

An Overview of the Advanced Clinical Practice Workforce in the North West 2024



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Contents

An Overview of the Advanced Clinical Practice Workforce in the North West 2024	1
<hr/>	
Introduction	3
Executive summary	4
Current Workforce – Secondary Care	5
North West Overview	5
Overview by ICS Area – Secondary Care	11
Cheshire & Merseyside	11
C&M ACP Demographics – Comparisons to All C&M Clinical Staff	14
Greater Manchester	16
GM ACP Demographics – Comparisons to All GM Clinical Staff	19
Lancashire & South Cumbria	21
L&SC ACP Demographics – Comparisons to All L&SC Clinical Staff	24
Current Workforce – Sickness Absence	26
NW Overview	26
Overview by ICS Area – Sickness Absence	32
Cheshire & Merseyside	32
Greater Manchester	34
Lancashire & South Cumbria	36
Current Workforce - Primary Care	39
NW Overview	39
Supply	45
NW Overview	45
APPENDIX	49
Appendix A	49
Appendix B	49
SOURCES	49



Introduction

The NHS Five Year Forward View 2014 and the NHS Long Term Plan 2019 outlined the need for healthcare reform to improve quality of care and efficiencies. Advanced Clinical Practitioners (ACPs) were identified, as part of the solution, in transforming the workforce with new models of care, recognising that they are senior clinical decision makers who can make a demonstratable impact in priority areas.

The current NHS Long-Term Workforce Plan 2023 further emphasizes the need to train nurses to have longer career pathways, at advanced and consultant level, and the importance of Allied Health Professions (AHPs) at an advanced practice level to manage the demands across the system. The growth of Advanced Practitioners is specifically addressed as a key workforce expansion role with an estimated 39,000 Advanced Practitioners required by 2036/37 across England, through reformed education pathways. The Plan stipulates that the current growth rate is not sufficient, with education growth projections from 2023/24.

The aim of this report is to provide an overview of the current advanced practice workforce in the North West region, encompassing 31 NHS Trusts and Primary Care. It excludes the advanced practice workforce of NHS providers within private, independent, and voluntary organizations due to data accessibility issues. This report is intended to support Integrated Care Boards, NHS Trusts, and Primary Care in embedding advanced practice within their workforce modelling and planning, aligning with the ambitious growth targets outlined in the NHS Long-Term Workforce Plan 2023.

This report will be shared with NHS Trusts and Primary Care Training Hub Advanced Practice Leads to demonstrate the changes and improvements in the data. It underscores the importance of maintaining accurate data for sustainable workforce modelling and planning. The report will be encouraged to be shared with senior executives within NHS Trusts and Integrated Care Boards to support the Advanced Practice ICS collaboratives in developing and delivering their strategy for improving governance of the Advanced Practice workforce. This will help achieve the workforce reform target of Advanced Practitioners outlined in the NHS Long-Term Workforce Plan 2023, particularly targeting NHS Trusts with lower levels of the advanced practice workforce.

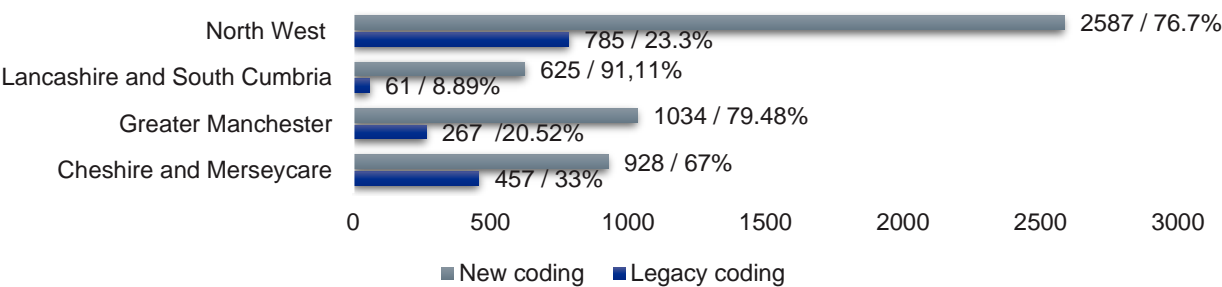
Furthermore, this report will be utilised for further data analysis to identify trends and understand the average, upper, and lower control limits for the advanced practice workforce. This will support future workforce planning by identifying specific services that have appropriate levels of Advanced Practitioners and understanding the variance.

Executive summary

In March 2022 a baseline report on the north west advanced practice workforce indicated a headcount of 2,571 advanced practitioner across NHS Trusts (1870) and primary care (701). It was recognised that data had inaccuracies due limitations in data capture methods, providing only a reflection based on the best available information and not a completely accurate representation of the advanced practice workforce in the north west.

In February 2022, the publication of an Information Standards Notification – v3.3 introduced significant changes to the job role coding for advanced practitioner within the Electronic Staff Records (ESR). For the first time, this provided a clear structure to identify the advanced practice workforce aligned to the professional staffing groups. A guide to ESR coding for advanced practitioner roles was developed to support NHS trusts.

Across the north west 97% of the NHS Trusts committed to a project to audit their advanced practitioner workforce and accurately code them. A quarter of the NHS Trusts have not fully completed their audit to ensure data accuracy. Figure 1 provides a position as of June 2024, illustrating the advanced practice and trainee advanced practice workforce within ESR who are aligned to the legacy coding (blue) and the workforce aligned to the Information Standards Notification (grey):



NHSE have been working in collaboration with NHS Trusts to ensure all Advanced Practitioners are recorded on ESR under the new coding. Through the audits it is recognised that some workforce identified through the legacy coding are not Advanced Practitioners and should be aligned to the legacy coding (blue). Lancashire and South Cumbria has the most accurate position and therefore recognise that circa 10% of the data above will maintain in the legacy

coding. Despite some data inaccuracies, this report provides a more accurate representation of the advanced practice workforce.

This report includes data on the primary care advanced practice workforce and student data. However, it is recognised that an audit has not been completed for these two data sets, so the accuracy of the information is not fully known. Despite this, the data provides some understanding that can support future audits.

Current Workforce – Secondary Care

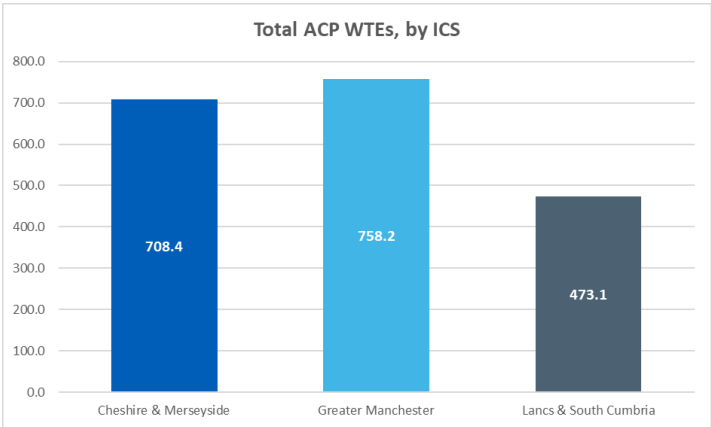
All data in this section of the report is taken from the NHS Electronic Staff Record (ESR), with an extract date of June 2024. ESR Job Role has been used to identify Advanced Clinical Practitioners, where the Job Role contains "Advanced Practitioner". This does not include those as Trainee Advanced Practitioners, as this detailed separately within the report.

North West Overview

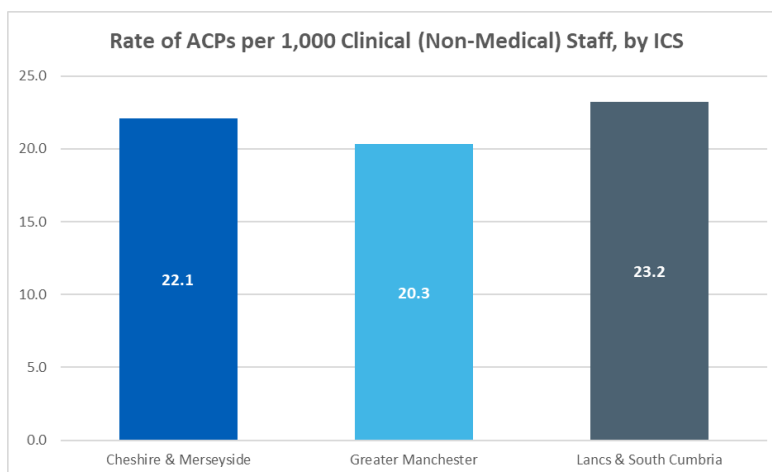
Total Number of ACPs (Regionally, and by ICS)

As of June 2024, there were **2,111** ACPs working in Secondary Care across the 31 NHS Trusts in the North West region. When considering this as a whole time equivalent (WTE) value, the number stands at **1,939.7**. (Whole time equivalent values are calculated by dividing the number of hours worked by the numbers of weekly hours available – 37.5 in this case. For example, if a member of staff works a full 37.5-hour week, then their WTE value is 1, whereas a member of staff who works 15 hours per week has a WTE value of 0.4)

The breakdown in numbers by ICS area is as follows:

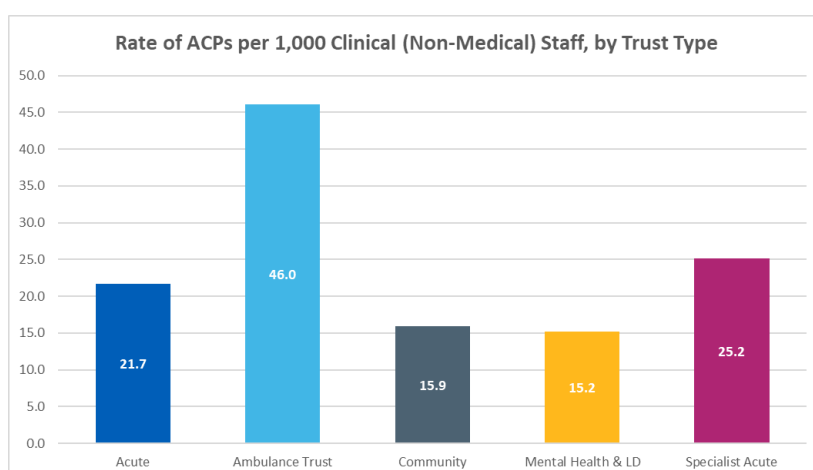


When we consider the rate of ACPs per 1,000 clinical staff (i.e. non-Medical, non-Infrastructure – just those staff who can become ACPs), we get a better and fairer understanding of the numbers across the ICS areas:



As illustrated in the chart above, Lancashire & South Cumbria ICS has the highest rate of ACPs per 1,000 clinical staff, with **23.2**. This contrasts with the lowest rate of **20.3** per 1,000 in Greater Manchester – a difference of 2.9.

When viewed as a rate per 1,000 staff at a North West level, but by Trust type, this is what we can see:

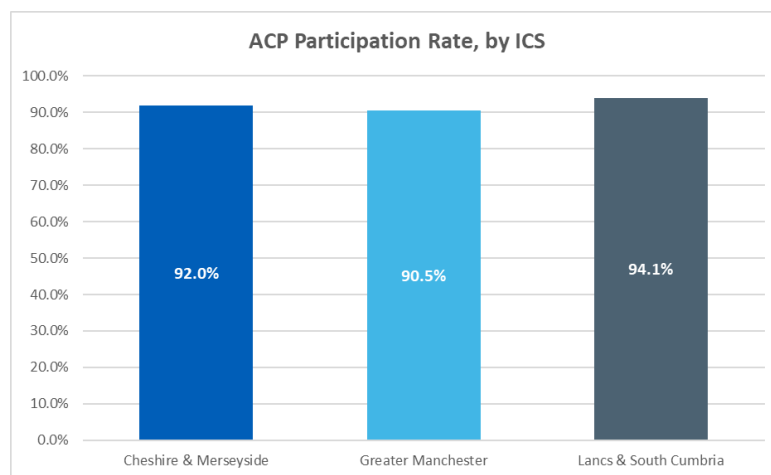


The Ambulance trust type (in this case, NWAS-only) has by far the highest rate of ACPs per 1,000 staff, at **46**. The next highest are Specialist Acutes, at **25.2**, with the lowest being Mental Health and LD Trusts, at **15.2**.

Participation Rate

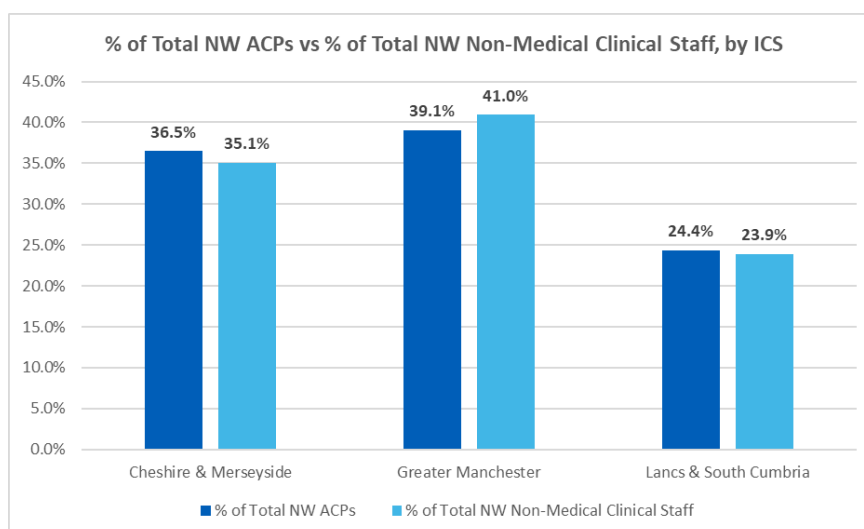
Participation rate is a measure of the proportion of staff working full time, and is calculated by dividing the whole time equivalent value of the workforce by the headcount. If we consider that the headcount of North West ACPs is 2,111 and the WTE is 1,939.7, then the latter divided by the former gives us a participation rate of **91.9%** for the region.

The following chart breaks down the participation rates by ICS area:



Greater Manchester falls below the North West average, with a participation rate of **90.5%**

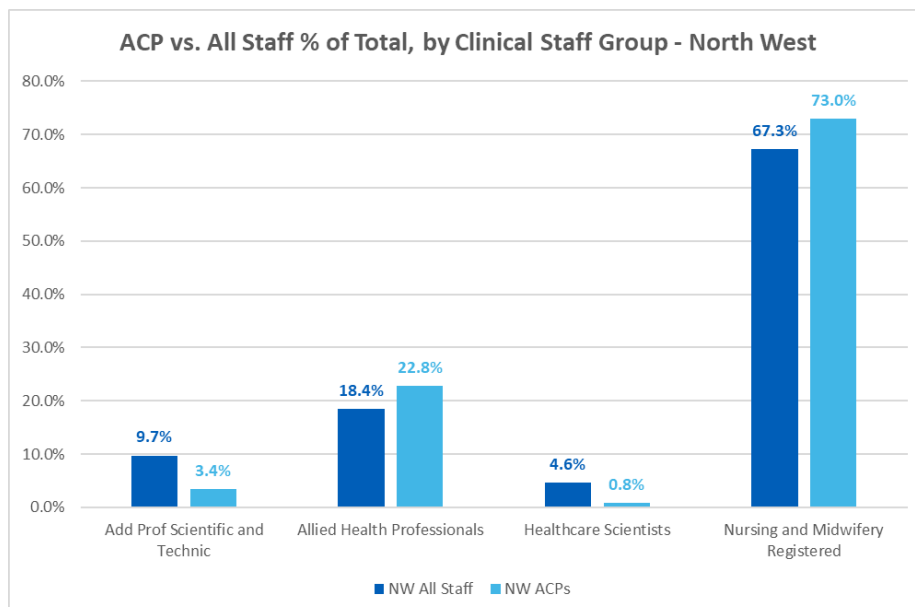
ICS % of Total NW ACPs vs % of Total NW Clinical Staff



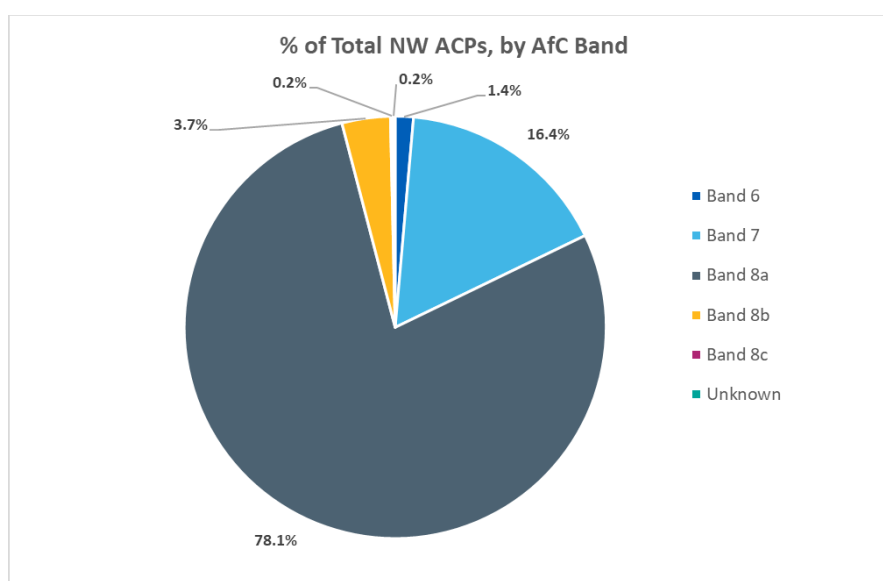
The dark blue bars in the chart above illustrate the percentage of total North West ACPs that each ICS area employs, whilst the light blue bar shows the percentage of total NW clinical staff (of which can become ACPs) in each ICS. E.g. Greater Manchester employs 41% of all North West clinical staff, but only 39% of all North West ACPs. This is reversed for Cheshire & Merseyside, which employs 35.1% of all clinical staff in the North West, but 36.5% of all ACPs.

North West ACPs by Staff Group

The following chart focus only on those staff groups in which ACPs are currently employed, this is the percentage split:

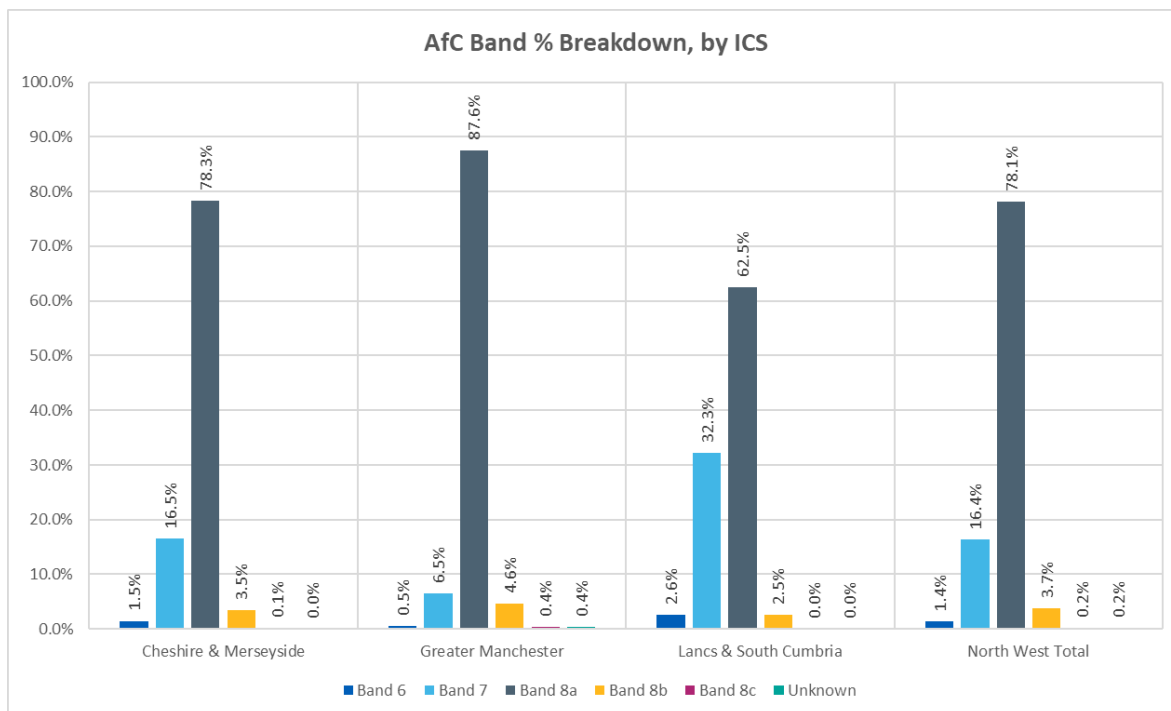


North West ACP Split by Agenda for Change Pay Bands



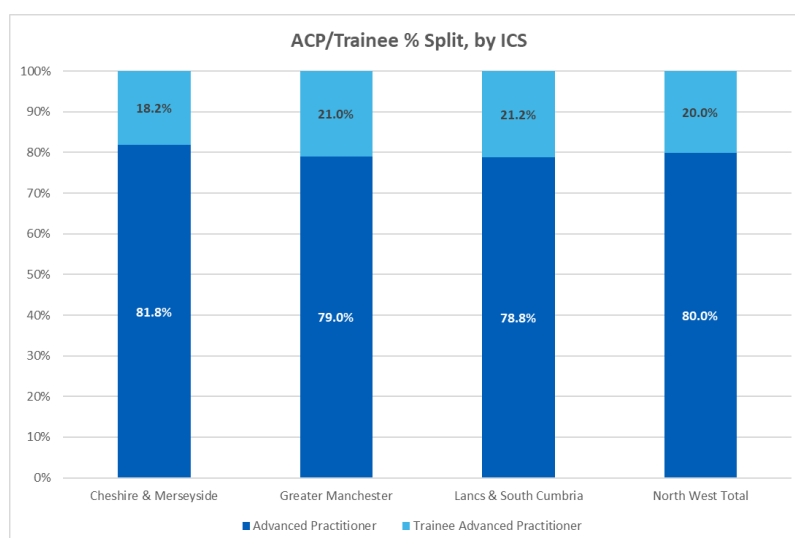
Over three-quarters (**78.1%**) of ACPs in the North West are employed at AfC Band 8a. Bands 8a and 7 account for **94.5%** of all NW ACPs.

The following chart illustrates the split by ICS area:



To note here; over one-third (**34.9%**) of Lancashire & South Cumbria's ACPs are banded below 8a (i.e. bands 7 and 6).

Trainee/Qualified ACP Split



This chart illustrates the split between qualified ACPs and Trainee ACPs, by ICS area. (Please note that this is based on ESR coding/naming conventions, and therefore may not be an accurate picture of trainee proportions).

NW ACPs by Role

Staff Group	Role	WTE	
Add Prof Scientific and Technic	Advanced Practitioner	61.4	<div></div>
	Pharmacist Advanced Practitioner	*	
Allied Health Professionals	Chiropractist or Podiatrist Advanced Practitioner	*	
	Dietitian Advanced Practitioner	8.4	<div></div>
	Multi Therapist Advanced Practitioner	*	
	Occupational Therapist Advanced Practitioner	18.5	<div></div>
	Operating Department Practitioner Advanced Practitioner	7.8	<div></div>
	Orthoptist Advanced Practitioner	*	
	Paramedic Advanced Practitioner	153.3	<div></div>
	Physiotherapist Advanced Practitioner	203.2	<div></div>
	Radiographer - Diagnostic Advanced Practitioner	30.9	<div></div>
	Radiographer - Therapeutic Advanced Practitioner	7.8	<div></div>
	Speech and Language Therapist Advanced Practitioner	*	
Healthcare Scientists	Clinical Scientist Advanced Practitioner	7.5	<div></div>
	Healthcare Science Practitioner Advanced Practitioner	7.9	<div></div>
Nursing and Midwifery Registered	Advanced Practitioner	*	
	Midwife - Advanced Practitioner	12.9	<div></div>
	Nurse - Advanced Practitioner	1401.9	<div></div>

*Values <5 suppressed

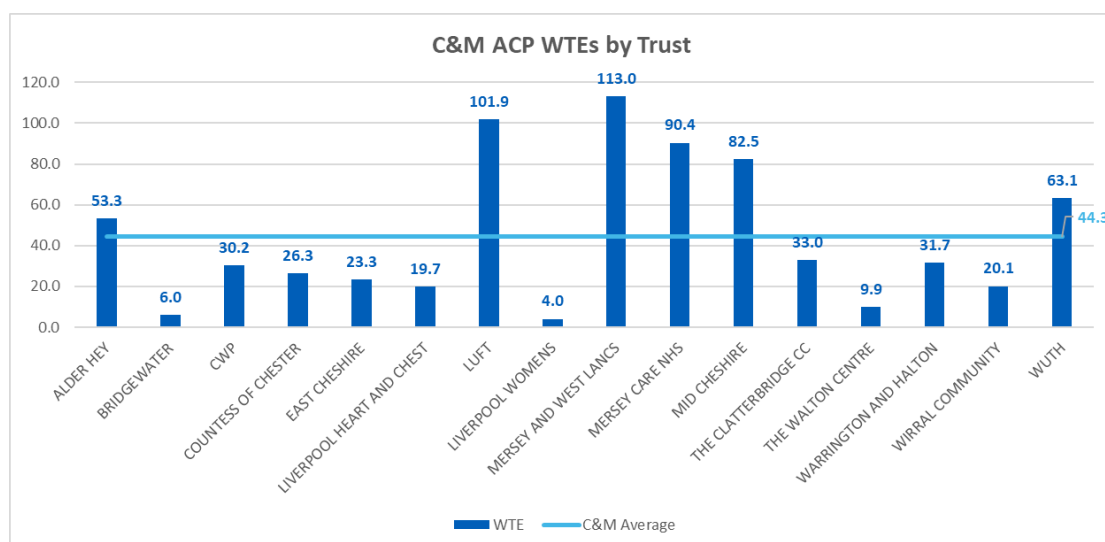
The table above displays the number of WTEs by staff group and role, across the North West. Prosthetists and Orthotists are the only Allied Health Professionals that are not represented in the table. The table clearly shows, the vast majority of ACPs in the region are Nurses. With this in mind, the following table splits out the Nursing roles, to provide further detail:

Area of Nursing	WTE	
Adult	930.4	<div></div>
Children & Young People	102.4	<div></div>
Community	270.8	<div></div>
Learning Disabilities	*	
Maternity Services	15.6	<div></div>
Mental Health	40.1	<div></div>
Neonatal	59.1	<div></div>
School Nursing	*	

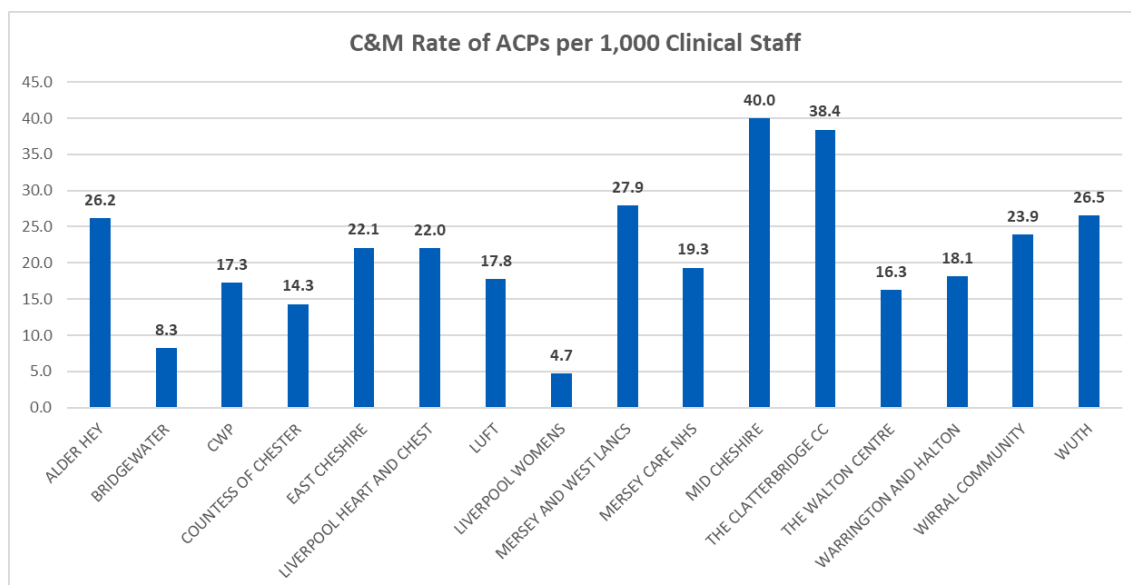
Overview by ICS Area – Secondary Care

Cheshire & Merseyside

As of June 2024, there were **770** ACPs working across all sixteen provider Trusts in Cheshire & Merseyside. The WTE value of these staff was **708.4**, giving a participation rate of **92%**. The following chart breaks down the ACP WTEs by Trust:



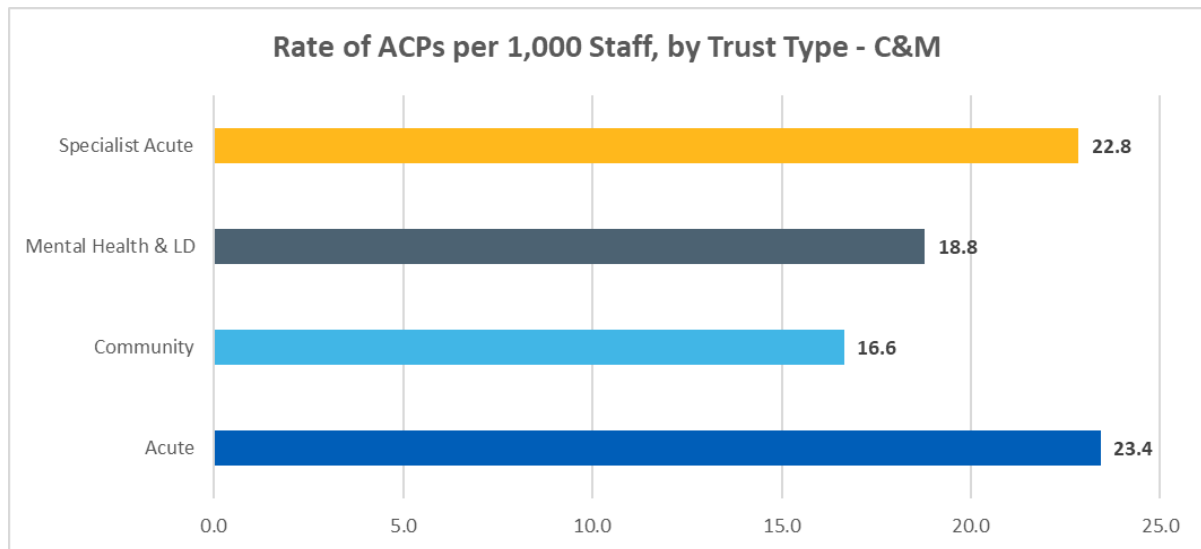
The next chart illustrates the rate of ACPs per 1,000 clinical staff, by Trust:



Mid Cheshire Hospitals NHS Foundation Trust has the highest rate of ACPs per 1,000 clinical staff, at **40**. This is 35.3 more than Liverpool Women's NHS Foundation Trust, which has a rate of **4.7** per 1,000.



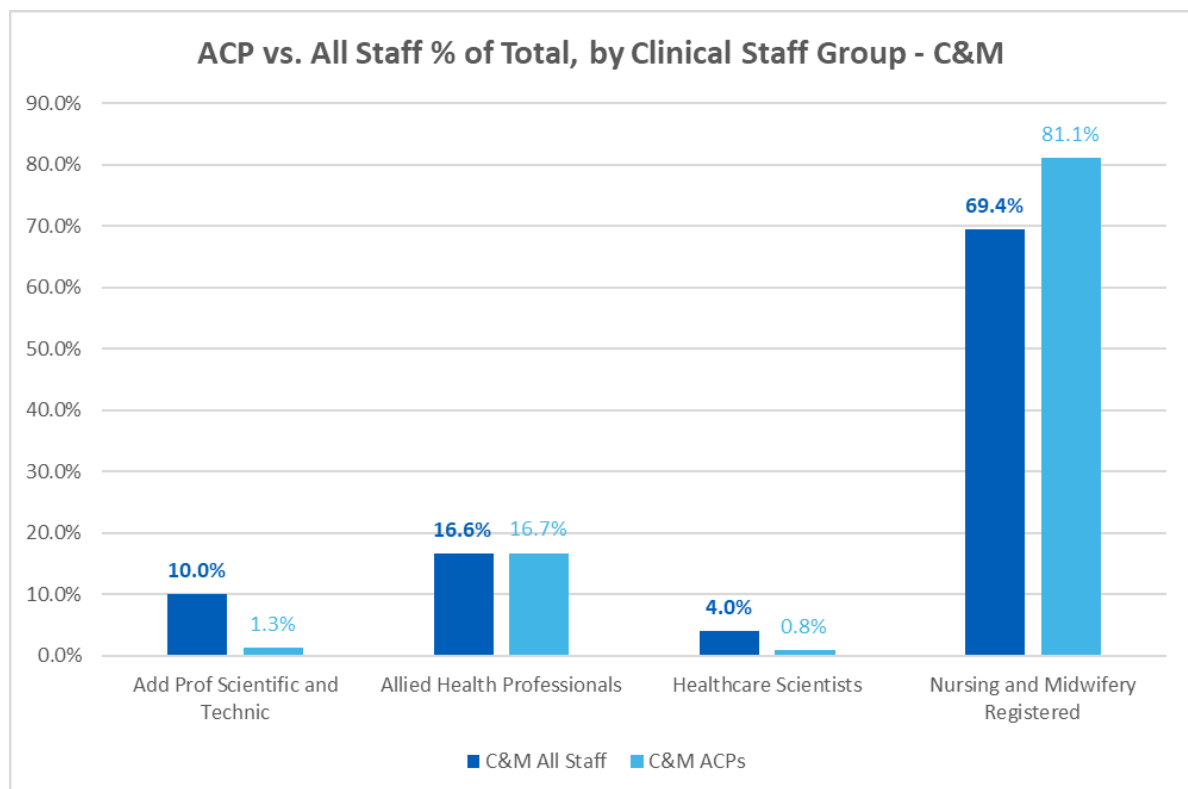
We can also view the rate per 1,000 clinical staff by Trust type in Cheshire & Merseyside:



The Cheshire & Merseyside general Acute Trusts have the highest rate, at **23.4** per 1,000. Community Trusts have the lowest rate at **16.6**; a difference of **6.8**.

C&M ACPs by Staff Group

The following chart compares the proportion of staff groups in which ACPs are currently employed, this is the percentage split:



C&M ACPs by Role

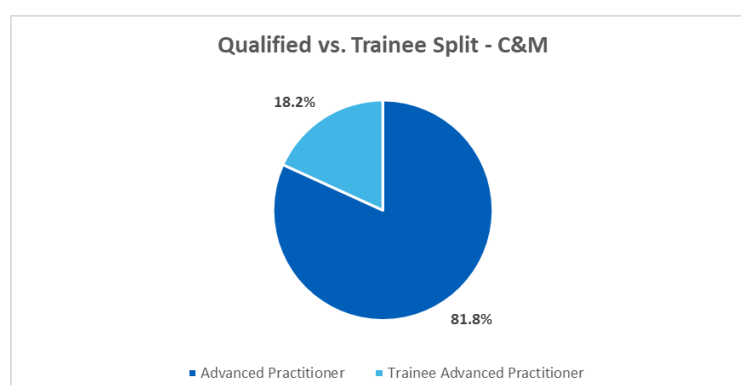
Staff Group	Role	WTE	
Add Prof Scientific and Technic	Advanced Practitioner	7.7	
	Pharmacist Advanced Practitioner	*	
Allied Health Professionals	Chiropodist or Podiatrist Advanced Practitioner	*	
	Dietitian Advanced Practitioner	*	
	Occupational Therapist Advanced Practitioner	9.5	
	Operating Department Practitioner Advanced Practitioner	*	
	Orthoptist Advanced Practitioner	*	
	Paramedic Advanced Practitioner	10.0	
	Physiotherapist Advanced Practitioner	75.3	
	Radiographer - Diagnostic Advanced Practitioner	14.0	
	Speech and Language Therapist Advanced Practitioner	*	
	Healthcare Science Practitioner Advanced Practitioner	5.9	
Nursing and Midwifery Registered	Midwife - Advanced Practitioner	7.0	
	Nurse - Advanced Practitioner	567.4	

*Values <5 suppressed

The table above displays the number of WTEs by staff group and role, in Cheshire & Merseyside. Multi Therapist Advanced Practitioners, Radiographer – Therapeutic and Prosthetists and Orthotists Advanced Practitioners are the Allied Health Professionals that are not represented in the table. The table clearly shows, the vast majority of ACPs in C&M are Nurses. With this in mind, the following table splits out the Nursing roles, to provide further detail:

Area of Nursing	WTE	
Adult	332.7	
Children & Young People	74.1	
Community	125.1	
Learning Disabilities	*	
Maternity Services	10.7	
Mental Health	11.0	
Neonatal	17.4	
School Nursing	*	

Qualified ACP vs. Trainee ACP Split

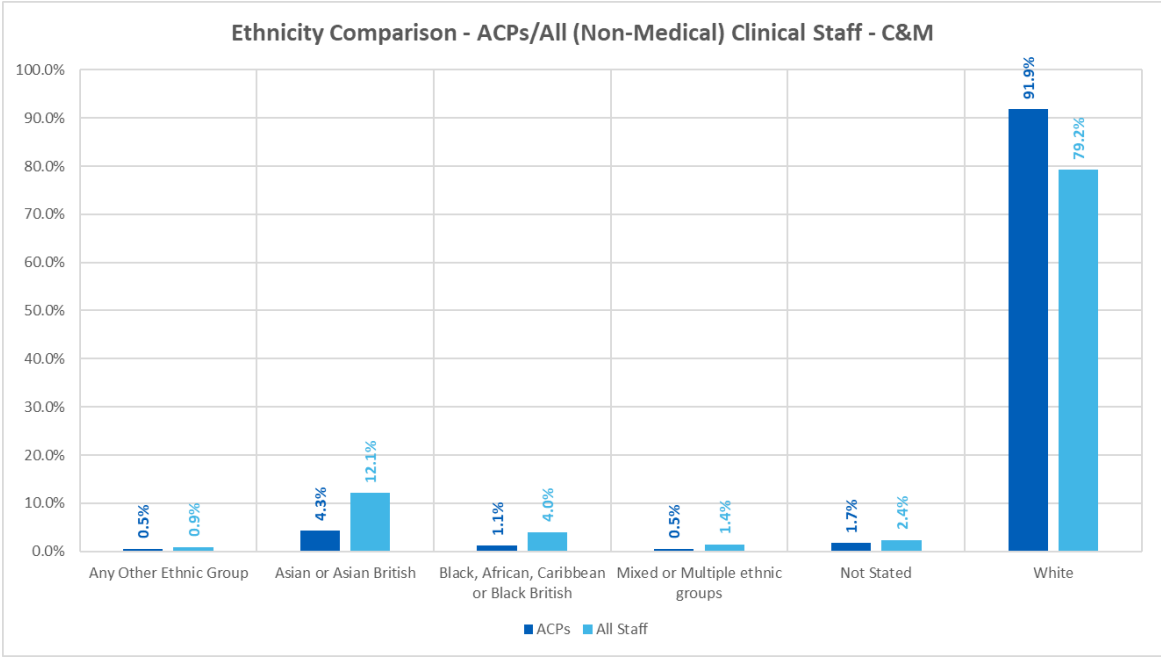


This chart illustrates the split between qualified ACPs and Trainee ACPs, by ICS area. (Please note that this is based on ESR coding/naming conventions, and therefore may not be an accurate picture of trainee proportions).

C&M ACP Demographics – Comparisons to All C&M Clinical Staff

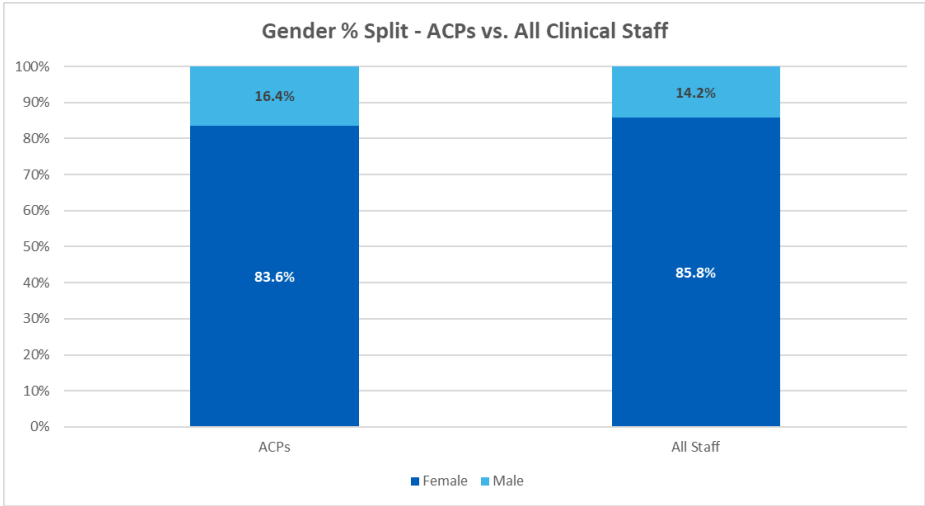
Ethnicity

The following chart compares the ethnicity breakdown of ACPs in Cheshire & Merseyside, and compares this to the total clinical staff group numbers:

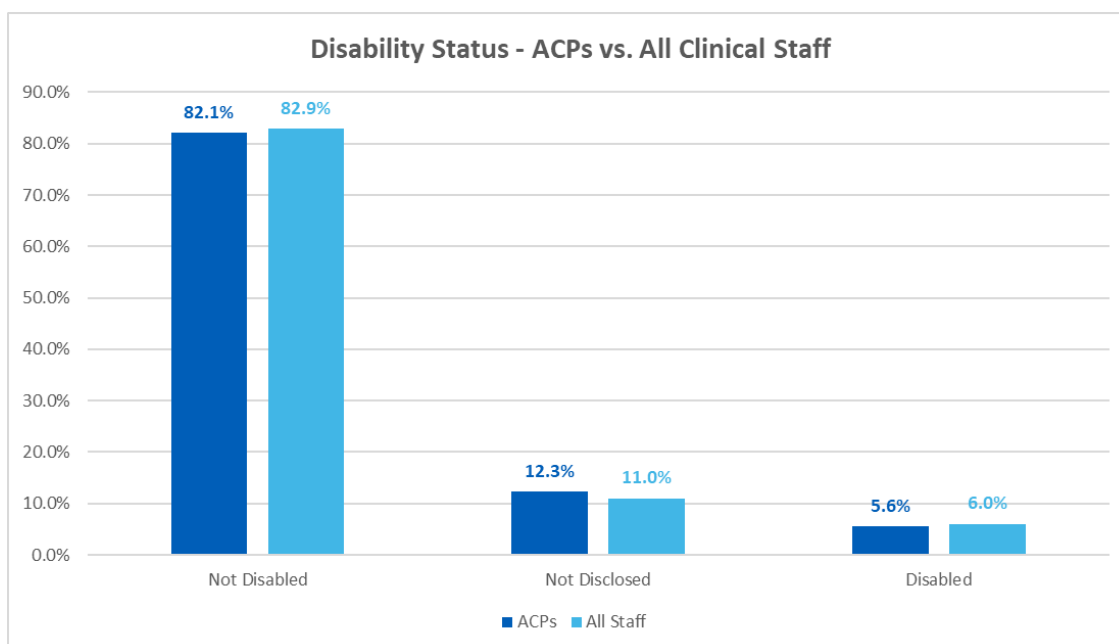


For example, **91.9%** of all ACPs in C&M are White, compared to **79.2%** in the wider clinical workforce. Just over one-fifth (20.8%) of the total clinical workforce in C&M is BAME, compared to **8.1%** for ACPs.

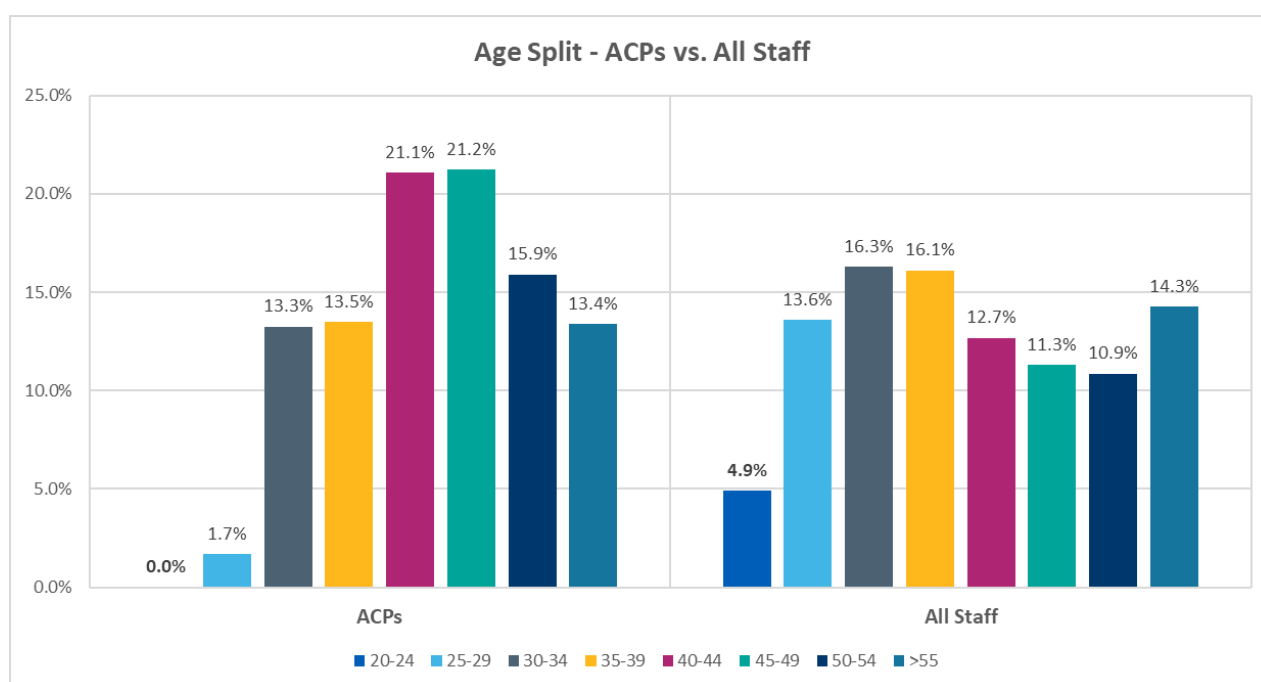
Gender



Disability



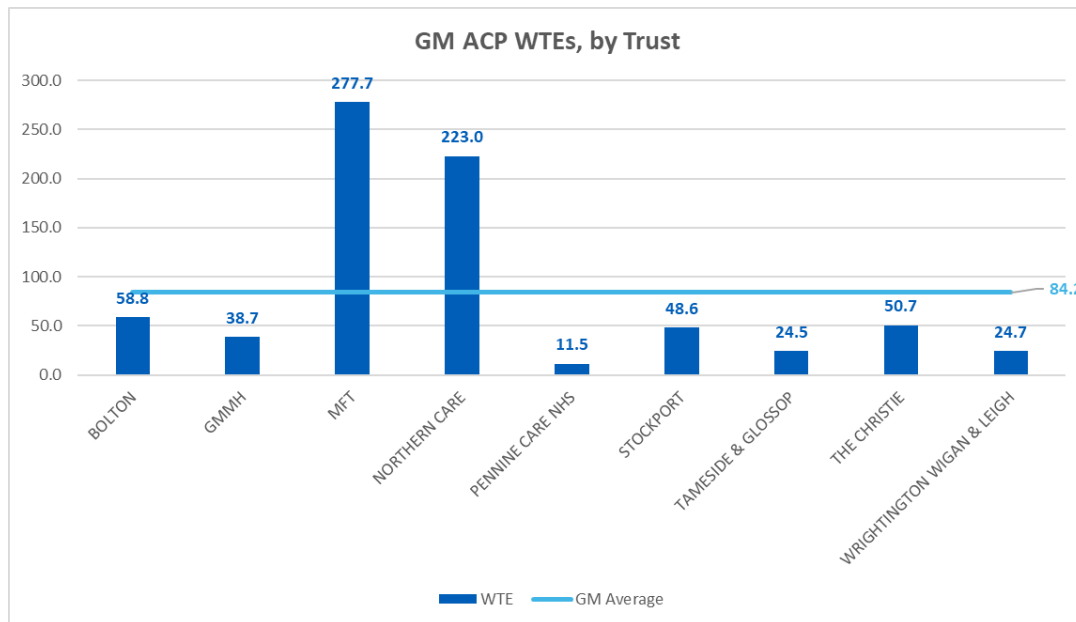
Age



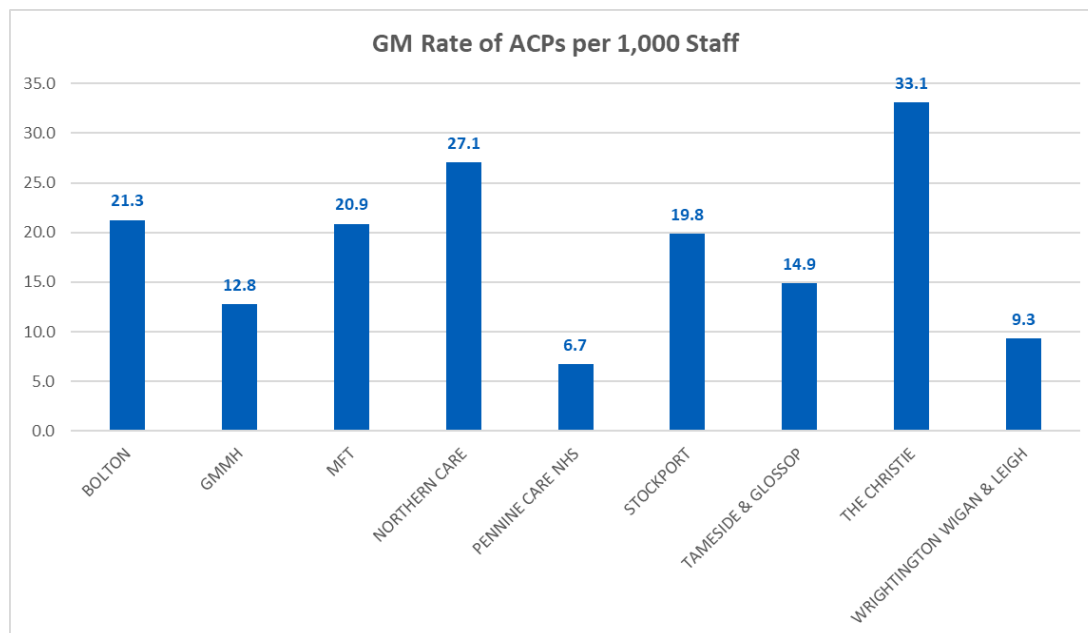
The retirement risk for ACPs (i.e. those aged 55+) is slightly lower than the all-staff average; **13.4%** compared to **14.3%**

Greater Manchester

As of June 2024, there were **838** ACPs working across nine provider Trusts in Greater Manchester. The WTE value of these staff was **758.2**, giving a participation rate of **90.5%**. The following chart breaks down the ACP WTEs by Trust:

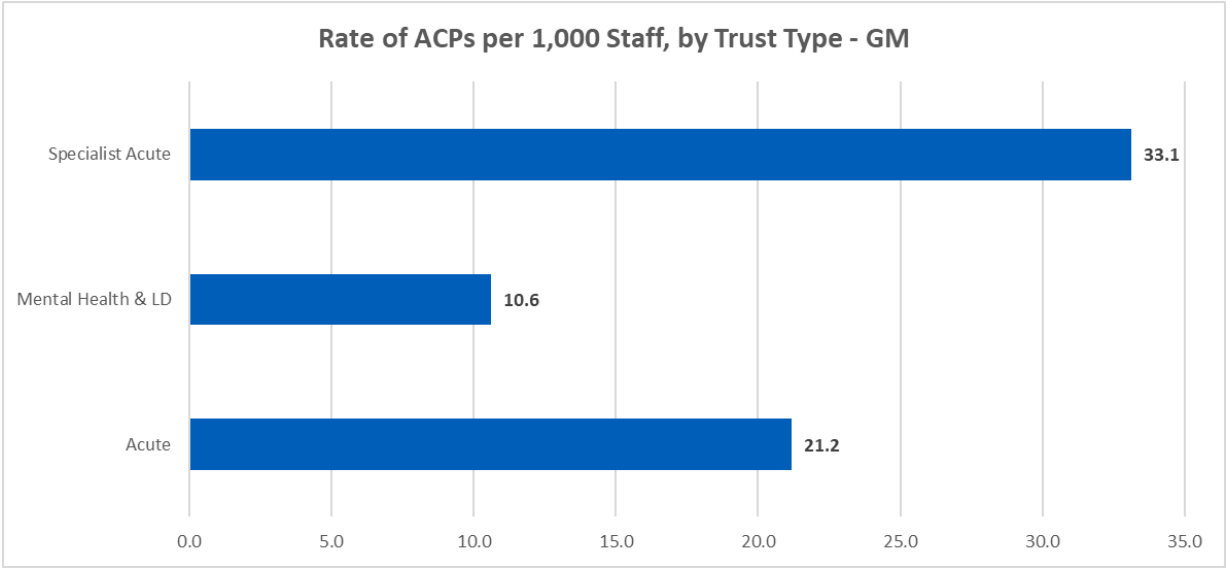


The next chart illustrates the rate of ACPs per 1,000 clinical staff, by Trust:



The Christie NHS Foundation Trust has the highest rate of ACPs per 1,000 clinical staff, at **33.1**. This is 26.4 more than Pennine Care NHS Foundation Trust, which has a rate of **6.7** per 1,000.

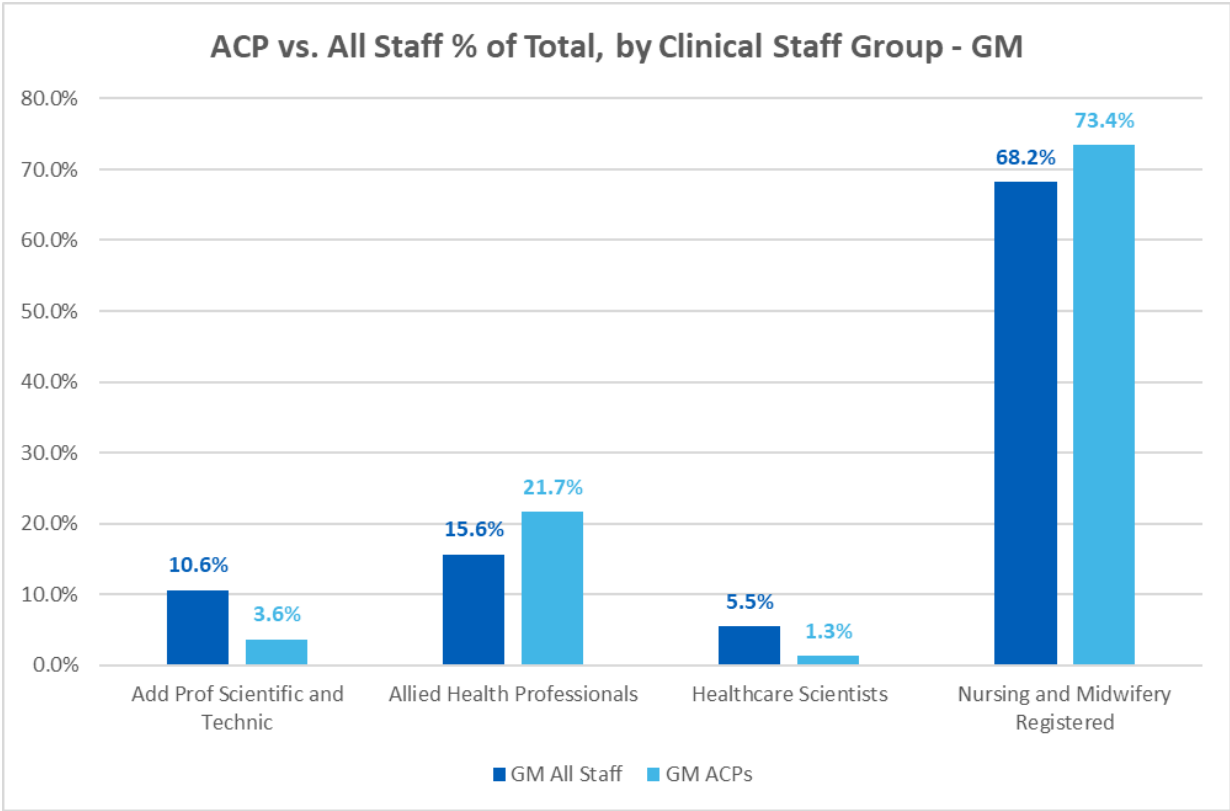
We can also view the rate per 1,000 clinical staff by Trust type in Greater Manchester:



The Greater Manchester Specialist Acute Trusts have the highest rate, at **33.1** per 1,000. Mental Health & LD Trusts have the lowest rate at **10.6**; a difference of **22.5**.

GM ACPs by Staff Group

The following chart compares the proportion staff groups in which ACPs are currently employed, this is the percentage split:



GM ACPs by Role

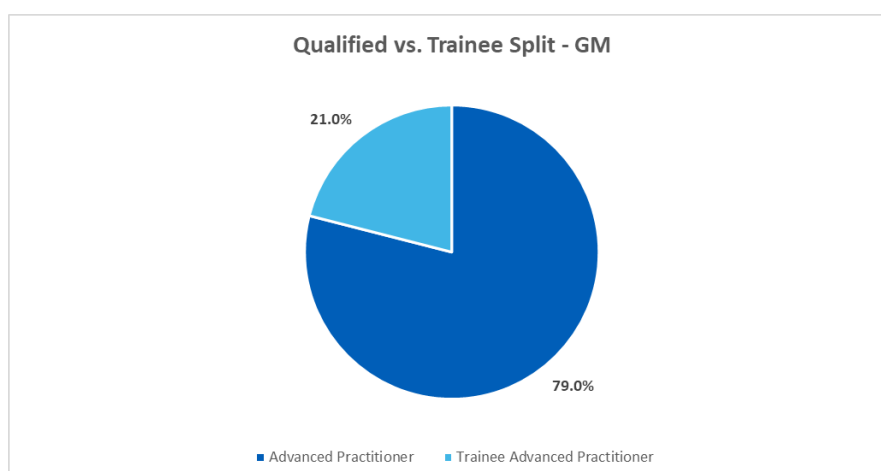
Staff Group	Role	WTE
Add Prof Scientific and Technic	Advanced Practitioner	25.6
	Pharmacist Advanced Practitioner	*
Allied Health Professionals	Chiroprapist or Podiatrist Advanced Practitioner	*
	Dietitian Advanced Practitioner	*
	Multi Therapist Advanced Practitioner	*
	Occupational Therapist Advanced Practitioner	7.0
	Operating Department Practitioner Advanced Practitioner	*
	Orthoptist Advanced Practitioner	*
	Paramedic Advanced Practitioner	12.2
	Physiotherapist Advanced Practitioner	110.4
	Radiographer - Diagnostic Advanced Practitioner	17.0
	Radiographer - Therapeutic Advanced Practitioner	*
	Clinical Scientist Advanced Practitioner	7.5
Healthcare Scientists	Healthcare Science Practitioner Advanced Practitioner	*
	Midwife - Advanced Practitioner	5.9
Nursing and Midwifery Registered	Nurse - Advanced Practitioner	550.7

*Values <5 suppressed

The table above displays the number of WTEs by staff group and role, in Greater Manchester. Speech and Language Therapists and Prosthetists and Orthotists are the Allied Health Professionals that are not represented in the table. As the table clearly shows, the vast majority of ACPs in GM are Nurses. With this in mind, the following table splits out the Nursing roles, to provide further detail:

Area of Nursing	WTE
Adult	401.8
Children & Young People	21.9
Community	66.2
Maternity Services	*
Mental Health	24.1
Neonatal	37.7

Qualified ACP vs. Trainee ACP Split

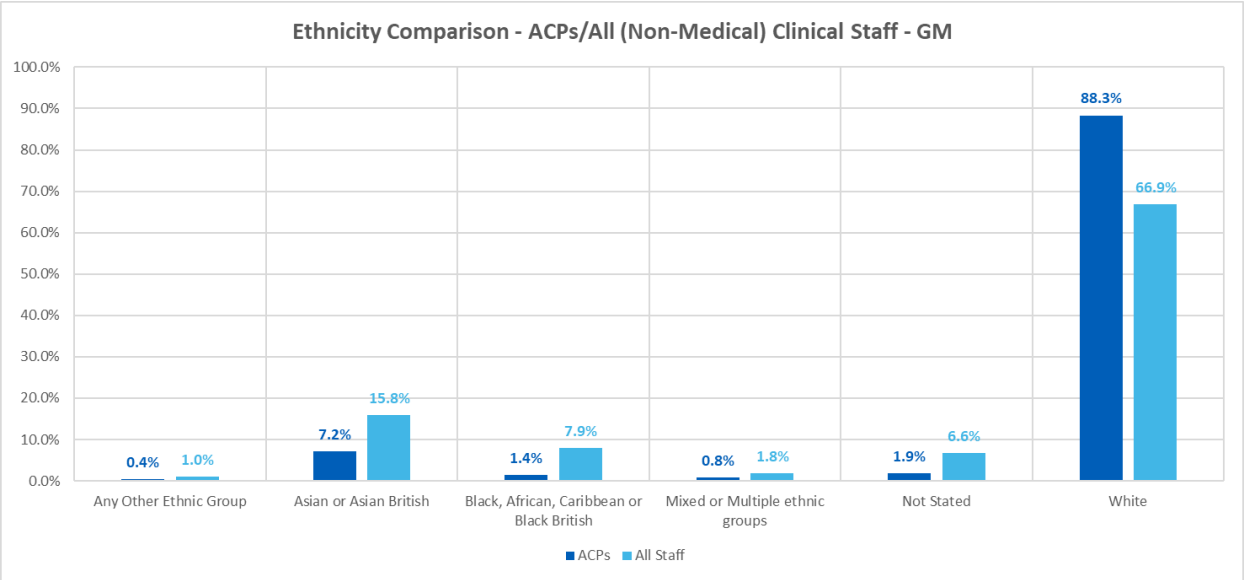


This chart illustrates the split between qualified ACPs and Trainee ACPs, by ICS area. (Please note that this is based on ESR coding/naming conventions, and therefore may not be an accurate picture of trainee proportions.)

GM ACP Demographics – Comparisons to All GM Clinical Staff

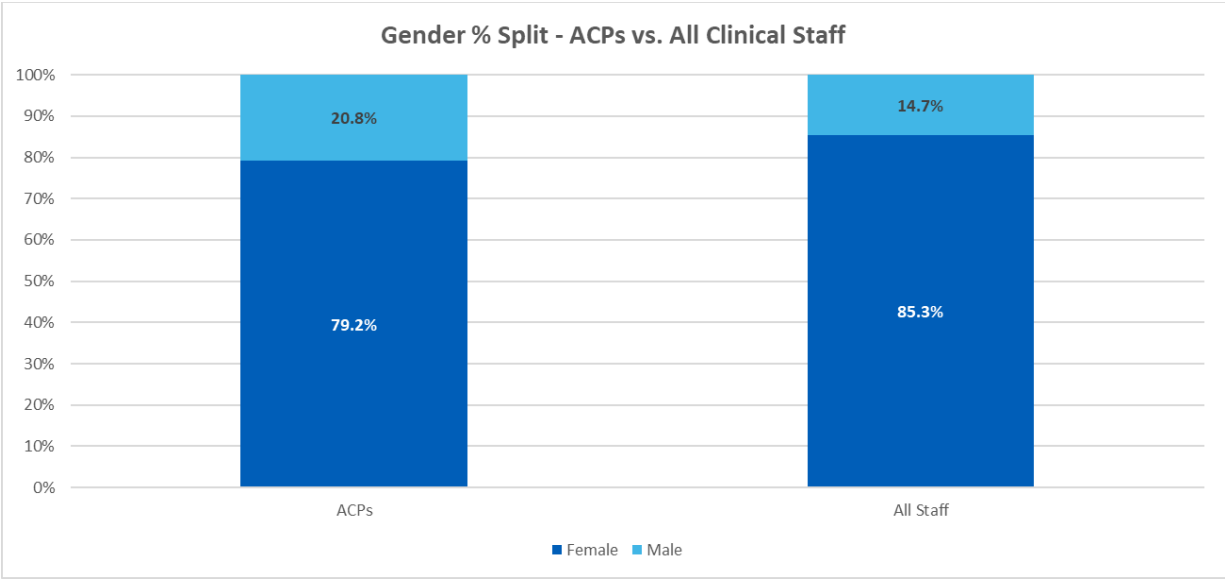
Ethnicity

The following chart compares the ethnicity breakdown of ACPs Greater Manchester, and compares this to the total clinical staff group numbers:

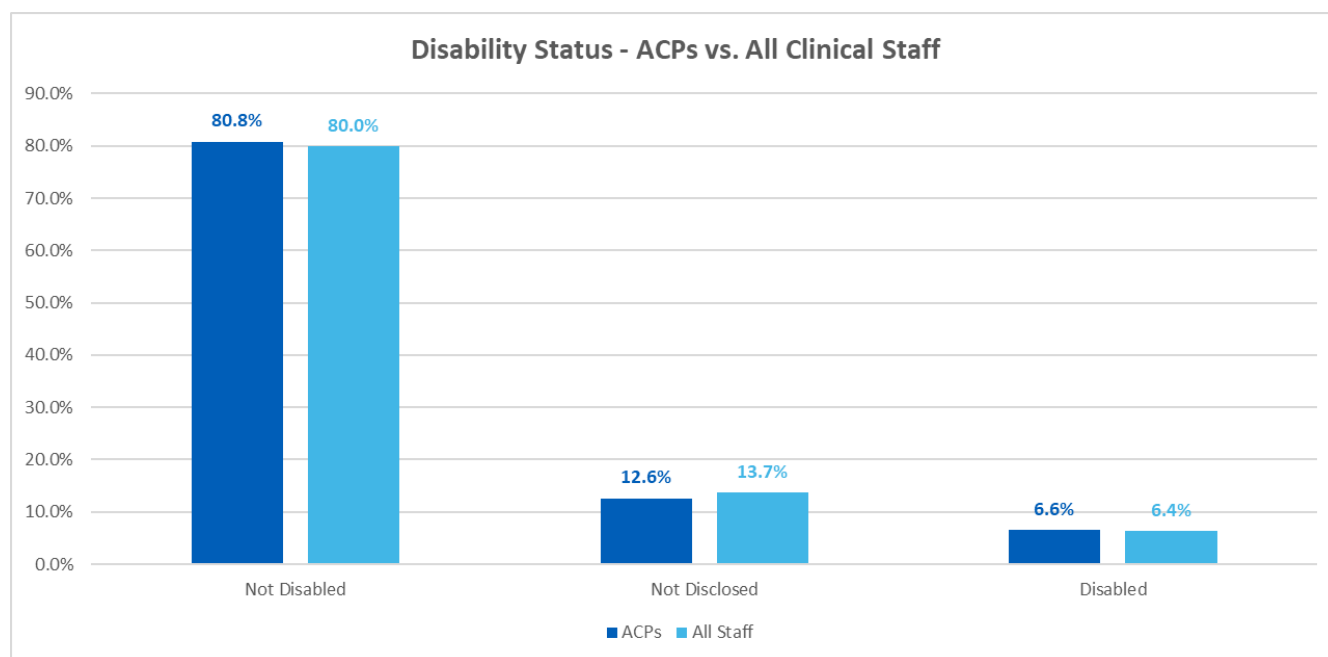


For example, **88.3%** of all ACPs in GM are White, compared to **66.9%** in the wider clinical workforce. Just over one-quarter (26.5%) of the total clinical workforce in GM is BAME, compared to **9.8%** for ACPs.

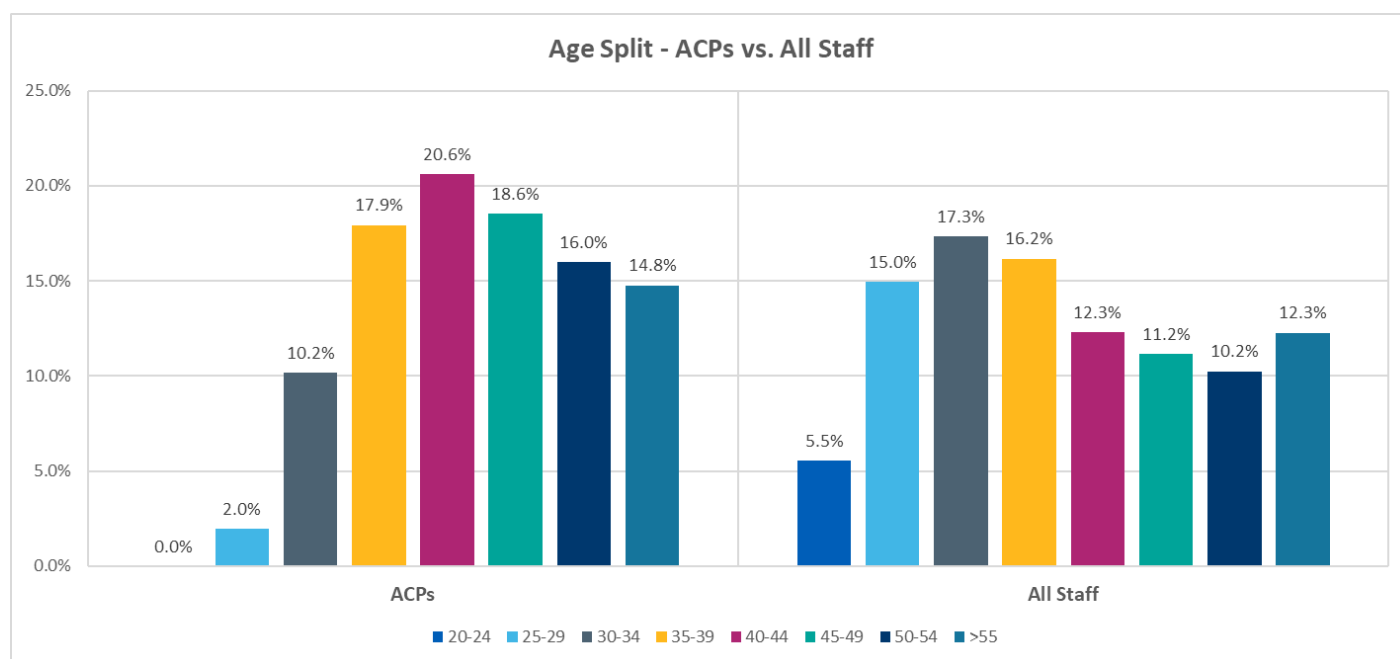
Gender



Disability



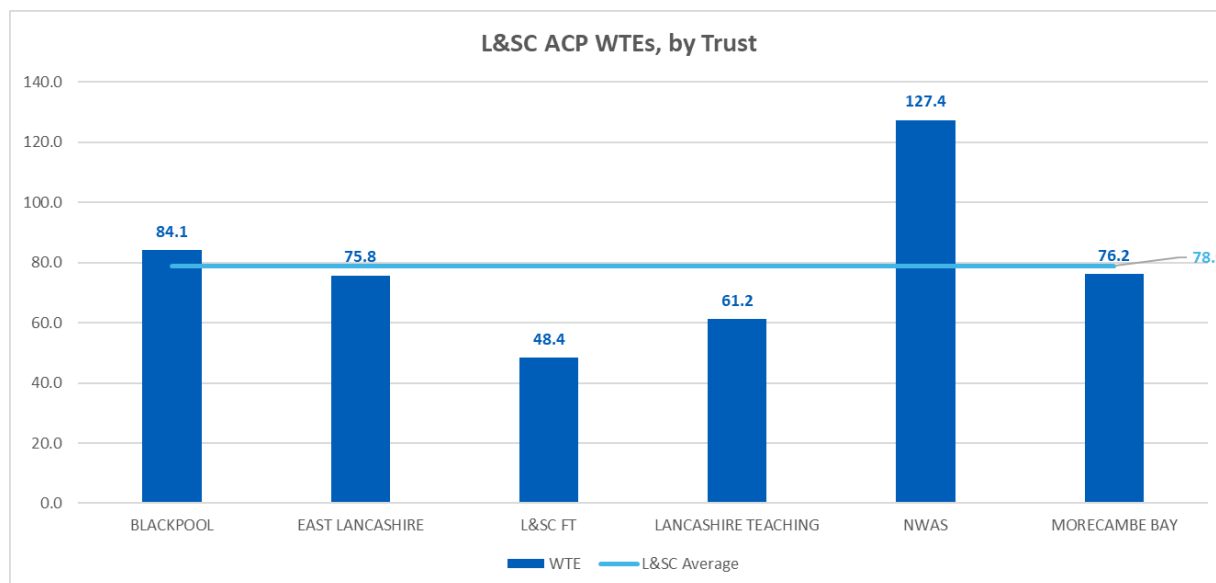
Age



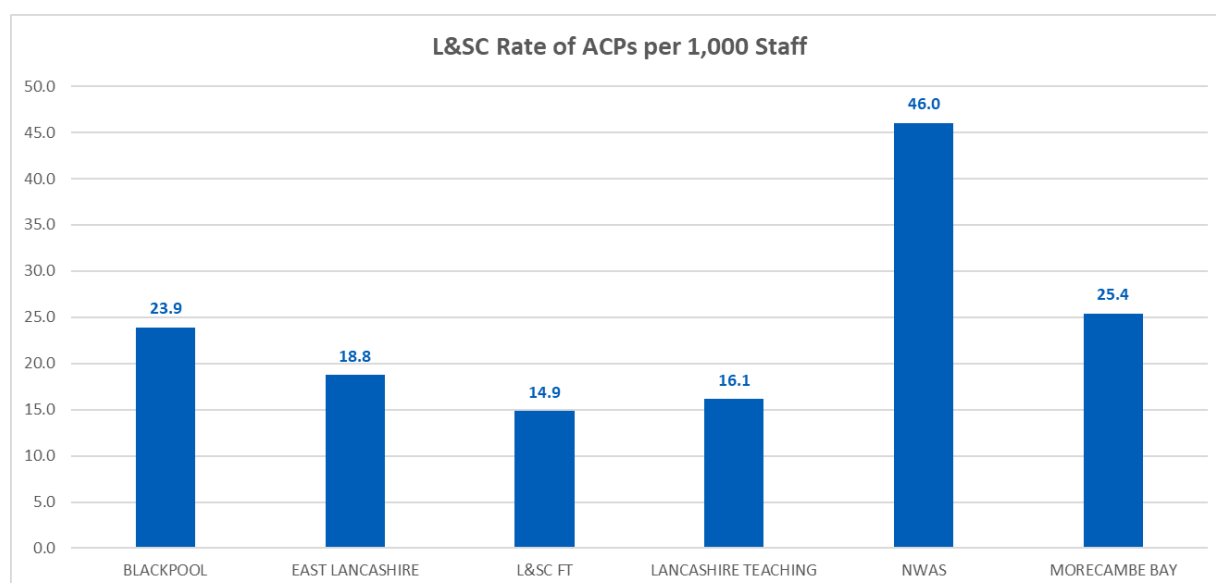
The retirement risk for ACPs (i.e. those aged 55+) is slightly higher than the all-staff average; **14.8%** compared to **12.3%**

Lancashire & South Cumbria

As of June 2024, there were **503** ACPs working across six provider Trusts in Lancashire & South Cumbria. The WTE value of these staff was **473.1**, giving a participation rate of **94.1%**. The following chart breaks down the ACP WTEs by Trust:

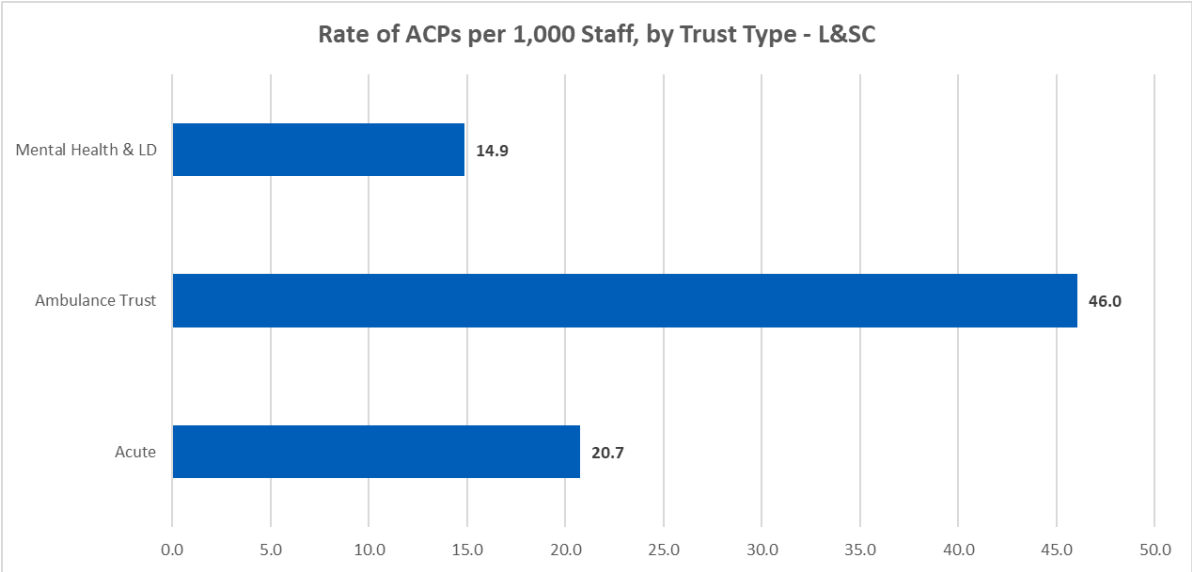


The next chart illustrates the rate of ACPs per 1,000 clinical staff, by Trust:



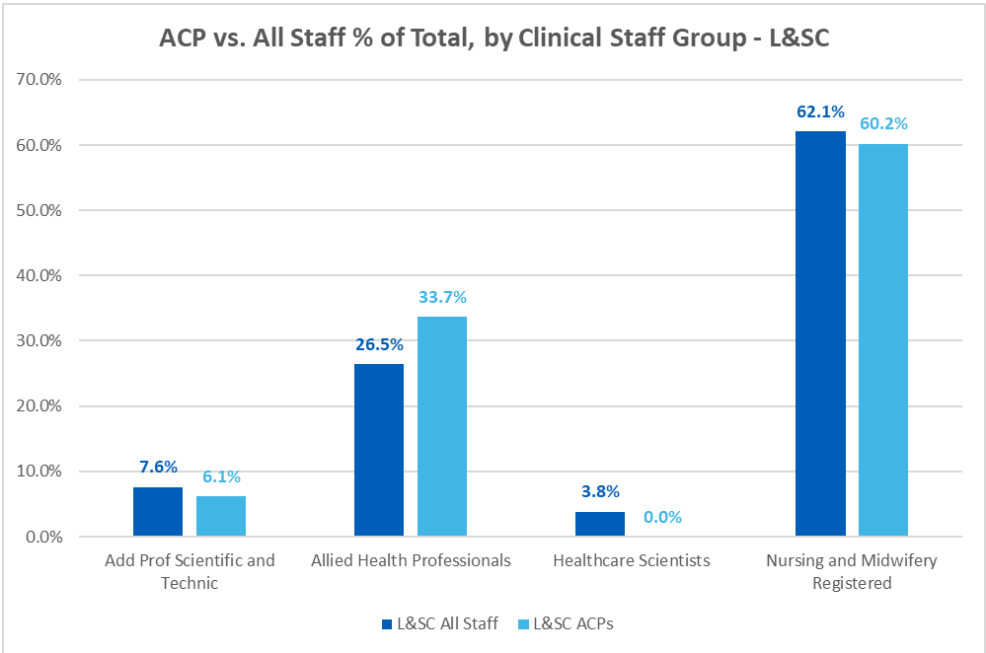
North West Ambulance Service has the highest rate of ACPs per 1,000 clinical staff, at **46** (the highest rate in the North West). This is 31.1 more than Lancashire & South Cumbria NHS Foundation Trust, which has a rate of **14.9** per 1,000.

We can also view the rate per 1,000 clinical staff by Trust type in Lancashire & South Cumbria:



L&SC ACPs by Staff Group

The following chart compares the proportion of staff groups in which ACPs are currently employed, this is the percentage split:



L&SC ACPs by Role

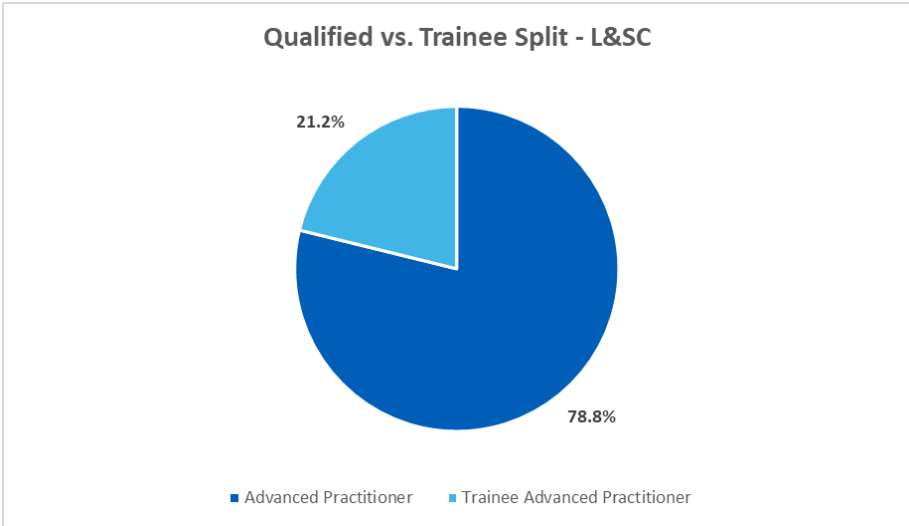
Staff Group	Role	WTE	
Add Prof Scientific and Technic	Advanced Practitioner	28.1	
	Pharmacist Advanced Practitioner	*	
Allied Health Professionals	Multi Therapist Advanced Practitioner	*	
	Occupational Therapist Advanced Practitioner	*	
	Operating Department Practitioner Advanced Practitioner	*	
	Paramedic Advanced Practitioner	131.1	
	Physiotherapist Advanced Practitioner	17.5	
Nursing and Midwifery Registered	Radiographer - Therapeutic Advanced Practitioner	*	
	Advanced Practitioner	*	
	Nurse - Advanced Practitioner	283.8	

*Values <5 suppressed

The table above displays the number of WTEs by staff group and role, in Lancashire & South Cumbria. Chiropodist/podiatrist, Dieticians, Prosthetists & Orthotists and Radiographer – Diganostic care the Allied Health Professionals that are not represented in the table. As the table clearly shows, the vast majority of ACPs in L&SC are Nurses. With this in mind, the following table splits out the Nursing roles, to provide further detail:

Area of Nursing	WTE	
Adult	189.9	
Children & Young People	6.4	
Community	79.5	
Mental Health	*	
Neonatal	*	

Qualified ACP vs. Trainee ACP Split

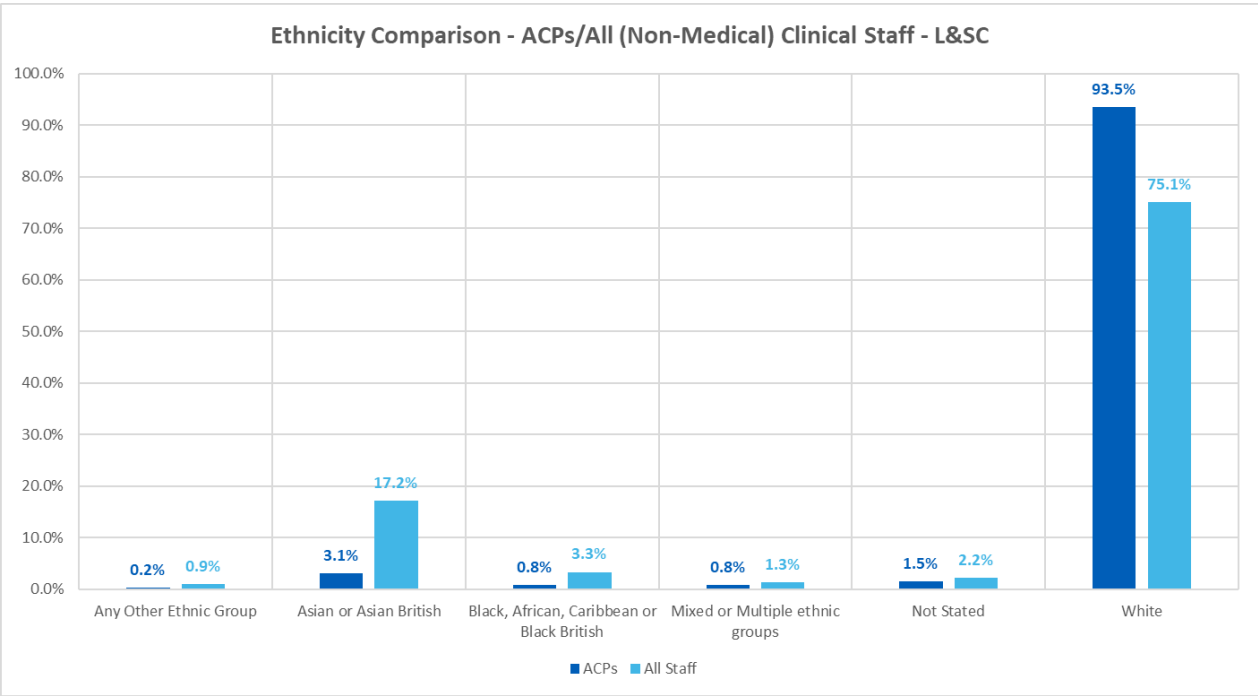


This chart illustrates the split between qualified ACPs and Trainee ACPs, by ICS area. (Please note that this is based on ESR coding/naming conventions, and therefore may not be an accurate picture of trainee proportions.)

L&SC ACP Demographics – Comparisons to All L&SC Clinical Staff

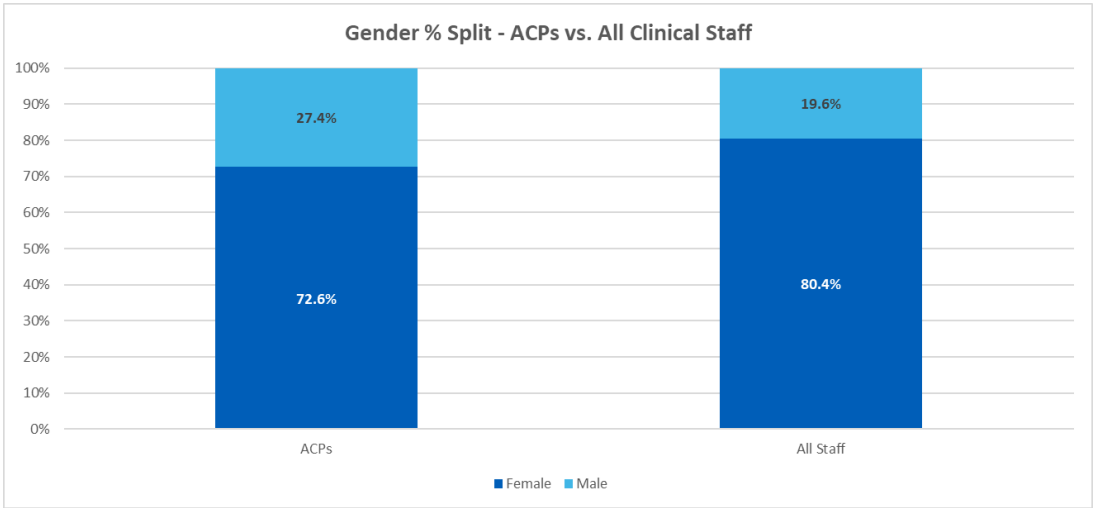
Ethnicity

The following chart compares the ethnicity breakdown of ACPs in Lancashire & South Cumbria, and compares this to the total clinical staff group numbers:

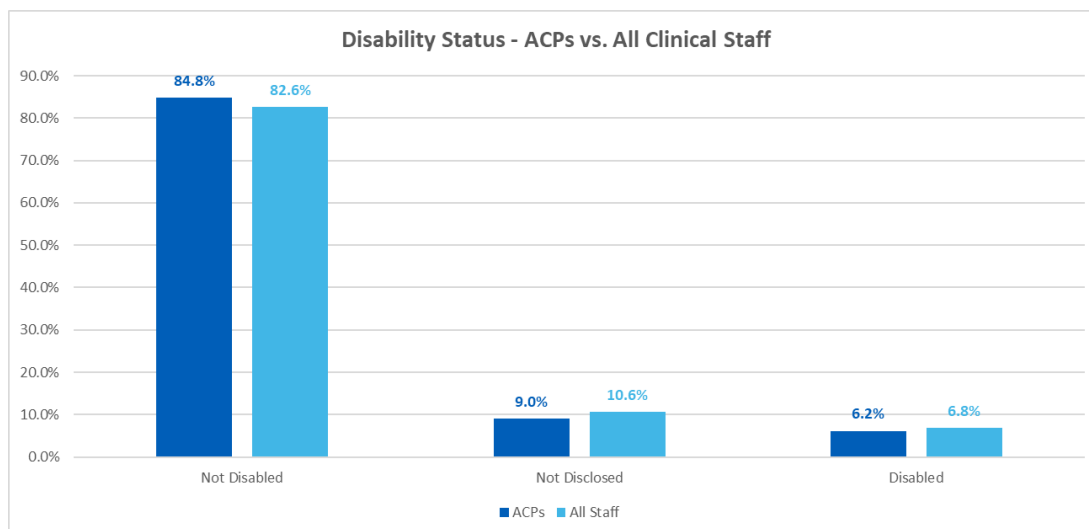


For example, **93.5%** of all ACPs in L&SC are White, compared to **75.1%** in the wider clinical workforce. Just over one-fifth (22.7%) of the total clinical workforce in L&SC is BAME, compared to **5%** for ACPs.

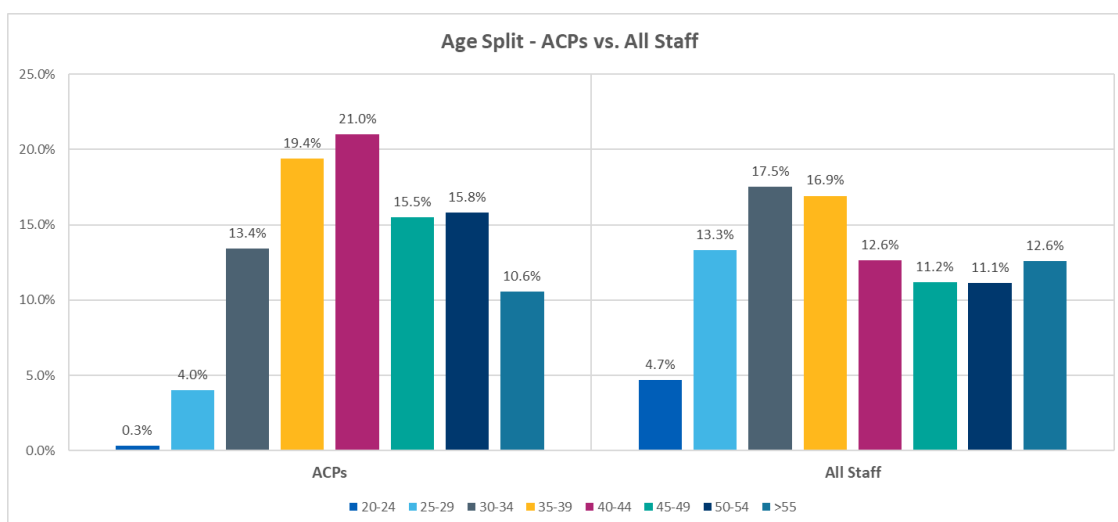
Gender



Disability



Age



The retirement risk for ACPs (i.e. those aged 55+) is slightly lower than the all-staff average; **10.6%** compared to **12.6%**

Current Workforce – Sickness Absence

This section looks at ACP sickness rates, using absence data from ESR. Sickness rates displayed are a 12-month rolling average (July 23 – June 24), which gives a more accurate representation of sickness, rather than in-month rates, due to seasonal variations.

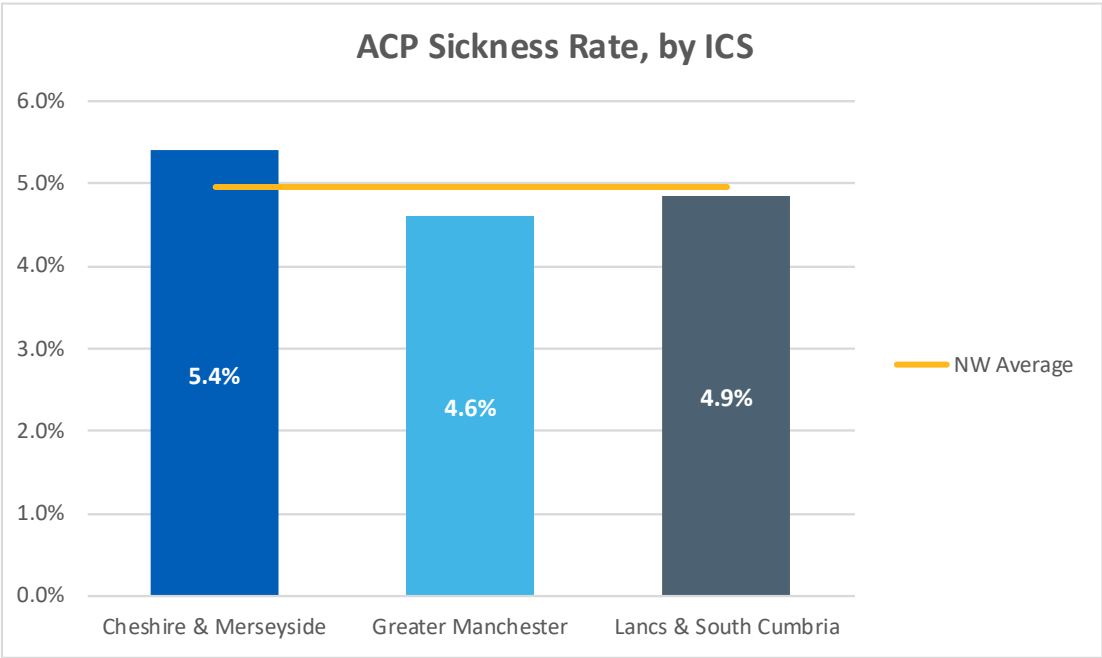
ACP workforce has been extracted using the same methodology as the staff in post analysis.

NW Overview

The following section looks at ACP sickness rates in the NW.

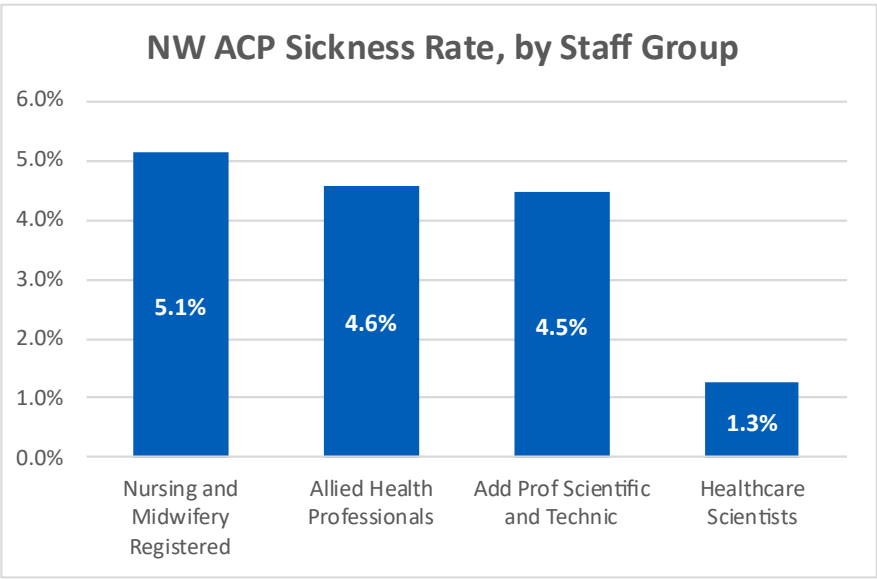
Sickness Rates (Regionally, and by ICS)

The 12m rolling sickness rate of ACPs in the NW as of June 24 is **5.0%**. This is much lower than the total NW workforce sickness rate which is 6.3%.



Across ICSs, the sickness rate in **Cheshire & Merseyside** is highest at **5.4%**, **4.9%** in **Lancs & South Cumbria**, and lowest in **Greater Manchester** at **4.6%**. All ICS ACP sickness rates are lower than their respective total workforce rates.

Sickness Rates by Staff Group



Across the NW ACP staff groups, the highest sickness rate is in **Nursing & Midwifery** at **5.1%**. **AHP** ACPs have a sickness rate of **4.6%**, **Additional Prof Scientific & Technical** rate is **4.5%**, and **Healthcare Scientists** is very low (although the number of ACPs is very small) at **1.3%**.

The ACP Nursing & Midwifery and Healthcare Scientist sickness rates are lower than the NW total workforce average of those staff groups. The AHP and Additional Prof Scientific & Technical ACP rates are both fairly in line.

Staff Group	Role	Absence Rate
Nursing and Midwifery Registered	Nurse - Advanced Practitioner	5.2%
	Advanced Practitioner	5.0%
	Midwife - Advanced Practitioner	4.6%
Allied Health Professionals	Physiotherapist Advanced Practitioner	3.3%
	Paramedic Advanced Practitioner	5.8%
	Radiographer - Diagnostic Advanced Practitioner	5.2%
	Occupational Therapist Advanced Practitioner	6.7%
	Radiographer - Therapeutic Advanced Practitioner	2.5%
	Dietitian Advanced Practitioner	1.7%
	Operating Department Practitioner Advanced Practitioner	3.5%
	Advanced Practitioner	2.9%
	Chiropodist or Podiatrist Advanced Practitioner	28.5%
	Orthoptist Advanced Practitioner	1.3%
	Multi Therapist Advanced Practitioner	2.6%
	Speech and Language Therapist Advanced Practitioner	1.7%
Add Prof Scientific and Technic	Advanced Practitioner	4.5%
	Pharmacist Advanced Practitioner	3.6%
Healthcare Scientists	Healthcare Science Practitioner Advanced Practitioner	1.1%
	Healthcare Scientist Advanced Practitioner	1.1%
	Clinical Scientist Advanced Practitioner	1.8%

The above table displays the sickness rates by ACP job role.

Chiropodist/Podiatrist ACPs have a significantly high sickness rate, however the wte numbers are very small.

Nursing Service	Absence Rate	
Adult	5.1%	<div></div>
Community	5.1%	<div></div>
Children & Young People	5.0%	<div></div>
Neonatal	6.2%	<div></div>
Mental Health	5.7%	<div></div>
Maternity Services	4.0%	<div></div>
School Nursing	0.0%	
Learning Disabilities	0.0%	

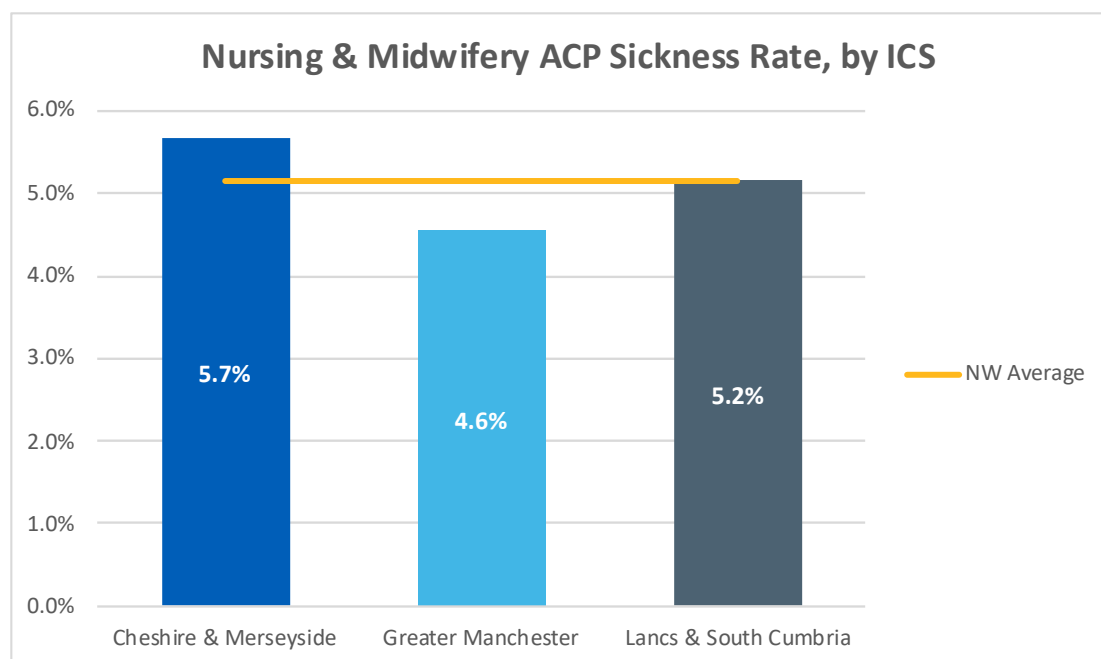
The above table shows the absence rates of Nursing & Midwifery ACP by service area. Rates are similar across Adult, Community and Children & Young People, higher in Neonatal and Mental Health, and lower in Maternity Services.

Reasons for Sickness Absence

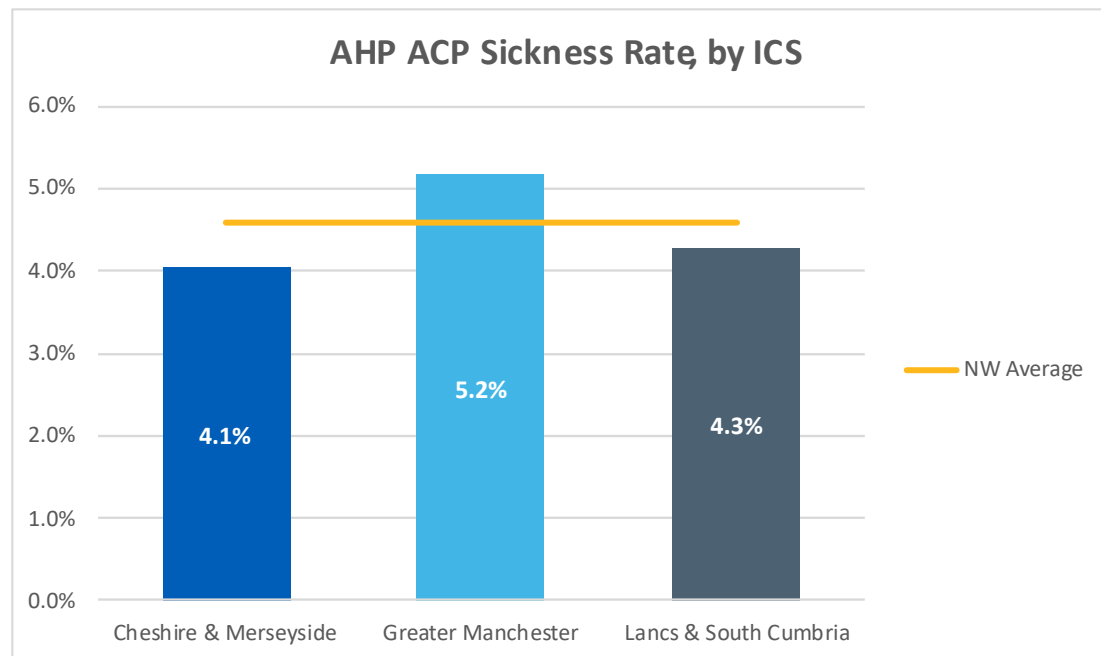
Reason For Absence	% of Absence
Mental Health	31%
Musculoskeletal Problems	17%
Minor Illnesses	10%
Other	9%
Genitourinary Problems	7%
Gastrointestinal Problems	6%
Cancers and Tumours	5%
Respiratory Conditions	4%
ENT/Eye/Oral/Dental Problems	3%
Unknown	3%
Heart, Cardiac and Circulatory Problems	3%
Infectious diseases	2%

The top reason for sickness absence in ACPs across the NW is **Mental Health**, which accounts for 31% of all sickness absence. This is followed by Musculoskeletal Problems (17%), and then Minor Illnesses (10%). A similar picture is seen across the total workforce.

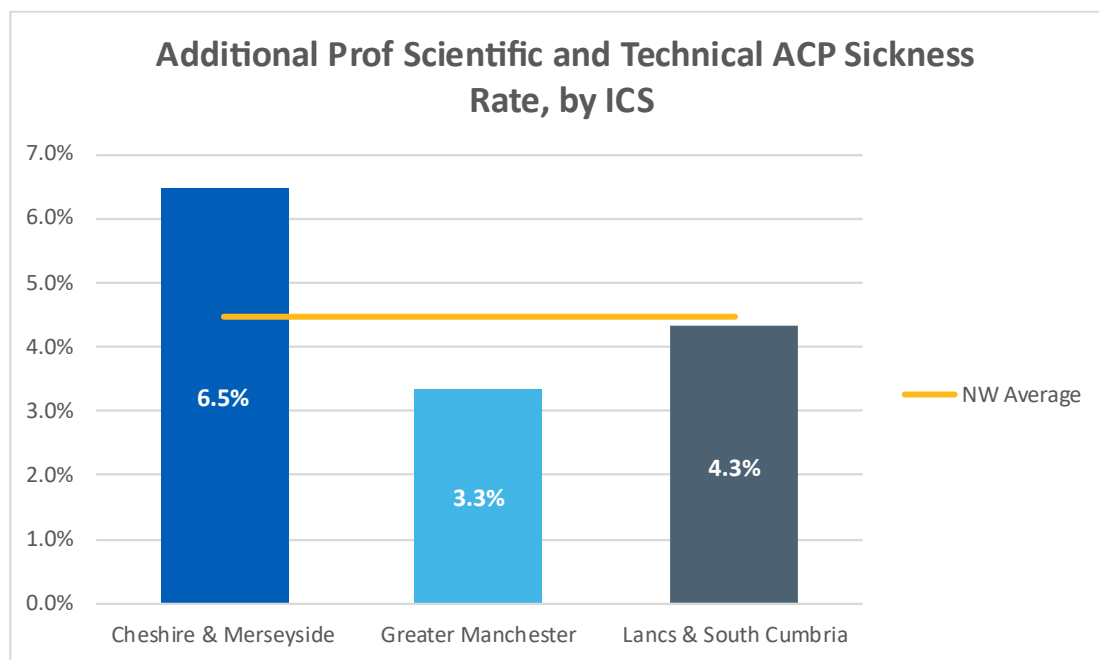
Sickness Rates, by Staff Group and ICS



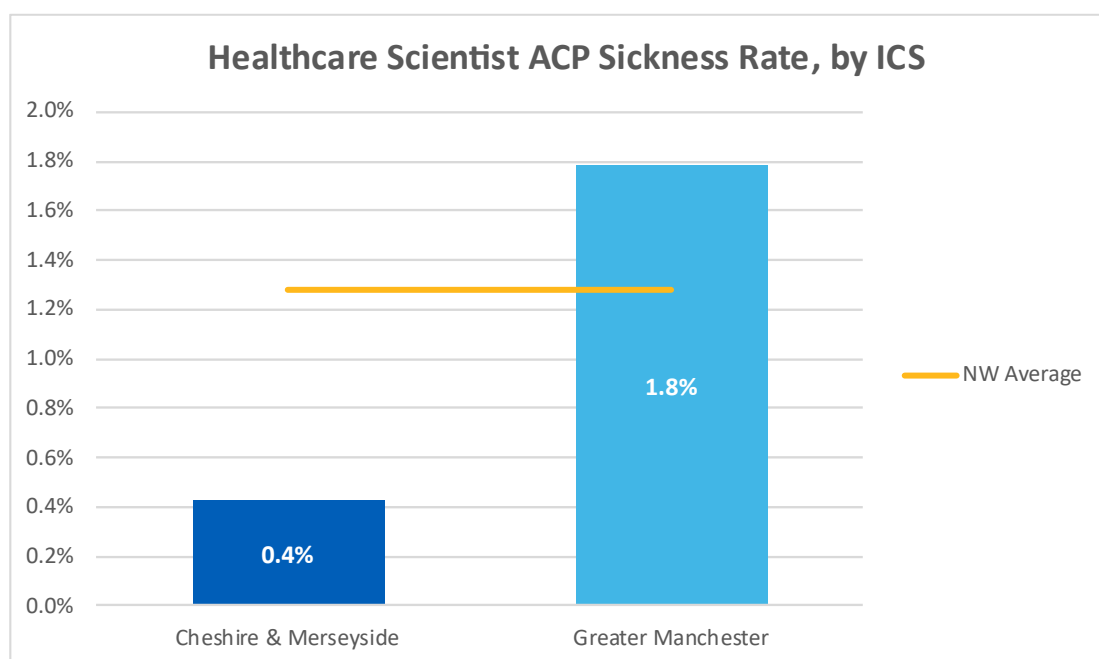
Due to Nursing & Midwifery making up a large proportion of ACPs, the Nursing & Midwifery sickness rates by ICS are similar to the total ACP sickness rates. Lancs & South Cumbria Nursing & Midwifery ACP sickness rates are fairly in line with the NW average (5.1%), Cheshire & Merseyside are higher and Greater Manchester are lower.



Greater Manchester AHP ACPs have sickness rate of 5.2% which is higher than the NW average (4.6%). Cheshire & Merseyside and Lancs & South Cumbria are both lower at 4.1% and 4.3%, respectively.



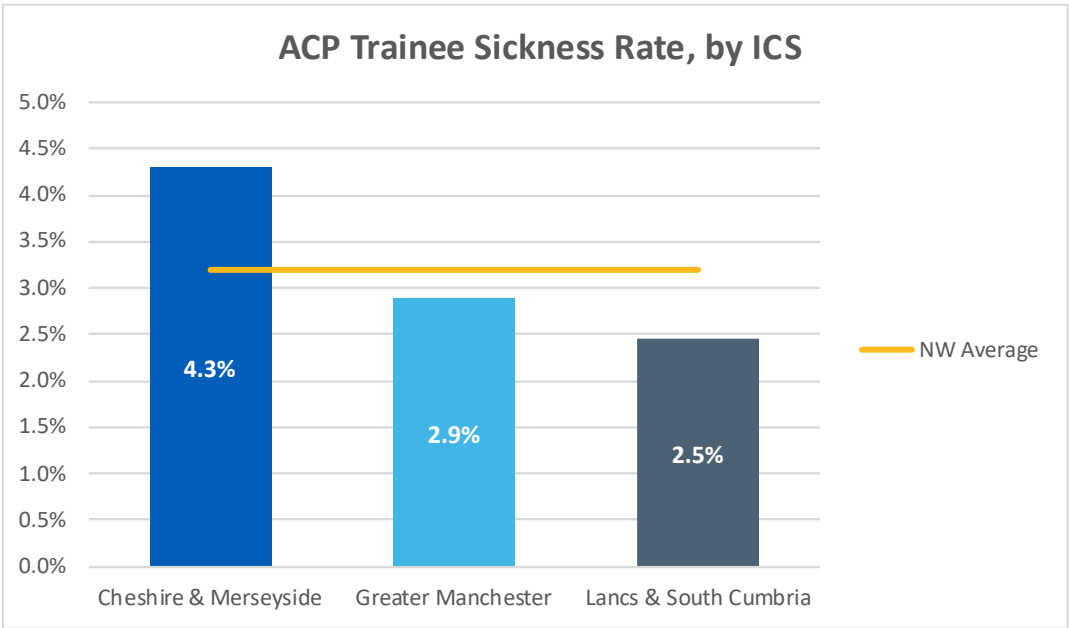
Cheshire & Merseyside Additional Prof Scientific and Technical ACPs have a sickness rate of 6.5% which is higher than the NW average (4.5%). Greater Manchester is lower at 3.3%, and Lancs & South Cumbria is roughly in line.



Greater Manchester Healthcare Scientist ACPs have a sickness rate of 1.8% which is higher than the NW average (1.3%). Cheshire & Merseyside is lower at 0.4%.

NW Trainee Sickness Rates

The 12m rolling sickness rate of Trainee ACPs in ESR in the NW as of June 24 is **3.2%**.



Cheshire & Merseyside Trainees have the highest sickness rate (4.3%). Greater Manchester and Lancs & South Cumbria are both below the NW average at 2.9% and 2.5%, respectively.

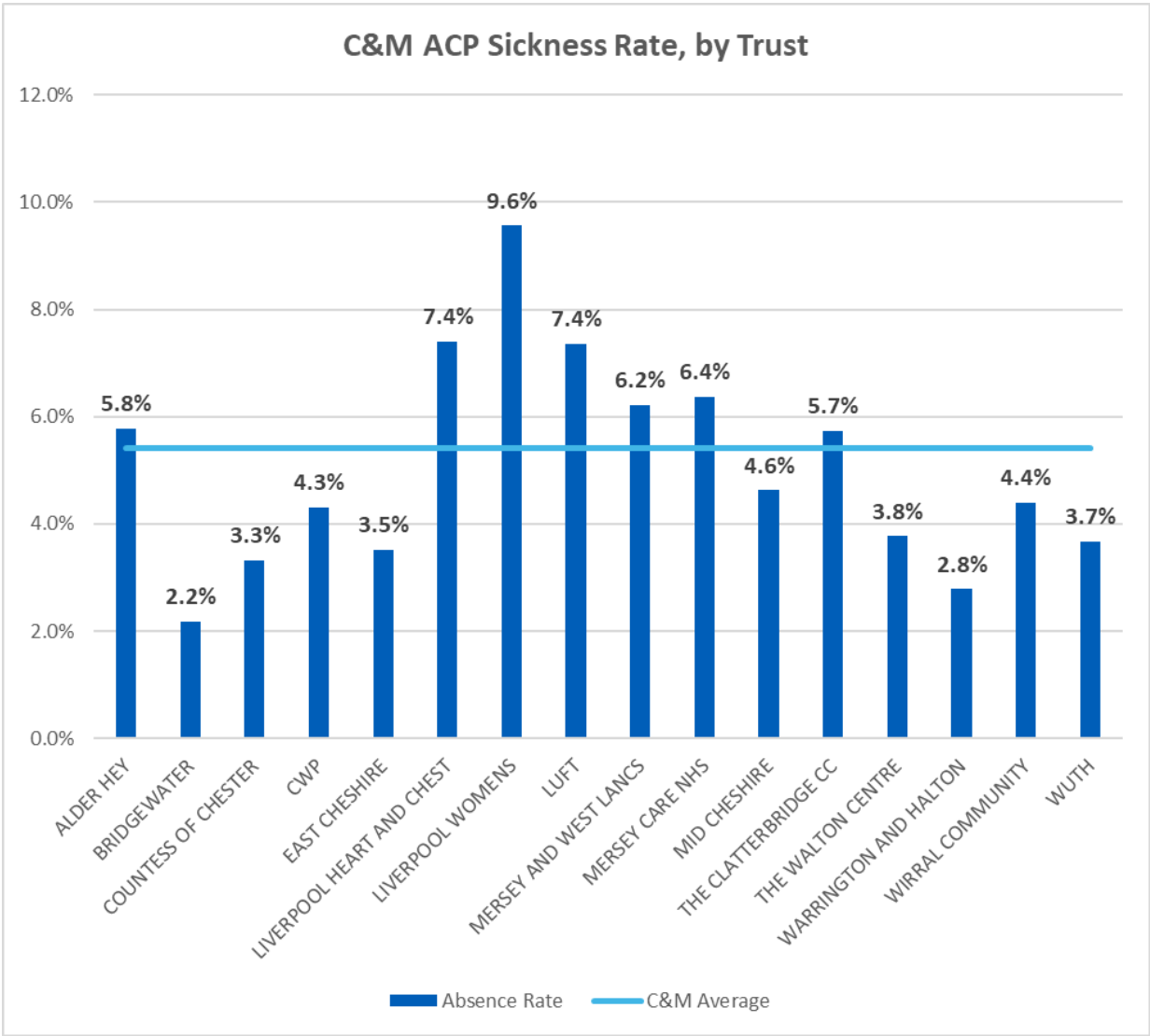
Reason For Absence	% of Absence
Mental Health	22%
Musculoskeletal Problems	18%
Minor Illnesses	12%
Other	11%
Genitourinary Problems	9%
Gastrointestinal Problems	9%
ENT/Eye/Oral/Dental Problems	6%
Cancers and Tumours	4%
Unknown	4%
Respiratory Conditions	2%
Infectious diseases	2%
Heart, Cardiac and Circulatory Problems	0%

The top reason for sickness absence in Trainee ACPs in the NW is **Mental Health**, which accounts for 22% of all sickness absence. This is followed by Musculoskeletal Problems (18%), and then Minor Illnesses (12%).

Overview by ICS Area – Sickness Absence

Cheshire & Merseyside

The 12m rolling sickness rate of ACPs in Cheshire & Merseyside as of June 24 is **5.4%**.



Liverpool Womens has the highest ACP sickness rate at 9.6%, which is significantly higher than that Trust’s total workforce average of 6.2% however this Trust has a very small number of ACPs. Liverpool Heart & Chest and LUFT are second highest, with a rate of 7.4%, and both also higher than their Trust averages.

Bridgewater (low numbers of ACPs) and Warrington and Halton both have low ACP sickness rates, 2.2% and 2.8%, respectively. Both rates are significantly lower than the Trust averages.

Staff Group	Role	Absence Rate	
Nursing and Midwifery Registered	Nurse - Advanced Practitioner	5.7%	<div></div>
	Midwife - Advanced Practitioner	6.7%	<div></div>
	Advanced Practitioner	2.7%	<div></div>
Allied Health Professionals	Physiotherapist Advanced Practitioner	2.8%	<div></div>
	Radiographer - Diagnostic Advanced Practitioner	2.9%	<div></div>
	Occupational Therapist Advanced Practitioner	11.2%	<div></div>
	Paramedic Advanced Practitioner	11.3%	<div></div>
	Dietitian Advanced Practitioner	0.5%	<div></div>
	Orthoptist Advanced Practitioner	1.8%	<div></div>
	Speech and Language Therapist Advanced Practitioner	1.7%	<div></div>
	Chiropodist or Podiatrist Advanced Practitioner	0.5%	<div></div>
	Operating Department Practitioner Advanced Practitioner	5.5%	<div></div>
	Advanced Practitioner	1.1%	<div></div>
Add Prof Scientific and Technic	Advanced Practitioner	6.5%	<div></div>
	Pharmacist Advanced Practitioner	6.1%	<div></div>
Healthcare Scientists	Healthcare Science Practitioner Advanced Practitioner	0.5%	<div></div>
	Clinical Scientist Advanced Practitioner	0.0%	
	Healthcare Scientist Advanced Practitioner	0.0%	

The above table displays Cheshire & Merseyside sickness absence rates by ACP Role. Occupational Therapist ACPs and Paramedic ACPs have the highest sickness rates at 11.2% and 11.3%, respectively.

Physiotherapist ACPs and Radiographer – Diagnostic ACPs both make up a large portion of AHP ACPs in Cheshire & Merseyside, and have low sickness rates of 2.8% and 2.9%, respectively.

Nursing Service	Absence Rate	
Adult	5.7%	<div></div>
Community	6.5%	<div></div>
Children & Young People	5.8%	<div></div>
Neonatal	2.1%	<div></div>
Mental Health	3.0%	<div></div>
Maternity Services	5.0%	<div></div>
School Nursing	0.0%	
Learning Disabilities	0.0%	

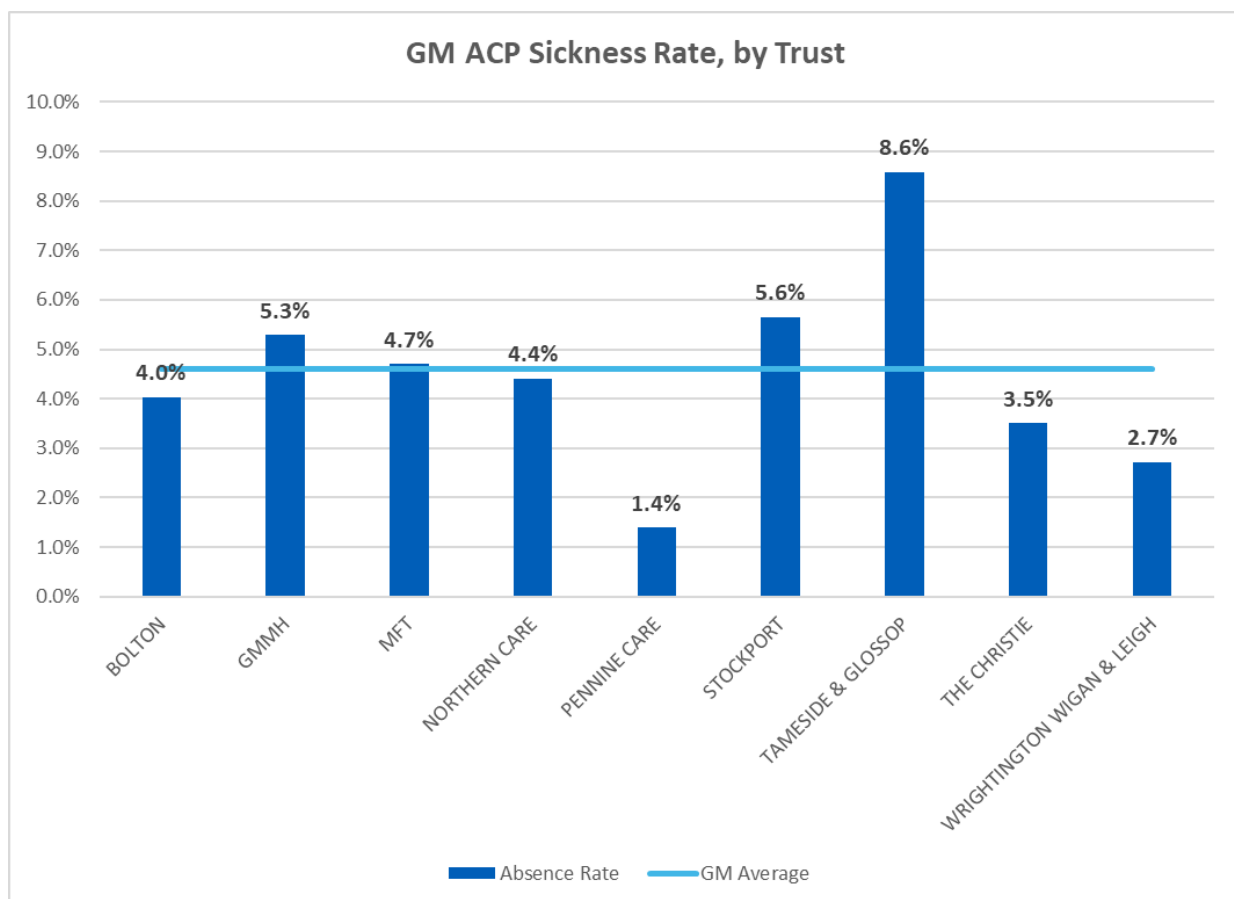
Advanced Nurse Practitioners in Community Nursing have the highest sickness rate at 6.5%.

Reason For Absence	% of Absence
Mental Health	31%
Musculoskeletal Problems	16%
Minor Illnesses	9%
Genitourinary Problems	9%
Other	9%
Gastrointestinal Problems	5%
Respiratory Conditions	5%
Cancers and Tumours	5%
Unknown	5%
ENT/Eye/Oral/Dental Problems	3%
Infectious diseases	2%
Heart, Cardiac and Circulatory Problems	2%

The top reason for sickness absence in ACPs in Cheshire & Merseyside is **Mental Health**, which accounts for 31% of all sickness absence. This is followed by Musculoskeletal Problems (16%), and then Minor Illnesses (9%).

Greater Manchester

The 12m rolling sickness rate of ACPs in Greater Manchester as of June 24 is **4.6%**.



Tameside & Glossop has the highest ACP sickness rate at 8.6%, which is significantly higher than that Trust's total workforce average of 6.0%. Stockport is second highest, with a rate of 5.6%, which is slightly below their Trust average.

Pennine Care has a low ACP sickness rate of 1.4%, which is significantly lower than the Trust average.

Staff Group	Role	Absence Rate
Nursing and Midwifery Registered	Nurse - Advanced Practitioner	4.6%
	Advanced Practitioner	4.2%
	Midwife - Advanced Practitioner	1.8%
Allied Health Professionals	Physiotherapist Advanced Practitioner	3.7%
	Radiographer - Diagnostic Advanced Practitioner	7.4%
	Paramedic Advanced Practitioner	11.7%
	Occupational Therapist Advanced Practitioner	3.0%
	Dietitian Advanced Practitioner	2.4%
	Advanced Practitioner	3.4%
	Operating Department Practitioner Advanced Practitioner	2.2%
	Radiographer - Therapeutic Advanced Practitioner	5.4%
	Chiropodist or Podiatrist Advanced Practitioner	40.6%
	Multi Therapist Advanced Practitioner	5.9%
	Orthoptist Advanced Practitioner	0.4%
	Advanced Practitioner	3.4%
Add Prof Scientific and Technic	Pharmacist Advanced Practitioner	1.0%
	Healthcare Scientist Advanced Practitioner	1.3%
Healthcare Scientists	Clinical Scientist Advanced Practitioner	2.1%
	Healthcare Science Practitioner Advanced Practitioner	2.4%

The above table displays Greater Manchester sickness absence rates by ACP Role. Chiropodist/Podiatrist ACPs have a significantly high sickness rate at 40.6%, however the wte numbers are relatively small. Paramedic ACPs and Radiographer – Diagnostic ACPs have high sickness rates of 11.7% and 7.4%, respectively, compared to the overall Greater Manchester ACP average.

Nursing Service	Absence Rate
Adult	4.3%
Community	4.0%
Neonatal	8.0%
Mental Health	6.9%
Children & Young People	3.0%
Maternity Services	1.1%

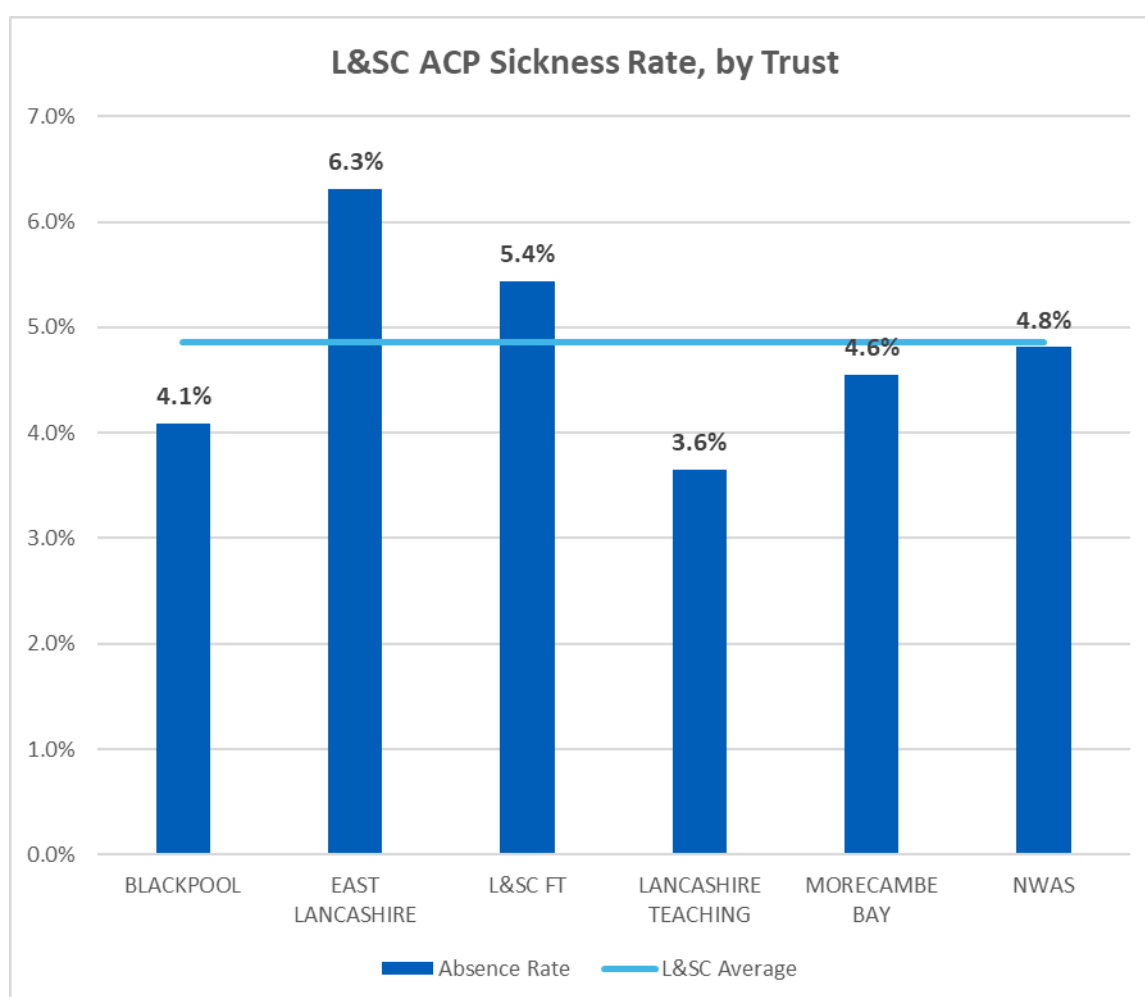
Advanced Nurse Practitioners in Neonatal have the highest sickness rate at 8.0%.

Reason For Absence	% of Absence
Mental Health	32%
Musculoskeletal Problems	13%
Minor Illnesses	11%
Other	10%
Cancers and Tumours	7%
Heart, Cardiac and Circulatory Problems	5%
Genitourinary Problems	5%
Gastrointestinal Problems	5%
Respiratory Conditions	4%
ENT/Eye/Oral/Dental Problems	3%
Unknown	2%
Infectious diseases	2%

The top reason for sickness absence in ACPs in Greater Manchester is **Mental Health**, which accounts for 32% of all sickness absence. This is followed by Musculoskeletal Problems (13%), and then Minor Illnesses (11%).

Lancashire & South Cumbria

The 12m rolling sickness rate of ACPs in Greater Manchester as of June 24 is **4.9%**.



East Lancashire has the highest ACP sickness rate at 6.3%, which is fairly in line with that Trust’s total workforce average of 6.1%. L&SC FT is second highest, with a rate of 5.4%, however this is significantly lower than their Trust average.


Lancashire Teaching has a low ACP sickness rate of 3.6%, which is significantly lower than the Trust average.

Staff Group	Role	Absence Rate	
Nursing and Midwifery	Nurse - Advanced Practitioner	5.1%	<div></div>
	Advanced Practitioner	7.1%	<div></div>
Allied Health Professionals	Paramedic Advanced Practitioner	4.8%	<div></div>
	Physiotherapist Advanced Practitioner	3.0%	<div></div>
	Radiographer - Therapeutic Advanced Practitioner	0.3%	<div></div>
	Occupational Therapist Advanced Practitioner	1.1%	<div></div>
	Operating Department Practitioner Advanced Prac	4.2%	<div></div>
	Multi Therapist Advanced Practitioner	0.3%	<div></div>
	Orthoptist Advanced Practitioner	0.0%	<div></div>
	Advanced Practitioner	0.0%	<div></div>
Add Prof Scientific and Technic	Advanced Practitioner	4.4%	<div></div>
	Pharmacist Advanced Practitioner	0.0%	<div></div>

The above table displays Lancashire & South Cumbria sickness absence rates by ACP Role. Advanced Practitioner job role within Nursing & Midwifery has a high sickness rate, although the wte numbers against this job role title are relatively small. Excluding ACP roles that have very low wte numbers, Physiotherapist ACPs have the lowest sickness rate of 3.0%.

Nursing Service	Absence Rate	
Adult	5.6%	<div></div>
Community	4.0%	<div></div>
Children & Young People	3.1%	<div></div>
Mental Health	7.1%	<div></div>
Neonatal	6.1%	<div></div>

Advanced Nurse Practitioners in Mental Health have the highest sickness rate at 7.1%, however the wte numbers are relatively small. Advanced Nurse Practitioners in Adult have a sickness rate of 5.6% which is higher the Lancashire & South Cumbria Nursing average of 5.2%.



Reason For Absence	% of Absence
Mental Health	27%
Musculoskeletal Problems	24%
Gastrointestinal Problems	11%
Minor Illnesses	10%
Other	7%
Genitourinary Problems	5%
ENT/Eye/Oral/Dental Problems	4%
Infectious diseases	3%
Respiratory Conditions	3%
Unknown	2%
Heart, Cardiac and Circulatory Problems	2%
Cancers and Tumours	1%

The top reason for sickness absence in ACPs in Lancashire & South Cumbria is **Mental Health**, which accounts for 27% of all sickness absence. This is followed by Musculoskeletal Problems (24%), and then Gastrointestinal Problems (11%).

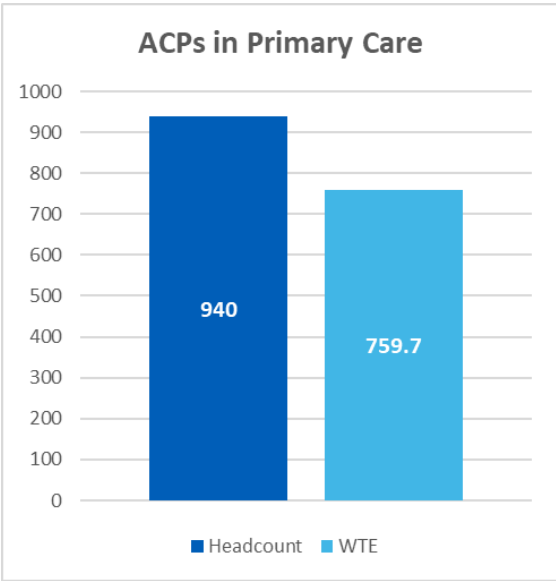
Current Workforce - Primary Care

This section looks at the number of ACPs working in Primary Care across the NW, utilising August 24 data from the National Workforce Reporting Service (NWRS). There are some caveats with this data; links to these provided in appendix A.

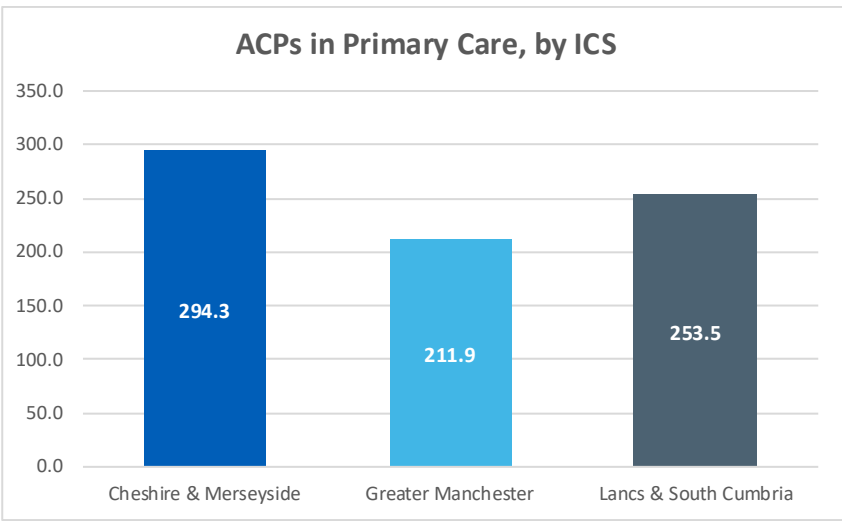
For this report, General Practice and Primary Care Network workforce data has been combined to give an overall view of ACPs in Primary Care. ACPs are identified as anyone with “Advanced” in their Staff Role title.

NW Overview

Total Number of ACPs (Regionally, and by ICS)

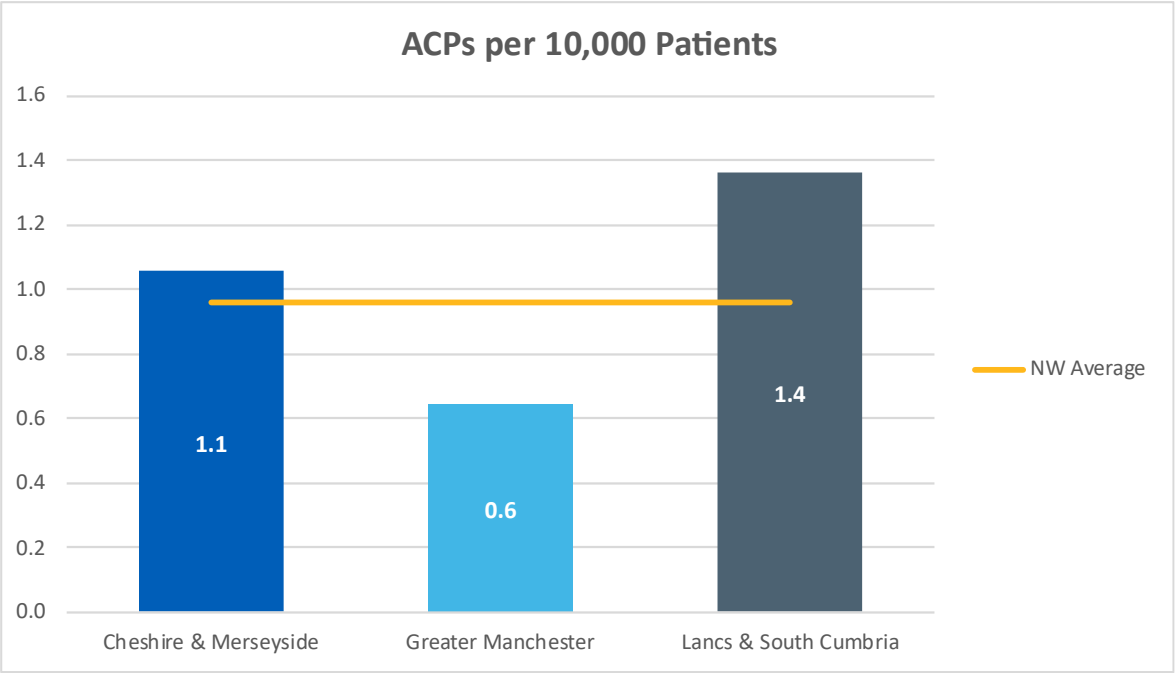


There are **940** ACPs working in Primary Care across the NW. This equates to **759.7 wte**.



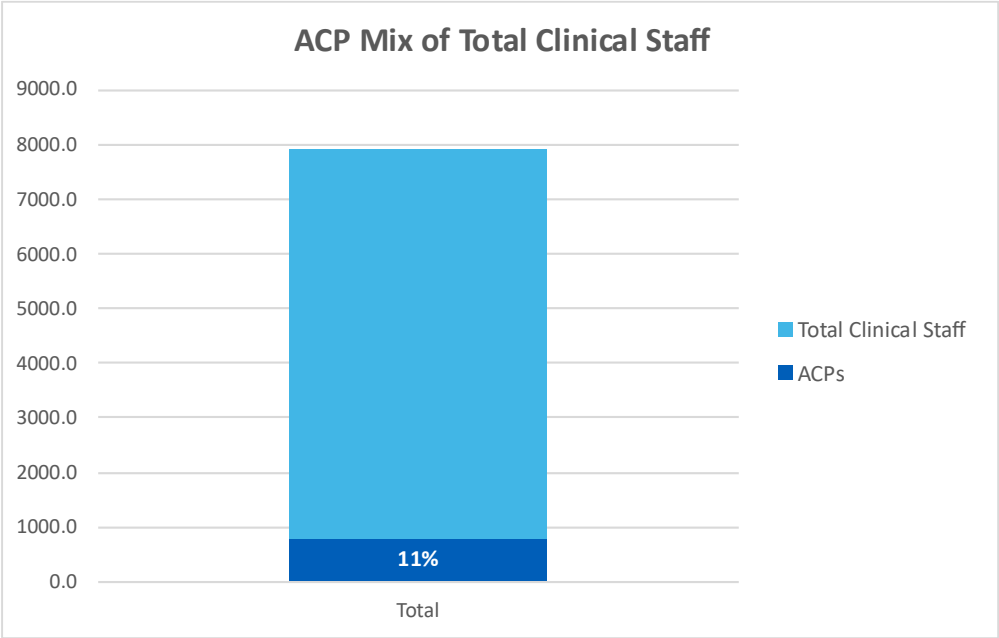
294.3 wte ACPs (39%) are working in **Cheshire & Merseyside**, **211.9 wte** (28%) are working in **Greater Manchester**, and **253.5 wte** (33%) are working in **Lancs & South Cumbria**.

ACPs per 10,000 Patients

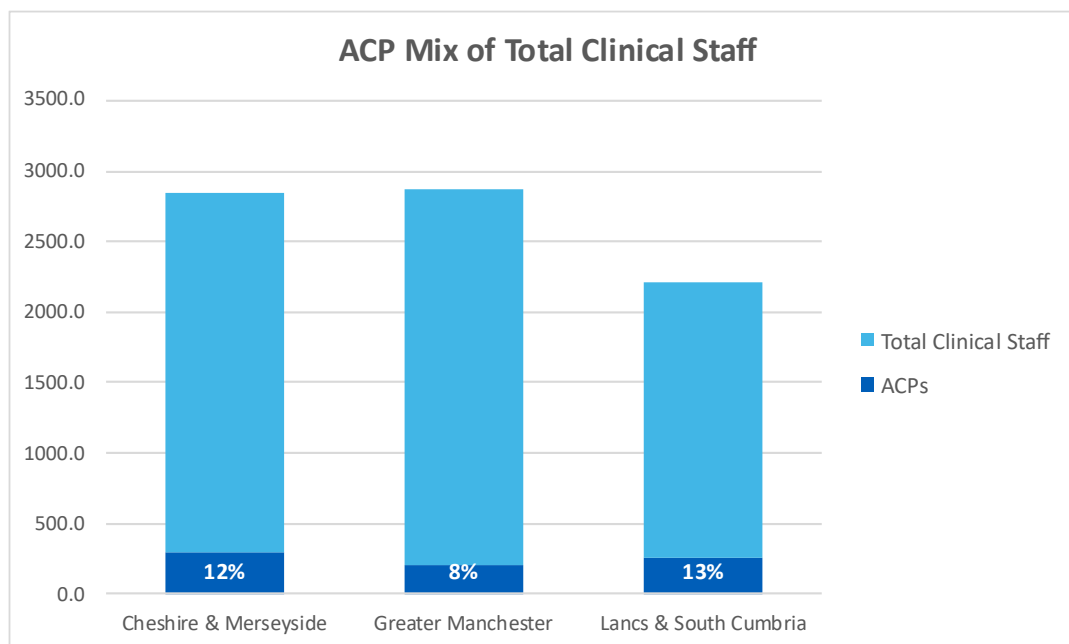


In terms of the numbers of ACPs per 10,000 registered patients within each ICS, **Cheshire & Merseyside** have **1.1 wte**, and **Lancs & South Cumbria** have **1.4 wte**, which are both above the **NW average of 1.0**. **Greater Manchester** has **0.6 wte**.

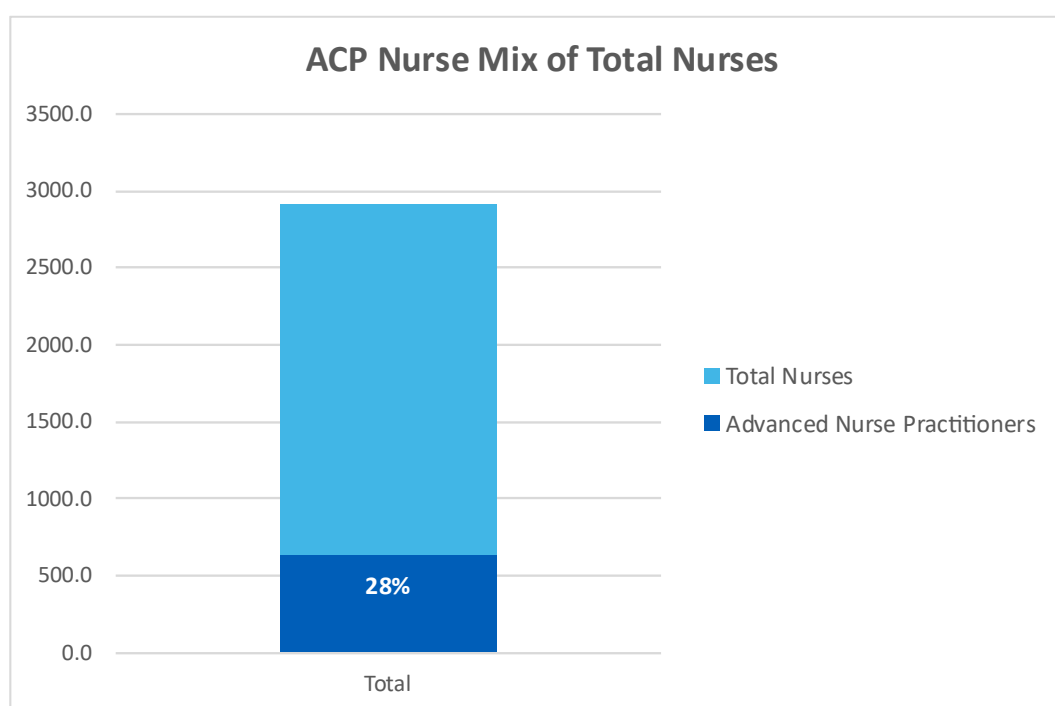
Primary Care ACP % Mix Within Primary Care Workforce



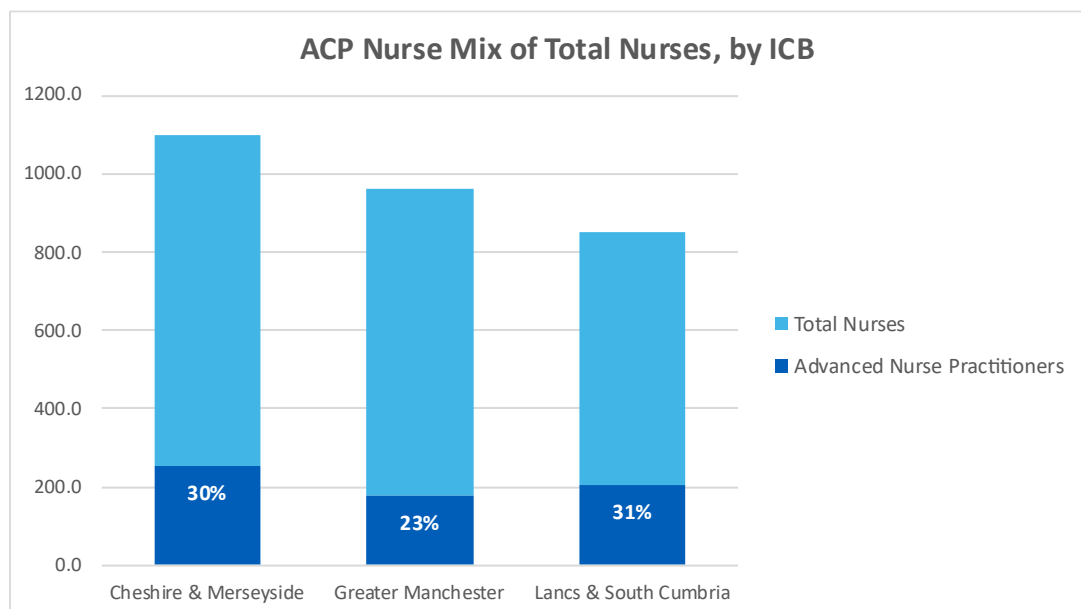
ACPs make up **11%** of the total clinical staff (Nurses and Direct Patient Care) in Primary Care.



This varies slightly by ICS, with **Cheshire & Merseyside** ACPs making up **12%** of Primary Care clinical staff, **Greater Manchester** is the lowest at **8%**, and **Lancs & South Cumbria** the highest at **13%**.

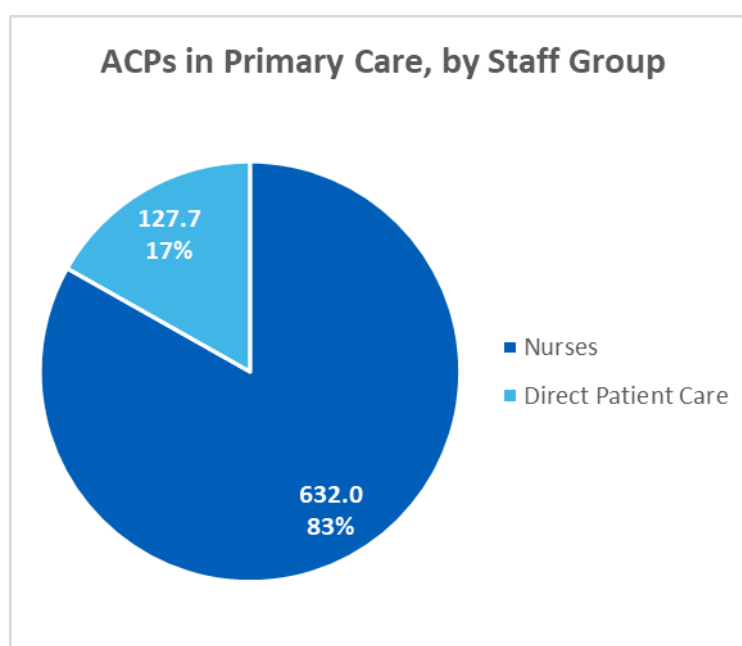


In the NW, the Advanced Nurse Practitioners make up **28%** of the total Nursing workforce in Primary Care.

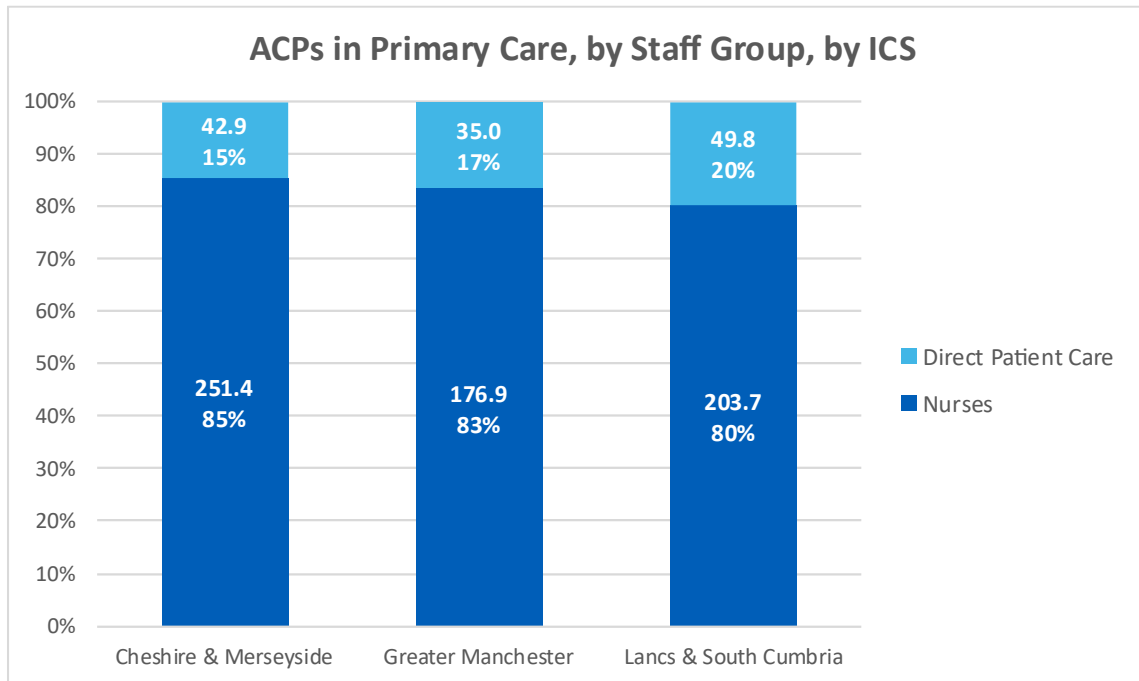


This varies slightly by ICS. The Advanced Nurse Practitioners in **Greater Manchester** make up **23%** of the total Nursing Workforce. **Cheshire & Merseyside** and **Lancs & South Cumbria** have a larger proportion of **30%** and **31%**, respectively.

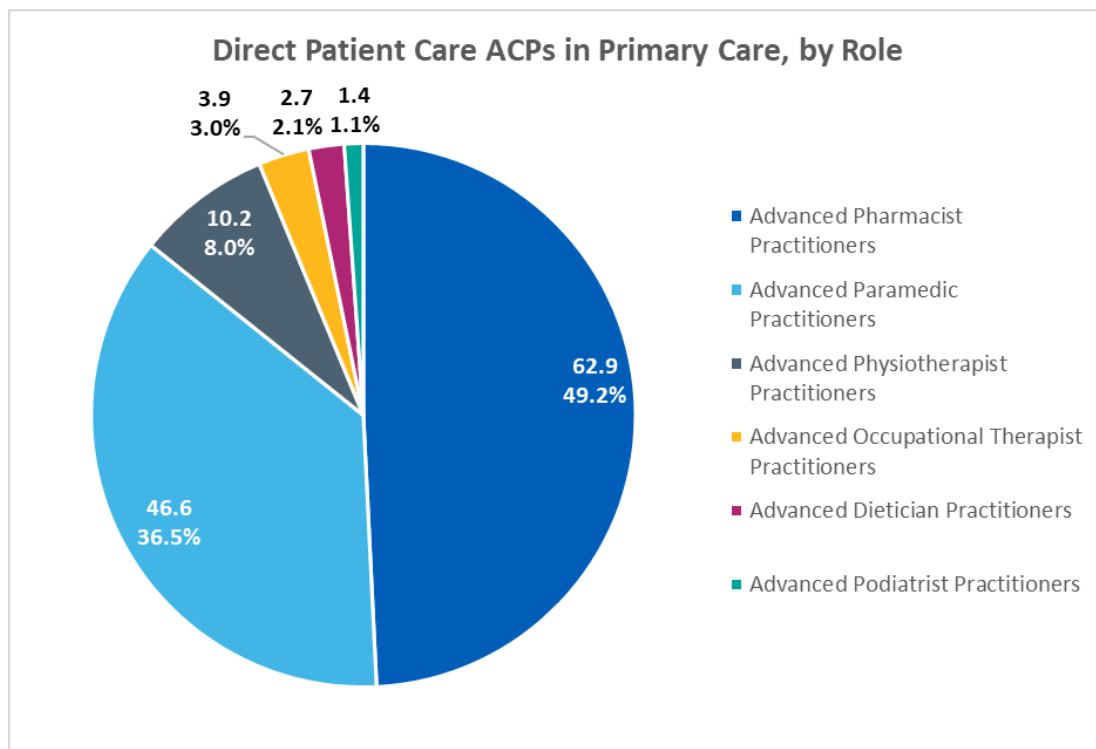
Primary Care ACPs by Staff Group & Role



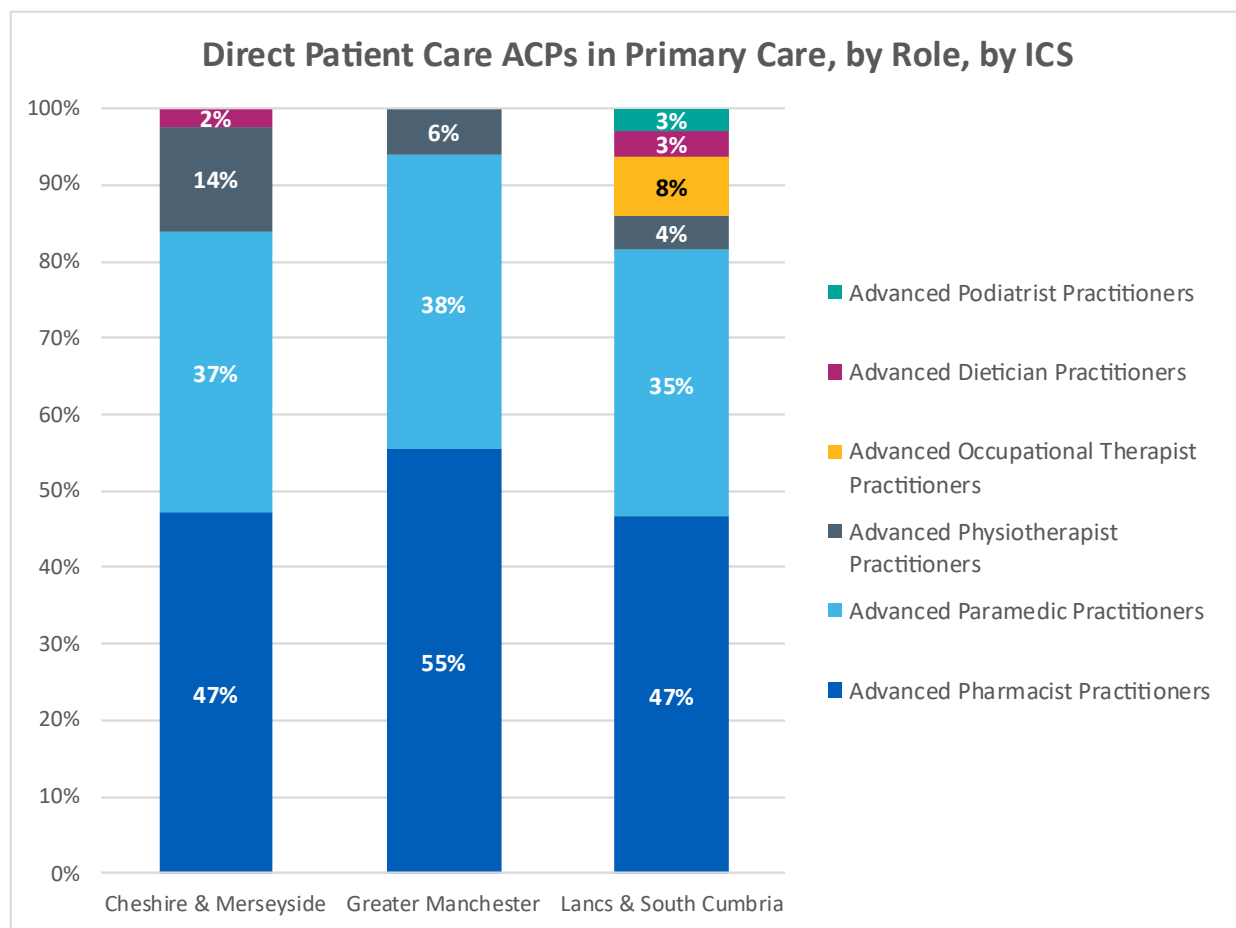
In the NW, there are **632.0 wte** Advanced Nurse Practitioners, and **127.7 wte** other ACPs, equating to an 83%/17% split.



The split between Advanced Nurse Practitioners and other ACPs in Primary Care is broadly similar across the ICSs, with Lancs & South Cumbria having the largest split of other ACPs (20%).



The above visual shows the split of other ACP roles in the NW. A large proportion are **Advanced Pharmacist Practitioners** and **Advanced Paramedic Practitioners**, which combined, make up 86% of the other ACP Primary Care workforce.



Role	WTE		
	Cheshire & Merseyside	Greater Manchester	Lancs & South Cumbria
Advanced Pharmacist Practitioners	20.2	19.4	23.2
Advanced Paramedic Practitioners	15.7	13.5	17.4
Advanced Physiotherapist Practitioners	5.9	2.1	2.2
Advanced Occupational Therapist Practitioners	0.0	0.0	3.9
Advanced Dietician Practitioners	1.0	0.0	1.7
Advanced Podiatrist Practitioners	0.0	0.0	1.4

The mix of other ACP roles varies between ICSs. Advanced Occupational Therapists Practitioners and Advanced Podiatrist Practitioners are only present in Lancs & South Cumbria.

Supply

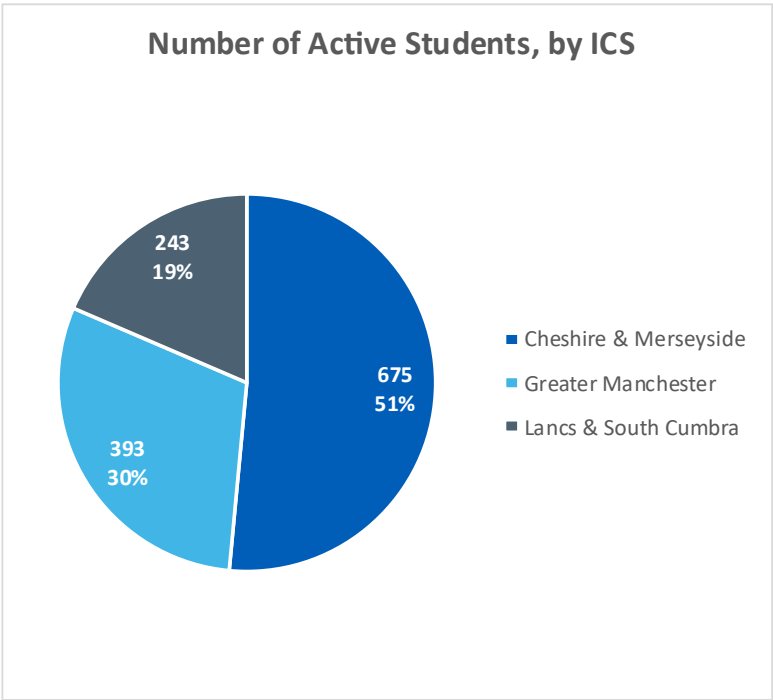
This section presents data in the NHSE NW Student Data Collection Tool (data as at 30th June 2024) for the below ACP courses, which are provided by a NW HEI and where the course is delivered in the NW.

Course Title
Advanced Clinical Practitioner
Advanced Clinical Practitioner - Mental Health
Advanced Clinical Practitioner (Emergency Care)
Advanced Clinical Practitioner (Primary Care)
Advanced Critical Care Practitioner
Advanced Neonatal Nurse Practitioner

NW Overview

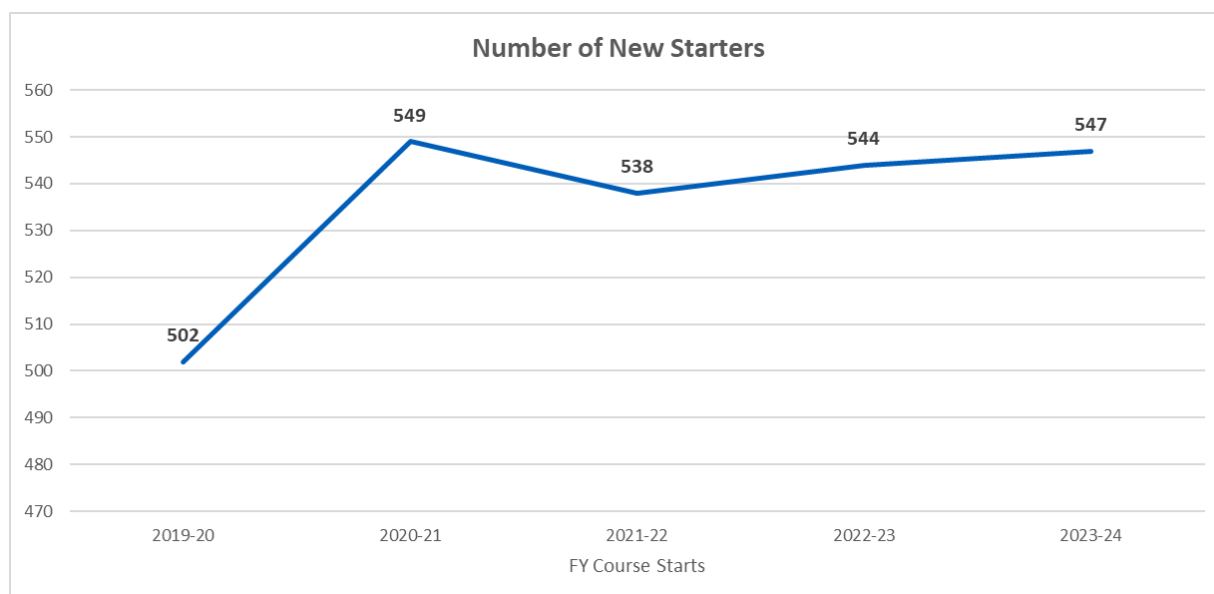
Active Students

There are currently **1,311** active ACP students in the NW.



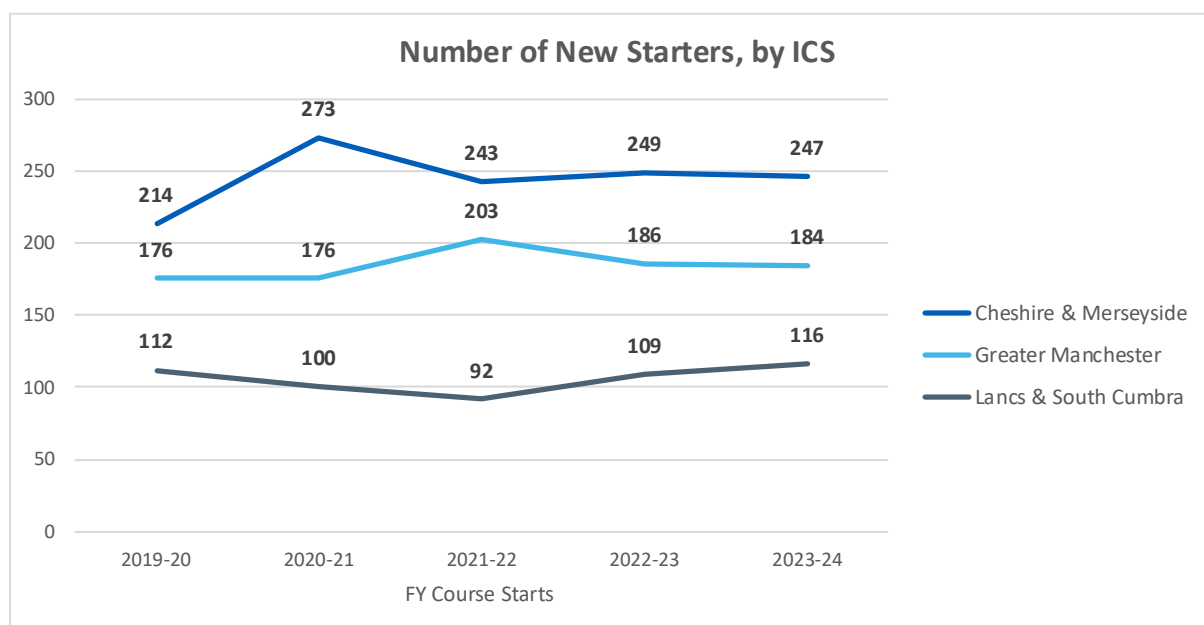
Over half are in **Cheshire & Merseyside** (675), **30%** (393) are in **Greater Manchester** and **19%** (243) in **Lancs & South Cumbria**.

New Starters



The above visual shows the number of new starters in the NW by the financial year a course starts. The numbers have remained fairly steady since 20/21. In 23/24 there were **547** new starters on an ACP course in the NW.

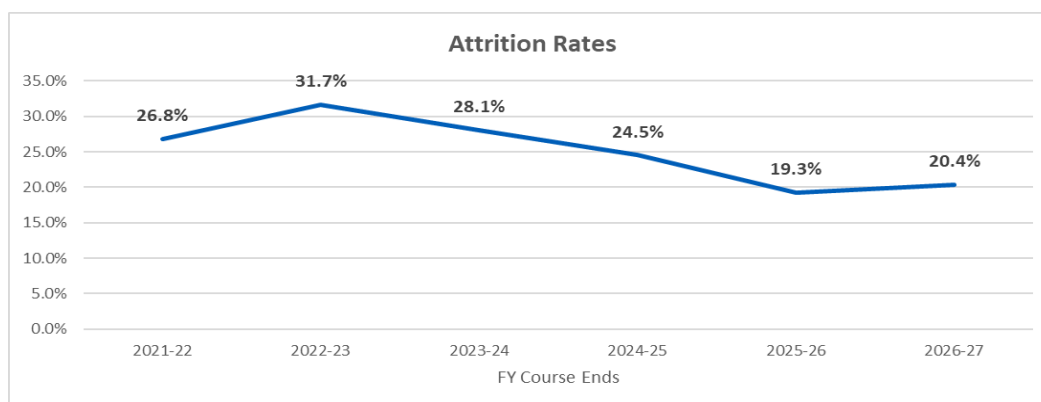
NHSE funded 356 of the 544 in 2022-23 and 379 of the 547 in 2023-24. The variation of new starters will be self-funders, and it is unknown if the self-funded starters have an Advanced Practitioner role on successful completion of the MSc programme.



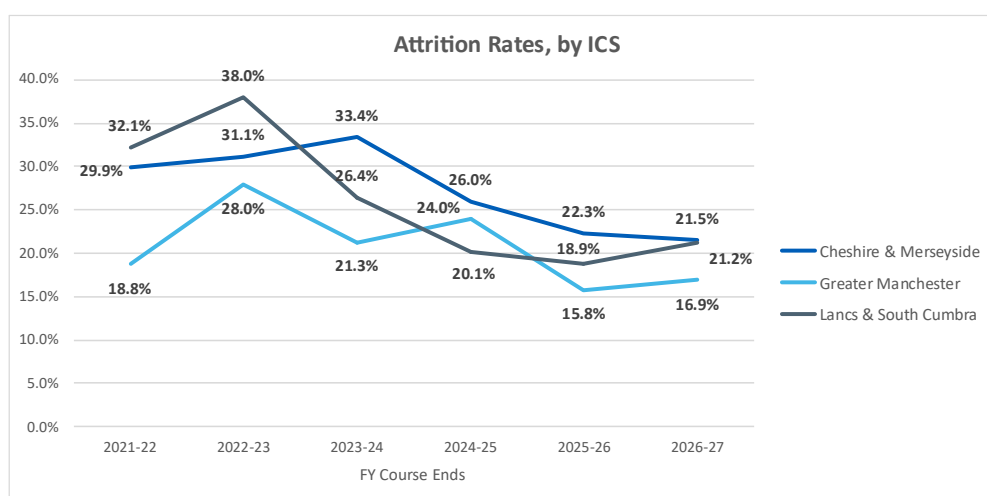
Since 21/22, the number of new starters in Cheshire & Merseyside have remained fairly steady. Greater Manchester has seen a small decline, and an increase seen in Lancs & South Cumbria.

Attrition

The following attrition visuals combine actual attrition and forecast attrition rates. The attrition forecast definition can be found in appendix B. A combination of actual and forecast has been used rather than just actual, due to there being a proportion of cohorts in recent years not fully complete – therefore actual attrition alone would not be reflective of the likely attrition in those years.



The NW attrition rate increased between 21/22 and 22/23, and then reduced in 23/24 to 28.1%. Rates are forecast to keep reducing and then remain fairly level around 20% in 25/26 and 26/27.

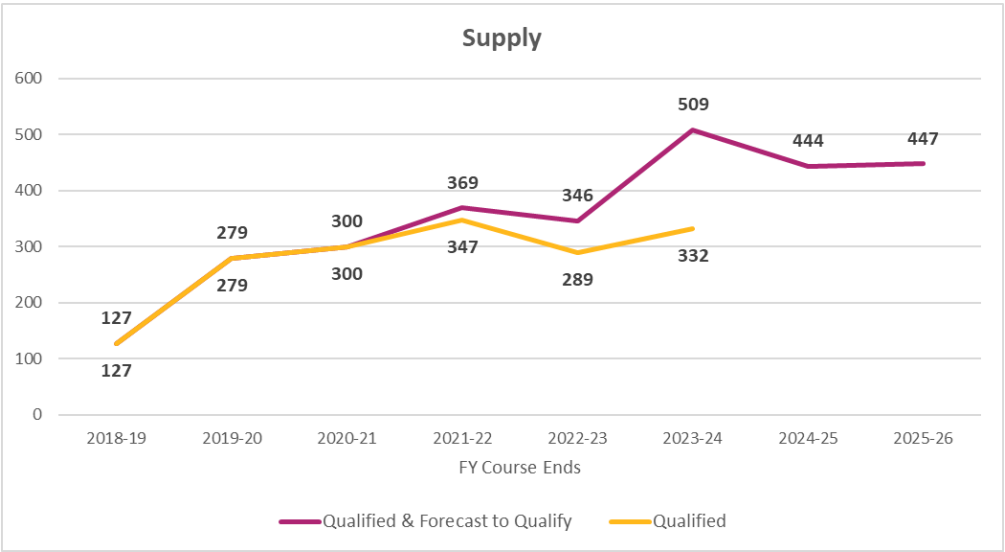


For courses ending in 23/24, **Cheshire & Merseyside** had the highest attrition at **33.4%**. This was followed by **Lancs & South Cumbria** at **26.4%**, and then **Greater Manchester** at **21.3%**. Greater Manchester and Lancs & South Cumbria both saw a significant increase in 22/23 but then decreased in 23/24. Cheshire & Merseyside and Lancs & South Cumbria are forecast to see decreases and then level out in 25/26 and 26/27, whereas Greater Manchester is forecast to increase in 24/25 and then decrease.

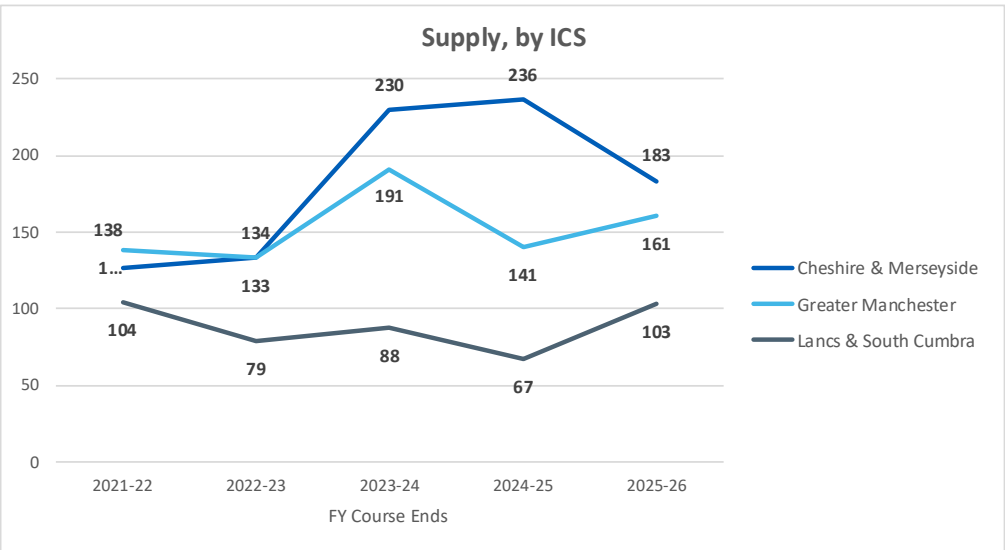
Supply – Qualified & Forecast to Qualify

Qualified & Forecast to Qualify numbers are against the year a course is expected to end. It is not possible in the data to determine when a student is expected to qualify i.e. a 3-year course


that started in 21/22 is expected to end in 24/25, however if a student takes a break in study, they may qualify a year later in 25/26, but they will show in the data as qualifying in 24/25.



In 23/24, **332** ACP students qualified. This number is forecast to increase to **509**, which is a significant increase compared to 346 in 22/23. The numbers are then forecast to drop slightly in 24/25 and stay level in 25/26. It is unclear whether those that have not had NHSE funding complete and transition into actual Advanced Practice roles. NHSE Data collection started by the Faculty from September 2022 of all students who have commenced programmes, to understand the forecast of NHSE funded students that have successfully completed their MSc programme in Advanced Practice and converted into an Advanced Practice role, as requirement of the funding agreement.



The above visual shows the numbers qualified & forecast to qualify, by ICS. Greater Manchester and Lancs & South Cumbria are forecast to see a drop in numbers in 24/25, and then an increase in 25/26, whereas Cheshire & Merseyside is forecast to remain level in 24/25 and then



drop in 25/26. Greater Manchester and Cheshire & Merseyside both saw a significant increase in 23/24.

APPENDIX

Appendix A

NHS Digital Primary Care – Data Quality of NWRS

Practice Data: [Background Data Quality Statement - NHS England Digital](#)

PCN Data: [Data Quality - August 2024 - NHS England Digital](#)

Appendix B

Attrition Rate Definition

Attrition Rate is a North West Analysis calculation: *Attrition rate calculated in two ways: For active cohorts it is based on the activity to date taking into consideration the number of students commencing at the start of the cohort, joining part way through and the number of students leaving the course. It also takes into consideration final attrition rates for fully completed cohorts. For fully completed cohorts it is based on the number of students completed in comparison to starters and late joiners. This a proxy attrition rate and should be used as a guide as each cohort is different and could result in higher or lower attrition. Following each data collection, the % will be refreshed. This provides an estimate forecast of what the attrition is likely to be at the end of the cohort when every student has got a recorded outcome. This calculation does NOT include any students who have taken a break in learning.*

SOURCES

Current Workforce – Secondary Care

- ESR extract from June 2024

Sickness

- ESR extract from June 2024

Current Workforce – Primary Care

- General Practice - <https://digital.nhs.uk/data-and-information/publications/statistical/general-and-personal-medical-services>
- PCN - <https://digital.nhs.uk/data-and-information/publications/statistical/primary-care-network-workforce>

Supply

- NHSE NW Student Data Collection Tool – extract as at June 30th, 2024