



Mental Health Officers' Report 2012

Published 29 May 2013

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Mental Health Officers' Report

2012

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1 Introduction

This report presents the results of the latest Mental Health Officers' (MHOs) survey to give a picture of:

- the number of practising MHOs in Scotland, in post at 3 December 2012
- the workload carried out by MHOs in Scotland

This report can be used to support workforce planning and for benchmarking purposes.

This is the first MHO publication to be produced by the Scottish Social Services Council (SSSC). In previous years this report was collated and published by the Scottish Government and assessed by the UK Statistics Authority (UKSA) as a National Statistics publication.

The SSSC has followed the same methodology as that used by Scottish Government; however, these statistics have not been formally assessed for compliance with the Code of Practice for Official Statistics since their transfer from Scottish Government. The UKSA is planning to assess the statistics for compliance with the Code of Practice later in the year.

The survey data used in this report has been collected annually since 2005, from local authorities. The survey has developed each year with new questions being added when a need for further information has been identified.

In all previous years the survey collected information about the number of qualified MHOs who were practising within Scotland on the 31 March. This year the date has changed to 3 December as this is the same collection date used for the annual census of local authority social work services. This change in date means that the data in this report is not directly comparable with that of previous MHO reports, but it is comparable with the annual census. These data collections are currently carried out separately but there is potential to combine them in the future.

A "practising" MHO is defined as using legislation directly in relation to working with clients, or potentially using legislation directly in relation to clients, eg serving on rotas during the previous 12 months.

A Mental Health Officer (MHO):

- is a qualified social worker with at least two years' experience, who has completed a further year's study of mental disorder and the related law to achieve accreditation
- has a range of statutory duties under the Criminal Procedure (Consequential Provisions) (Scotland) Act 1995, the Adults with Incapacity (Scotland) Act 2000 and the Mental Health (Care and Treatment) (Scotland) Act 2003
- can work as either part of a specialist mental health team, or are integrated into a multidisciplinary (non-mental health specialist) teams
- is responsible for making decisions about admissions to hospital for people who, in their judgement, pose a risk to themselves or others

2 Summary

MHO workforce

- The number of practising MHOs has increased from 688 on 31 March 2012 to 698 on 3 December 2012.
- The staffing whole time equivalent (WTE) has increased from 635.4 on 31 March 2012 to 643.2 on 3 December 2012, this is an increase of 1.2%.
- In March 2012 there were 304 MHOs in non-specialist mental health teams, this increased in December 2012 to 339.5, a rise of 11.7%. The number of MHOs in specialist mental health teams has decreased between March 2012 (384) and December 2012 (358.5) by 6.6%.
- The number of MHOs in exclusive positions has increased from 167 in March 2012 to 176 in December 2012, this is the highest number of exclusive MHO positions that has been recorded in this publication. The number of unfilled exclusive MHO vacancies has decreased from 16 in March 2012 to 13.9 in December 2012, a fall of 13.1%. Please see the Appendix 3 for the definition of an "exclusive" MHO.
- On 3 December 2012, 72.4% of MHOs were aged 45 and over. Male MHOs were on average older with 76% being aged 45 and over, compared to 71% of females. At the time of the survey 68% of the MHO workforce were female.
- The number of trainee MHOs has fallen substantially to 33 in December 2012. There were 59 trainees in March 2012 and 105 in March 2008.
- A total of 56 MHOs left the workforce between 4 December 2011 and 3 December 2012, of which a quarter retired and a quarter had a change of post (sideways move).

Work completed by MHOs

- The number of MHOs on daytime rota duty rose slightly between March 2012 (490) and December 2012 (494). This figure was 529 in March 2011 meaning there was a decrease of 6.6% between March 2011 and December 2012.
- The number of MHOs working on assessment and treatment orders has shown an increase of 22.9% between March 2012 (210) and December 2012 (258). The two other areas of work reported within this publication are compulsion orders, which have increased by 16% in this same time period, and designated MHO for restricted patients which have decreased by 0.85%.

- The majority of mentally disordered offenders (MDO) cases are carried out by MHOs on specialist mental health teams. The percentage of this work undertaken by MHOs on specialist teams stood at 81.8% in 2008 and has decreased to 66.2% in December 2012.

3 MHO workforce

Between 2005 and March 2012 the Scottish Government collected data on the MHO workforce within each Local Authority. All figures collected by the Scottish Government relate to practising MHOs in post at 31 March for a given year.

This year the data collection duties have been transferred to the SSSC. The date of collection has changed so that information is gathered on MHOs in post at 3 December 2012. These figures are presented alongside the previous data.

3.1 MHO numbers over time

Table 1 shows that on 3 December 2012 there were 698 MHOs practising, this is an increase of 1.5% from March 2012. The staffing whole time equivalent (WTE) on 3 December 2012 was 643.2, this is an increase of 1.2% from March 2012. The average WTE per MHO remained constant between March 2012 and December 2012 at 0.92.

Figure 1: Number of MHOs, 2008 to 2012

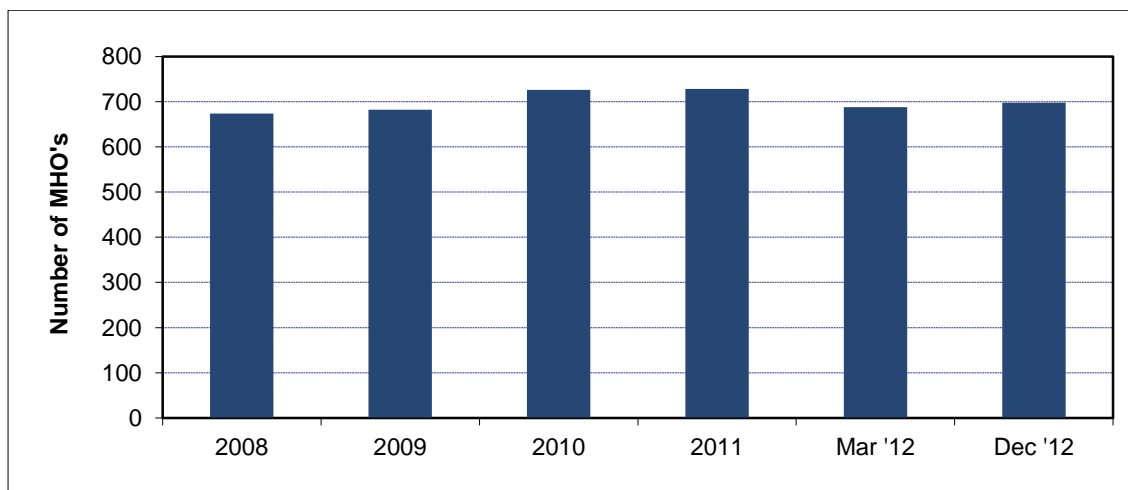


Figure 2: WTE of MHOs, 2008 to 2012



Table 1: Practising MHOs, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Number of MHOs	674	682	726	728	688	698
WTE of MHOs	622.16	643.04	667.84	687.75	635.44	643.24
Average WTE per person	0.92	0.94	0.92	0.94	0.92	0.92

The MHO workforce is split between specialist and non-specialist mental health (MH) teams. Table 2 shows that in 2008, 52% of MHOs worked in specialist MH teams, this number increased to 56% in March 2012 but has decreased to 51% in December 2012. Section 4 of this report looks at the field team in which an MHO works in more detail.

Table 2: MHOs by type of Mental Health team, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Specialist MH teams	352	366	381	383	384	358.5
Non-specialist MH teams	322	316	345	345	304	339.5
Percentage in specialist MH teams	52%	54%	52%	53%	56%	51%
Percentage in non-specialist MH teams	48%	46%	48%	47%	44%	49%

3.2 MHO rates per 1,000 of population

Table 3 shows that the rate of MHOs per 1,000 of the Scottish population has remained constant at between 0.12 and 0.13 between March 2008 and December 2012, with it currently at 0.12. (Refer to Appendix 1).

Table 3: MHO rates, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
MHO WTE rate per 1,000 of the Scottish population	0.12	0.12	0.13	0.13	0.12	0.12

Source: National Records of Scotland mid-year population estimates 2008 to 2011.

3.3 Age and gender of MHO workforce

A question regarding the age and gender of an MHO was first introduced in the 2007 survey. An MHOs age and gender can only be provided with their consent, which has resulted in incomplete returns. This means that the figures for each year are not comparable and the figures will not add up to the total numbers of MHOs due to missing information, please see Table 4.

Table 4: Undisclosed MHO age and gender data, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Undisclosed data	3	102	0	28	94	2

The MHO workforce at 3 December 2012 had 223 male (32%) and 473 female (68%) MHOs. This shows an increase in the number of males since March 2012. Looking specifically at the ages of the MHO workforce in December 2012, the majority (72.4%) were aged 45 and over. A higher percentage of males (76%) were aged 45 and over compared to females (71%). The age grouping with the highest percentage of MHOs is 55-59 for males at 23.3% and 50-54 for females at 22.2%.

Figure 3: Age and gender of MHO workforce, December 2012

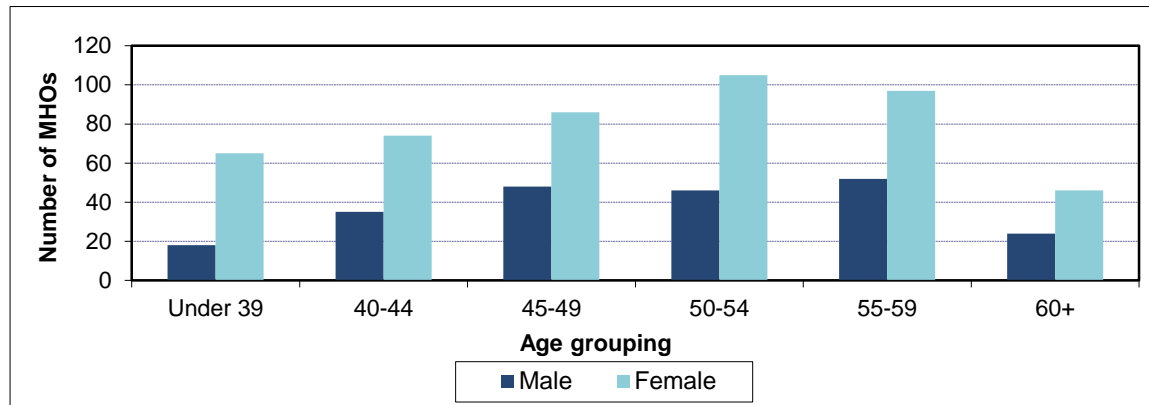


Table 5a: Number of male MHOs by age group, 2008 to 2012

Age group	Male - Numbers					
	2008	2009	2010	2011	Mar '12	Dec '12
Under 39	26	16	15	15	12	18
40-44	35	28	37	44	27	35
45-49	39	36	46	48	41	48
50-54	65	47	54	51	43	46
55-59	46	39	49	42	35	52
60+	13	14	27	28	18	24
Totals	224	180	228	228	176	223

Figures for each year are not comparable.

Table 5b: Percentage of male MHOs by age group, 2008 to 2012

Age group	Male - Percentage					
	2008	2009	2010	2011	Mar '12	Dec '12
Under 39	11.6%	8.9%	6.6%	6.6%	6.8%	8.1%
40-44	15.6%	15.6%	16.2%	19.3%	15.3%	15.7%
45-49	17.4%	20.0%	20.2%	21.1%	23.3%	21.5%
50-54	29.0%	26.1%	23.7%	22.4%	24.4%	20.6%
55-59	20.5%	21.7%	21.5%	18.4%	19.9%	23.3%
60+	5.8%	7.8%	11.8%	12.3%	10.2%	10.8%
Totals	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Figures for each year are not comparable.

Table 6a: Number of female MHOs by age group, 2008 to 2012

Age group	Female - Numbers					
	2008	2009	2010	2011	Mar '12	Dec '12
Under 39	82	55	79	77	61	65
40-44	60	57	69	79	63	74
45-49	88	77	89	82	73	86
50-54	100	83	120	113	85	105
55-59	97	102	101	107	96	97
60+	20	26	40	42	40	46
Totals	447	400	498	500	418	473

Figures for each year are not comparable.

Table 6b: Percentage of female MHOs by age group, 2008 to 2012

Age group	Female - Percentage					
	2008	2009	2010	2011	Mar '12	Dec '12
Under 39	18.3%	13.8%	15.9%	15.4%	14.6%	13.7%
40-44	13.4%	14.3%	13.9%	15.8%	15.1%	15.6%
45-49	19.7%	19.3%	17.9%	16.4%	17.5%	18.2%
50-54	22.4%	20.8%	24.1%	22.6%	20.3%	22.2%
55-59	21.7%	25.5%	20.3%	21.4%	23.0%	20.5%
60+	4.5%	6.5%	8.0%	8.4%	9.6%	9.7%
Totals	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Figures for each year are not comparable.

3.4 Ethnicity of the MHO workforce

An ethnicity question was first introduced to the survey in 2008 and as with the age and gender question, an MHOs ethnicity can only be provided with consent. This means that the figures for each year are not comparable and the figures will not add up to the total numbers of MHOs due to missing information.

Tables 7a and 7b show that on 3 December 2012 the majority of MHOs were white and that only 1.4% of the workforce were from an ethnic minority. A total of 4.6% of all staff had either not wanted to disclose or not known their ethnic group. This is a large decrease from March 2012 where 12.8% of MHOs had not disclosed or known their ethnic group.

Table 7a: Ethnicity of MHOs by headcount, 2008 to 2012

Ethnicity	Number of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
White	550	598	700	656	596	656
Minority	5	6	7	5	4	10
Not Known / not disclosed	119	78	19	67	88	32
Total	674	682	726	728	688	698

Figures for each year are not comparable.

Table 7b: Ethnicity of MHOs by percentage, 2008 to 2012

Ethnicity	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
White	81.6%	87.7%	96.4%	90.1%	86.6%	94.0%
Minority	0.7%	0.9%	1.0%	0.7%	0.6%	1.4%
Not Known / not disclosed	17.7%	11.4%	2.6%	9.2%	12.8%	4.6%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Figures for each year are not comparable.

3.5 Number of trainee MHOs

The number of trainee MHOs has decreased from 59 in March 2012 to 33 in December 2012. This is the lowest number recorded since the survey began, and a substantial decrease from the 105 trainee MHOs recorded in 2008.

Figure 4: Number of trainee MHOs, 2008 to December 2012

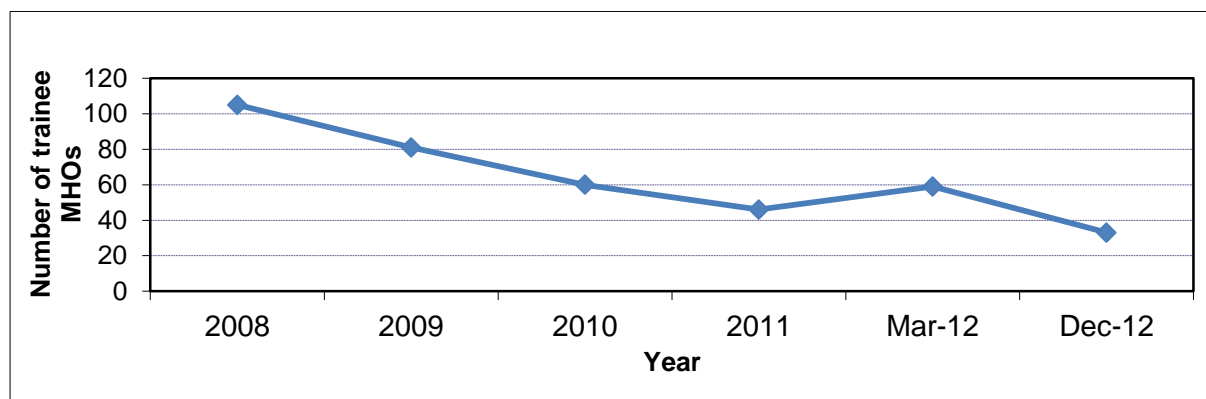


Table 8: Trainee MHO numbers, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Number of trainee MHOs	105	81	60	46	59	33

3.6 MHOs leaving the workforce

A new question was added to the 2009 survey to collect data on the number of MHOs leaving the workforce and the reason for leaving. Between 4 December 2011 and 3 December 2012 a total of 56 MHOs left the workforce, which is lower than the 2011/12 number reported in March 2012 of 90 MHOs. Please note there is some overlap between these figures and so they are not directly comparable.

The reason given for an MHO leaving the workforce has changed considerably since 2009. In 2009 the most common reason was due to a change of post (promotion), in December 2012 this was the second lowest reported reason.

Tables 9a and 9b show that the most common reasons for MHOs leaving the workforce in December 2012 are the same as those reported in March 2012.

Retirement and change of post (sideways move) each account for 25% of leavers.

Table 9a: Number of MHOs leaving the workforce, 2009 to 2012

	Number of MHOs				
	2009	2010	2011	Mar '12	Dec '12
Change of post (promotion)	10	3	6	4	4
Change of post (sideways move)	9	3	2	20	14
Resigned	9	15	14	17	12
Retired	8	18	22	30	14
Career break	8	4	1	2	9
Other (Secondments etc)	7	8	6	18 ¹	3
Total	51	51	51	91²	56

¹ This figure has been revised from the March 2012 report, where 17 was the figure recorded.

² This figure has been revised from the March 2012 report, where 90 leavers were recorded.

Table 9b: Percentage of MHOs leaving the workforce, 2009 to 2012

	Percentage of yearly total				
	2009	2010	2011	Mar '12 ¹	Dec '12
Change of post (promotion)	19.6%	5.9%	11.8%	4.4%	7.1%
Change of post (sideways move)	17.6%	5.9%	3.9%	22.0%	25.0%
Resigned	17.6%	29.4%	27.5%	18.7%	21.4%
Retired	15.7%	35.3%	43.1%	33.0%	25.0%
Career break	15.7%	7.8%	2.0%	2.2%	16.1%
Other (secondments etc)	13.7%	15.7%	11.8%	19.8%	5.4%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

¹ Percentages recorded for March 2012 vary from the 2011-12 report as the figures were revised.

3.7 Number of MHO vacancies

A question asking about MHO vacancies was first introduced to the survey in 2007. Table 10 shows that the number of unfilled "exclusive" MHO vacancies was 16 between March 2011 and March 2012, and then was 13.9 between December 2011 and December 2012. An "exclusive" MHOs contract specifies that they are appointed to primarily undertake statutory Mental Health Officer work. Please note there is some overlap between these figures and so they are not directly comparable. In December 2012 there were also 30 qualified MHOs unavailable. An MHO is classed as unavailable when they are either on maternity leave, a career break, on long term sick leave or compassionate leave, for a period of three months or more.

Table 10: Currently unfilled MHO posts, 2008 to 2012

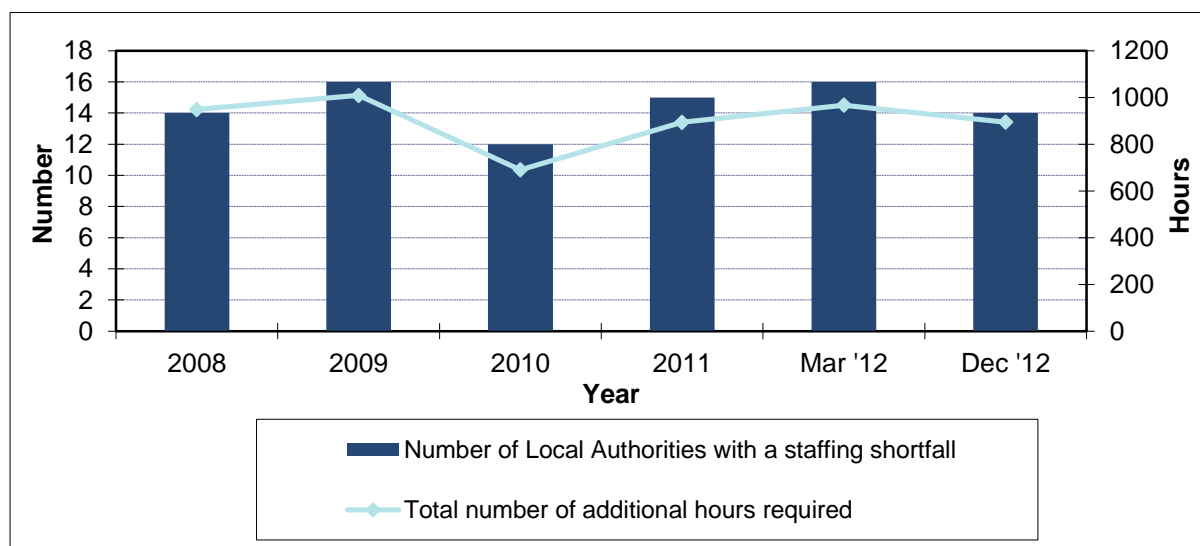
	2008	2009	2010	2011	Mar '12	Dec '12
Unfilled "exclusive" MHO vacancies	21	12.5	9.6	12.3	16	13.9
MHOs currently unavailable	26	18	26	21	25	30

Table 11 and Figure 5 present data on the total shortfall of MHO staff within Scotland. Local Authorities were asked to report any gap between real available time and what they felt was needed within their Authority. The number of Local Authorities reporting a shortfall has decreased from 16 in March 2012 to 14 in December 2012, and the hours required has also decreased from 967.0 in March 2012 to 894.3 in December 2012.

Table 11: MHO staffing shortfall, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Number of local authorities with a staffing shortfall	14	16	12	15	16	14
Total number of additional hours required	948.4	1008.6	690.0	893.5	967.0	894.3
Average shortfall in hours	67.7	63.0	57.5	59.6	60.4	63.9

Figure 5: MHO staffing shortfall, 2008 to 2012



4 Specialist and non-specialist mental health teams

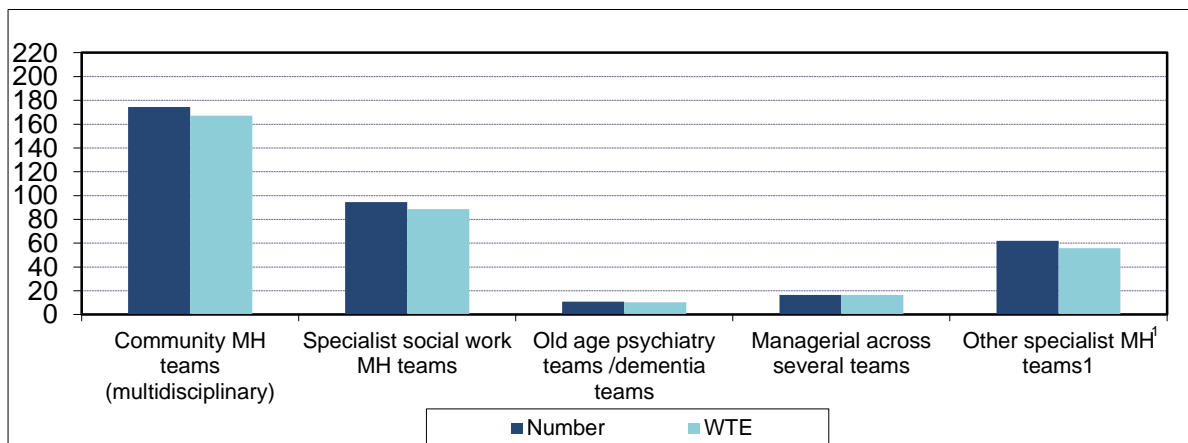
The MHO workforce is split between specialist and non-specialist mental health (MH) teams, this section of the report looks at the field team in which an MHO works in more detail.

4.1 MHOs in specialist teams

Table 12a shows that the number of MHOs working in specialist MH teams increased steadily between 2008 (352) and March 2012 (384). However the number has decreased by 6.6% between March 2012 and December 2012, to 358.5. Of these 358.5 MHOs the majority (48.7%) work in Community MH Teams, while only 3.1% work in old age psychiatry/dementia teams.

Table 13a shows the WTEs of the MHOs working in specialist MH teams. The percentage splits across the teams are similar to those in table 12b. The 358.5 MHOs have a WTE of 337.71, giving an average of 0.94 per MHO, compared to 0.91 in March 2012. Figure 6 shows the December 2012 data from tables 12a and 13a.

Figure 6: MHOs by specialist MH teams, December 2012



¹ Other specialist MH teams¹ includes Child and adolescent MH teams due to concealment of small numbers, please see Appendix 3 for the definition of "concealment".

Table 12a: Number of MHOs by specialist MH teams, 2008 to 2012

	Number of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
Community MH teams (multidisciplinary) ^{2,3,4}	182	197.5	205.33	201	173	174.5
Specialist social work MH teams ^{3,4}	76	74	106.83	77	90	94.5
Old age psychiatry teams / dementia teams ^{2,3}	12	17.5	17.34	20.5	19	11
Managerial across several teams ⁴	15	29	25	28	33	16.5
Other specialist MH teams ^{1,3}	67	48	26.5	56.5	69	62
Total	352	366	381	383	384	358.5

¹ Includes child & adolescent MH teams due to concealment of small numbers.

² In 2009, a MHO splits working between teams.

³ In 2010, a number of MHOs are split working between teams.

⁴ In Dec 2012, a number of MHOs are split working between teams.

Table 12b: Percentage of MHOs by specialist MH teams, 2008 to 2012

	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
Community MH teams (multidisciplinary) ^{2,3,4}	51.7%	54.0%	53.9%	52.5%	45.1%	48.7%
Specialist social work MH teams ^{3,4}	21.6%	20.2%	28.0%	20.1%	23.4%	26.4%
Old age psychiatry teams / dementia teams ^{2,3}	3.4%	4.8%	4.6%	5.4%	4.9%	3.1%
Managerial across several teams	4.3%	7.9%	6.6%	7.3%	8.6%	4.6%
Other specialist MH teams ^{1,3,4}	19.0%	13.1%	7.0%	14.8%	18.0%	17.3%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

¹ Includes child & adolescent MH teams due to concealment of small numbers.

² In 2009, a MHO splits working between teams.

³ In 2010, a number of MHOs split working between teams.

⁴ In Dec 2012, a number of MHOs are split working between teams.

Table 13a: WTE of MHOs by specialist MH teams, 2008 to 2012

	WTE of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
Community MH teams (multidisciplinary)	167.8	186.5	192.43	186.8	158.27	167.1
Specialist social work MH teams	70.4	68.14	102.13	71.7	80.78	88.52
Old age psychiatry teams / dementia teams	10.8	17	16.14	18.3	16.9	10.36
Managerial across several teams	14.6	28.8	24.8	27.5	32.2	16.5
Other specialist MH teams ¹	61.36	45.97	23.4	52.45	61.99	55.83
Total	324.96	346.41	358.9	356.75	350.14	337.71

¹ Includes child and adolescent MH teams due to concealment of small numbers.

Table 13b: Percentage of WTE of MHOs by specialist MH teams, 2008 to 2012

	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
Community MH Teams (multidisciplinary)	51.6%	53.8%	53.6%	52.4%	45.2%	49.5%
Specialist social work MH teams	21.7%	19.7%	28.5%	20.1%	23.1%	26.2%
Old age psychiatry teams / Dementia teams	3.3%	4.9%	4.5%	5.1%	4.8%	3.1%
Managerial across several teams	4.5%	8.3%	6.9%	7.7%	9.2%	4.9%
Other specialist MH teams ¹	18.9%	13.3%	6.5%	14.7%	17.7%	16.5%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

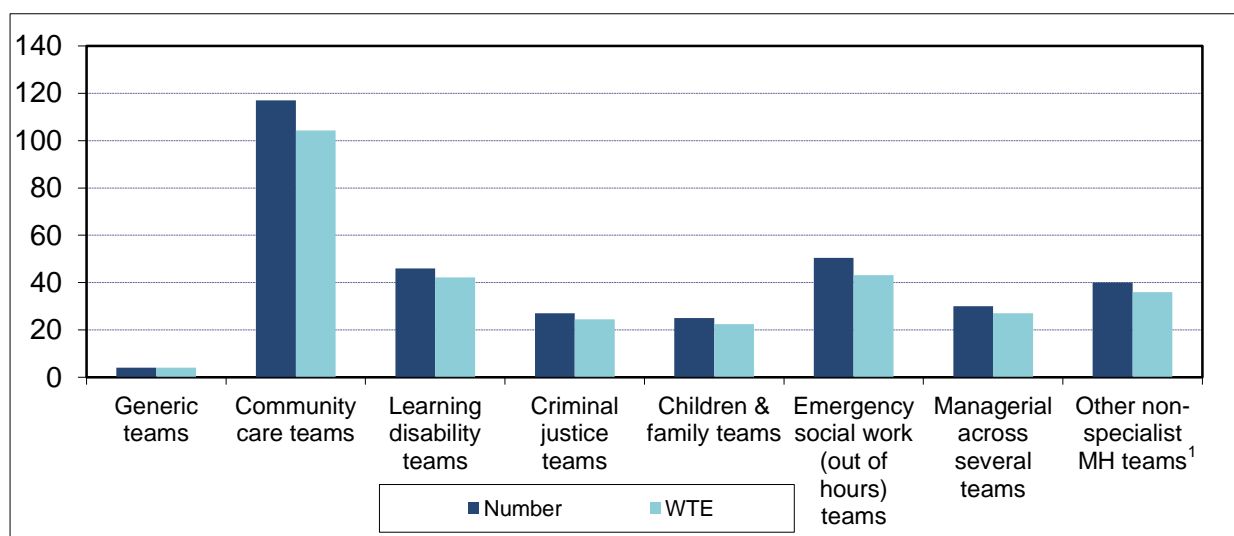
¹ Includes child and adolescent MH teams due to concealment of small numbers.

4.2 MHOs in non-specialist MH teams

Table 14a shows that the number of MHOs working in non-specialist MH teams has increased between March 2012 and December 2012, from 304 to 339.5. Of these 339.5 MHOs the majority (34.5%) work in Community care teams, whilst only 1.2% work in Generic teams.

Table 15a shows the WTE's of the MHOs working in non-specialist MH teams, the percentage splits across the teams are very similar to those in table 14b. The 339.5 MHOs have a WTE of 305.53, giving an average of 0.90 WTE per MHO, compared to 0.94 in March 2012. Figure 7 shows the December 2012 data from tables 14a and 15a.

Figure 7: MHOs by non-specialist MH teams, December 2012



¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers

Table 14a: Number of MHOs by non-specialist MH teams, 2008 to 2012

	Number of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
Generic teams	28	10	8	20	12	4
Community care teams	87	101	98	86	100.5	117
Learning disability teams	28	30	43.5	39	42.5	46
Criminal justice teams	37	35	29.5	29	28	27
Children & family teams	25	23	27	29	22	25
Emergency social work (out of hours) teams	66	61	68.5	64	48	50.5
Managerial across several teams	19	17	25	34	20	30
Other non-specialist MH teams ^{1,2}	32	39	45.5	44	31	40
Total	322	316	345	345	304	339.5

¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers.

² In 2010, a number of MHOs split working between teams.

Table 14b: Percentage of MHOs by non-specialist MH teams, 2008 to 2012

	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
Generic teams	8.7%	3.2%	2.3%	5.8%	3.9%	1.2%
Community care teams	27.0%	32.0%	28.4%	24.9%	33.1%	34.5%
Learning disability teams	8.7%	9.5%	12.6%	11.3%	14.0%	13.5%
Criminal justice teams	11.5%	11.1%	8.6%	8.4%	9.2%	8.0%
Children & family teams	7.8%	7.3%	7.8%	8.4%	7.2%	7.4%
Emergency social work (out of hours) teams	20.5%	19.3%	19.9%	18.6%	15.8%	14.9%
Managerial across several teams	5.9%	5.4%	7.2%	9.9%	6.6%	8.8%
Other non-specialist MH teams ^{1,2}	9.9%	12.3%	13.2%	12.8%	10.2%	11.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers.

² In 2010, a number of MHOs split working between teams.

Table 15a: WTE of MHOs by non-specialist MH teams, 2008 to 2012

	WTE of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
Generic teams	27.25	10	7.5	20	12	4
Community care teams	80.13	94.53	93.1	82.1	93.95	105.3
Learning disability teams	26.08	28.38	41.08	37.2	41.1	42.2
Criminal justice teams	34.1	32.9	28.95	26.75	27.5	24.46
Children & family teams	24.5	22.1	26.5	29	21.2	22.46
Emergency social work (out of hours) teams	58.54	53.72	60.47	61.25	40.45	43.09
Managerial across several teams	17.5	17	25	33	19	27.0
Other non-specialist MH teams ¹	29.1	38	26.34	41.7	30.1	37.02
Total	297.2	296.63	308.94	331	285.3	305.53

¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers.

Table 15b: Percentage of WTE of MHOs by non-specialist MH teams, 2008 to 2012

	Percentage of yearly totals					
	2008	2009	2010	2011	Mar '12	Dec '12
Generic teams	9.2%	3.4%	2.4%	6.0%	4.2%	1.3%
Community care teams	27.0%	31.9%	30.1%	24.8%	32.9%	34.5%
Learning disability teams	8.8%	9.6%	13.3%	11.2%	14.4%	13.8%
Criminal justice teams	11.5%	11.1%	9.4%	8.1%	9.6%	8.0%
Children & family teams	8.2%	7.5%	8.6%	8.8%	7.4%	7.4%
Emergency social work (out of hours) teams	19.7%	18.1%	19.6%	18.5%	14.2%	14.1%
Managerial across several teams	5.9%	5.7%	8.1%	10.0%	6.7%	8.8%
Other non-specialist MH teams ¹	9.8%	12.8%	8.5%	12.6%	10.6%	12.1%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers.

A very rough estimate of the average number of hours MHOs working in non-specialist teams spend on MHO work per week is shown in Table 16. In December 2012 this figure was 7.08 hours, this figure compares to 5.64 hours in March 2012 and 6.57 hours in March 2011. These figures have only been collected since 2008 and not all Local Authorities are able to provide data on this. Eleven Local Authorities were not able to provide this information in December 2012.

Table 16: Average hours per week spent on MHO work by MHOs on non-specialist MH teams, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Generic teams	8.65	7.88	20.13	5.00	5.00	2.83
Community care teams	7.32	6.53	10.05	9.10	14.97	13.37
Learning disability teams	14.15	12.22	11.68	7.50	13.40	12.27
Criminal justice teams	5.89	5.83	8.62	8.00	4.92	4.12
Children & family teams	4.16	5.58	7.98	4.57	4.00	4.08
Emergency social work (out of hours) teams	3.66	5.29	6.47	3.57	3.98	4.10
Managerial across several teams	3.93	2.94	6.00	4.87	5.33	4.00
Other non-specialist MH teams ¹	4.41	6.11	4.79	4.68	5.60	4.79
Total	5.98	7.42	8.26	6.57	5.64	7.08

These are based on figures from 24 Local Authorities in 2008, 28 in 2009, 23 in 2010 and 2011, 21 in March 2012 and 24 in December 2012.

¹ Includes Intake teams and Physical & sensory disability teams due to concealment of small numbers.

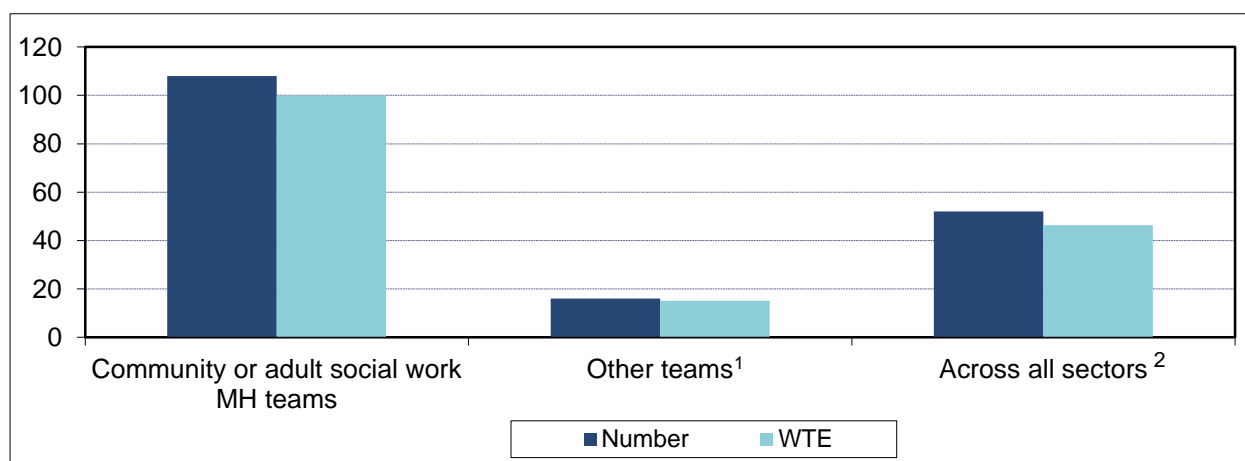
4.3 Exclusive MHO positions

An exclusive MHO position refers to MHOs whose contract specifies that they are appointed to mainly carry out statutory Mental Health Officer work. The MHOs counted in this section are also included in sections 4.1 & 4.2.

The number of MHO exclusive positions has increased from 167 in March 2012 to 176 in December 2012. This figure has fluctuated since first recorded in 2006, and shown no clear trend. This latest number of exclusive MHOs is the highest that has been recorded in this publication, however between March 2012 and December 2012 the WTE has slightly decreased. Tables 17a and 17b show that the majority of exclusive MHO posts are within the Community or Adult Social Work MH teams, this has been the case since 2005 when this data was first recorded. Tables 18a and 18b show the WTE's of exclusive MHOs, the percentage splits across the teams are very similar to those in Table 17b.

Figure 8 shows the December 2012 data from tables 17a and 18a.

Figure 8: Exclusive MHO positions by MH teams, December 2012



¹ Includes staff from Learning disability teams, old age psychiatry / dementia teams and forensic teams due to concealment of small numbers

² For definition of “Across all sectors” please see Appendix 3.

Table 17a: Number of exclusive MHOs positions by MH teams, 2008 to 2012

	Number of MHOs					
	2008	2009	2010	2011	Mar '12	Dec '12
Community or adult social work MH teams	64	82	102	75	98	108
Other teams ¹	21	12	25	30	22	16
Across all sectors ²	45	45	28	26	47	52
Total	130	139	155	131	167	176

¹ Includes staff from Learning disability teams , old age psychiatry / dementia teams and forensic teams due to concealment of small numbers.

² For definition of “Across all sectors” please see Appendix 3.

Table 17b: Percentage of exclusive MHOs positions by MH teams, 2008 to 2012

	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
Community or adult social work MH Teams	49.2%	59.0%	65.8%	57.3%	58.7%	61.4%
Other teams ¹	16.2%	8.6%	16.1%	22.9%	13.2%	9.1%
Across all sectors ²	34.6%	32.4%	18.1%	19.8%	28.1%	29.5%
Total	100%	100%	100%	100%	100%	100%

¹ Includes staff from Learning disability teams, old age psychiatry / dementia teams and forensic teams due to concealment of small numbers.

² For definition of “Across all sectors” please see Appendix 3.

Table 18a: WTE of exclusive MHOs positions by MH teams, 2008 to 2012

	WTE of MHOs					
	2008 ²	2009	2010	2011	Mar '12	Dec '12
MHOs in CMHT's or adult social work MH teams	37.7	79.6	97	72.95	94.14	99.87
MHOs in other teams ¹	16.88	11.58	21.98	29.5	20.5	15.1
MHOs across all sectors ³	40.98	43.4	27	24.9	41.66	46.39
Total	95.56	134.58	145.98	127.35	156.3	154.26

¹ Includes staff from Learning disability teams, old age psychiatry / dementia teams and forensic teams due to concealment of small numbers.

² WTE figures for 2008 incomplete due to three Local Authorities being unable to provide WTE for exclusive staff.

³ For definition of "Across all sectors" please see Appendix 3.

Table 18b: Percentage of WTE of exclusive MHOs positions by MH teams, 2008 to 2012

	Percentage of yearly total					
	2008 ²	2009	2010	2011	Mar '12	Dec '12
MHOs in CMHT's or adult social work MH teams	39.5%	59.1%	66.4%	57.3%	60.2%	64.7%
MHOs in other teams ¹	17.7%	8.6%	15.1%	23.2%	13.1%	9.8%
MHOs across all sectors ³	42.9%	32.2%	18.5%	19.6%	26.7%	30.1%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

¹ Includes staff from Learning disability teams a, old age psychiatry / dementia teams and forensic teams due to concealment of small numbers.

² WTE figures for 2008 incomplete due to three Local Authorities being unable to provide WTE for exclusive staff.

³ For definition of "Across all sectors" please see Appendix 3.

5 Work carried out by MHOs

This section of the report looks at the work specifically carried out by an MHO.

5.1 Rota duty

Figure 9 and Table 19 show that the number of MHOs on daytime rota duty increased slightly between March 2012 (490) and December 2012 (494). This figure is similar to that reported in 2009 and 2010, but is a decrease of 6.6% from 2011.

The number of MHOs on out-of-hours rota duty increased year on year between 2008 and 2011. However in March 2012 it decreased to 123 and in December 2012 it decreased further to 106. In December 2012, 94 daytime MHOs worked on the out-of-hours rota, a decrease from March 2012 but still 46.9% higher than 2008.

Falkirk, Stirling and Clackmannanshire share an out of hours service. North, South and East Ayrshire run one joint Ayrshire-wide out of hours service.

Figure 9: Number of MHOs on rota duties, 2008 to 2012

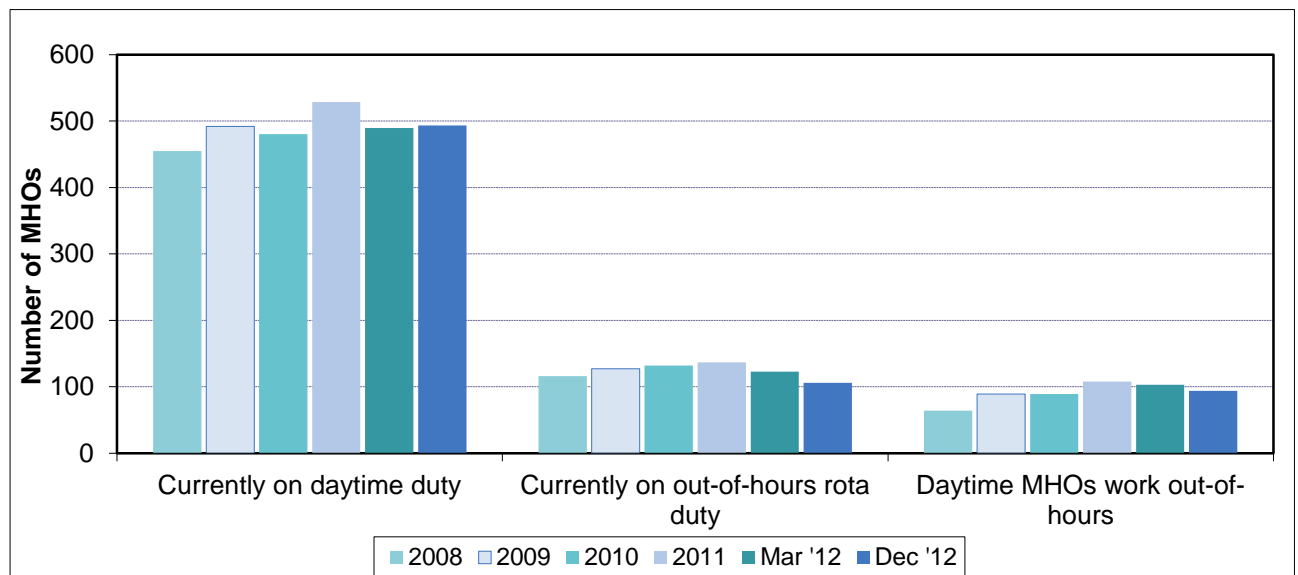


Table 19: Number of MHOs on rota duties, 2008 to 2012

	2008	2009	2010	2011	Mar '12	Dec '12
Currently on daytime duty	455	492	481	529	490	494
Currently on out-of-hours rota duty	116	127	132	137	123	106
Daytime MHOs work out-of-hours	64	89	89	108	103	94

5.2 Mentally disordered offender (MDO) work carried out by MHOs

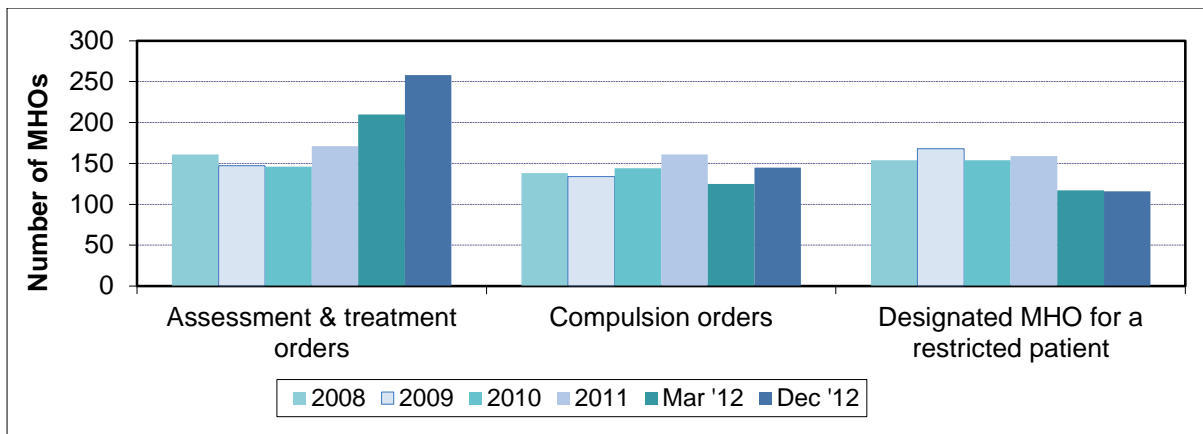
This section of the report examines the specific types of work carried out by MHOs relating to mentally disordered offenders. This question has been in the survey since 2007 and it asks about three specific types of MDO work:

- Assessment and treatment orders
- Compulsion orders
- Designated MHO for a restricted patient

It is possible that an MHO will not be involved in any MDO work or that they may work on more than one type during the year, this will depend on the size of the Local Authority and the number of offenders in a year.

The number of MHOs carrying out assessment & treatment orders is shown in Figure 10 and Table 20, and has increased from 210 in March 2012 to 258 in December 2012. This number has been increasing year-on-year since 2010. In December 2012 there were 145 MHOs working on compulsion orders, this is an increase of 16% from March 2012. Between March 2011 and December 2012 the number of MHOs who were the designated officer for a restricted patient has decreased by 27%, from 159 to 116.

Figure 10: Number of MHOs carrying out MDO work by work type, 2008 to 2012



Note - In 2008 not every Local Authority was able to provide a response by specific work types.

Table 20: Number of MHOs undertaking MDO work by work type, 2008 to 2012

Work area's carried out by MHO's	Number of MHO's carrying out work					
	2008 ¹	2009	2010	2011	Mar '12	Dec '12
Assessment & treatment orders	161	147	146	171	210	258
Compulsion orders	138	134	144	161	125	145
Designated MHO for a restricted patient	154	168	154	159	117	116

¹ In 2008 not every Local Authority was able to provide a response by specific work types.

The figures in Table 21 show that the majority of MDO cases are carried out by MHOs on specialist MH teams, although this percentage has decreased from 81.8% in 2008 to 66.2% in December 2012.

Table 21a: Number of MHOs carrying out MDO work by MH team, 2008 to 2012

	MHO Numbers					
	2008	2009	2010	2011	Mar '12	Dec '12
Specialist teams	229	173	176	204	180	133
Non-specialist teams	51	39	65	57	82	68
Total	280	212	241	261	262	201

Table 21b: Percentage of MHOs carrying out MDO work by MH team, 2008 to 2012

	Percentage of yearly total					
	2008	2009	2010	2011	Mar '12	Dec '12
Specialist teams	81.8%	81.6%	73.0%	78.2%	68.7%	66.2%
Non-specialist teams	18.2%	18.4%	27.0%	21.8%	31.3%	33.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

6 Background information on the collection of data

6.1 Data sources

(i) Mental Health Officers' (MHO) survey

The survey data used in this report has been collected annually since 2005 from Local Authorities. The survey has been developed each year with new questions added when a need for further information has been identified. The survey collects information about the number of qualified MHOs who are practising within Scotland. For information the latest survey form is available from:

http://www.sssc.uk.com/cat_view/67-social-services-workforce/69-statistics-and-reports

(ii) National Records for Scotland (NRS) population estimates

The NRS mid-year population estimates are used to calculate the rate of MHOs per 1,000 of the Scottish population in section 3.2, and the MHO WTE rate per 1,000 population in Appendix 1 to the report.

The NRS is the devolved Government department in Scotland responsible for the registration of births, marriages, civil partnerships, deaths, divorces and adoptions in Scotland. The population estimates are produced using the demographic cohort component method. The estimates are based on the 2011 census. Full details are available from:

<http://www.gro-scotland.gov.uk/statistics/theme/population/estimates/mid-year/index.html>

6.2 Understanding the statistics in this report

Data presented in this report is either a snapshot of the workforce taken on 31 March (2008 – 2012), or from a snapshot of the workforce taken on 3 December (2012). The NRS mid-year population estimates are based on a year from 1 April to 31 March.

All staffing grades have been included as long as they are a practising MHO. These grades include basic grade staff, senior practitioner posts and team leaders or managers.

Whole Time Equivalent (WTE), is the number of whole-time staff, those working a full standard working week and the total number of hours worked by part-time staff, divided by the number of hours considered to be a standard whole-time working week. It should be noted that a standard working week can range between 35 and 39 hours per week. This can have the effect of WTE figures

being slightly higher in Local Authorities who have a shorter whole-time standard working week.

An exclusive MHO position refers to MHOs whose contract specifies that they are appointed to primarily undertake statutory Mental Health Officer work.

A trainee MHO is defined as a social worker training as an MHO on 3 December.

An MHO's age, gender and ethnicity can only be provided with their consent. This means that figures may not sum to the total number of MHOs due to missing information.

Some column totals in the tables in this document may not exactly equal the sum of their component parts due to the effects of rounding. The percentages shown in the tables have been rounded to one decimal place, this means that they will not always total to 100%.

The change in staffing numbers recorded between 1 April 2011 and 31 March 2012 in Dumfries and Galloway is due in part to a group of eight staff, who provide supervision, no longer being recorded as active practitioners. This group consists of 3 senior social workers and 5 managers of MHO practitioners.

On 1 April 2012, following the integration of Health and Social Care in Highland, 11 qualified MHOs transferred to NHS employment from Highland Council and therefore can no longer practice as MHOs. This accounts for 19.6% of leavers between 4 December 2011 and 3 December 2012. An additional 14 members of staff who were already working for the local authority now have a more defined mental health role and are included in the return.

6.3 Changes to previously published figures

In the March 2012 MHO report a total of 90 MHOs were reported as leaving the workforce in Table 9. This figure has since been revised to 91, with the number of MHOs leaving for "other" reasons increasing from 17 to 18.

6.4 Respondent burden

The UK Statistics Authority requires producers of National Statistics reports to calculate the costs to the organisations of gathering and providing the information that is necessary to produce the report. To calculate the cost of respondent burden to this survey, each Local Authority was asked to provide an estimate of the time taken in hours to extract the requested information and complete the survey form. Thirty one Local Authorities were able to provide this figure and the median time taken was 3 hours. The hourly rate of a typical respondent was taken from the Annual Survey of Hours and Earnings 2011 provisional results, as £11.13.

Using these figures and the below calculation, the total cost of responding to this survey was calculated as £1035.

$$\text{Cost of Responding (£)} = \frac{\text{(number of responses)}}{\text{X}} \times \text{any additional costs experienced by data provider} + \text{median time it takes to respond in hours} \times \text{hourly rate of typical respondent}$$

6.5 Previous publications

The 2007/08 survey results were published in issue 19 of the Mental Health Officers in Scotland newsletter, which can be found at:

<http://www.strath.ac.uk/humanities/socialwork/communitycareworks/publication/s/mentalhealthofficernewsletter/>

The reports from 2008/09 to 2011/12 can be found at:

2008/09 – <http://www.scotland.gov.uk/Publications/2009/12/15081827/0>

2009/10 – <http://www.scotland.gov.uk/Publications/2010/08/30114721/0>

2010/11 – <http://www.scotland.gov.uk/Publications/2011/06/27145626/0>

2011/12 – <http://www.scotland.gov.uk/Publications/2012/06/3674>

6.6 Future MHO reports

Please note that this is the first MHO publication to be produced by the SSSC. In previous years this report was collated and published by the Scottish Government and assessed by the UKSA as a National Statistics publication.

The SSSC has followed the same methodology as that used by Scottish Government; however, these statistics have not been formally assessed for compliance with the Code of Practice for Official Statistics since their transfer from Scottish Government. The UKSA is planning to assess the statistics for compliance with the Code of Practice later in the year.

<http://www.statisticsauthority.gov.uk/>

6.7 Further information

The report is available at:

http://www.sssc.uk.com/cat_view/67-social-services-workforce/69-statistics-and-reports

Information provided by Local Authorities in Scotland is shown in the appendix to this Report.

Details and analysis of the data presented in this report are available on request from:

Email: gail.wilson@sssc.uk.com

Tel: 01382 34 6444

You can also write to us at:

Gail Wilson
Workforce Intelligence Team
Scottish Social Services Council
Compass House
11 Riverside Drive
Dundee
DD1 4NY

If you would like to be consulted about new or existing statistical collections or receive notification of forthcoming statistical publications, please register your interest on the Scottish Government Scotstat website at:

www.scotland.gov.uk/Topics/Statistics/scotstat

For more information about the Scottish Social Services Council please go to our website at: www.sssc.uk.com

For more information about the social services workforce and further statistical publications, please visit the SSSC Statistics and reports section at:

http://www.sssc.uk.com/cat_view/67-social-services-workforce/69-statistics-and-reports

This report was published on 29 May 2013.

7 Appendices

7.1 Appendix 1 - Mental Health Officer numbers, whole time equivalents (WTEs) and rates per 1,000 of population by Local Authority, 2008 to December 2012.

Local Authority	Number of MHO's						WTE of MHO's						MHO WTE Rate per 1,000 Population					
	2008	2009	2010	2011	Mar-12	Dec-12	2008	2009	2010	2011	Mar-12	Dec-12	2008	2009	2010	2011	Mar-12	Dec-12
Aberdeen City	28	27	29	30	29	32	26.5	25.8	27.8	28.6	26.6	30.9	12.7%	12.3%	13.0%	13.2%	12.1%	14.0%
Aberdeenshire	31	30	29	31	36	29	30.1	29.1	26.4	29.7	32.5	28.3	12.6%	12.1%	10.9%	12.1%	13.1%	11.4%
Angus	15	15	17	13	12	15	5.7	13.6	15.8	12.2	10.7	14.7	5.1%	12.3%	14.3%	11.0%	9.6%	13.2%
Argyll & Bute	12	13	14	14	13	11	9.1	13.0	13.5	13.5	12.5	11.0	10.0%	14.4%	14.9%	15.1%	14.0%	12.3%
Clackmannanshire	7	6	6	4	5	5	5.5	5.0	5.0	4.0	5.0	5.0	11.1%	9.9%	9.9%	7.9%	9.8%	9.8%
Dumfries and Galloway	20	26	28	31	21	23	20.2	25.6	27.2	30.6	16.6	15.2	13.6%	17.2%	18.3%	20.6%	11.2%	10.3%
Dundee City	27	28	24	21	21	22	25.7	27.8	22.1	17.9	17.7	18.3	18.1%	19.5%	15.5%	12.4%	12.2%	12.6%
East Ayrshire	19	18	23	23	18	21	19.1	18.0	23.0	21.5	17.0	20.9	16.0%	15.0%	19.2%	17.9%	14.1%	17.4%
East Dunbartonshire	9	7	7	5	7	8	7.2	6.2	6.2	5.0	7.0	8.0	6.9%	5.9%	5.9%	4.8%	6.7%	7.7%
East Lothian	7	7	5	9	11	10	5.8	6.0	4.3	8.0	10.0	4.7	6.1%	6.2%	4.5%	8.2%	10.2%	4.8%
East Renfrewshire	9	8	8	9	7	11	8.3	7.5	7.0	8.5	7.0	10.5	9.3%	8.4%	7.8%	9.5%	7.8%	11.7%
Edinburgh City of	56	64	62	58	57	53	49.5	56.8	53.8	54.0	51.0	46.4	10.6%	12.0%	11.4%	11.1%	10.3%	9.4%
Eilean Siar	5	5	6	5	4	4	5.0	5.0	6.0	5.0	4.0	4.0	19.0%	19.1%	22.9%	19.1%	15.3%	15.3%
Falkirk	17	13	11	12	10	12	16.2	13.0	11.0	12.0	6.0	10.2	10.7%	8.6%	7.3%	7.8%	3.9%	6.6%
Fife	47	44	48	47	46	44	45.5	42.0	47.0	45.5	45.5	42.5	12.6%	11.6%	13.0%	12.5%	12.4%	11.6%
Glasgow City	88	100	113	120	115	113	86.6	97.0	93.8	114.3	109.8	109.7	14.9%	16.6%	16.1%	19.3%	18.3%	18.3%
Highland	41	43	39	36	29	28	37.8	39.4	38.3	35.0	26.8	25.2	17.4%	18.0%	17.5%	15.8%	12.1%	11.3%
Inverclyde	13	12	16	16	15	15	12.6	11.8	15.8	15.4	13.8	14.3	15.5%	14.6%	19.6%	19.2%	17.4%	18.0%
Midlothian	10	7	7	7	6	7	8.0	6.8	6.4	6.0	5.0	5.0	10.0%	8.4%	7.9%	7.4%	6.1%	6.1%
Moray	10	9	13	13	13	13	9.4	9.0	11.3	11.3	8.5	11.2	10.8%	10.3%	12.9%	12.9%	9.7%	12.8%
North Ayrshire	22	21	23	23	21	21	22.3	20.6	22.2	22.2	20.2	20.6	16.4%	15.2%	16.3%	16.4%	14.9%	15.2%
North Lanarkshire	37	40	45	43	39	42	36.0	39.0	45.0	43.0	38.2	41.2	11.1%	12.0%	13.8%	13.2%	11.7%	12.6%
Orkney islands	4	5	5	6	6	6	4.0	5.0	5.0	6.0	6.0	5.0	20.1%	25.1%	25.1%	29.8%	29.8%	24.8%
Perth & Kinross	13	15	16	18	15	16	12.3	14.6	15.6	14.4	14.1	16.0	8.7%	10.1%	10.8%	9.7%	9.4%	10.7%
Renfrewshire	17	13	16	16	17	19	16.1	12.5	15.8	15.4	12.8	13.6	9.5%	7.4%	9.3%	9.0%	7.5%	8.0%
Scottish Borders	20	16	16	15	17	15	18.8	14.3	16.0	15.0	17.0	14.0	16.9%	12.7%	14.2%	13.3%	15.0%	12.4%
Shetland islands	5	6	7	6	7	7	4.3	5.0	6.0	5.5	6.3	6.3	19.6%	22.7%	27.3%	24.6%	27.8%	27.8%
South Ayrshire	19	17	17	17	17	20	18.2	16.2	16.2	16.2	17.0	20.0	16.3%	14.5%	14.5%	14.5%	15.2%	17.9%
South Lanarkshire	27	23	28	31	31	29	23.9	20.0	24.3	29.4	29.9	27.7	7.7%	6.4%	7.8%	9.4%	9.6%	8.8%
Stirling	7	9	12	15	13	13	5.7	5.9	10.0	12.0	12.1	12.1	6.5%	6.7%	11.3%	13.4%	13.4%	13.4%
West Dunbartonshire	10	13	11	10	8	11	6.8	11.0	8.3	8.5	7.0	9.5	7.5%	12.1%	9.1%	9.4%	7.7%	10.5%
West Lothian	24	22	25	24	22	23	20.0	20.5	21.8	22.3	22.0	21.4	11.9%	12.1%	12.9%	13.0%	12.7%	12.4%
Scotland	674	682	726	728	688	698	622.2	643.0	667.8	687.8	635.4	643.2	12.1%	12.4%	12.9%	13.2%	12.1%	12.1%

Source: National Records of Scotland mid-year population estimates 2007 to 2011

7.2 Appendix 2 - Mental Health Officer numbers as a proportion of all practising social workers, December 2012.

Local Authority	Total number MHOs	Total number social workers ¹	Percentage of social workers that are MHOs
Aberdeen City	32	277	11.6%
Aberdeenshire	29	242	12.0%
Angus	15	81	18.5%
Argyll & Bute	11	67	16.4%
Clackmannanshire	5	49	10.2%
Dumfries and Galloway	23	165	13.9%
Dundee City	22	194	11.3%
East Ayrshire	21	149	14.1%
East Dunbartonshire	8	84	9.5%
East Lothian	10	95	10.5%
East Renfrewshire	11	91	12.1%
Edinburgh City of	53	634	8.4%
Eilean Siar	4	21	19.0%
Falkirk	12	152	7.9%
Fife	44	284	15.5%
Glasgow City	113	839	13.5%
Highland	28	236	11.9%
Inverclyde	15	117	12.8%
Midlothian	7	88	8.0%
Moray	13	124	10.5%
North Ayrshire	21	165	12.7%
North Lanarkshire	42	314	13.4%
Orkney islands	6	24	25.0%
Perth & Kinross	16	142	11.3%
Renfrewshire	19	159	11.9%
Scottish Borders	15	146	10.3%
Shetland islands	7	28	25.0%
South Ayrshire	20	108	18.5%
South Lanarkshire	29	301	9.6%
Stirling	13	80	16.3%
West Dunbartonshire	11	112	9.8%
West Lothian	23	149	15.4%
Scotland	698	5717	12.2%

¹ Data from 2011 annual census of local authority social work services

7.3 Appendix 3 - Glossary

Term	Meaning
Concealment of small numbers	When a figure is too small to be seen in a graph/chart, it is added to the "Other" category. When this occurs in the report it is made clear in a footnote.
Exclusive MHOs	"Exclusive" MHOs are those whose contract specifies that they are appointed to primarily undertake statutory Mental Health Officer work.
Unavailable MHOs	An MHO is classed as unavailable when they are either on maternity leave, a career break, on long term sick leave or compassionate leave, for a period of three months or more.
Across all sectors	Involved in all aspects of MHO work and work across all client groups