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The NHS management workforce



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1 Introduction

This report provides an analysis of the NHS management workforce and how it has changed over the past 14 years, using data from the Binley's Database of NHS Management produced by Beechwood House Publishing Ltd. The report has been produced for The King's Fund Commission on Leadership and Management in the NHS by researchers at Manchester Business School. We are very grateful to both The King's Fund and Beechwood House Publishing Ltd for their support, but of course, responsibility for its contents rests wholly with the authors.

The report begins by setting out the background briefly, making the case for undertaking some empirical analysis of the NHS management workforce and how it has changed over time, and then explaining the methods we have used and some of the strengths and limitations of the dataset. It then goes on to present a series of quantitative analyses in tables, showing the number of NHS managers and their distribution geographically and across organisation types and service areas. It then focuses particularly on senior managers at board level in NHS organisations and provides an analysis of board membership and roles and functions at board level, and goes on to examine clinical directorate management staff and some specific occupational groups in the NHS management workforce. The report concludes by reflecting on the utility both of this dataset and of the analyses we have undertaken, and considers what further research might be useful.

2 Background: what we know about NHS managers

We know remarkably little about the NHS management workforce – how many managers there are and what they do; who they are and where they come from; what training or educational backgrounds they have and how much that prepares them for management; how they come to work in management roles and what place this has in their career; and how their management careers progress or develop over time. While for clinical occupational groups in the NHS (such as doctors, nurses and therapists) substantial effort has been invested in workforce planning, with the intention of matching current and future workforce capacity (in terms of both numbers and skills) to the needs of the NHS and understanding current and future career patterns and trajectories, no similar work has been undertaken for NHS management.

Although the Department of Health and NHS organisations invest substantial resources in management training and development, that investment is not sufficiently informed by empirical analysis of NHS management training needs or workforce capacity requirements. However, concerns about the quality and capacity of NHS management are often raised in a variety of ways. For example, inquiries and investigations into failures in NHS organisations often focus on the issues of governance, leadership and management, and criticise organisations for their perceived failings in management. Problems more generally with the performance of NHS organisations (such as widespread NHS deficits in 2006, or the perceived failures of commissioning by primary care trusts in 2009) are often ascribed to weaknesses in management capacity and capability. Government health policy has often spoken rhetorically about the importance of NHS management and leadership and there have been many reviews and reports on NHS management over the past two decades; a variety of initiatives and organisational structures have been put in place, though few have lasted. Perhaps the most enduring and well-regarded investment in the NHS management workforce has been the NHS management training schemes, which were first established in 1956 and have been a key source of future senior NHS managers for more than 50 years, though even for this flagship scheme, we know remarkably little about the subsequent career trajectories of its graduates or about how well it meets the needs of the NHS.

The NHS Information Centre does produce some workforce statistics on NHS management in England, though its analyses do not cover the other countries of the UK. Based on workforce returns from NHS organisations, it produces aggregate figures for the number of managers and senior managers. But its definitions exclude from this count many managers with a clinical professional background (such as medical directors and directors of nursing) who get counted as clinicians instead. Also, the workforce returns it receives say very little about what managers actually do – their roles, functions and responsibilities.

Of course, the NHS management workforce – its size, rates of pay and overall costs – is often the subject of contentious debate in the media and among politicians and policy-makers. It has been widely asserted that over the past decade, the number of NHS managers has increased, at a

rate disproportionate to need and to the wider growth of the NHS. Some commentators suggest that the NHS is bureaucratic and over-managed and that much NHS management is unnecessary. Some have pejoratively described NHS managers as 'pen pushers' and 'grey suits'. Often, they have called for a reduction in the number of managers, and a return of their power and responsibilities to doctors, nurses and other clinicians. In contrast, others would point to international comparisons of health care management costs which suggest that the NHS spends less on management than most other health care systems, and would argue either that NHS management is particularly efficient or that we under-invest in NHS management and that NHS organisations are under-managed.

The current UK government appears to subscribe largely to the former point of view, and in a recent White Paper, it announced plans to cut the management costs of the NHS in England by more than 45 per cent during the next four years, imposing what it claimed would be the 'largest reduction in administrative costs in NHS history'. The Health Select Committee recently expressed its concern about the feasibility of making these cuts in management costs, alongside a very challenging financial settlement for the NHS and a substantial programme of organisational restructuring and reform. The NHS Confederation and the British Medical Association (BMA) have also raised concerns about the abrupt loss of management capacity and its potential adverse and destabilising effects.

3 This study: aims, data sources and methods

The King's Fund established a Commission on Leadership and Management in the NHS in October 2010, with a broad remit to take a view on the current state of management and leadership in the NHS, to establish the nature of management and leadership needed to meet the quality and financial challenges now facing the health care system, and to recommend what needs to be done to strengthen and develop management and leadership in the NHS. At one of the first meetings of the Commission, the absence of a body of empirical information on the NHS management workforce was noted, and the potential for research to tackle this knowledge gap was discussed.

Since the early 1990s, Beechwood House Publishing has been compiling and updating the Binley's Database of NHS Management in the UK primarily for commercial purposes – it is supplied to organisations that want to be able to contact NHS managers. This database is updated three times a year, by staff who contact each NHS organisation directly to find out about staff changes. Each record on the database contains some data about the functions, roles and responsibilities of the manager concerned, and shows where they work, and for what organisation. We approached Beechwood House Publishing to ask if we could conduct some analyses of their data for The King's Fund Commission on Leadership and Management in the NHS. They agreed to take part, and provided us with anonymised extracts from their database for a 14-year period, from 1997 to 2010.

We undertook work to check the consistency and completeness of the data, and to ensure that the data and coding were comparable both between places and over time. We then used SPSS to conduct our analysis. We think the Binley's database has some advantages because of the detailed data it contains on managerial role and function, and because it has been collected fairly consistently over a long period of time. Because it consists of person-level data rather than aggregate data, it has far more potential and flexibility for analysis. However, the definition of inclusion criteria for the database and the quality and completeness of data returned are highly dependent on the organisations who submit data. Although the dataset supplied to us has longitudinal coverage over a period of 14 years, we found we could not reliably use record linkage across years (for example, to examine job turnover and career trajectories). Because the data were collected mainly for a commercial purpose, some data which would have been very interesting to analyse (for example, professional and educational training/qualifications, ethnicity, age, pay/seniority, etc) were not available. More details of our data source and methodology, and a comparative analysis with NHS management workforce data from the NHS Information Centre, can be found in Appendix A.

4 The NHS management workforce: an overview of numbers and distribution

Table 1 below shows an analysis of the number of NHS managers in the four countries of the UK, and how the numbers have changed over the period from 1997 to 2010. It can be seen that overall, the number of NHS managers in the UK has grown from 24,822 in 1997 to 31,871 in 2010. That is a rise of 28 per cent in 13 years, over a period in which overall NHS spending also grew in real terms, from about £60 billion in 1996/7 to about £123 billion in 2010/11 (both at 2010/11 prices) – an increase of about 105 per cent. In other words, the data suggest that the rise of the NHS 'bureaucracy' may have been somewhat exaggerated, and that in comparison with spending (and indeed with number of other staff groups such as doctors and nurses), the NHS management workforce has not expanded disproportionately.

Table 1 NHS management workforce by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	20029	882	2485	1426	24822
	% within year	80.7%	3.6%	10.0%	5.7%	100.0%
1998	Count	19113	863	2578	1429	23983
	% within year	79.7%	3.6%	10.7%	6.0%	100.0%
1999	Count	18432	899	1876	1112	22319
	% within year	82.6%	4.0%	8.4%	5.0%	100.0%
2000	Count	18462	888	1974	1042	22366
	% within year	82.5%	4.0%	8.8%	4.7%	100.0%
2001	Count	18592	892	1929	1037	22450
	% within year	82.8%	4.0%	8.6%	4.6%	100.0%
2002	Count	23543	963	1979	1073	27558
	% within year	85.4%	3.5%	7.2%	3.9%	100.0%
2003	Count	27603	918	2070	1572	32163
	% within year	85.8%	2.9%	6.4%	4.9%	100.0%
2004	Count	28536	969	2097	1653	33255
	% within year	85.8%	2.9%	6.3%	5.0%	100.0%
2005	Count	29005	994	2250	1714	33963
	% within year	85.4%	2.9%	6.6%	5.0%	100.0%
2006	Count	29228	1018	2213	1758	34217
	% within year	85.4%	3.0%	6.5%	5.1%	100.0%
2007	Count	25007	921	2326	1807	30061
	% within year	83.2%	3.1%	7.7%	6.0%	100.0%
2008	Count	24036	651	2386	1412	28485
	% within year	84.4%	2.3%	8.4%	5.0%	100.0%
2009	Count	26240	711	2383	1703	31037
	% within year	84.5%	2.3%	7.7%	5.5%	100.0%
2010	Count	27413	804	2399	1255	31871
	% within year	86.0%	2.5%	7.5%	3.9%	100.0%
Total	Count	335239	12373	30945	19993	398550
	% within year	84.1%	3.1%	7.8%	5.0%	100.0%

However, the breakdown by country in Table 1 shows some variations within the UK. It can be seen that the number of NHS managers has grown in England, while numbers have been steady or even declining in the other three countries. All the growth in NHS management workforce numbers in the UK noted in Table 1 seems to have taken place in England.

Table 2 shows a more detailed analysis of the NHS management workforce in England by geographic region for the period 2002–10 (because regional location was coded differently before 2002, we have not shown the data from 1997 to 2001). It can be seen that the steady growth in numbers is not specific to any one region, but seems to be fairly evenly spread across England.

Table 2 NHS management workforce in England by region, 2002–10

		NEW REGION					
		England	London	Midlands & Eastern	North	South	Total
2002	Count	533	3428	6643	7093	5846	23543
	% within year	2.3%	14.6%	28.2%	30.1%	24.8%	100.0%
2003	Count	915	4060	7712	8300	6616	27603
	% within year	3.3%	14.7%	27.9%	30.1%	24.0%	100.0%
2004	Count	874	4169	8016	8539	6938	28536
	% within year	3.1%	14.6%	28.1%	29.9%	24.3%	100.0%
2005	Count	901	4178	8201	8735	6990	29005
	% within year	3.1%	14.4%	28.3%	30.1%	24.1%	100.0%
2006	Count	712	4321	8208	8893	7094	29228
	% within year	2.4%	14.8%	28.1%	30.4%	24.3%	100.0%
2007	Count	623	4217	6639	7783	5745	25007
	% within year	2.5%	16.9%	26.5%	31.1%	23.0%	100.0%
2008	Count	701	4009	6412	7584	5330	24036
	% within year	2.9%	16.7%	26.7%	31.6%	22.2%	100.0%
2009	Count	719	4345	7085	8257	5834	26240
	% within year	2.7%	16.6%	27.0%	31.5%	22.2%	100.0%
2010	Count	713	4506	7442	8606	6146	27413
	% within year	2.6%	16.4%	27.1%	31.4%	22.4%	100.0%
Total	Count	6691	37233	66358	73790	56539	240611
	% within year	2.8%	15.5%	27.6%	30.7%	23.5%	100.0%

5 The NHS management workforce: organisations and services

Tables 3a–3d below show an analysis of NHS management numbers in different types of organisations over the period 1997–2010, presented separately for each of the four countries of the UK. Because there have been quite a number of changes in the organisational structure over this period, we grouped the data into a number of broad types – national and regional organisations, health authorities/boards, primary care trusts (PCTs)/organisations, and NHS providers/trusts. The tables clearly show the effects of changes such as the abolition of health authorities in England in 2001 and the transfer of much of their function to PCTs, as well as the abolition of NHS trusts in Scotland in 2003 and the creation of integrated health boards. The differences in structures between countries make comparisons somewhat difficult, but overall, the figures suggest that the great majority of the NHS management workforce is based in health care provider organisations, in primary and secondary care. While reorganisations such as those alluded to above seem to move NHS managers from one organisation type to another, they do not seem to have had much effect on the overall number of NHS managers.

Table 3a NHS management workforce in England by organisation type, 1997–2010

		Organisation type					
		Health authority or board	National or regional	Other	Primary care	Provider	Total
1997	Count	2961	200	56	34	16778	20029
	% within year	14.8%	1.0%	.3%	.2%	83.8%	100.0%
1998	Count	3013	217	51	28	15804	19113
	% within year	15.8%	1.1%	.3%	.1%	82.7%	100.0%
1999	Count	2821	288	49	27	15247	18432
	% within year	15.3%	1.6%	.3%	.1%	82.7%	100.0%
2000	Count	2806	381	51	369	14855	18462
	% within year	15.2%	2.1%	.3%	2.0%	80.5%	100.0%
2001	Count	2549	317	83	1917	13726	18592
	% within year	13.7%	1.7%	.4%	10.3%	73.8%	100.0%
2002	Count	0	1014	235	9471	12823	23543
	% within year	.0%	4.3%	1.0%	40.2%	54.5%	100.0%
2003	Count	0	1330	513	11782	13978	27603
	% within year	.0%	4.8%	1.9%	42.7%	50.6%	100.0%
2004	Count	0	1500	433	12441	14162	28536
	% within year	.0%	5.3%	1.5%	43.6%	49.6%	100.0%
2005	Count	0	1460	567	12818	14160	29005
	% within year	.0%	5.0%	2.0%	44.2%	48.8%	100.0%
2006	Count	0	1286	1107	13199	13636	29228
	% within year	.0%	4.4%	3.8%	45.2%	46.7%	100.0%
2007	Count	0	761	418	10117	13711	25007
	% within year	.0%	3.0%	1.7%	40.5%	54.8%	100.0%
2008	Count	0	857	402	9165	13612	24036
	% within year	.0%	3.6%	1.7%	38.1%	56.6%	100.0%
2009	Count	0	1028	408	10441	14363	26240
	% within year	.0%	3.9%	1.6%	39.8%	54.7%	100.0%
2010	Count	0	1151	386	11196	14680	27413
	% within year	.0%	4.2%	1.4%	40.8%	53.6%	100.0%
Total	Count	14150	11790	4759	103005	201535	335239
	% within year	4.2%	3.5%	1.4%	30.7%	60.1%	100.0%

Table 3b NHS management workforce in Scotland by organisation type, 1997–2010

		Organisation type					
		Health authority or board	National or regional	Other	Primary care	Provider	Total
1997	Count	411	33	94	0	1947	2485
	% within year	16.5%	1.3%	3.8%	.0%	78.4%	100.0%
1998	Count	418	33	110	0	2017	2578
	% within year	16.2%	1.3%	4.3%	.0%	78.2%	100.0%
1999	Count	401	33	138	0	1304	1876
	% within year	21.4%	1.8%	7.4%	.0%	69.5%	100.0%
2000	Count	376	35	148	0	1415	1974
	% within year	19.0%	1.8%	7.5%	.0%	71.7%	100.0%
2001	Count	404	40	134	0	1351	1929
	% within year	20.9%	2.1%	6.9%	.0%	70.0%	100.0%
2002	Count	427	61	217	0	1274	1979
	% within year	21.6%	3.1%	11.0%	.0%	64.4%	100.0%
2003	Count	543	186	338	0	1003	2070
	% within year	26.2%	9.0%	16.3%	.0%	48.5%	100.0%
2004	Count	594	204	1299	0	0	2097
	% within year	28.3%	9.7%	61.9%	.0%	.0%	100.0%
2005	Count	1154	214	524	358	0	2250
	% within year	51.3%	9.5%	23.3%	15.9%	.0%	100.0%
2006	Count	1459	228	135	391	0	2213
	% within year	65.9%	10.3%	6.1%	17.7%	.0%	100.0%
2007	Count	1413	245	139	529	0	2326
	% within year	60.7%	10.5%	6.0%	22.7%	.0%	100.0%
2008	Count	1395	259	131	601	0	2386
	% within year	58.5%	10.9%	5.5%	25.2%	.0%	100.0%
2009	Count	1328	262	123	670	0	2383
	% within year	55.7%	11.0%	5.2%	28.1%	.0%	100.0%
2010	Count	1303	314	96	686	0	2399
	% within year	54.3%	13.1%	4.0%	28.6%	.0%	100.0%
Total	Count	11626	2147	3626	3235	10311	30945
	% within year	37.6%	6.9%	11.7%	10.5%	33.3%	100.0%

Table 3c NHS management workforce in Wales by organisation type, 1997–2010

		Organisation type				
		Health authority or board	National or regional	Other	Provider	Total
1997	Count	168	16	24	1218	1426
	% within year	11.8%	1.1%	1.7%	85.4%	100.0%
1998	Count	164	17	42	1206	1429
	% within year	11.5%	1.2%	2.9%	84.4%	100.0%
1999	Count	175	10	20	907	1112
	% within year	15.7%	.9%	1.8%	81.6%	100.0%
2000	Count	160	13	21	848	1042
	% within year	15.4%	1.2%	2.0%	81.4%	100.0%
2001	Count	168	12	27	830	1037
	% within year	16.2%	1.2%	2.6%	80.0%	100.0%
2002	Count	152	13	14	894	1073
	% within year	14.2%	1.2%	1.3%	83.3%	100.0%
2003	Count	593	39	19	921	1572
	% within year	37.7%	2.5%	1.2%	58.6%	100.0%
2004	Count	610	43	39	961	1653
	% within year	36.9%	2.6%	2.4%	58.1%	100.0%
2005	Count	650	42	42	980	1714
	% within year	37.9%	2.5%	2.5%	57.2%	100.0%
2006	Count	690	41	43	984	1758
	% within year	39.2%	2.3%	2.4%	56.0%	100.0%
2007	Count	727	39	39	1002	1807
	% within year	40.2%	2.2%	2.2%	55.5%	100.0%
2008	Count	738	38	48	588	1412
	% within year	52.3%	2.7%	3.4%	41.6%	100.0%
2009	Count	786	41	48	828	1703
	% within year	46.2%	2.4%	2.8%	48.6%	100.0%
2010	Count	1058	38	46	113	1255
	% within year	84.3%	3.0%	3.7%	9.0%	100.0%
Total	Count	6839	402	472	12280	19993
	% within year	34.2%	2.0%	2.4%	61.4%	100.0%

Table 3d NHS management workforce in Northern Ireland by organisation type, 1997–2010

		Organisation type				
		Health authority or board	National or regional	Other	Provider	Total
1997	Count	124	30	13	715	882
	% within year	14.1%	3.4%	1.5%	81.1%	100.0%
1998	Count	134	31	14	684	863
	% within year	15.5%	3.6%	1.6%	79.3%	100.0%
1999	Count	132	35	14	718	899
	% within year	14.7%	3.9%	1.6%	79.9%	100.0%
2000	Count	132	60	15	681	888
	% within year	14.9%	6.8%	1.7%	76.7%	100.0%
2001	Count	134	42	41	675	892
	% within year	15.0%	4.7%	4.6%	75.7%	100.0%
2002	Count	137	39	43	744	963
	% within year	14.2%	4.0%	4.5%	77.3%	100.0%
2003	Count	138	31	34	715	918
	% within year	15.0%	3.4%	3.7%	77.9%	100.0%
2004	Count	141	27	68	733	969
	% within year	14.6%	2.8%	7.0%	75.6%	100.0%
2005	Count	148	24	58	764	994
	% within year	14.9%	2.4%	5.8%	76.9%	100.0%
2006	Count	154	23	66	775	1018
	% within year	15.1%	2.3%	6.5%	76.1%	100.0%
2007	Count	175	29	74	643	921
	% within year	19.0%	3.1%	8.0%	69.8%	100.0%
2008	Count	158	35	45	413	651
	% within year	24.3%	5.4%	6.9%	63.4%	100.0%
2009	Count	0	160	50	501	711
	% within year	.0%	22.5%	7.0%	70.5%	100.0%
2010	Count	0	247	53	504	804
	% within year	.0%	30.7%	6.6%	62.7%	100.0%
Total	Count	1707	813	588	9265	12373
	% within year	13.8%	6.6%	4.8%	74.9%	100.0%

Table 4 shows an analysis of NHS management numbers in the UK by service area for the period 1997–2010. The main service areas by which organisations have been categorised in the data are shown in the table – acute, community, ambulance services, mental health, etc. However, because organisations often provide more than one sort of service, and the data do not allocate individual managers within organisations to those service areas, we can only make an approximate estimate of the distribution of managers across service areas. The table does not show totals because the columns are not exclusive (in other words, a particular manager may be counted in more than one service area).

Table 4 NHS management workforce in the UK by service area, 1997–2010

	Service area						
	Acute	Community	Ambulance	Mental health	Primary care	Learning disabilities	Social care
	Count	Count	Count	Count	Count	Count	Count
1997	14810	9482	1161	9489	0	0	0
1998	14090	9231	730	9284	0	0	0
1999	12912	8595	776	8461	457	0	0
2000	12642	8460	724	8204	1258	0	0
2001	12111	8629	761	6599	2721	0	0
2002	12010	12902	721	5586	10443	959	0
2003	12664	15072	799	6457	12825	3554	319
2004	12965	15805	830	6819	13479	4414	327
2005	13200	16206	842	7096	13544	4820	363
2006	13473	16381	845	7255	14185	4886	405
2007	13505	8055	387	6325	11153	4031	543
2008	12645	7847	467	6271	10325	4313	496
2009	13655	8646	502	6867	10369	4485	433
2010	13985	11202	538	7241	11330	4957	501

Table 4 does suggest that, overall, the number of managers working in community services and in primary care has grown over the period, while the number working in acute care has remained largely static. In contrast, the number of managers working in ambulance services and in mental health appears to have declined. The decline in management numbers in these two areas probably results from the substantial organisational amalgamations that have taken place in ambulance services and mental health. The table seems to show that the number of managers working in learning disabilities is rising, but we think this is an artefact, resulting from organisational changes which mean that learning disability services are usually managed alongside other community or mental health services, and from some inconsistencies in the way data have been collected and coded in earlier years.

6 NHS board membership, roles and functions

Throughout the period analysed in this report, NHS organisations in all four countries of the UK have been run by unitary boards, composed of both executive directors and non-executive directors and chaired by a non-executive chair. The executive make-up of boards has varied but has generally included the chief executive and senior directors such as the director of finance and the medical director. Non-executive directors have been appointed by government or by the NHS Appointments Commission, as have the non-executive chairs. Table 5 below shows an analysis of the number of NHS board members in the four countries of the UK over the period 1997–2010. As with the earlier analysis of overall management numbers in Table 1, it can be seen that the number of board members grew in England during the past decade as the number of NHS organisations expanded, but was largely static in the other three countries. In recent years, the number of board members has declined throughout the UK, largely as a result of mergers and amalgamations among NHS organisations.

Table 5 NHS board members by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	6173	299	740	386	7598
	% within year	81.2%	3.9%	9.7%	5.1%	100.0%
1998	Count	5861	288	735	369	7253
	% within year	80.8%	4.0%	10.1%	5.1%	100.0%
1999	Count	5337	267	562	271	6437
	% within year	82.9%	4.1%	8.7%	4.2%	100.0%
2000	Count	5528	283	578	276	6665
	% within year	82.9%	4.2%	8.7%	4.1%	100.0%
2001	Count	5671	292	551	268	6782
	% within year	83.6%	4.3%	8.1%	4.0%	100.0%
2002	Count	7291	296	577	287	8451
	% within year	86.3%	3.5%	6.8%	3.4%	100.0%
2003	Count	8334	294	563	383	9574
	% within year	87.0%	3.1%	5.9%	4.0%	100.0%
2004	Count	8185	318	495	357	9355
	% within year	87.5%	3.4%	5.3%	3.8%	100.0%
2005	Count	7961	318	557	350	9186
	% within year	86.7%	3.5%	6.1%	3.8%	100.0%
2006	Count	7770	306	506	346	8928
	% within year	87.0%	3.4%	5.7%	3.9%	100.0%
2007	Count	5013	207	558	636	6414
	% within year	78.2%	3.2%	8.7%	9.9%	100.0%
2008	Count	5269	163	597	563	6592
	% within year	79.9%	2.5%	9.1%	8.5%	100.0%
2009	Count	5410	157	617	655	6839
	% within year	79.1%	2.3%	9.0%	9.6%	100.0%
2010	Count	5565	250	615	239	6669
	% within year	83.4%	3.7%	9.2%	3.6%	100.0%
Total	Count	89368	3738	8251	5386	106743
	% within year	83.7%	3.5%	7.7%	5.0%	100.0%

Table 6 contains a breakdown of NHS board members in the UK by their role/function, for three sample years in the period studied (1997, 2003 and 2010). It shows the number and proportion of board members in each role/function. It should be noted that we found some overlaps between executive board functions (for example, directors of finance who were also responsible for other functions like information, contracting or estates, and directors of operations who were also directors of nursing), and we have tried to classify each board member by their main or primary function.

Table 6 NHS board members in the UK by function, for 1997, 2003 and 2010

Board members		Year			Total
		1997	2003	2010	
Chair	Count	668	777	514	1959
	% within year	8.8%	8.1%	7.7%	8.2%
Non-executive	Count	3128	3801	2827	9756
	% within year	41.2%	39.7%	42.4%	40.9%
Chief executive	Count	689	851	537	2077
	% within year	9.1%	8.9%	8.1%	8.7%
Finance	Count	668	983	631	2282
	% within year	8.8%	10.3%	9.5%	9.6%
Public health	Count	120	346	304	770
	% within year	1.6%	3.6%	4.6%	3.2%
Medical	Count	555	667	676	1898
	% within year	7.3%	7.0%	10.1%	8.0%
Nursing	Count	388	521	216	1125
	% within year	5.1%	5.4%	3.2%	4.7%
Operations	Count	206	203	127	536
	% within year	2.7%	2.1%	1.9%	2.2%
Human resources	Count	278	228	134	640
	% within year	3.7%	2.4%	2.0%	2.7%
Corporate	Count	155	175	71	401
	% within year	2.0%	1.8%	1.1%	1.7%
Quality	Count	30	20	11	61
	% within year	.4%	.2%	.2%	.3%
Information	Count	33	33	13	79
	% within year	.4%	.3%	.2%	.3%
Commissioning	Count	78	30	16	124
	% within year	1.0%	.3%	.2%	.5%
Estates	Count	61	36	28	125
	% within year	.8%	.4%	.4%	.5%
Other	Count	541	903	564	2008
	% within year	7.1%	9.4%	8.5%	8.4%
Total	Count	7598	9574	6669	23841
	% within year	100.0%	100.0%	100.0%	100.0%

Tables 7a and 7b present analyses of NHS board members in the UK by gender for two years at the start and end of our study period – 1997 and 2010. They show that, while boards are largely still male-dominated (64 per cent male in 1997 and 62 per cent male in 2010), there has been some

change in gender make-up of NHS boards over this period. Notably there are now substantially more female chief executives and finance directors, though female board members still tend to occupy traditional roles, such as director of nursing, quality and human resources.

Table 7a NHS board composition in the UK by gender, 1997

Board members		Gender		
		Female	Male	Total
Chair	Count	175	450	625
	% within board members	28.0%	72.0%	100.0%
Non-executive	Count	1242	1655	2897
	% within board members	42.9%	57.1%	100.0%
Chief executive	Count	139	536	675
	% within board members	20.6%	79.4%	100.0%
Finance	Count	104	564	668
	% within board members	15.6%	84.4%	100.0%
Public health	Count	31	60	91
	% within board members	34.1%	65.9%	100.0%
Medical	Count	48	306	354
	% within board members	13.6%	86.4%	100.0%
Nursing	Count	291	96	387
	% within board members	75.2%	24.8%	100.0%
Operations	Count	65	138	203
	% within board members	32.0%	68.0%	100.0%
Human resources	Count	117	161	278
	% within board members	42.1%	57.9%	100.0%
Corporate	Count	49	103	152
	% within board members	32.2%	67.8%	100.0%
Quality	Count	17	13	30
	% within board members	56.7%	43.3%	100.0%
Information	Count	11	21	32
	% within board members	34.4%	65.6%	100.0%
Commissioning	Count	30	46	76
	% within board members	39.5%	60.5%	100.0%
Estates	Count	5	56	61
	% within board members	8.2%	91.8%	100.0%
Other	Count	188	323	511
	% within board members	36.8%	63.2%	100.0%
Total	Count	2512	4528	7040
	% within board members	35.7%	64.3%	100.0%

Table 7b NHS board composition in the UK by gender, 2010

Board members		Gender		
		Female	Male	Total
Chair	Count	156	358	514
	% within board members	30.4%	69.6%	100.0%
Non-executive	Count	1005	1822	2827
	% within board members	35.6%	64.4%	100.0%
Chief executive	Count	197	340	537
	% within board members	36.7%	63.3%	100.0%
Finance	Count	163	468	631
	% within board members	25.8%	74.2%	100.0%
Public health	Count	161	143	304
	% within board members	53.0%	47.0%	100.0%
Medical	Count	130	546	676
	% within board members	19.2%	80.8%	100.0%
Nursing	Count	183	33	216
	% within board members	84.7%	15.3%	100.0%
Operations	Count	72	55	127
	% within board members	56.7%	43.3%	100.0%
Human resources	Count	84	50	134
	% within board members	62.7%	37.3%	100.0%
Corporate	Count	38	33	71
	% within board members	53.5%	46.5%	100.0%
Quality	Count	8	3	11
	% within board members	72.7%	27.3%	100.0%
Information	Count	6	7	13
	% within board members	46.2%	53.8%	100.0%
Commissioning	Count	7	9	16
	% within board members	43.8%	56.2%	100.0%
Estates	Count	4	24	28
	% within board members	14.3%	85.7%	100.0%
Other	Count	277	287	564
	% within board members	49.1%	50.9%	100.0%
Total	Count	2491	4178	6669
	% within board members	37.4%	62.6%	100.0%

7 Clinical directorates and their management

In NHS provider organisations (NHS trusts in England, and integrated health boards in other countries of the UK), the management of clinical services below board level is usually undertaken through a system of clinical divisions and/or directorates. Each clinical directorate is led by a director who is commonly (though not always) a doctor, supported by directorate business or service managers and often by a directorate nurse manager as well. Across the UK, there are around 5,300 staff working in management roles in clinical directorates, and Table 8 below provides a breakdown of the numbers by country over the study period. It can be seen that through a period of considerable change in all four countries, the clinical directorate structures and staffing have continued, though there has been some reduction in the number of management staff.

Table 8 Clinical directorate management staff by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	5284	194	670	446	6594
	% within year	80.1%	2.9%	10.2%	6.8%	100.0%
1998	Count	4959	184	683	435	6261
	% within year	79.2%	2.9%	10.9%	6.9%	100.0%
1999	Count	4686	194	393	364	5637
	% within year	83.1%	3.4%	7.0%	6.5%	100.0%
2000	Count	4625	195	465	329	5614
	% within year	82.4%	3.5%	8.3%	5.9%	100.0%
2001	Count	4697	175	442	325	5639
	% within year	83.3%	3.1%	7.8%	5.8%	100.0%
2002	Count	4359	187	423	303	5272
	% within year	82.7%	3.5%	8.0%	5.7%	100.0%
2003	Count	4519	170	441	310	5440
	% within year	83.1%	3.1%	8.1%	5.7%	100.0%
2004	Count	4599	164	440	346	5549
	% within year	82.9%	3.0%	7.9%	6.2%	100.0%
2005	Count	4610	177	402	359	5548
	% within year	83.1%	3.2%	7.2%	6.5%	100.0%
2006	Count	4649	179	373	352	5553
	% within year	83.7%	3.2%	6.7%	6.3%	100.0%
2007	Count	4350	170	383	347	5250
	% within year	82.9%	3.2%	7.3%	6.6%	100.0%
2008	Count	4037	98	386	183	4704
	% within year	85.8%	2.1%	8.2%	3.9%	100.0%
2009	Count	4484	161	354	294	5293
	% within year	84.7%	3.0%	6.7%	5.6%	100.0%
2010	Count	4559	151	380	273	5363
	% within year	85.0%	2.8%	7.1%	5.1%	100.0%
Total	Count	64417	2399	6235	4666	77717
	% within year	82.9%	3.1%	8.0%	6.0%	100.0%

Table 9 shows a more detailed analysis of clinical directorate management staff in the UK by function/role, splitting them into three main groups: clinical directors, directorate managers and directorate nurse managers. It can be seen that there are more than 2,000 clinicians, mostly doctors, who are taking on the role of clinical director, usually alongside their clinical responsibilities. The data suggest that not all directorates have an identified senior nurse (alongside the clinical director and directorate manager), but we think that quite a number of directorate managers are probably clinical professionals (nurses or therapists) and so combine these two roles.

Table 9 Clinical directorate management staff in the UK by function, 1997–2010

		Clinical directorate staff			
		Clinical director	Directorate manager	Directorate nurse manager	Total
1997	Count	2843	2713	1038	6594
	% within year	43.1%	41.1%	15.7%	100.0%
1998	Count	2682	2558	1021	6261
	% within year	42.8%	40.9%	16.3%	100.0%
1999	Count	2384	2353	900	5637
	% within year	42.3%	41.7%	16.0%	100.0%
2000	Count	2369	2352	893	5614
	% within year	42.2%	41.9%	15.9%	100.0%
2001	Count	2384	2385	870	5639
	% within year	42.3%	42.3%	15.4%	100.0%
2002	Count	2236	2201	835	5272
	% within year	42.4%	41.7%	15.8%	100.0%
2003	Count	2306	2307	827	5440
	% within year	42.4%	42.4%	15.2%	100.0%
2004	Count	2370	2334	845	5549
	% within year	42.7%	42.1%	15.2%	100.0%
2005	Count	2370	2316	862	5548
	% within year	42.7%	41.7%	15.5%	100.0%
2006	Count	2376	2356	821	5553
	% within year	42.8%	42.4%	14.8%	100.0%
2007	Count	2223	2219	808	5250
	% within year	42.3%	42.3%	15.4%	100.0%
2008	Count	1937	2064	703	4704
	% within year	41.2%	43.9%	14.9%	100.0%
2009	Count	1988	2548	757	5293
	% within year	37.6%	48.1%	14.3%	100.0%
2010	Count	2009	2577	777	5363
	% within year	37.5%	48.1%	14.5%	100.0%
Total	Count	32477	33283	11957	77717
	% within year	41.8%	42.8%	15.4%	100.0%

8 Other functional groups in the management workforce

The dataset allows us to identify a wide range of professional occupational groups within the NHS management workforce to examine their distribution geographically (across countries or regions) and across organisation types or service areas, and to explore trends over time. For illustrative purposes, our final three tables (10, 11 and 12) present analyses of the number and distribution of selected functional groups.

Table 10 shows the number of NHS managers with roles or functions concerned broadly with service quality – we have included those working in quality assurance or improvement, clinical governance, clinical audit, complaints, risk management and related areas. As the table shows, there has been an increase in the number of staff working in this area over the study period, with a peak around 2005.

Table 10 Number of NHS managers working in service quality by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	1539	75	174	104	1892
	% within year	81.3%	4.0%	9.2%	5.5%	100.0%
1998	Count	1492	75	188	107	1862
	% within year	80.1%	4.0%	10.1%	5.7%	100.0%
1999	Count	1370	71	125	74	1640
	% within year	83.5%	4.3%	7.6%	4.5%	100.0%
2000	Count	1675	87	163	82	2007
	% within year	83.5%	4.3%	8.1%	4.1%	100.0%
2001	Count	1666	93	175	80	2014
	% within year	82.7%	4.6%	8.7%	4.0%	100.0%
2002	Count	1826	92	185	101	2204
	% within year	82.8%	4.2%	8.4%	4.6%	100.0%
2003	Count	2386	97	190	116	2789
	% within year	85.6%	3.5%	6.8%	4.2%	100.0%
2004	Count	2557	100	172	132	2961
	% within year	86.4%	3.4%	5.8%	4.5%	100.0%
2005	Count	2546	99	165	145	2955
	% within year	86.2%	3.4%	5.6%	4.9%	100.0%
2006	Count	2584	102	160	150	2996
	% within year	86.2%	3.4%	5.3%	5.0%	100.0%
2007	Count	2099	72	131	153	2455
	% within year	85.5%	2.9%	5.3%	6.2%	100.0%
2008	Count	1782	50	128	110	2070
	% within year	86.1%	2.4%	6.2%	5.3%	100.0%
2009	Count	1842	42	118	118	2120
	% within year	86.9%	2.0%	5.6%	5.6%	100.0%
2010	Count	2047	44	125	108	2324
	% within year	88.1%	1.9%	5.4%	4.6%	100.0%
Total	Count	27411	1099	2199	1580	32289
	% within year	84.9%	3.4%	6.8%	4.9%	100.0%

Table 11 provides a similar analysis for the number of NHS managers with roles concerning health informatics, in which we have included roles both in computing and networking and those in information services, IT support and data protection. Again, it can be seen that this has been an area of modest but significant growth over the study period in England, with a particular peak in 2005 and 2006; but workforce levels in the other three countries have been static or declining.

Table 11 Number of NHS managers working in health informatics by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	939	39	99	65	1142
	% within year	82.2%	3.4%	8.7%	5.7%	100.0%
1998	Count	870	43	103	67	1083
	% within year	80.3%	4.0%	9.5%	6.2%	100.0%
1999	Count	842	43	85	49	1019
	% within year	82.6%	4.2%	8.3%	4.8%	100.0%
2000	Count	868	41	86	48	1043
	% within year	83.2%	3.9%	8.2%	4.6%	100.0%
2001	Count	810	44	85	45	984
	% within year	82.3%	4.5%	8.6%	4.6%	100.0%
2002	Count	920	44	101	46	1111
	% within year	82.8%	4.0%	9.1%	4.1%	100.0%
2003	Count	1135	43	92	49	1319
	% within year	86.1%	3.3%	7.0%	3.7%	100.0%
2004	Count	1147	45	89	54	1335
	% within year	85.9%	3.4%	6.7%	4.0%	100.0%
2005	Count	1405	53	96	76	1630
	% within year	86.2%	3.3%	5.9%	4.7%	100.0%
2006	Count	1421	55	95	83	1654
	% within year	85.9%	3.3%	5.7%	5.0%	100.0%
2007	Count	1071	54	86	82	1293
	% within year	82.8%	4.2%	6.7%	6.3%	100.0%
2008	Count	999	40	90	59	1188
	% within year	84.1%	3.4%	7.6%	5.0%	100.0%
2009	Count	1025	30	86	57	1198
	% within year	85.6%	2.5%	7.2%	4.8%	100.0%
2010	Count	1051	28	81	56	1216
	% within year	86.4%	2.3%	6.7%	4.6%	100.0%
Total	Count	14503	602	1274	836	17215
	% within year	84.2%	3.5%	7.4%	4.9%	100.0%

Finally, Table 12 provides a similar analysis of the number of NHS managers working in estates or facilities management. It can be seen that across all four countries, there has been a progressive decline in numbers over the study period of around 20 per cent, which contrasts with the growth (at least in England) seen in tables 10 and 11. It might be that the contracting out of facilities management and some estates functions lies behind this decline, or it could result in part from the transfer of responsibilities in some places for these functions to private contractors in private finance initiative (PFI) schemes.

Table 12 Number of NHS managers working in estates/facilities management by country, 1997–2010

		Country				
		England	N Ireland	Scotland	Wales	Total
1997	Count	986	48	127	74	1235
	% within year	79.8%	3.9%	10.3%	6.0%	100.0%
1998	Count	898	47	134	69	1148
	% within year	78.2%	4.1%	11.7%	6.0%	100.0%
1999	Count	933	51	101	57	1142
	% within year	81.7%	4.5%	8.8%	5.0%	100.0%
2000	Count	1072	58	134	54	1318
	% within year	81.3%	4.4%	10.2%	4.1%	100.0%
2001	Count	907	56	106	48	1117
	% within year	81.2%	5.0%	9.5%	4.3%	100.0%
2002	Count	1057	60	120	56	1293
	% within year	81.7%	4.6%	9.3%	4.3%	100.0%
2003	Count	1135	63	114	56	1368
	% within year	83.0%	4.6%	8.3%	4.1%	100.0%
2004	Count	1079	62	99	57	1297
	% within year	83.2%	4.8%	7.6%	4.4%	100.0%
2005	Count	1074	61	95	60	1290
	% within year	83.3%	4.7%	7.4%	4.7%	100.0%
2006	Count	1032	57	95	58	1242
	% within year	83.1%	4.6%	7.6%	4.7%	100.0%
2007	Count	879	53	91	58	1081
	% within year	81.3%	4.9%	8.4%	5.4%	100.0%
2008	Count	738	24	83	50	895
	% within year	82.5%	2.7%	9.3%	5.6%	100.0%
2009	Count	746	19	87	48	900
	% within year	82.9%	2.1%	9.7%	5.3%	100.0%
2010	Count	799	20	62	46	927
	% within year	86.2%	2.2%	6.7%	5.0%	100.0%
Total	Count	13335	679	1448	791	16253
	% within year	82.0%	4.2%	8.9%	4.9%	100.0%

9 Conclusions

This report provides a basic but useful overview of the NHS management workforce in the UK. It is helpful in offering some empirical grounding for thinking about capacity, capability and management development, talent management and succession planning. For example, we know that across the four countries of the UK we have about 700 doctors working at NHS board level in medical director or similar roles, and at least a further 2,000 doctors engaged in management as clinical directors. But we know very little about how these clinicians have been prepared for or supported in taking on these management roles, how they were selected, or how they perform.

In some ways, this report may pose as many questions as it answers. It is primarily useful in indicating the scale and scope of the NHS management workforce and how it has changed or is changing, and for identifying and exploring particular functional or occupational groups within the management workforce. But it can tell us little about the performance, competencies, development needs and other characteristics of that workforce.

Further research could be undertaken using the Binley's Database of NHS Management in three ways. First, we could do more detailed analysis of the functional and occupational groups within the NHS management workforce, using the existing Binley's dataset, and do more detailed intra-UK and cross-organisational comparisons. We could also work to link the management workforce records across years, which we were unable to do for this analysis, and that would allow us to examine rates of turnover and job change, and to do retrospective analyses of career trajectory. Second, we could seek to link this dataset to other available data – for example, to the NHS Institute's management training scheme alumni database, to explore post-training scheme career progression, or to databases of NHS organisation cost and performance indicators, in order to explore the relationships between NHS management characteristics and organisational performance. Third, we could use the Binley's dataset to identify and contact cohorts of managers in order to gather information directly from them. For example, we could survey medical managers to examine their motivations, experiences and competencies in management.

In an era of unprecedented financial constraint and austerity, investment in the NHS management workforce – in training needs analyses, development programmes, talent management initiatives, career coaching and mentoring, and the like – needs to be able to demonstrate a return, in terms of improved management and organisational performance. A more empirically grounded and intellectually robust approach to management development throughout the NHS is needed.

Appendix A. Data source and methodology

As was noted in Section 3, this report is based on an analysis of 14 years of data from the Binley's Database of NHS Management, which covers all four countries of the UK. The Binley's Database is updated three times a year by staff who contact each NHS organisation direct to collect person-level data about the individuals who hold particular managerial roles within the organisation. Inclusion in the database is therefore functionally determined – individuals are added if they fulfil a particular management function, and the set of functions is regularly updated to take account of changes in the NHS.

The tables below summarise the datasets provided and outline the variables which each contained. All the data had been anonymised by the removal of surnames and forenames.

File name	NHS17	NHS20	NHS23	NHS26	NHS28	NHS32	NHS36	NHS38	NHS40	NHS43	NHS46	NHS49	NHS53	NHS56	Merged all
Year (in file)	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	All 14 years
No of cases	24866	24038	22389	22448	22543	27641	32264	33362	34072	34321	30180	28615	31152	31995	399886
%age of whole dataset	6.22	6.01	5.60	5.61	5.64	6.91	8.07	8.34	8.52	8.58	7.55	7.16	7.79	8.00	100

Variables in each file

Merged File	NHS17	NHS20	NHS23	NHS26	NHS28	NHS32	NHS36	NHS38	NHS40	NHS43	NHS46	NHS49	NHS53	NHS56
Year inserted	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
on file														
STATUS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
ORGNAME	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
UNITITLE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
ADDRESS1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
ADDRESS2	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
ADDRESS3	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
TOWN	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
COUNTY	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
POSTCODE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
CATEGORY	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
RESPCODE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
SALUTATION	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
JOBTITLE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
URN	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Numeric
SITE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Numeric
NEWREGION	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
PERCHANGE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
SITECHANGE	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
DIRNO	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Numeric
SERVICES	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
DIRNAME	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
BEDS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
EDITION	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
PNLS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Numeric
NHS_CODE			✓								✓	✓	✓	Numeric
OLDREGION			✓			✓	✓		✓		✓	✓		String
LOC			✓		✓	✓	✓		✓		✓	✓		String
HA_NAME						✓	✓		✓		✓	✓		Numeric
GENDER	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	String
USN			✓											String

Key for variables

STATUS	Whether the organisation is a trust, an SHA, etc
ORGNAME	Name of organisation
UNITTITLE	Where the organisation has geographical divisions
ADDRESS1	Address
ADDRESS2	Address
ADDRESS3	Address
TOWN	Town
COUNTY	County
POSTCODE	Post code
CATEGORY	Management site category code
RESPCODE	Identifies the responsibility of each contact listed within the database.
SALUTATION	Sister, Mr., Mrs., Doctor.
JOBTITLE	Job title
URN	Unique Record number i.e. person number
SITE	Permanent reference, will remain permanently associated with the site. A new number is issued only when a new site is added to the database.
NEWREGION	Identifies the current NHS region name.
PERCHANGE	Identifies any changes in the person details e.g. change in job title. A "Y" indicates that the details have changed.
SITECHANGE	Identifies any changes in the site details e.g. Telephone number, address. A "Y" indicates that the details have changed.
DIRNO	This field can be used to group members of the same directorate together.
SERVICES	Shows the service codes of the Clinical Directorates
DIRNAME	Identifies the Directorate Name, where known, but can not be used reliably for selections. Should be used for selections.
BEDS	No of beds
EDITION	
PNLS	This is an abbreviation for Post Nominal Letters. This field will identify Honours and Qualifications.
NHS_CODE	Identifies Trusts' Performance stats by DoH
OLDREGION	The old NHS Regions
LOC	Identifies the location address of a specific individual
HA_NAME	Identifies the SHA associated with each organisation, or HB in Scotland and LHB in Wales
GENDER	Contact's gender
USN	USN – identifies both the site and location of the individual. e.g. Bedford & Shires Health Care NHS Trust has a Site number of 1982001. Listed under this organisation is another site at 3 Kimbolton Road. In order to distinguish who works for the main site at 40 Kimbolton Road, and who works at 3 Kimbolton Road, the USN is used. The USN for 40 Kimbolton Road is 1982001A, and the USN for 3 Kimbolton Road is 1982001H.

We imported the data into SPSS, and undertook a series of analyses to explore the consistency with which coded fields (such as RESPCODE and STATUS) had been coded over the study period. We undertook some re-coding to produce consistent classifications where possible across the study period, and to produce a number of new calculated variables, including variables to represent country, organisation type, service areas, and a number of particular management roles and functions.

We noted in Section 2 that the NHS Information Centre produces some statistics on the NHS management workforce in England, but that the definitions of management contained in the NHS Occupational Code Manual (version 8.1, effective June 2010) which are used on returns to the NHS Information Centre exclude some important management groups – including, for example, all managers who are required to have a particular clinical or professional background (for example, medical directors, directors of nursing, clinical directors, etc) and all non-executive board members (chairs and non-executive directors). However, they do include in their returns some more junior and first-line managers who are unlikely to be identified by and included in the Binley’s Database of NHS Management. The table below sets out their figures for the number of managers in the NHS in England between 1999 and 2009, subdivided into senior managers (which they define as all board-level managers and those who report directly to them) and managers (all others). Alongside these figures, we have put the number of board-level managers and all other managers from the Binley’s dataset.

Unsurprisingly, the two sources of data do not agree precisely, because they use different definitions of the NHS management workforce and collect data in very different ways. However, the degree of correspondence is generally fair and both sets of data show similar temporal trends – a rising NHS management workforce in England from 1997 to 2005 (peaking at 39,391 or 29,005 staff in 2005) and then a decline in numbers until 2007, and then growth again in 2009.

Table A1 Number of managers in the NHS in England, 1999–2009, broken down into senior and other managers

Year	NHS Information Centre returns			Analysis of Binley’s Database of NHS Management		
	Senior managers	Other managers	Total managers	Board-level managers	Other managers	Total managers
1999	8879	15408	24287	5337	13095	18432
2000	8887	16369	25256	5528	12934	18462
2001	9740	17684	27424	5671	12921	18592
2002	11859	20435	32294	7291	16252	23543
2003	12056	23265	35321	8334	19269	27603
2004	11841	25885	37726	8185	20351	28536
2005	11430	27961	39391	7961	21044	29005
2006	10655	26096	36751	7770	21458	29228
2007	10443	26056	36499	5013	19994	25007
2008	11508	28405	39913	5269	18767	24036
2009	13077	31584	44661	5410	20830	26240