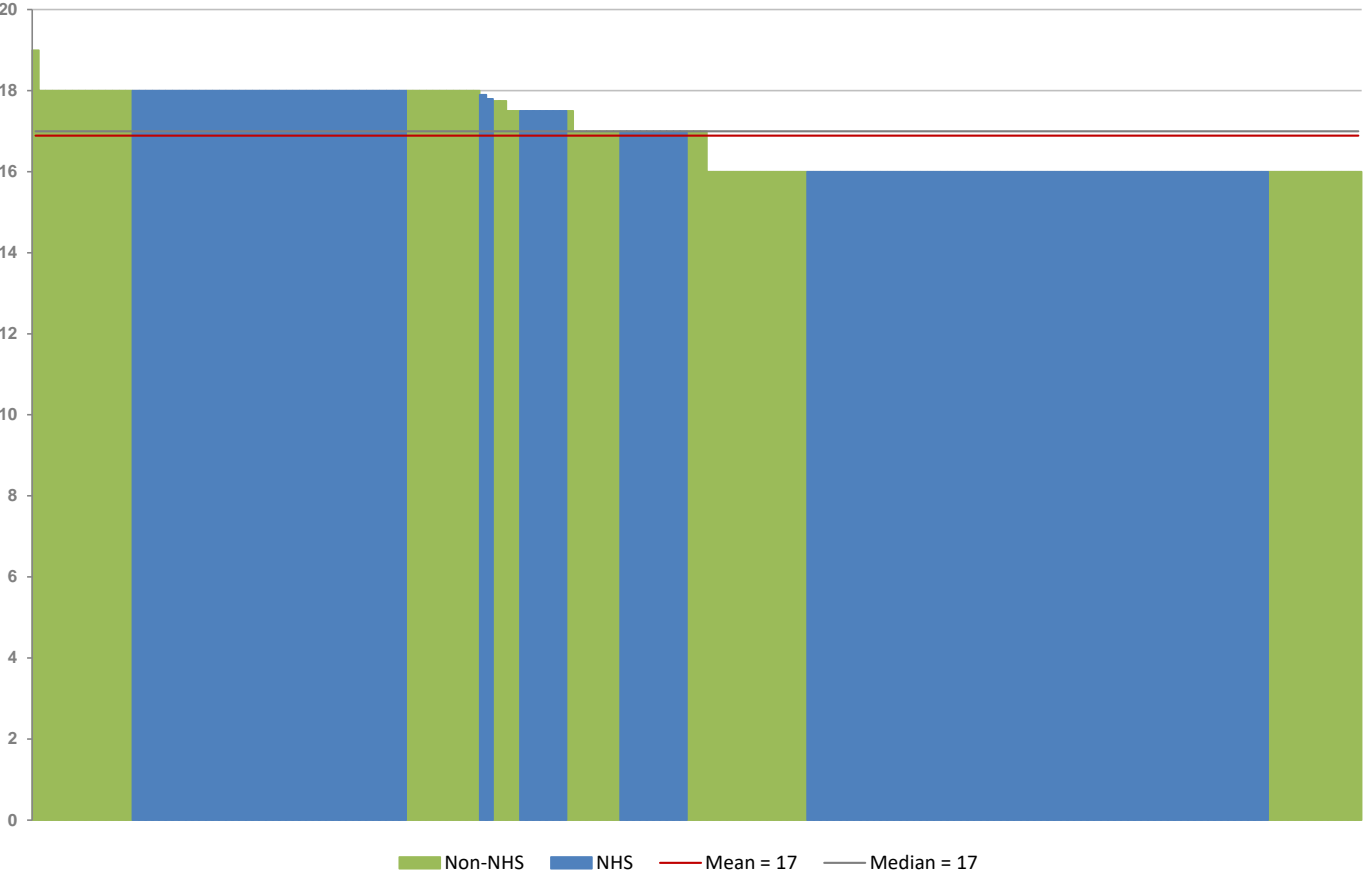
Specific pathways for university students were reported by 25% of services, with university services nationally often having links, or sharing a location, with student medical centres. For the older adult cohort (patients aged 65+), 22% of services reported a specific pathway in place.

It is worth noting that these metrics relate solely to the provision of specific pathways, rather than indicating the absence of services delivering care to patients within these age groupings, with designated lower/upper age criteria for services detailed on the following page.



Age restrictions

Lower age limit for services



As in previous iterations of the census, the majority of NHS Talking Therapies services reported a lower age criteria of between 16 and 18 years of age. The breakdown of respondents by lower age limit is as follows:

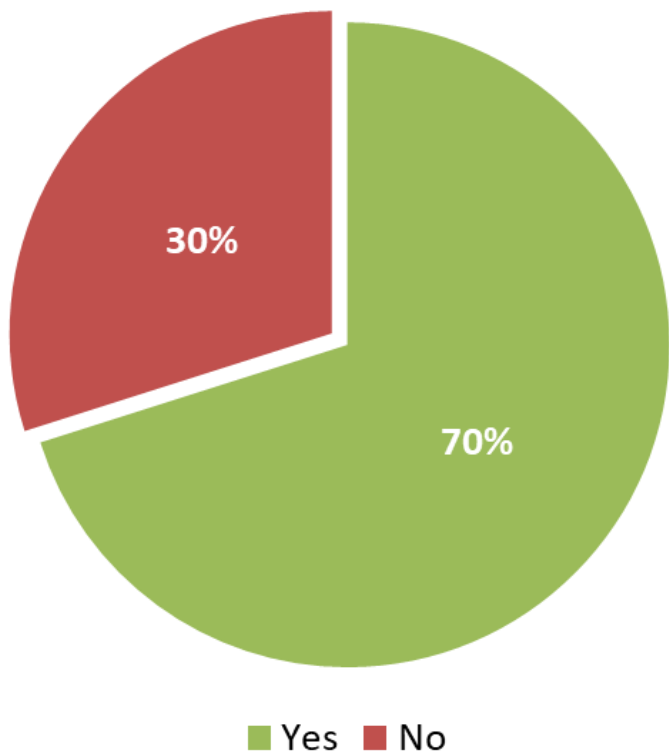
- 16 years of age: 98 services
- 17 years of age: 34 services
- 18 years of age: 66 services

Most services reported an absence of upper age limitations. Those who did report an upper age boundary for services typically stipulated a maximum age criteria of 90 to 100 years of age.



Therapy in languages other than English

Do any of your staff provide therapy in languages other than English (including sign language)?



70% of services confirmed that staff provided therapy to patients in languages other than English, marking an increase from the 66% reported in 2021.

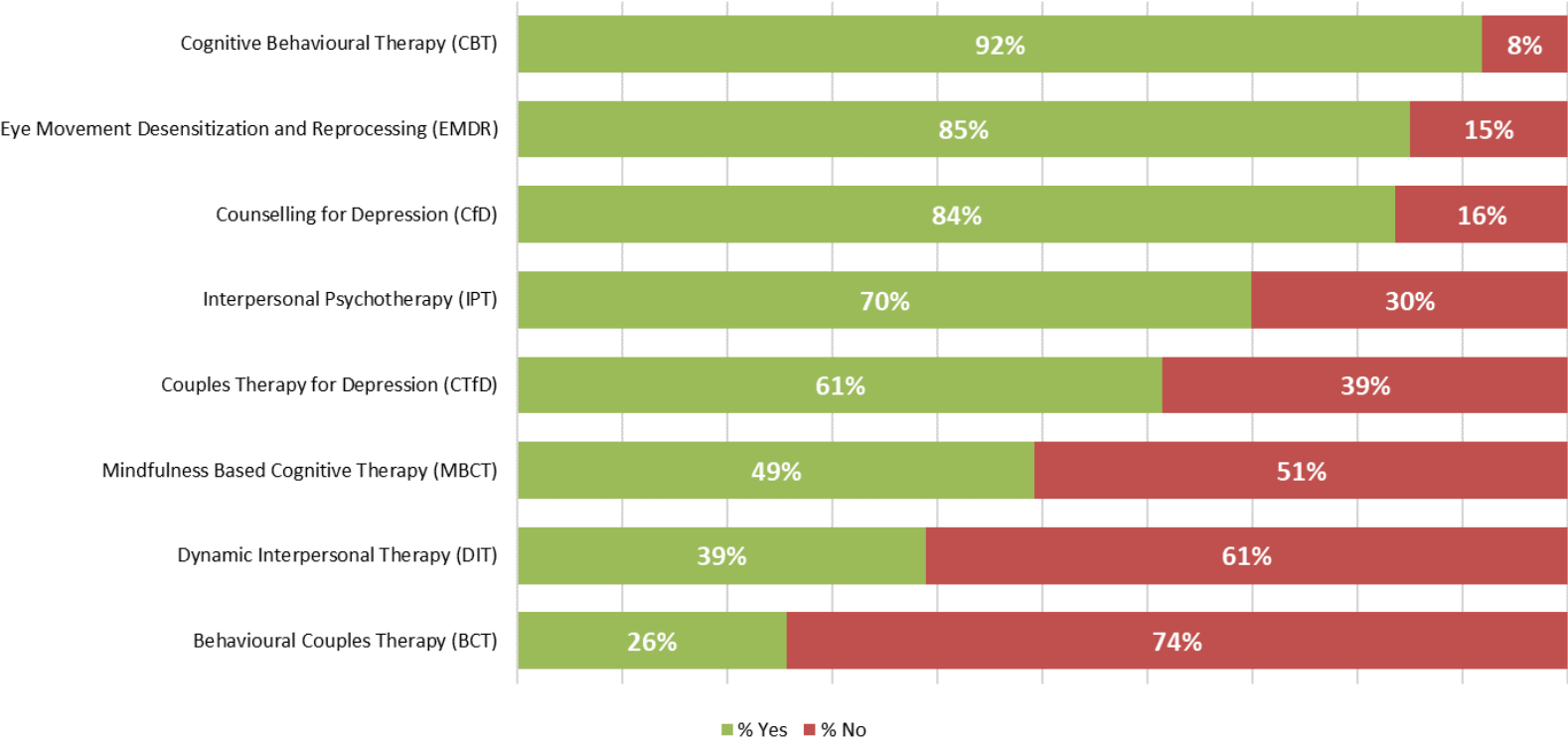
Many services specified several languages (including sign language), with those with the highest provision detailed below:

- Urdu – 44 services
- Polish – 42 services
- Punjabi – 35 services
- French – 26 services
- Spanish - 22 services
- British Sign Language – 12 services
- Farsi – 11 services

It is worth noting that this metric has a degree of fluidity, as it is influenced by the staff in post on the snapshot date each year.

Therapeutic offer

Therapeutic Offer



This chart details the therapeutic offer delivered by NHS Talking Therapies qualified and/or accredited staff, excluding trainees, as of 31st March 2022.

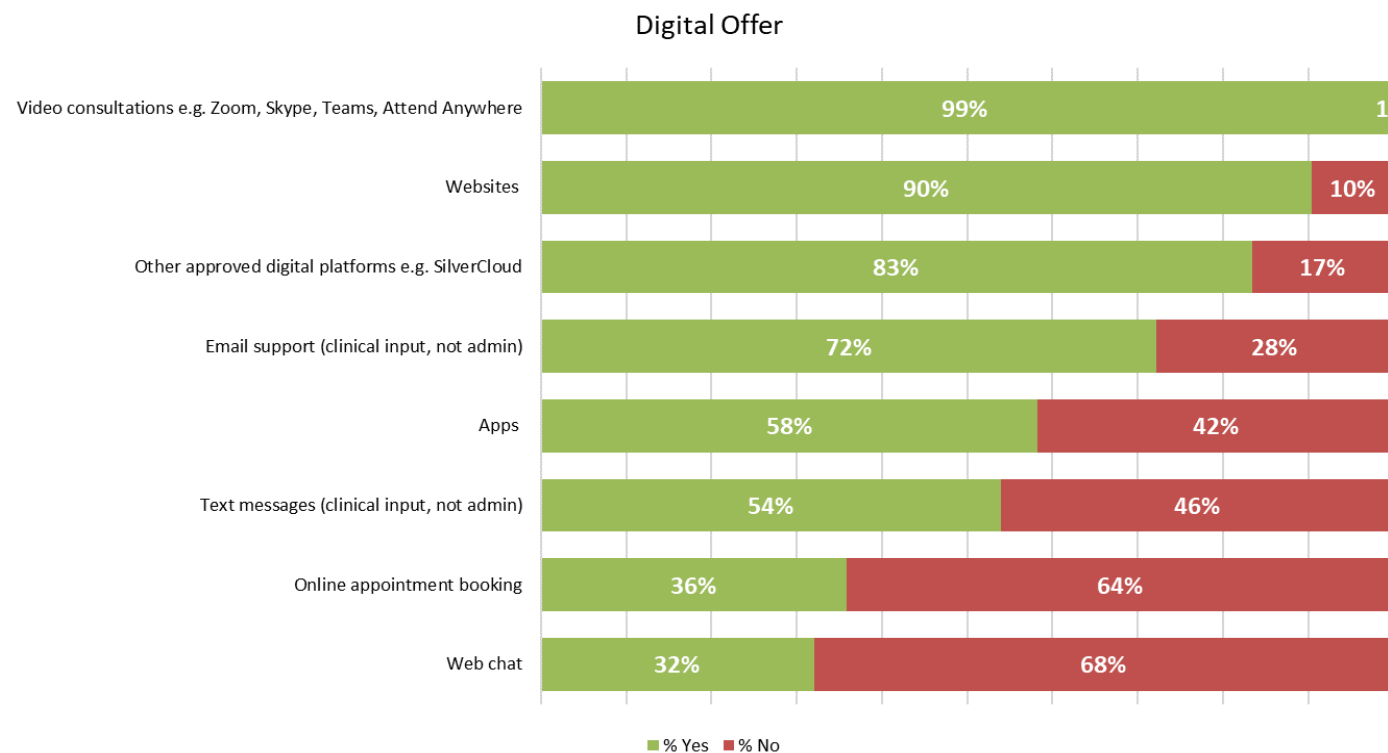
As in previous years, cognitive behavioural therapy was the most commonly offered therapy nationally, provided by 92% of respondents to this metric.

Additionally, eye movement desensitization and reprocessing (EMDR) and counselling for depression (CfD) were offered by the majority of services – 85% and 84%, respectively.

It is worth noting that the proportion of NHS Talking Therapies services offering counselling for depression (CfD) has continued to rise, from 79% in 2020 to 84% in 2022.



Digital offer



As reported within wider mental health services nationally, the Covid-19 pandemic necessitated a swift, widespread adoption of digital tools by NHS Talking Therapies services, in response to the restrictions in patient access to face-to-face care.

The adjacent chart displays the variety in digital offers reported by NHS Talking Therapies services during 2022, following the lifting of national restrictions which were still in place to various extents over the two previous census dates (2020 and 2021).

With increasing numbers of patients now returning to in-person care settings, apps and other approved digital appointment platforms, such as Silvercloud, have seen a decrease in utilisation between 2021 and 2022 (apps = 62% in 2021 vs 58% in 2022, other approved digital platforms = 86% in 2021 vs 83% in 2022).

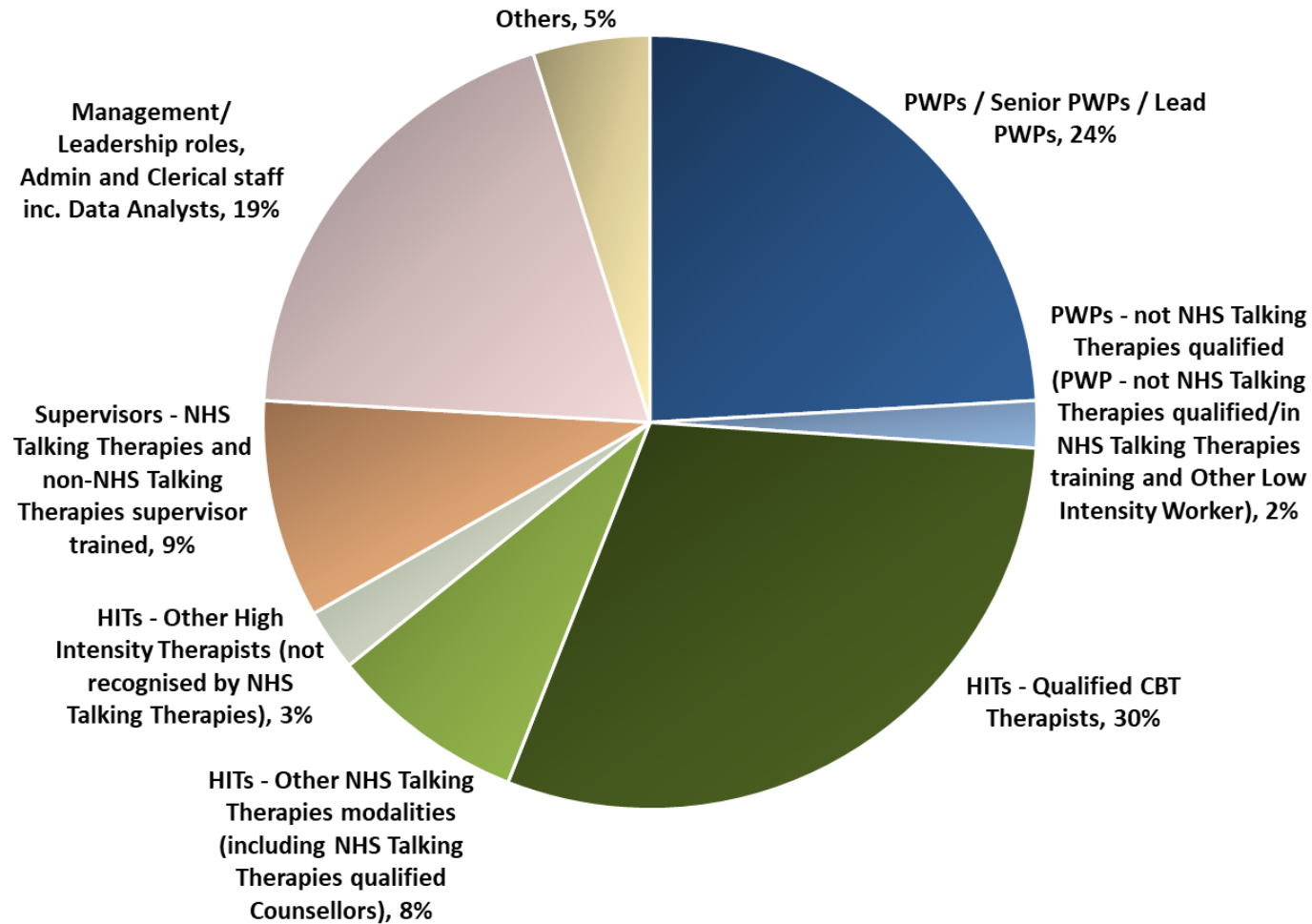
In contrast, online appointment booking systems have seen an increase in service adoption, with 36% of respondents utilising this technology to support individuals in 2022, compared to 25% during 2021.

An increase in the use of text messaging (clinical input) was also evidenced in the 2022 dataset, with utilisation nationally increasing from 49% in 2021 to 54% in 2022.

Project findings

Workforce profile

Workforce composition (WTE)



Though NHS Talking Therapies workforce numbers have undergone notable growth between 2019 and 2022, the workforce composition has remained relatively static.

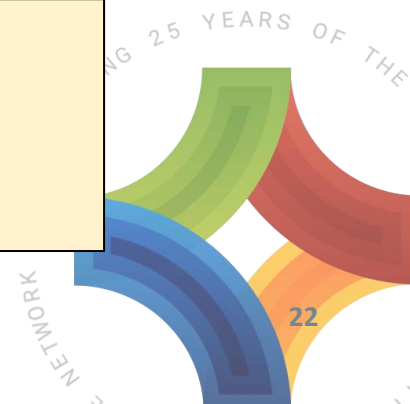
As in previous years, analysis into the composition of the NHS Talking Therapies workforce confirmed the majority of staff (WTE) work within therapeutic roles.

67% of the workforce (excluding trainees) were made up of clinical staff, including non-NHS Talking Therapies qualified PWPs and other HITs not recognised by NHS Talking Therapies. This non-NHS Talking Therapies qualified/not NHS Talking Therapies recognised subgroup covers 5% of staff numbers overall, with qualified clinical staff (recognised by NHS Talking Therapies) comprising 62% of the reported workforce.

In line with last year's figures, 19% of staff were employed within managerial/leadership, administrative or clerical roles.

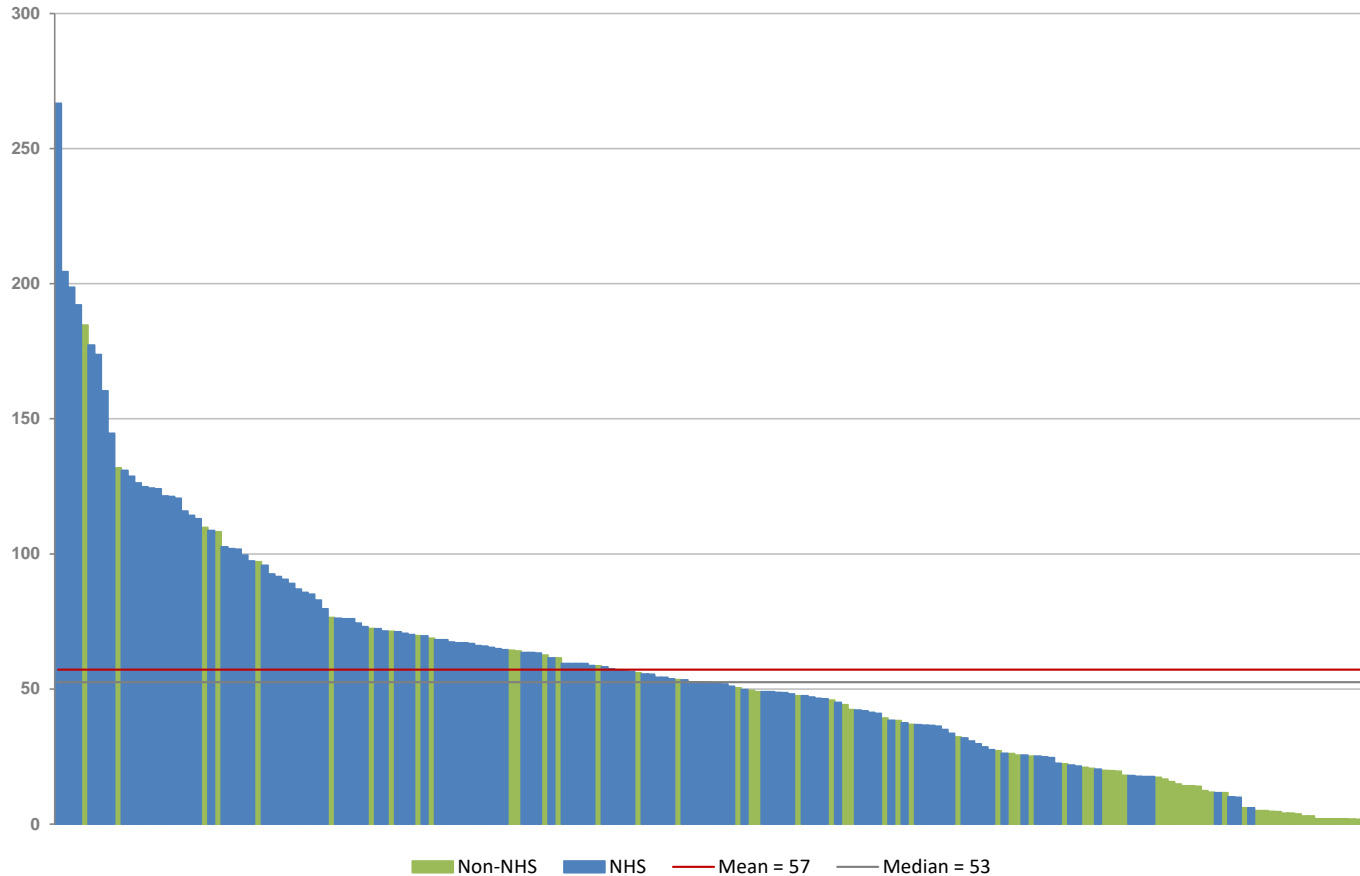
"Others" include:

- Employment support advisor and senior employment support advisor: 3%
- Other: 1% - *e.g. marketing/communications positions, referral coordinators etc.*
- Peer support worker: 0.4%



Workforce size by service

Total Staffing (WTE) - excluding trainees



This chart illustrates the total NHS Talking Therapies staffing numbers (WTE), excluding trainees, reported per service.

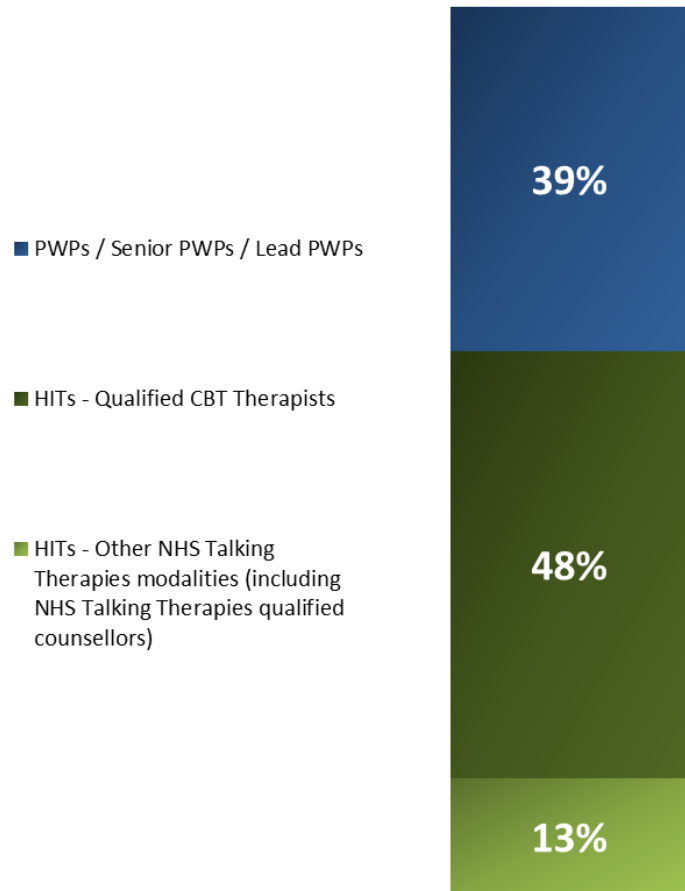
2022 census data demonstrated a median average position of 53 staff (WTE) per service. This represents a continuation of the growth evidenced since 2019, with the median position rising from 42 staff (WTE) in 2019 to 53 staff (WTE) within the most recent dataset.

Services reported notable variation in their workforce size, with services placing in the upper quartile reporting team sizes in excess of 100 staff (WTE).

To note, this position is not benchmarked, and is included to demonstrate the wide range of staffing numbers per service reported on the census date.

Workforce composition – qualified HITs vs PWPs

Workforce Composition
Qualified HITs vs PWPs



The adjacent chart demonstrates the split between:

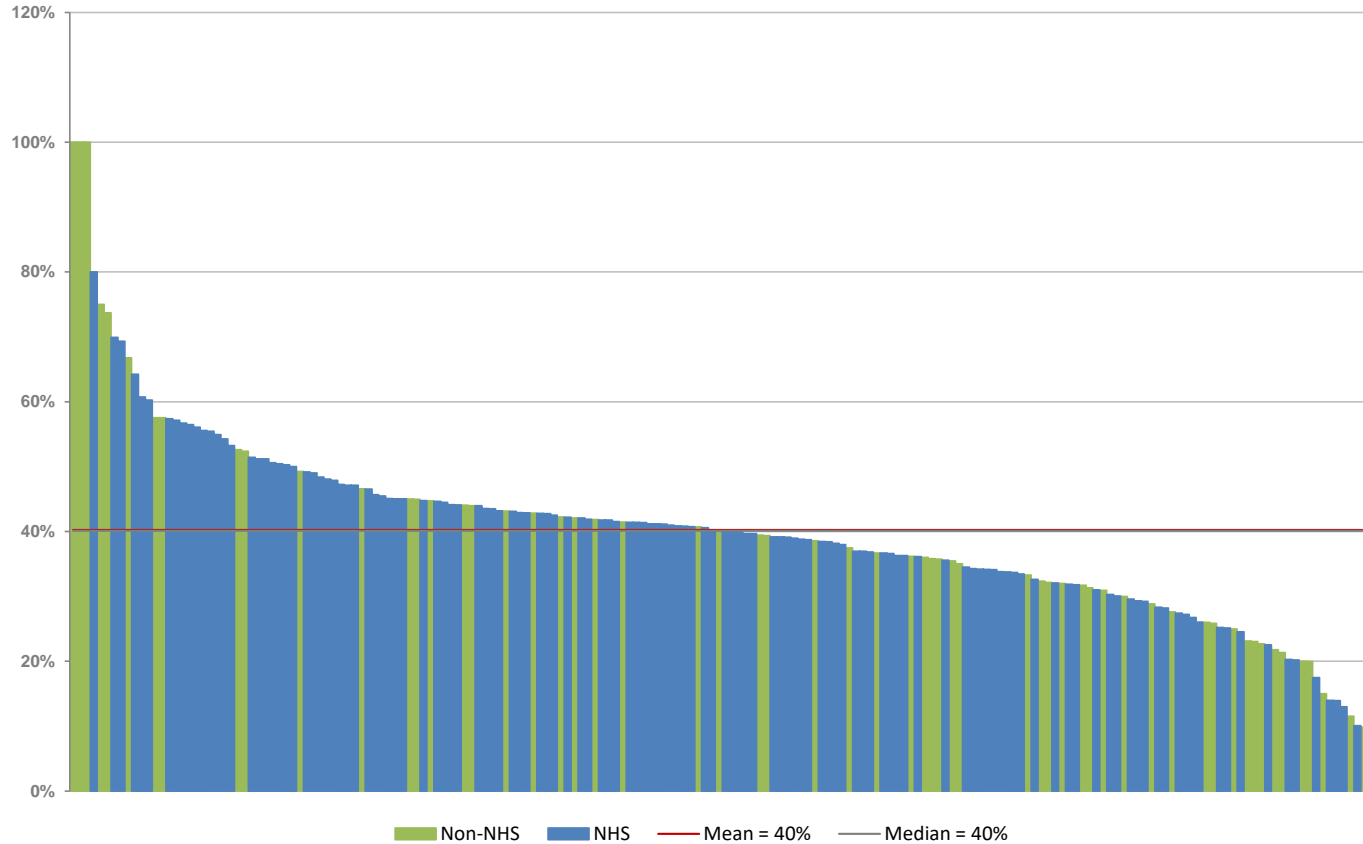
- Qualified HITs
 - HITs - CBT therapists
 - HITs - other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors)
- Qualified PWPs
 - PWPs
 - Senior PWPs
 - Lead PWPs

PWPs represented 39% of the total qualified HIT/PWP staffing numbers, with HITs accounting for 61%. The majority of HITs comprised qualified CBT therapists, with 13% HIT – other NHS Talking Therapies modality roles (including NHS Talking Therapies qualified counsellors).



Workforce size by service – qualified HITs

Qualified CBT Therapists and Counsellors in post at 31st March 2022 as a % of Total Staffing excluding trainees

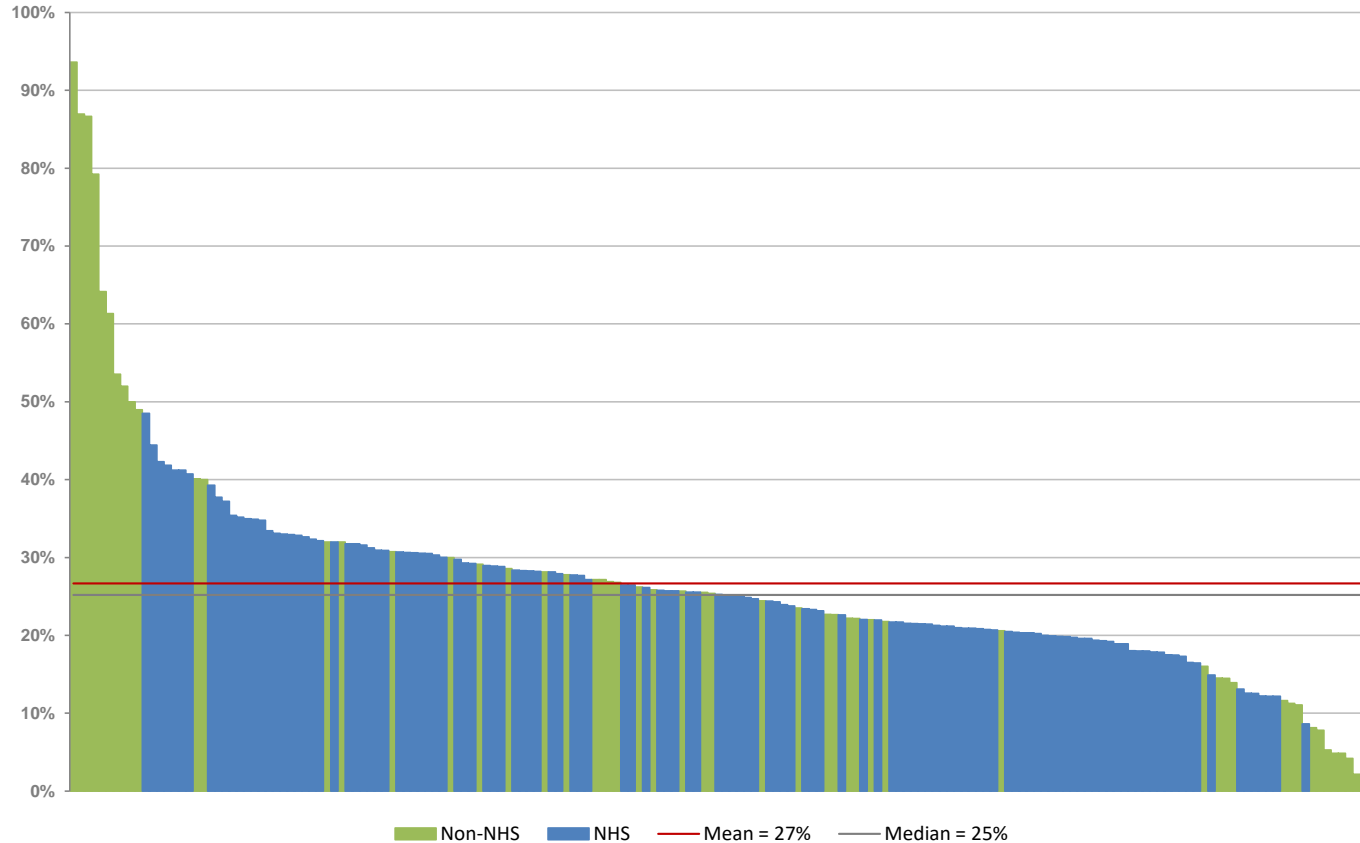


Data has also been reviewed in relation to the roles of HITs – qualified CBT therapists, alongside HITs – other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors), measured as a proportion of total staffing numbers (excluding trainees) on 31st March 2022.

On the census date, staff (WTE) within these roles totalled 4,317 WTE, representing, on average, 40% of total staff numbers across NHS Talking Therapies services where qualified CBT therapists/counsellors were employed.

Workforce size by service – qualified PWPs

Qualified Psychological Wellbeing Practitioners (PWPs / Senior PWPs / Lead PWPs) in post at 31st March 2022 as a % of Total Staffing excluding trainees



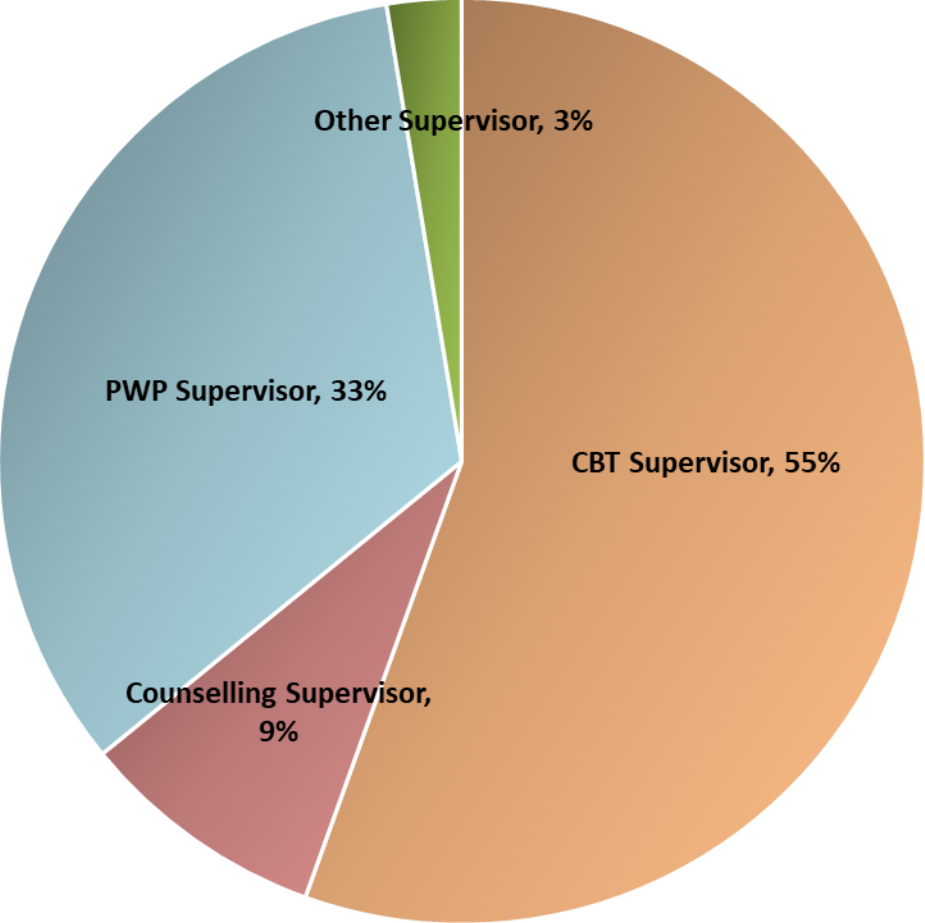
Qualified psychological wellbeing practitioners (PWPs) are comprised of PWPs, senior PWPs and lead PWPs, with the latter categorisation newly added to the data specification for 2022. This chart shows the proportion of staff numbers comprised of PWPs at service level (excluding trainees).

The data shows a high level of variation in PWP representation across NHS Talking Therapies services. This is a product of different commissioning specifications for NHS Talking Therapies, with differing local priorities. Every local system of care should include PWPs, but individual services may only provide part of the NHS Talking Therapies pathway.

As of the 31st March 2022, for services where PWPs were employed, this staff cohort comprised an average (mean) of 27% of overall workforce numbers, similar to the 26% reported in 2021.

In regards to PWP staff numbers (WTE) in their totality, 2,728 PWPs (WTE) were reported in post on the 2022 census date – a 6% increase from the 2,580 (WTE) total seen in 2021.

Supervisory roles – NHS Talking Therapies trained



Of the 981 supervisory roles/time (WTE) reported by NHS Talking Therapies-trained supervisors on 31st March 2022, 55% of this cohort was reported by CBT supervisors, representing over half of the total provision.

PWP supervisors comprised the next largest cohort, with a third of NHS Talking Therapies-trained supervisors within these roles.

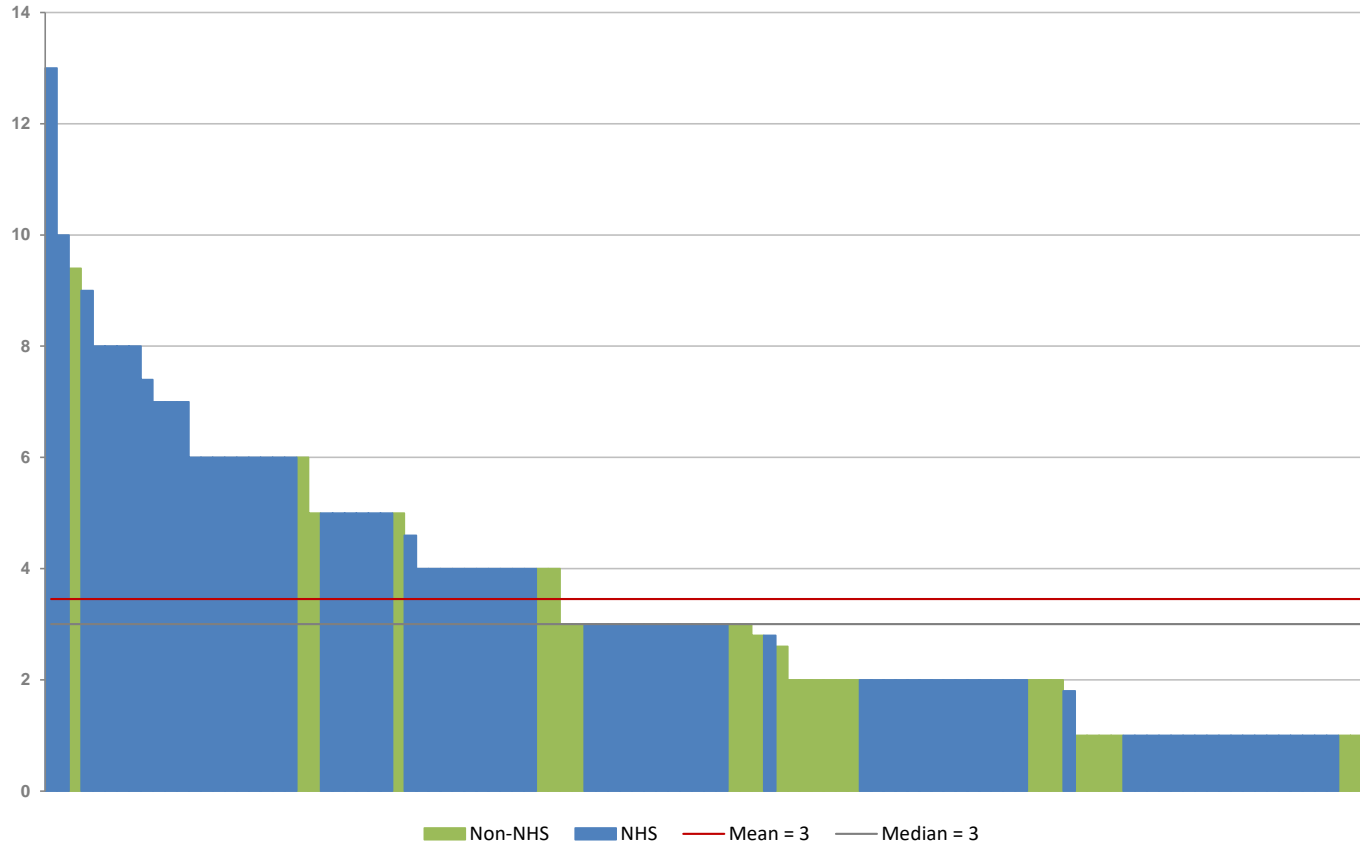
Counselling supervisors (9%) and other supervisors (3%) made up the final 12% of NHS Talking Therapies-supervisor trained roles/times on the 2022 snapshot date.

Additionally, a further 51 supervisory roles/time (WTE) were reported on the census date for supervisors who had not undertaken the NHS Talking Therapies supervision module/training.



HITs progressing from PWPs

Total number of PWPs (WTE) who progressed into HIT training within the last 12 months



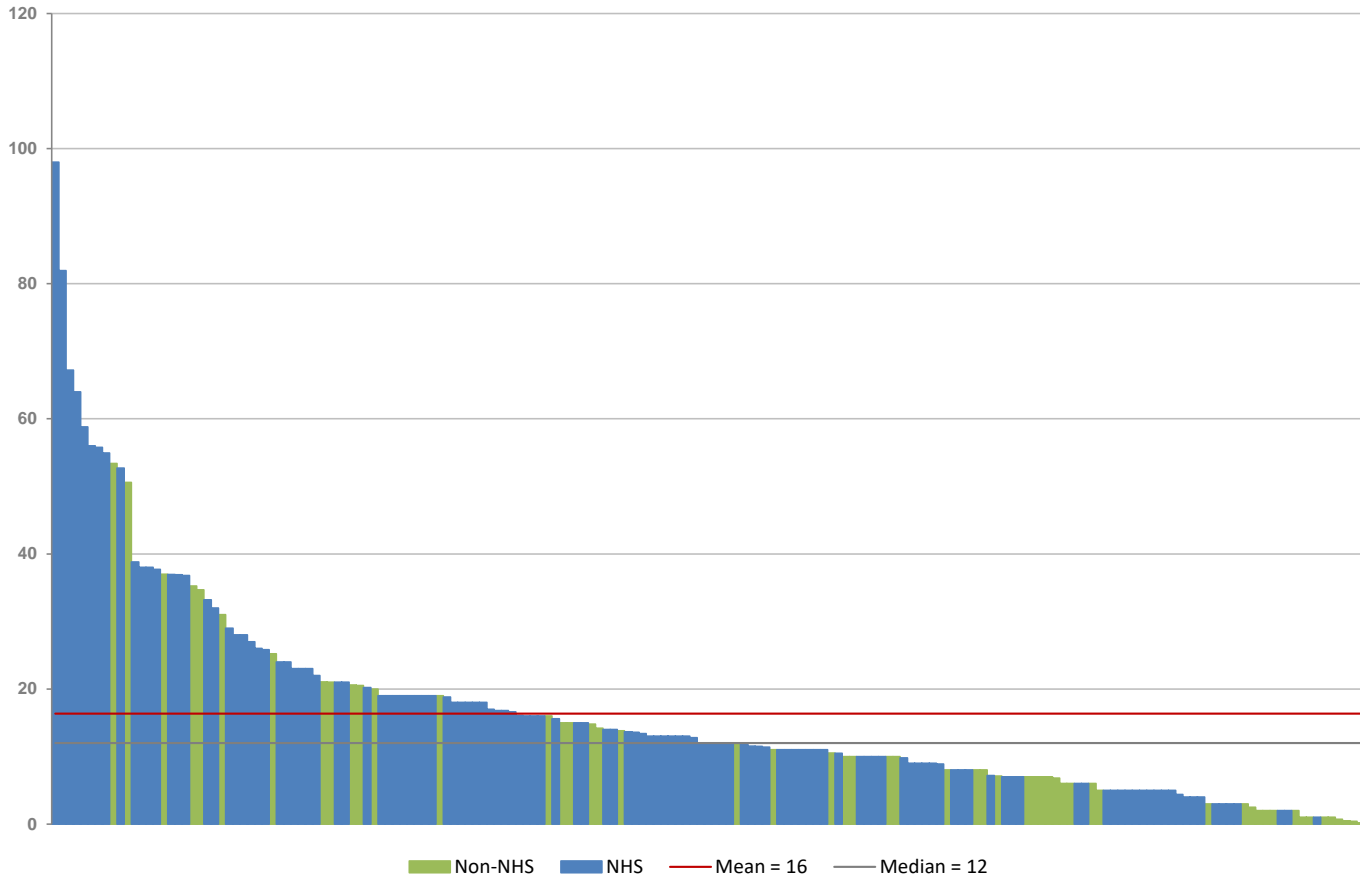
The NHS Talking Therapies career development process includes a route for psychological wellbeing practitioners who wish to train to become high intensity therapists. Though this metric has been included within previous census iterations, it was amended for 2022 to encompass staff progression across different services, where previously the sole focus related to staff progressing internally.

383 PWPs (WTE) progressed into HIT training over the last 12 months, including both those who remained with the same NHS Talking Therapies service and those who progressed into HIT training with another service.

111 (56%) participants reported progression of PWPs into HIT training within the last twelve months. These respondents reported an average of 3 PWPs (WTE) progressing via this route.

Trainees

Total Trainee Staffing (WTE)



NHS Talking Therapies provides clear pathways for progression for its staff, with active training programmes recruiting new staff into NHS Talking Therapies services, and enabling their development into specialist therapy roles.

On 31st March 2022, a total of 2,979 trainees (WTE) were reported within adult NHS Talking Therapies services, which represents a 12% increase from the 2,650 trainee (WTE) figure reported in 2021.

The breakdown by role was as follows:

- Trainee psychological wellbeing practitioners – 1,590 staff (WTE)
- Trainee high intensity CBT therapists – 1,257 staff (WTE)
- Trainee counsellors (NHS Talking Therapies Modality/HIT Upskilling) – 132 staff (WTE)

The chart on the left is not benchmarked, and is included to demonstrate the variation between services where trainees are employed. Results ranged from 1 to 98 trainees (WTE) employed on 31st March 2022, per service.

Trainee numbers per service remained relatively consistent to those reported in 2021, with a mean of 16 trainees (WTE) in post on the 2022 census date compared to 15 trainees (WTE) the previous year.

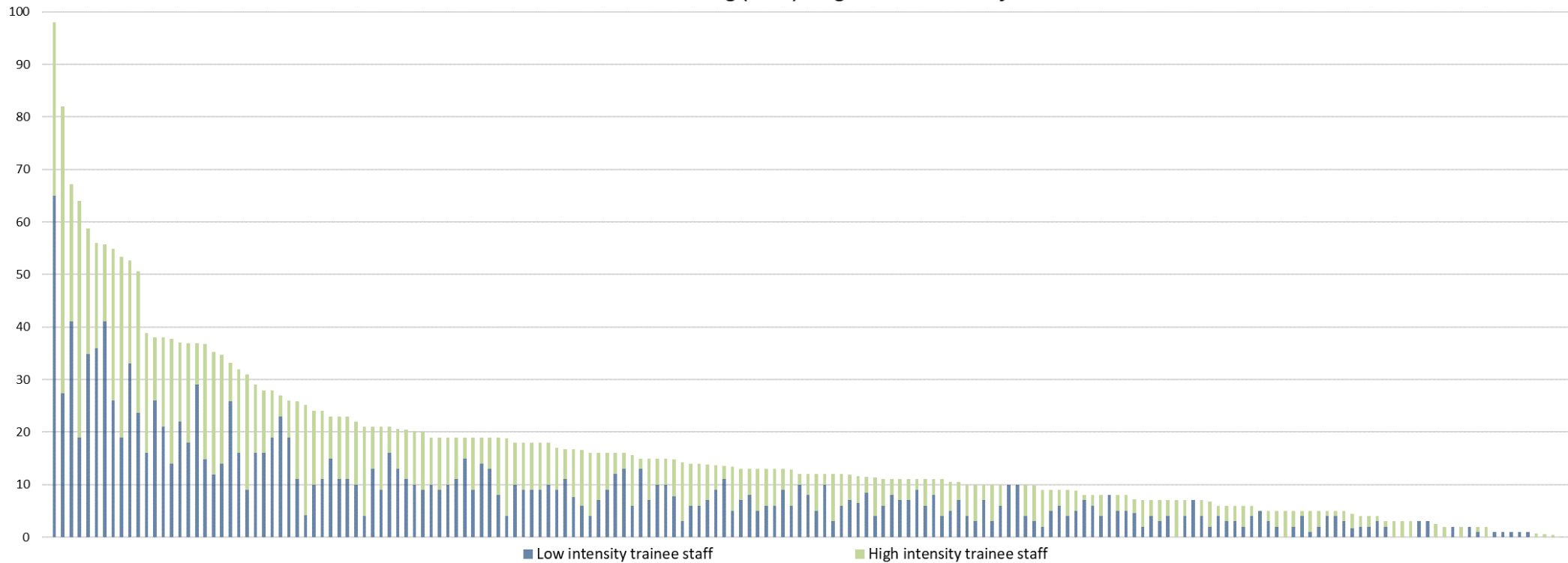


Low to high intensity trainees by service

This chart demonstrates the split of low to high intensity trainees, per service.

At a national level, services reported a largely even split between low vs high intensity trainee numbers, with 53% low intensity trainees to 47% high intensity trainees as on the 2022 census date.

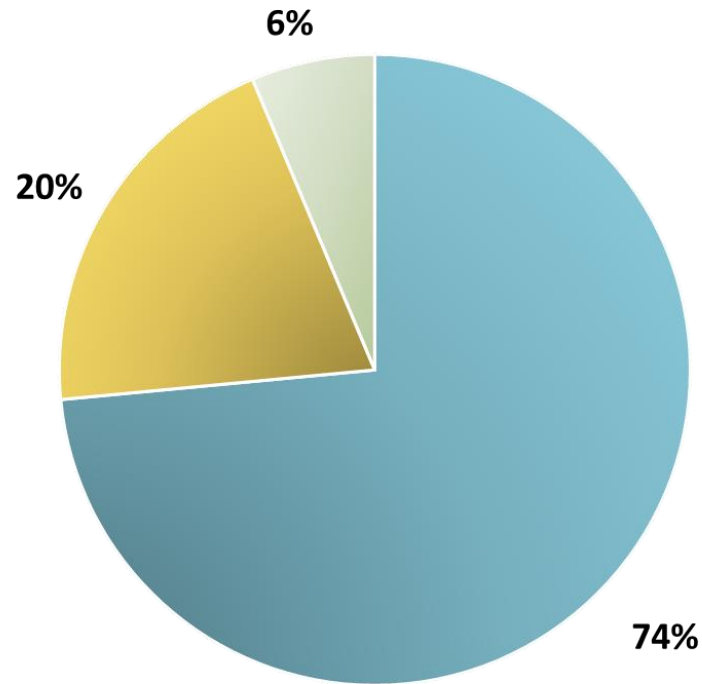
Total Trainee Staffing (WTE) - high vs low intensity



Project findings

High intensity staffing

High intensity workforce composition (WTE)



- HITs - qualified CBT therapists
- HITs - other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors)
- HITs - other high intensity therapists (not recognised by NHS Talking Therapies)

The high intensity workforce is comprised of 3 main role types:

- HITs – qualified CBT therapists
- HITs – other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors)
- HITs – other high intensity therapists (not recognised by NHS Talking Therapies)

This chart examines the proportion of the high intensity workforce (excluding trainees) made up of each of these roles.

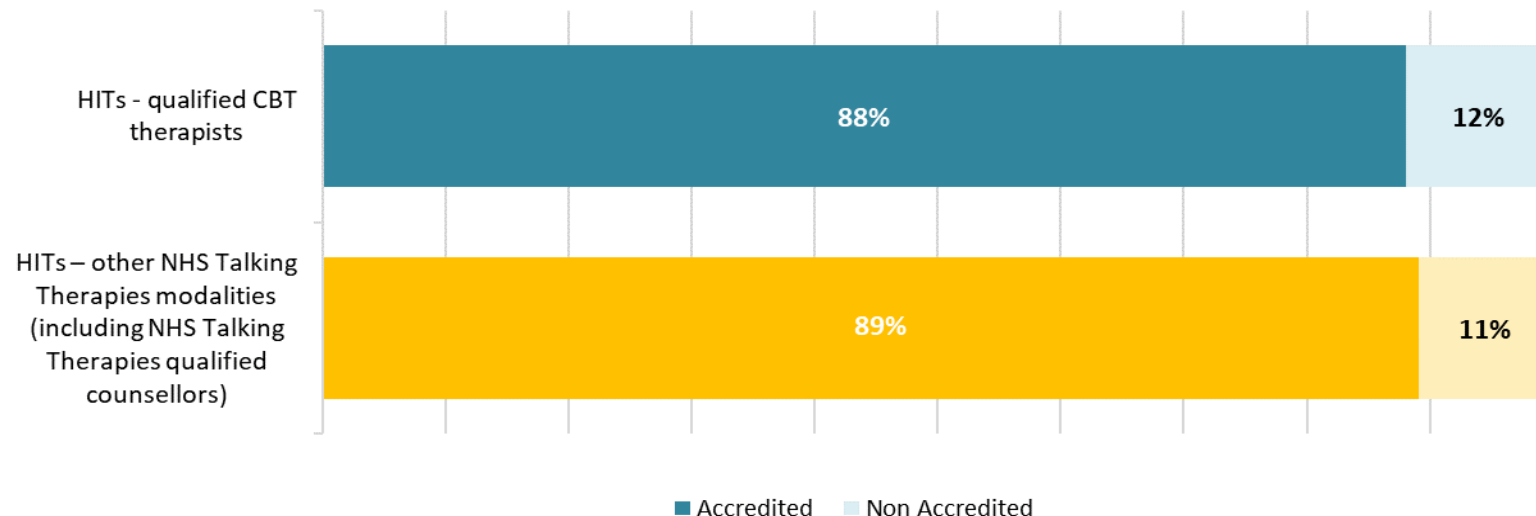
As in previous years, qualified CBT therapists made up the vast majority of the high intensity workforce, at 74%.

The remaining workforce in this sector is made up of HITs - other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors - 20%) and other high intensity therapists (not recognised by NHS Talking Therapies) which totalled 292 staff (WTE) – 6%. Accompanying narrative provided by NHS Talking Therapies services detailed a number of roles which sat within this latter job cohort, including clinical and counselling psychologists.

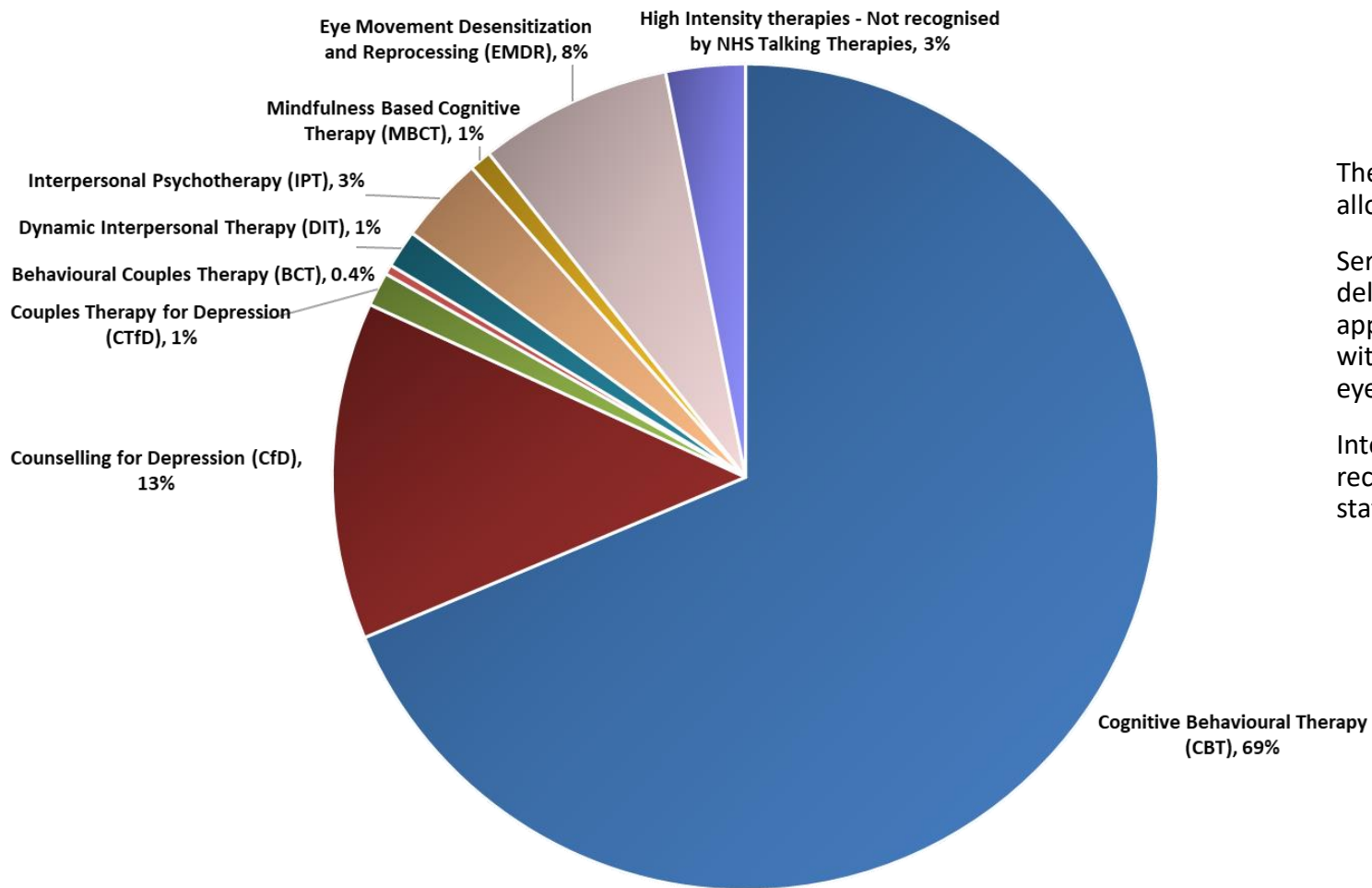
High intensity workforce – NHS Talking Therapies accredited

The below chart illustrates the proportion of staff (WTE) who have achieved accreditation as specified within the [NHS Talking Therapies Manual](#), via the relevant NHS Talking Therapies-recognised professional body, e.g. the British Association for Behavioural and Cognitive Psychotherapies.

As on the 31st March 2022, services reported that 88% of HITs – qualified CBT therapists were NHS Talking Therapies accredited. A similar proportion of HITs – other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors) were accredited (89%) as on the 2022 census date.



Delivery of therapies



The adjacent chart illustrates how high intensity workforce time is allocated nationally across different therapy modalities.

Service responses detailed over two-thirds of staff time being spent delivering cognitive behavioural therapy (69%). The next largest apportionment was 13% for staff delivering counselling for depression, with a further 8% of time spent working with service users delivering eye movement desensitisation and reprocessing therapy.

Interpersonal psychotherapy and other high intensity therapies (not recognised by NHS Talking Therapies) each had 3% of high intensity staff time (WTE) allocated nationally.

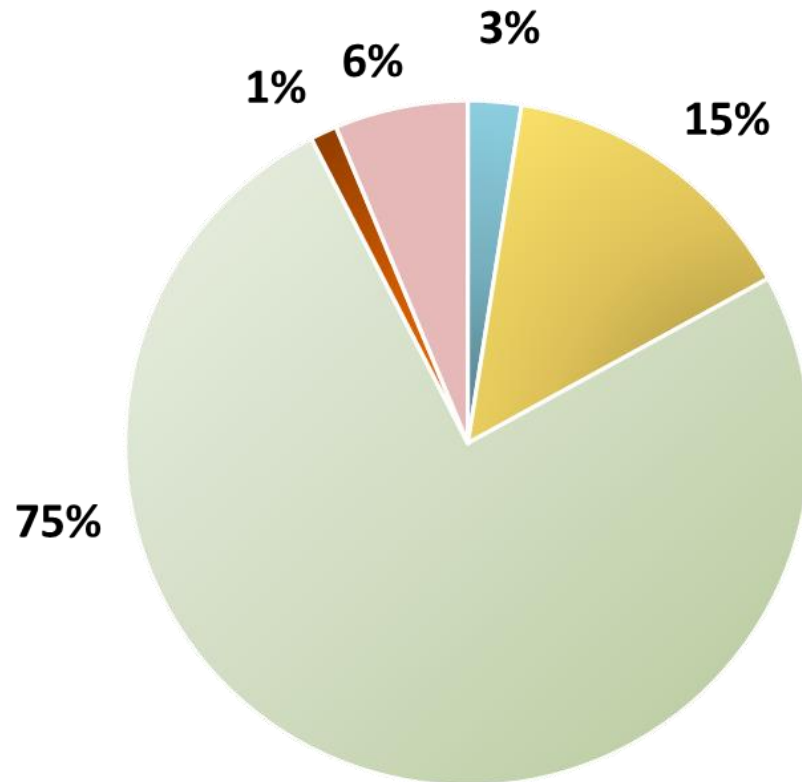


Project findings

Low intensity staffing



Low intensity workforce composition (WTE)



- Lead Psychological Wellbeing Practitioner - Qualified
- Senior Psychological Wellbeing Practitioner - Qualified
- Psychological Wellbeing Practitioner - Qualified
- Psychological Wellbeing Practitioner (not NHS Talking Therapies qualified or in NHS Talking Therapies training)
- Other low intensity worker e.g. Assistant PWP - Unqualified

92% of the low intensity NHS Talking Therapies workforce (excluding trainees) was made up of psychological wellbeing practitioners – comprising qualified lead PWPs, senior PWPs, and PWPs.

The remaining 7% of the low intensity workforce (excluding trainees) is comprised of non-NHS Talking Therapies qualified PWPs.

This composition mirrors that of the 2021 census, where a 93% to 7% split was seen between NHS Talking Therapies qualified and non-NHS Talking Therapies qualified roles.



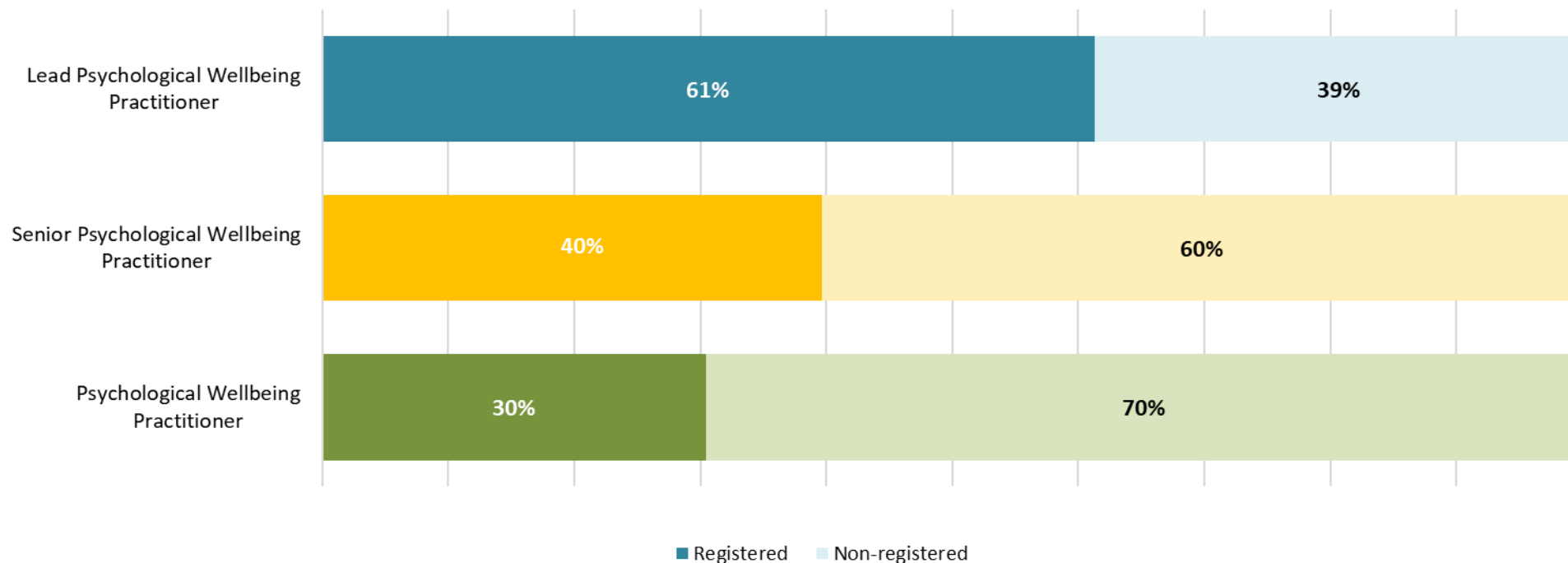
Low intensity workforce – NHS Talking Therapies registered

Additional analysis has been undertaken for 2022 relating to the proportion of qualified PWPs (WTE) who are registered with an NHS Talking Therapies recognised professional body, categorised by role type.

By way of further definition, registration refers to the PWP having undertaken a core NHS Talking Therapies low intensity course, with linked professional registration obtained following this training. This is particularly relevant in the context of the latest NHS England guidance, which stipulates that all PWPs should have either completed this course or currently be in the process of completing the training and be registered with the BABCP or BPS on successful completion.

The chart demonstrates that approximately 6 out of 10 lead PWPs were confirmed as NHS Talking Therapies registered, compared to circa 4 out of 10 senior PWPs, and 3 out of 10 PWPs.

Registers for PWPs opened on 10th June 2021 and became required for PWP practice in NHS Talking Therapies from 10th June 2022. The date for this snapshot of registration was 31st March 2022, during the transition period.



Project findings

Workforce demographics

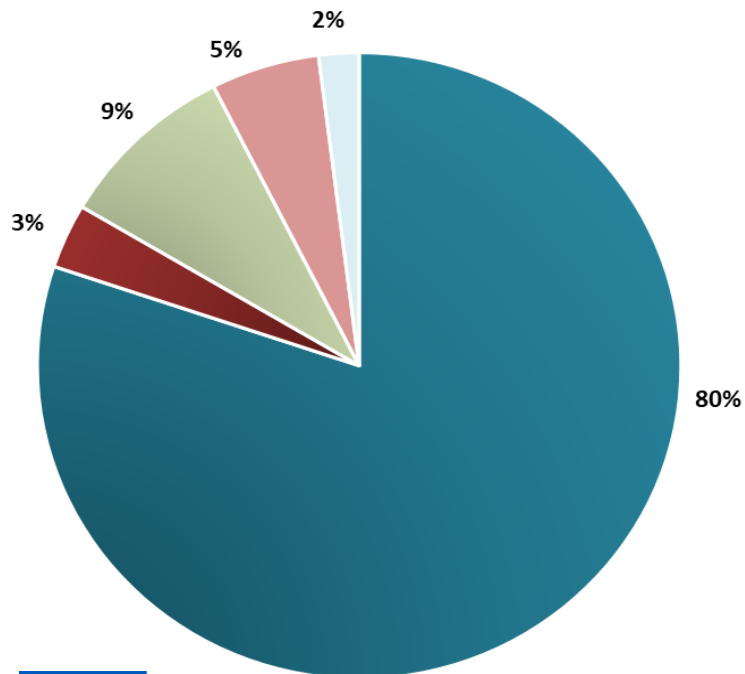
Ethnicity

Ethnicity demographic data was provided for 15,255 staff (headcount), with gender demographics data (provided for 15,368 staff) analysed on the following page.

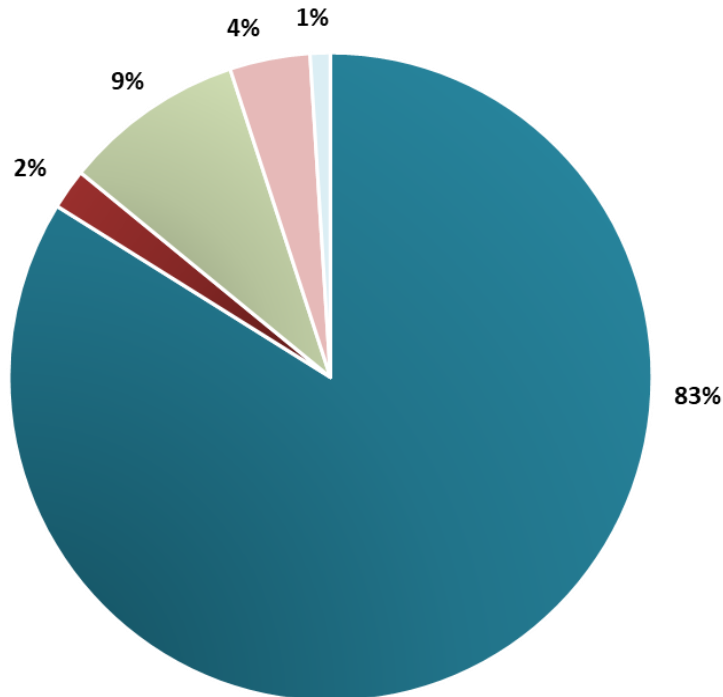
The ethnicity profile of the NHS Talking Therapies workforce was broadly consistent with wider England population demographics, with 80% of staff in post (headcount) on 31st March 2022 of White/White British ethnicity, compared to 83% in the wider population composition of England (resident population aged 16-64). This composition remains largely unchanged from previous years, and aligns with positions reported across wider NHS Trusts and CCGs (21% of NHS staff from a black and minority ethnic background on 31st March 2020 - [Workforce Race Quality Standard 2020 Report](#)).

Please note that whilst the table includes respondents who recorded staff members' ethnicity as 'not stated', the pie charts do not, to allow for comparisons against general population data.

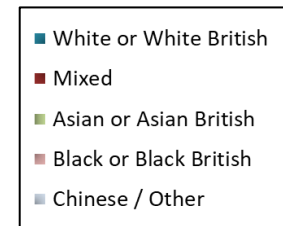
Ethnicity of NHS Talking Therapies workforce on 31st March 2022



England resident population ethnicity (16-64)



Ethnicity	2019	2020	2021	2022
White or White British	77%	77%	76%	72%
Mixed	3%	3%	3%	3%
Asian or Asian British	8%	8%	8%	8%
Black or Black British	4%	5%	5%	5%
Chinese / Other	1%	2%	2%	2%
Not stated	7%	6%	6%	10%

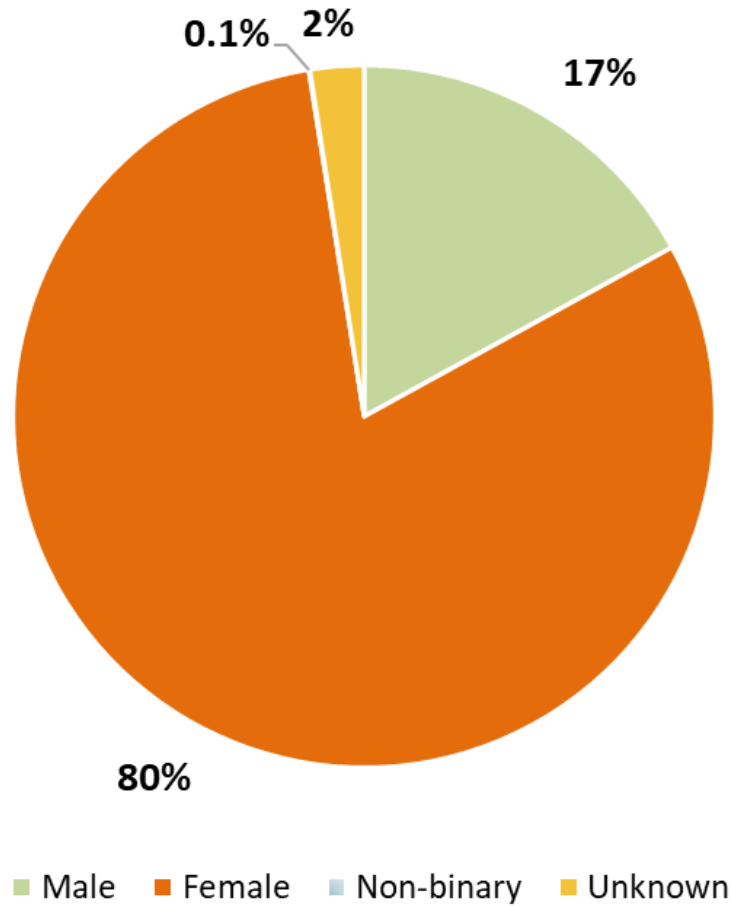


n = 15,255 (headcount)



Gender

Gender of individuals in post on 31st March 2022



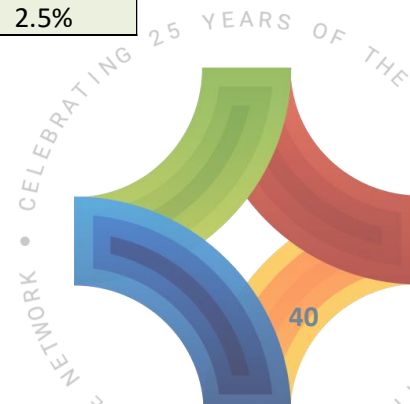
As with ethnicity demographic data, the gender of individuals working within NHS Talking Therapies services (headcount) on 31st March 2022 is broadly consistent with previously reported data.

Services continued to report a high majority of the workforce as female, though this proportion has reduced slightly from 82% in 2021 to 80% in 2022. This change, however, could be attributed to the increase in the NHS Talking Therapies workforce reported under “unknown” gender categorisation, rising from 0.2% in 2021, to 2.5% in 2022.

Nationally, 8 staff identified as non-binary, in line with 2021 reporting.

n = 15,368 (headcount)

Gender	2019	2020	2021	2022
Male	19%	19%	18%	17%
Female	81%	81%	82%	80%
Non-binary	0.0%	0.0%	0.1%	0.1%
Unknown	0.1%	0.3%	0.2%	2.5%



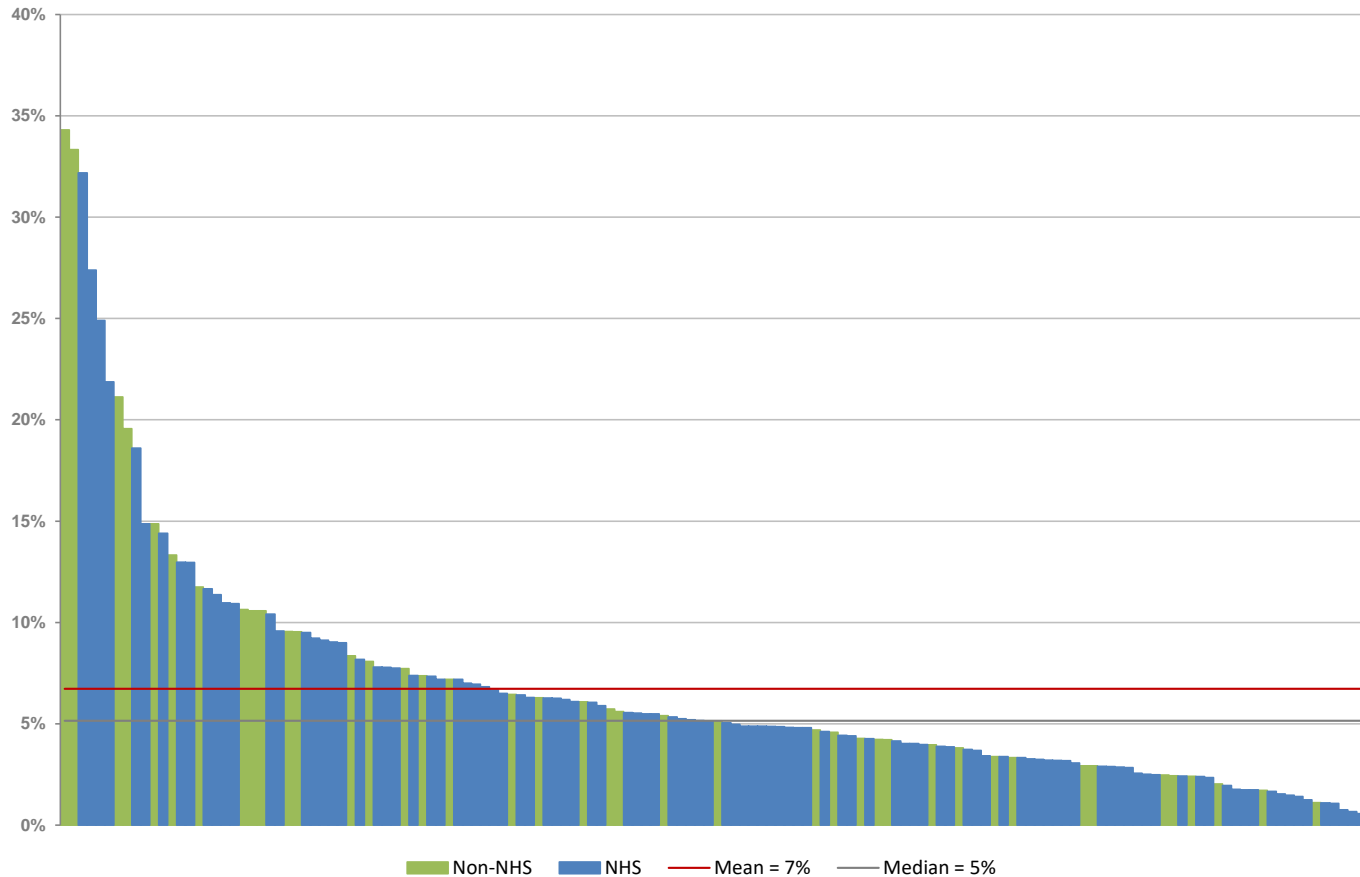
Project findings

Workforce summary metrics



Sickness

Total Sickness (WTE) at 31st March 2022 as a % of Total Staffing



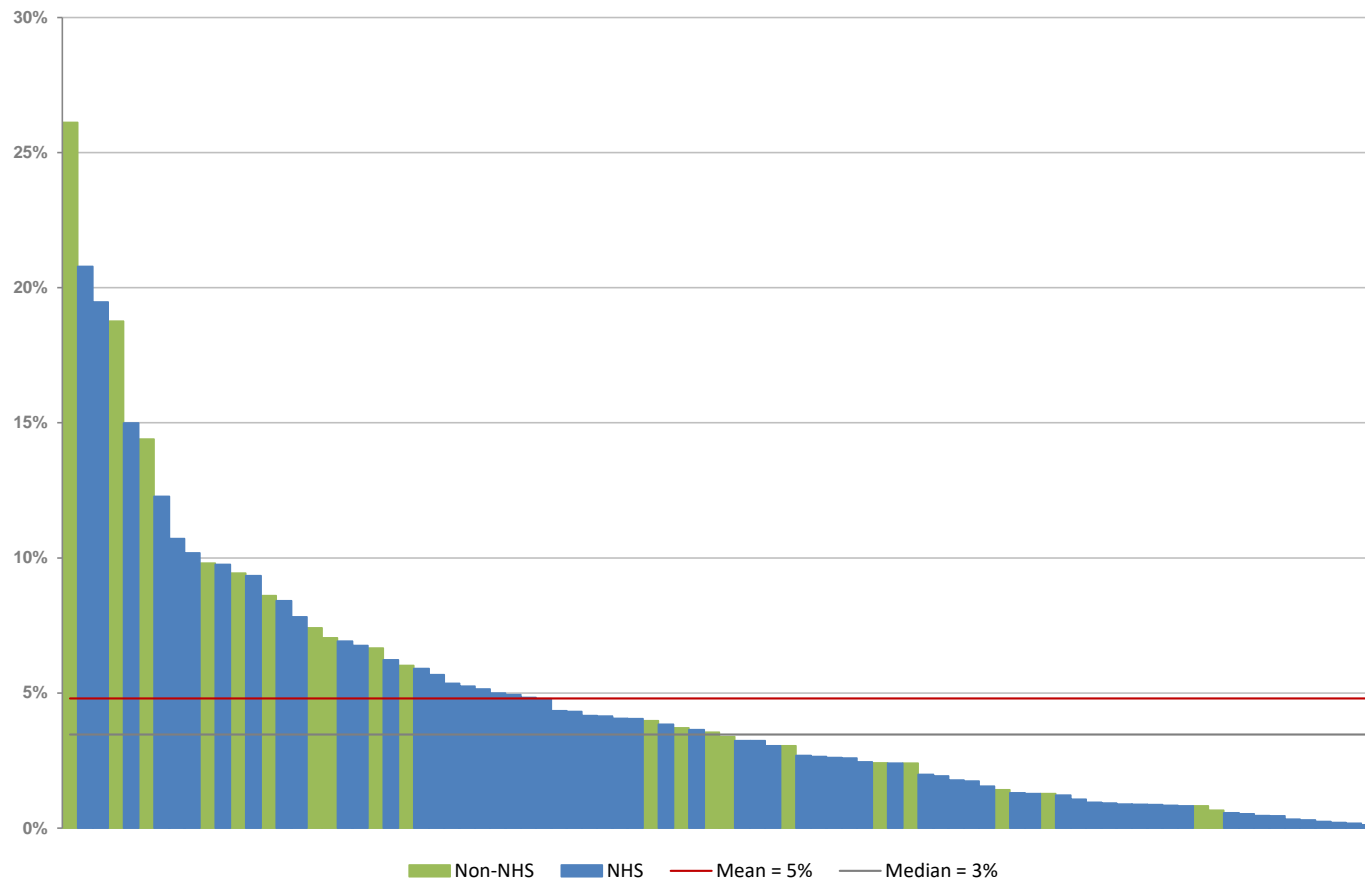
801 staff (WTE) were absent from work due to sickness on 31st March 2022. These came from the following staff groups:

- High intensity roles (qualified HITs – CBTs and other NHS Talking Therapies modalities including NHS Talking Therapies qualified counsellors, plus non-NHS Talking Therapies qualified HITs, trainees): 369 staff (WTE)
- Low intensity roles (PWPs – qualified and unqualified, trainees): 265 staff (WTE)
- All other roles: 167 staff (WTE)

The mean sickness absence rate reported by services was 7%. It is worth noting that this is lower than the comparable sickness absence rate reported by adult acute mental health inpatient services during 2021/22, who confirmed a mean position of 8% nationally.

Bank and Agency Staffing

Total Bank and Agency Staffing (WTE) as a % of Total Staffing



Though bank and agency staff can be vital in cases of widespread staff sickness, a high dependency on these staff can adversely impact service quality and patients' continuity of care.

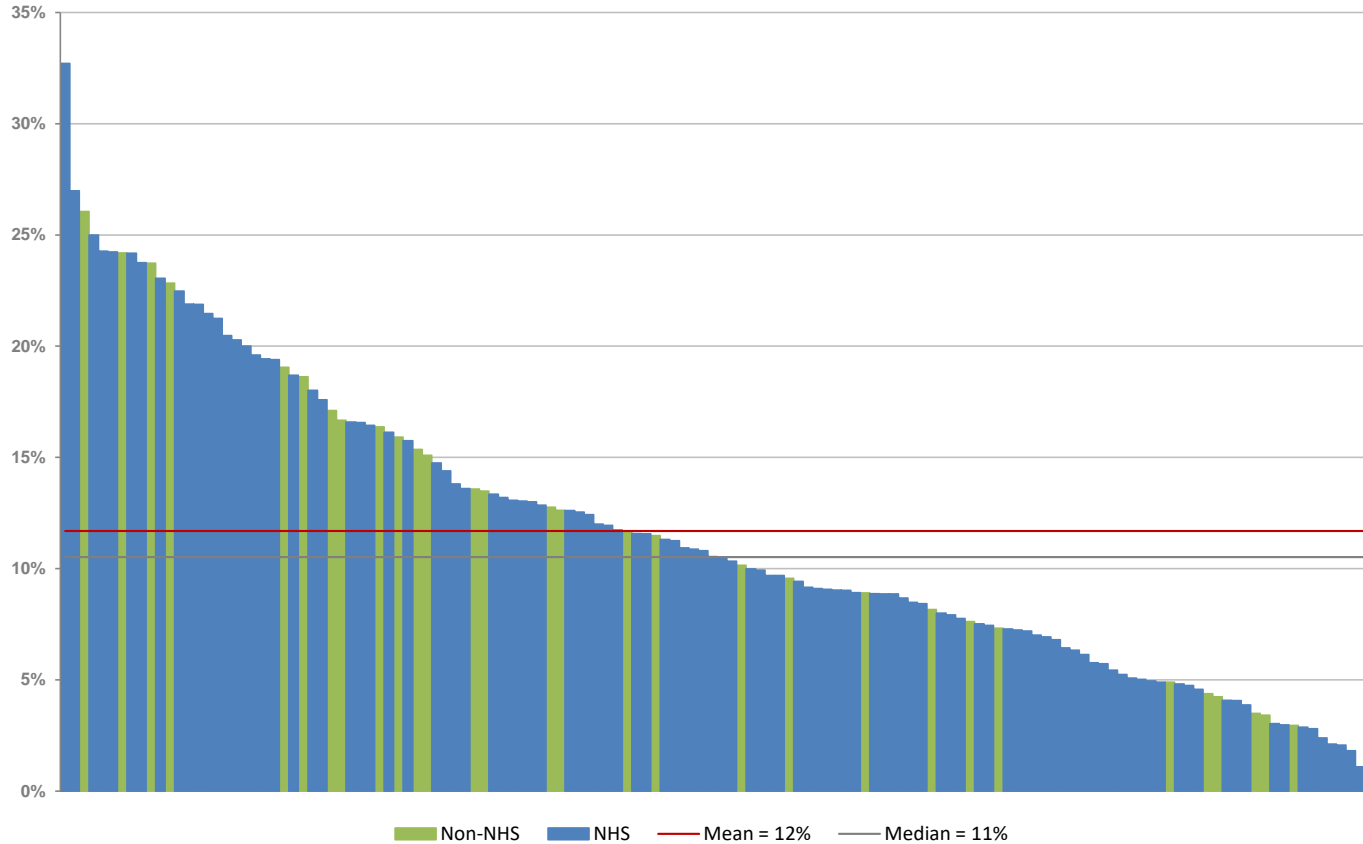
On 31st March 2022, a total of 304 bank and agency staff (WTE) were reported as having been utilised by NHS Talking Therapies services.

Bank and agency staff usage was as follows:

- High intensity roles – 132 staff (WTE)
- Low intensity roles – 111 staff (WTE)
- All other roles – 61 staff (WTE)

Vacancies

Vacancy rate WTE (measured as a proportion of staff in post plus vacancy numbers) at 31st March 2022



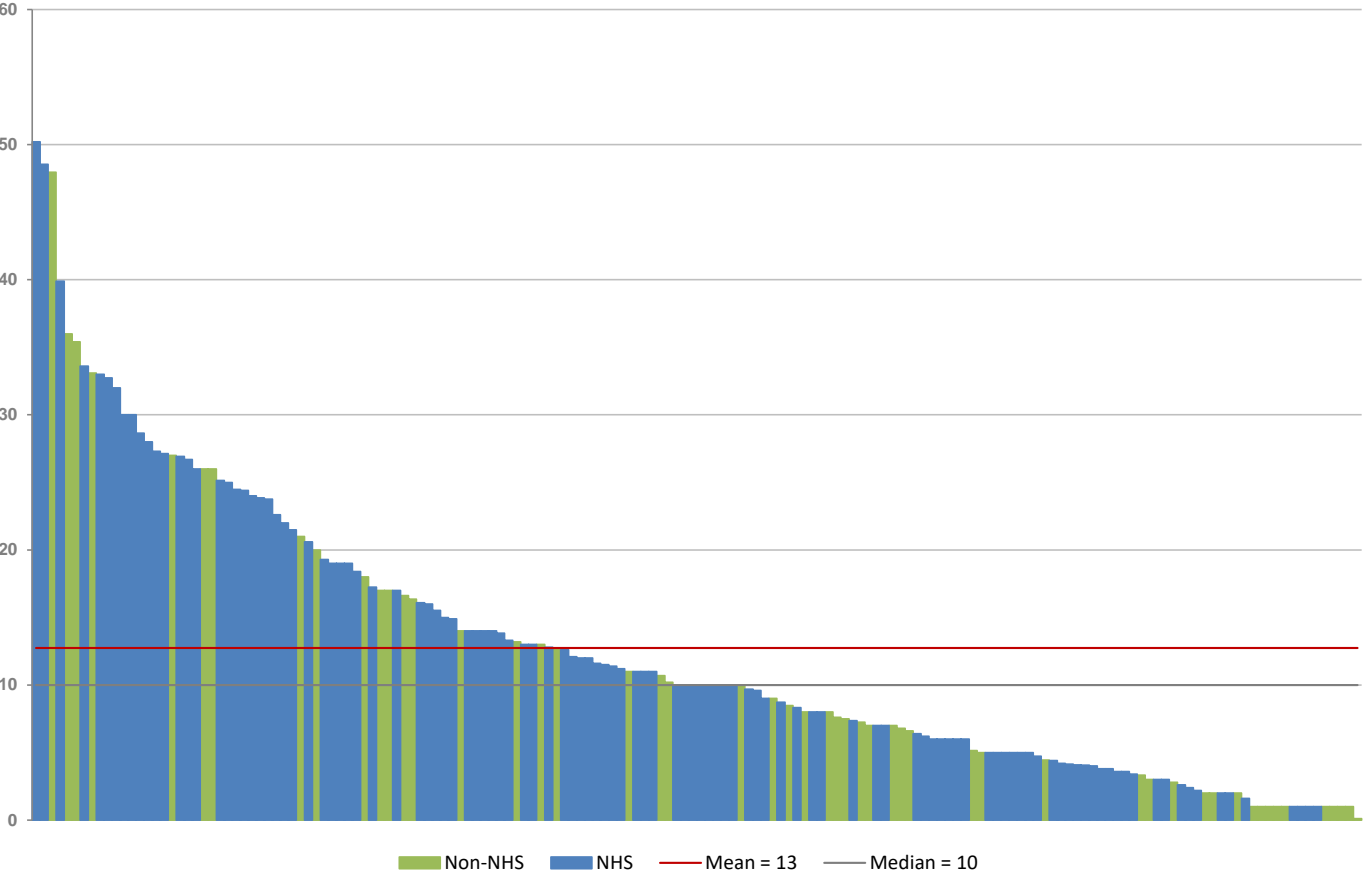
On 31st March 2022, 1,538 vacancies (WTE) were reported by NHS Talking Therapies services. The vacancies came from the following staff groups:

- High intensity roles: 668 staff (WTE) – 10% (when measured as vacancies / staff in post WTE plus vacancies)
- Low intensity roles: 661 staff (WTE) – 13% (when measured as vacancies / staff in post WTE plus vacancies)
- All other roles: 210 staff (WTE) – 5% (when measured as vacancies / staff in post WTE plus vacancies)

The mean vacancy rate (when measured as vacancies / staff in post WTE plus vacancies) was 12% in 2022. This is notably below the vacancy rate reported within adult acute mental health services, who confirmed an 18% mean vacancy rate nationally in 2021/22.

Staff leavers in previous 12 months

Staff (WTE) leavers in the 12 months to 31st March 2022



2,114 staff (WTE) left their role in the 12 months to 31st March 2022. This represents 13% of total workforce numbers (when measured as leavers / staff in post WTE on 31st March 2022 plus staff leavers during the preceding 12 months). This represents an increase from the 10% leaver rate reported by NHS Talking Therapies services during the 12 months to 31st March 2021.

The breakdown by staff group is as follows:

- High intensity roles : 803 staff (WTE) – 12% (when measured as leavers / staff in post WTE plus leavers)
- Low intensity roles: 840 staff (WTE) – 16% (when measured as leavers / staff in post WTE plus leavers)
- All other roles: 471 staff (WTE) – 11% (when measured as leavers / staff in post WTE plus leavers)

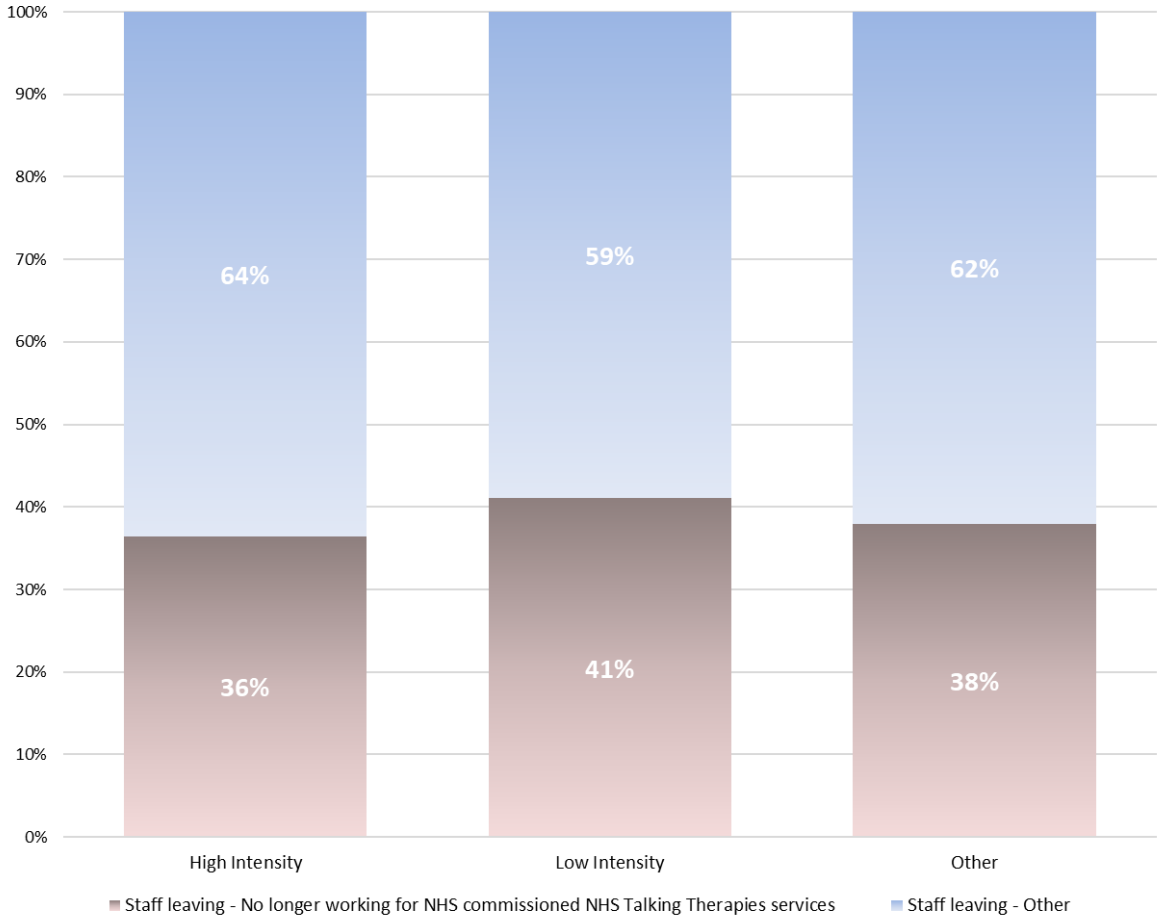
The mean position reported by services was 13 staff leavers (WTE) per service, up from 9 staff (WTE) per service reported in 2021.

The above figures are inclusive of staff moving on to other NHS Talking Therapies teams, leaving for another role in a different healthcare service, or retiring.



Staff leavers no longer working for NHS services

Staff leaving who are no longer working for NHS commissioned NHS Talking Therapies services



An additional metric was added to the 2022 data specification to understand staff's future destination following their departure from NHS Talking Therapies services.

Of the 2,114 total staff (WTE) leaving services in the 12 months to 31st March 2022, 816 staff (WTE) were confirmed as no longer working in NHS-commissioned NHS Talking Therapies services, representing 39% of leavers.

Results ranged between staff groups, with 41% of low intensity staff leavers no longer working for NHS-commissioned NHS Talking Therapies services compared to 36% of high intensity staff leavers.

When clinical (high and low intensity) leaver figures were reviewed in their totality, staff within these roles who were reported as no longer working for NHS-commissioned NHS Talking Therapies services comprised 6% of clinical workforce numbers (when measured as leavers who are no longer working for NHS-commissioned NHS Talking Therapies services / staff in post WTE plus leavers who are no longer working for NHS-commissioned NHS Talking Therapies services).

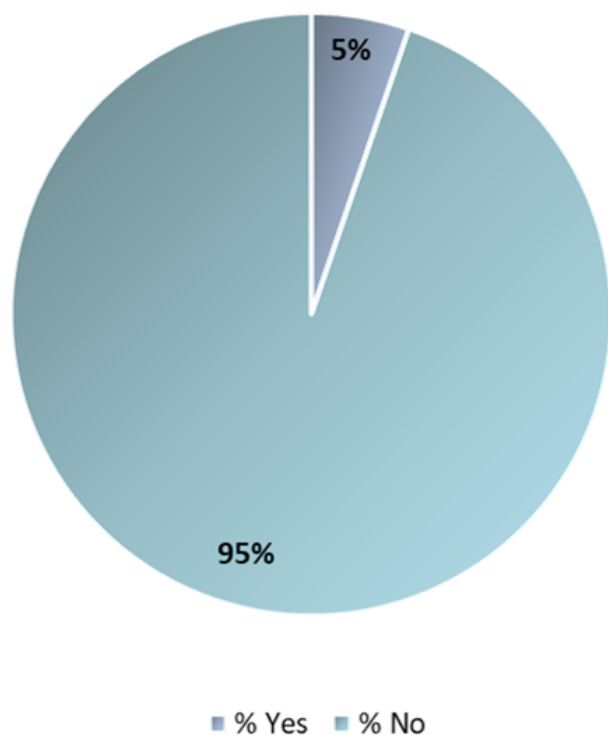


Project findings

Staff discrimination

Discrimination in the workplace

In the last 12 months, have there been any formal reports of staff members experiencing discrimination at work?



Several additional metrics were added to the 2022 data specification to ascertain the prevalence of discrimination within NHS Talking Therapies services nationally.

171 of 200 services responded to this metric, with nine respondents (5%) reporting formal reports of staff members experiencing discrimination while working. This included discrimination by patients/service users and colleagues.

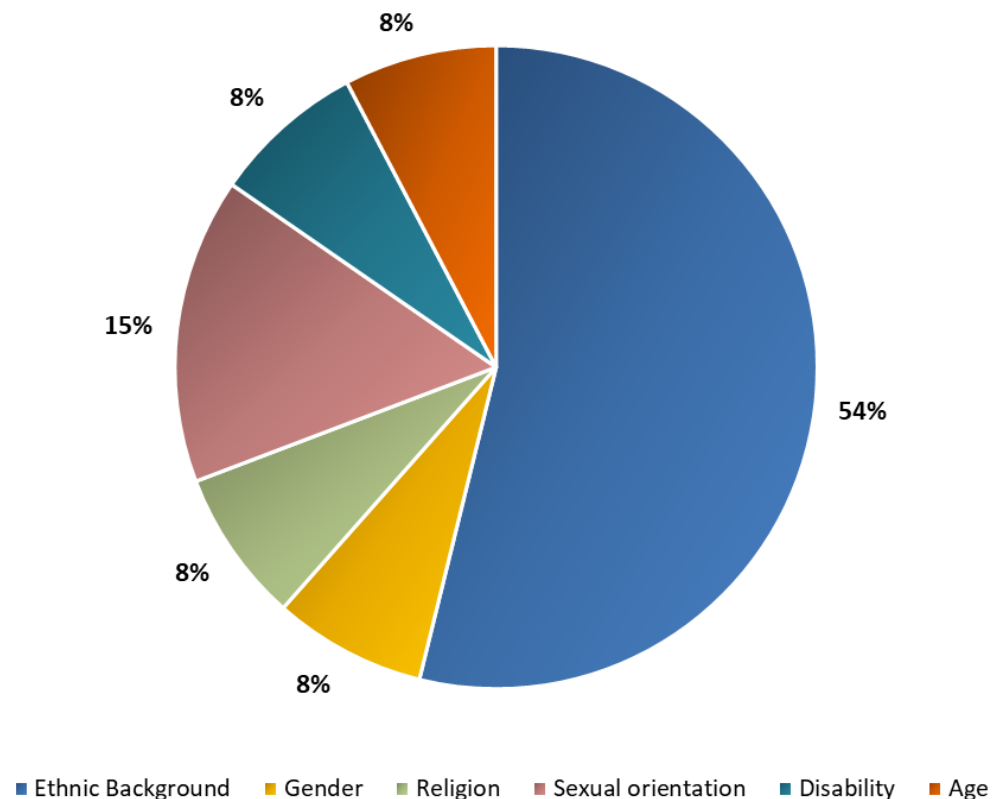
Four services disclosed a total of five reports of staff members experiencing discrimination at work from patients/service users.

Seven services disclosed a total of nine reports of staff members experiencing discrimination at work from colleagues. When reviewed in wider context, this represents a low rate of reporting of discrimination (colleague-to-colleague) for NHS Talking Therapies services, with the [Workforce Race Equality Standard 2020 report](#) detailing a 10%* proportion of staff experiencing discrimination at work from a manager/team leader or other colleagues across NHS services in England.

**10% comprised of discrimination data relating to staff from white, black and other ethnic minority backgrounds*

Grounds for discrimination

On what grounds have staff members experienced discrimination?



In conjunction with the metric on the previous page, grounds for discrimination experienced by NHS Talking Therapies staff members were also examined.

It is important to note that only 13 responses were received confirming discrimination as per the specified categorisations.

Ethnic background was reported as the most common ground for staff members experiencing discrimination, comprising 54% (7 responses) of the total formal reporting figures.

Two services confirmed formal reports of discrimination at work on the grounds of sexual orientation (15%).

Additional incidences were reported on the basis of gender, religion, disability and age.

Conclusions



Conclusions

The fourth annual adult NHS Talking Therapies Workforce Census comprised 200 data submissions from NHS Talking Therapies services spanning all CCGs in England as on 31st March 2022, prior to dissolution. Key findings of the stocktake include:

- From the first iteration of the workforce benchmarking series in 2019, staff numbers (WTE) nationally have risen by 38%; from 10,325 on 30th June 2019 to 14,299 on 31st March 2022, less than three years later. However, the rate of growth has slowed between 2021 and 2022 to 4%.
- Trainee numbers rose by 12% annually, with 2,979 trainees in post on 31st March 2022. These figures comprised 47% high intensity trainees (CBT therapists and counsellors) to 53% low intensity trainees (PWPs).
- Qualified high intensity therapists (CBT and other NHS Talking Therapies modalities e.g. counsellors – excluding other HITs not recognised by NHS Talking Therapies) comprised 38% of total workforce numbers (excluding trainees) within the latest dataset (4,317 staff WTE).
- The lead psychological wellbeing practitioner role was a new addition to the 2022 specification, with qualified PWPs (lead/senior/PWPs) totalling 2,728 (WTE) on the census date. This marks a 6% increase from the 2021 position, with staff in these roles representing 24% of total workforce numbers (excluding trainees) nationally in 2022.
- When the above HIT and PWP qualified staff cohorts are jointly analysed, PWPs/senior PWPs/lead PWPs represent 39% of national workforce totals (WTE). The remaining 61% comes from the high intensity contribution – with 48% of qualified CBT therapists and 13% from HITs – other NHS Talking Therapies modalities (including NHS Talking Therapies qualified counsellors).
- Ethnicity demographics of the adult NHS Talking Therapies workforce remain broadly similar to wider, national population statistics, though 20% of the adult NHS Talking Therapies workforce were from Black, Asian, Mixed, Chinese and other ethnic minority backgrounds, compared to 17% of England population numbers (ages 16-64).
- 13% leaver rate reported in 12 months to 31st March 2022, compared to the 10% rate reported during the previous year.
- 39% of total leavers in the 12 months to 31st March 2022 confirmed that they no longer worked in NHS-commissioned NHS Talking Therapies services. The non-NHS-commissioned departure rate for clinical roles (low and high intensity) totalled 6% when calculated as a proportion of clinical staff in post plus leavers no longer working for NHS-commissioned NHS Talking Therapies services.

We would like to reiterate our thanks to all NHS Talking Therapies services who participated in the 2022 census, and Health Education England and NHS England for their ongoing guidance and support.



Appendices



2022 staffing

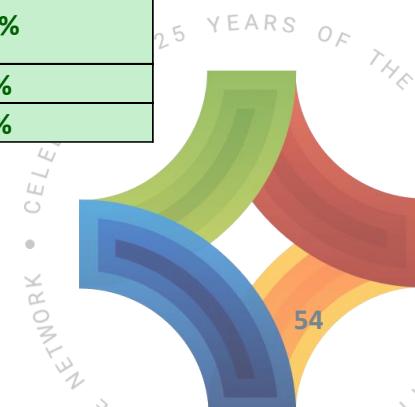
	2022
Low Intensity	WTE
Qualified Low Intensity Roles	
Lead Psychological Wellbeing Practitioner	74
Senior Psychological Wellbeing Practitioner	428
Psychological Wellbeing Practitioner	2225
Trainee Low Intensity Roles	
Trainee Psychological Wellbeing Practitioner	1590
Unqualified Low Intensity Roles	
Psychological Wellbeing Practitioner (not NHS Talking Therapies qualified or in NHS Talking Therapies training)	37
Other low intensity worker e.g. Assistant PWP	186
Low Intensity Total	4541
High Intensity	WTE
Qualified High Intensity Roles	
CBT Therapist	3387
Counsellor	929
Trainee High Intensity Roles	
Trainee CBT Therapist	1257
Trainee Counsellor e.g. CfD/IPT	132
High Intensity Roles - not recognised by NHS Talking Therapies	
Other High Intensity Therapist	292
High Intensity Total	5997
Total Low and High Intensity Staff	10538

	2022
Supervisors - NHS Talking Therapies supervisor trained	WTE
CBT Supervisor	544
Counselling Supervisor	85
PWP Supervisor	327
Other Supervisor	26
Supervisors who have not undertaken NHS Talking Therapies supervision model	
CBT Supervisor	12
Counselling Supervisor	26
PWP Supervisor	4
Other Supervisor	10
Employment Support Advisor	288
Senior Employment Support Advisor	65
Peer Support Worker (paid)	41
Management / Leadership roles	815
Admin and clerical staff inc. data analysts	1360
Other	159
Total other roles	3761
Total staffing in NHS Talking Therapies services	14299

NHS Talking Therapies workforce overview 2019-2022 – NHS services - breakdown by role (1)

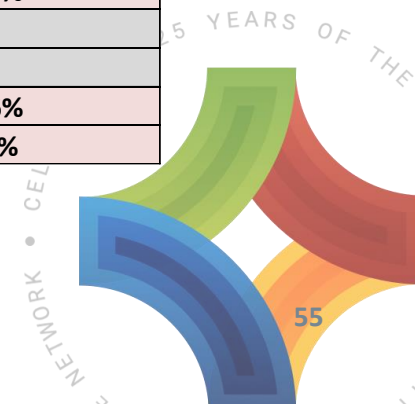
	2019	2020		2021		2022		
	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Qualified and trainee low intensity								
Psychological wellbeing practitioner	1483	1438	-3%	1729	20%	1797	4%	21%
Senior psychological wellbeing practitioner	264	280	6%	322	15%	362	30%	59%
Lead psychological wellbeing practitioner						57		
Qualified PWP's subtotal	1747	1718	-2%	2051	19%	2216	8%	27%
Low intensity trainees (e.g. Trainee psychological wellbeing practitioner)	660	1009	53%	1290	28%	1270	-2%	92%
Qualified and Trainee low intensity Total	2407	2727	13%	3341	23%	3486	4%	45%
High intensity								
CBT Therapists		2343		2823	20%	2861	1%	22%*
Other High Intensity Therapists	2455	232	5%	188	-19%	218	16%	-6%*
Counsellors	572	646	13%	702	9%	678	-3%	19%
Applied psychologist - Clinical	205	150	-27%	108	-28%			-
Non-trainee HIT Therapists subtotal	3231	3372	4%	3820	13%	3758	-2%	16%
High intensity trainees (e.g. Trainee CBT therapist / trainee counsellor e.g. CfD/IPT)	399	581	46%	865	49%	1046	21%	162%
High intensity Total	3630	3952	9%	4686	19%	4804	3%	32%
Total low and high intensity staff	6037	6679	11%	8027	20%	8290	3%	37%

*: 2020 – 2022 cumulative change



NHS Talking Therapies workforce overview 2019-2022 – NHS services - breakdown by role (2)

	2019	2020		2021		2022		
Employment Support	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Employment support advisor	164	221	35%	261	18%	246	-4%	-2%
Senior employment support advisor						56		
Externally contracted employment advisor/coordinator	143	85	-41%	53	-38%			
Employment Support Total	307	307	0%	314	2%	302	-4%	-2%
Additional roles								
Psychological wellbeing practitioner (not NHS Talking Therapies qualified or in NHS Talking Therapies training)						14	-	-
Other low intensity worker e.g. assistant PWP						138	-	-
PWP workers (not-NHS Talking Therapies qualified)	123	202	65%	144	-29%			-
Other low intensity counsellors	43							-
Other low intensity therapists	70							-
Other low intensity staffing subtotal	236	202	-14%	144	-29%	153	6%	-35%
Other trainees	57	77	35%	44	-42%			-
Peer support worker (paid)						34	-	-
Additional roles Total	293	279	-5%	188	-33%	187	-1%	-36%
Total patient-facing staff	6637	7265	9%	8529	17%	8778	3%	32%



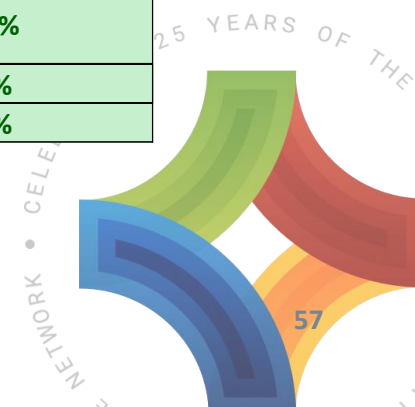
NHS Talking Therapies workforce overview 2019-2022 – NHS services - breakdown by role (3)

	2019	2020		2021		2022		
Non-patient facing roles <i>Including time spent by clinical staff providing supervision</i>	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Supervisors - NHS Talking Therapies supervisor trained	429	609	42%	719	18%	732	2%	71%
Supervisors - supervisors who have not undertaken NHS Talking Therapies supervision module/training	95	57	-40%	59	2%	36	-38%	-62%
Management / leadership roles	341	394	15%	612	55%	631	3%	85%
Admin and clerical staff inc. data analysts	858	905	6%	1035	14%	1018	-2%	19%
Other job roles	288	224	-22%	178	-20%	108	-39%	-62%
Total non-patient facing roles	2012	2189	9%	2602	19%	2525	-3%	26%
Total staffing in NHS Talking Therapies services	8648	9454	9%	11131	18%	11303	2%	31%

NHS Talking Therapies workforce overview 2019-2022 – Non-NHS services - breakdown by role (1)

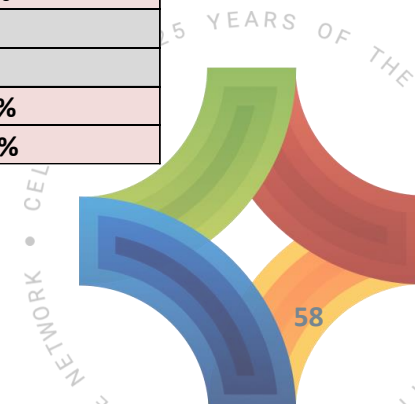
	2019	2020		2021		2022		
	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Qualified and trainee low intensity								
Psychological wellbeing practitioner	230	309	34%	421	36%	428	2%	86%
Senior psychological wellbeing practitioner	51	70	37%	109	56%	66	-23%	64%
Lead psychological wellbeing practitioner						18		
Qualified PWP's subtotal	281	379	35%	529	40%	512	-3%	82%
Low intensity trainees (e.g. Trainee psychological wellbeing practitioner)	117	192	65%	229	19%	321	40%	175%
Qualified and Trainee low intensity Total	398	571	44%	759	33%	832	10%	109%
High intensity								
CBT Therapists		419	40%	508	21%	526	3%	26%*
Other High Intensity Therapists	350	72		55	-23%	74	34%	3%*
Counsellors	230	209	-9%	304	45%	251	-17%	9%
Applied psychologist - Clinical	11	5	-55%	4	-17%			-
Non-trainee HIT Therapists subtotal	591	705	19%	872	24%	851	-2%	44%
High intensity trainees (e.g. Trainee CBT therapist / trainee counsellor e.g. CfD/IPT)	111	133	20%	195	46%	342	76%	210%
High intensity Total	701	838	20%	1066	27%	1193	12%	70%
Total low and high intensity staff	1099	1409	28%	1825	30%	2026	11%	84%

*: 2020 – 2022 cumulative change



NHS Talking Therapies workforce overview 2019-2022 – Non-NHS services - breakdown by role (2)

	2019	2020		2021		2022		
Employment Support	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Employment support advisor	24	43	80%	38	-11%	42	-12%	-3%
Senior employment support advisor						9		
Externally contracted employment advisor/coordinator	29	14	-53%	20	49%			
Employment Support Total	53	56	7%	58	4%	51	-12%	-3%
Additional roles								
Psychological wellbeing practitioner (not NHS Talking Therapies qualified or in NHS Talking Therapies training)						23	-	-
Other low intensity worker e.g. assistant PWP						47	-	-
PWP workers (not-NHS Talking Therapies qualified)	32	77	145%	54	-31%			-
Other low intensity counsellors	30							-
Other low intensity therapists	8							-
Other low intensity staffing subtotal	70	77	11%	54	-31%	70	31%	1%
Other trainees	11	33	198%	26	-20%			-
Peer support worker (paid)						7	-	-
Additional roles Total	81	110	37%	80	-27%	77	-4%	-4%
Total patient-facing staff	1232	1576	28%	1964	25%	2154	10%	75%



NHS Talking Therapies workforce overview 2019-2022 – Non-NHS services - breakdown by role (3)

	2019	2020		2021		2022		
Non-patient facing roles <i>Including time spent by clinical staff providing supervision</i>	WTE	WTE	Change (2019-2020)	WTE	Change (2020-2021)	WTE	Change (2021-2022)	Cumulative change (2019-2022)
Supervisors - NHS Talking Therapies supervisor trained	111	174	57%	210	21%	249	18%	125%
Supervisors - supervisors who have not undertaken NHS Talking Therapies supervision module/training	42	9	-79%	12	31%	15	28%	-64%
Management / leadership roles	96	107	11%	177	66%	185	4%	91%
Admin and clerical staff inc. data analysts	162	283	75%	235	-17%	342	46%	112%
Other job roles	34	38	11%	50	34%	51	1%	50%
Total non-patient facing roles	445	611	37%	684	12%	841	23%	89%
Total staffing in NHS Talking Therapies services	1677	2186	30%	2648	21%	2996	13%	79%

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