



Drug and Alcohol Treatment and Recovery Services National Workforce Census

December 2023

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We would also like to thank our stakeholder group, including representatives from NHS England for their support and guidance in the design and delivery of this workforce project.

Additionally, we are grateful to the Office for Health Improvement and Disparities (OHID) representatives who also formed an integral part of the oversight group, providing guidance and feedback. We are also grateful for their help and support in identifying participants and facilitating our wide-reaching engagement with participants via their regional offices and drug and alcohol provider and commissioning networks. We would also like to thank the National Workforce Skills Development Unit for their feedback.

Authors:

Kallie Phillips

Project Manager, Mental Health, Learning Disabilities and Autism, NHS Benchmarking Network.

Beverley Sheard

Head of Workforce Programme, Mental Health, Learning Disabilities and Autism, NHS Benchmarking Network.

Charlotte Kimpton

Graduate Project Coordinator, Mental Health, Learning Disabilities and Autism, NHS Benchmarking Network.

Kirsten Windfuhr

Associate Director, Mental Health, Learning Disabilities and Autism, NHS Benchmarking Network.

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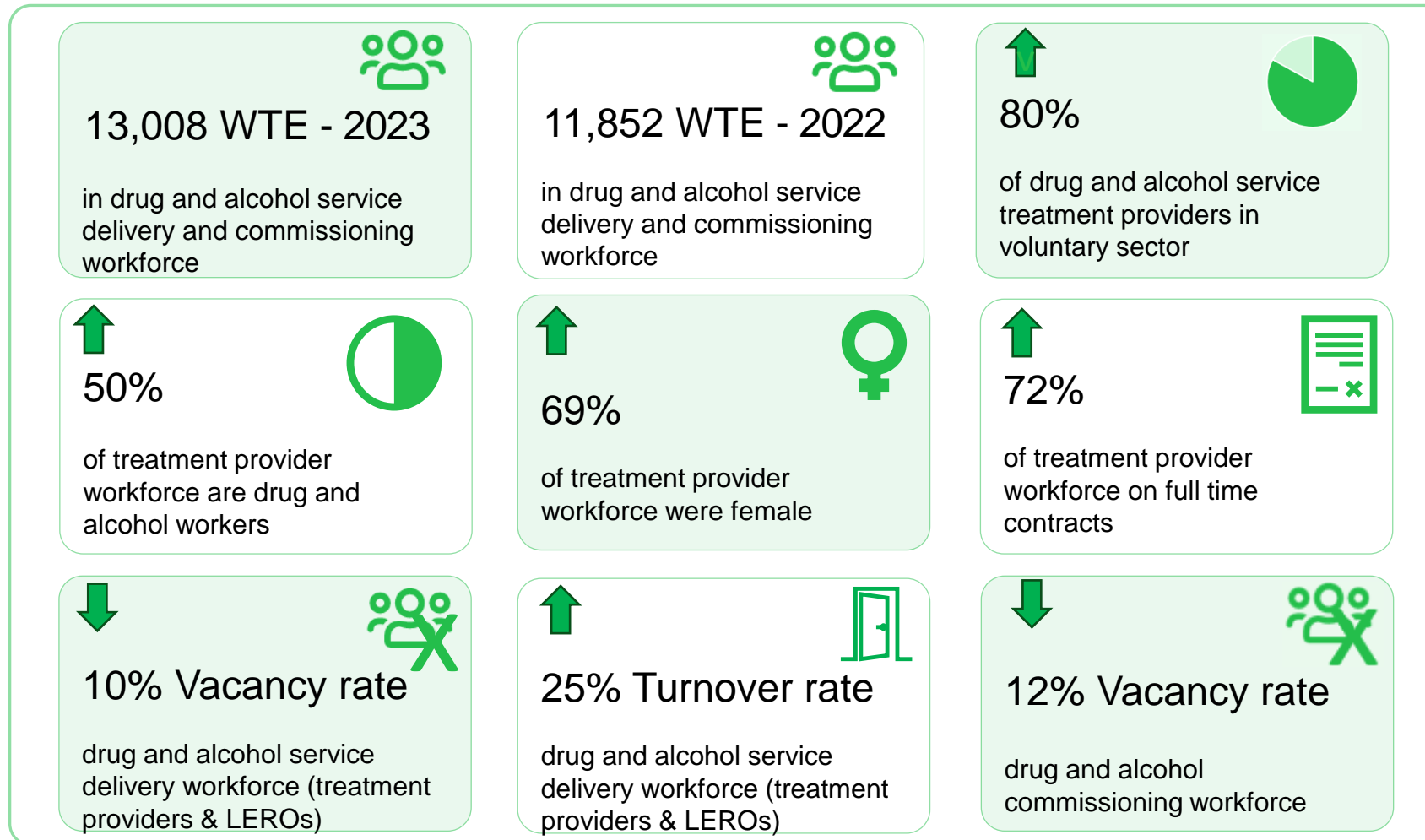


Benchmarking Network



Drug and alcohol workforce summary 2023

The following infographic shows the national position for key metrics included within this report.



Executive Summary (1)

Background and aims

In response to Dame Carol Black's [Independent Review of Drugs](#), the government published a new 10-year drug strategy [From Harm to Hope: A 10-year drugs plan to cut crime and save lives](#) in December 2021. This strategy sets out a commitment to a range of actions to support workforce transformation. Workforce transformation is a key enabler to deliver the strategic ambitions including the delivery of a world-class treatment and recovery system.

NHS England, together with the Office for Health Improvement and Disparities (OHID) have developed a 10-year workforce strategic plan, (2024-2034) which outlines the vision for the drug and alcohol treatment and recovery workforce. To support the continued development of workforce and training plans, the NHS Benchmarking Network were commissioned to develop and undertake a workforce census.

This is the second year of the census and provides an update as at the 30th June 2023 compared to the baseline position established as at 30th June 2022. The census provides comprehensive workforce data across treatment providers, local authority (LA) commissioners and lived experience recovery organisations (LEROs).*

For the purposes of this report, the 'drug and alcohol workforce' refers to LA-commissioned treatment and recovery services, LEROs and LA commissioning teams. The data is summarised primarily by job role group; more detailed information for individual roles is provided in Appendix 1.

This census presents the most comprehensive workforce data available to support the development of the drug and alcohol service delivery and commissioning workforce and provides the evidence to support the continued development of the strategy and future workforce training needs.

The project aims to:

- Provide a comprehensive summary and reference point of the drug and alcohol service delivery and commissioning workforce in 2023.
- Provide a series of outputs to support work nationally, regionally and locally to retain, diversify and grow the workforce.

Scope

The following were within scope of the census:

- LA drug and alcohol commissioning teams
- LA-commissioned adult and young people's treatment providers in the NHS, local authority (services delivered directly by the LA), voluntary and independent sectors, including community drug and alcohol treatment and recovery; residential rehabilitation; and inpatient detoxification service providers.
- Lived experience recovery organisations (LEROs).

Process

Following its first iteration in 2022 the census design and outputs were reviewed in collaboration with NHS England, OHID and representatives from provider organisations, L A commissioners and regional teams. The data collected remained largely consistent with the previous year, however, the census collection templates were split into treatment provider, commissioning and LEROs to simplify the templates received by each organisation.

Participation

There were 515 data submissions of which 380 were from treatment providers, 30 from LEROs and 128 from commissioners. Participation rates by sector were 72% for treatment providers, 85% for LAs and 53% for LEROs. Voluntary sector organisations accounted for 70% of treatment provider submissions, the NHS 13%, independent providers 6% and LA delivered treatment 11%.

*A lived experience recovery organisation (LERO) is an organisation led by people with lived experience of recovery. LEROs deliver a range of harm reduction interventions, peer support, recovery support and help people to access and engage in treatment and other support services.



Executive Summary (2)

Limitations

Whilst we now have data for consecutive years, it is not possible to make direct comparisons of the changes in whole time equivalent (WTE) between the two years due to the variation in participation of the number, scope and size of the organisations in each area that have returned data in each of the two years. Therefore, because of the limitations of not being able to make direct comparisons, this data should not be used to infer that the workforce size overall or by types / professions has increased or decreased by any given amount. The difference in the WTE of LEROs between 2022 and 2023 can mostly be accounted for by the fact that more LEROs participated in 2023 compared to the previous year.

Key findings

The table below shows that overall workforce WTE numbers were 11,852 in 2022 and 13,008 in 2023, 10% higher in 2023 when compared to the previous year.

Summary of workforce WTE	2022	2023	Change	%
Treatment providers	11270	12073	803	7%
LEROs	184	469	285	155%
Commissioning staff	398	466	68	17%
Total	11852	13008	1156	10%

Summary of treatment provider WTE by sector	2022	2023	Change	%
Voluntary	8768	9667	899	10%
NHS	1786	1688	-98	-5%
Independent / Private	299	373	74	25%
LA delivered treatment	417	345	-72	-17%
Total	11270	12073	803	7%

The profile of the workforce by job role shows half of the treatment provider workforce was made up of drug and alcohol workers (50%), followed by service management and administration (24%), peer support and service user development staff (8%), and nurses (9%). This was in line with the profile reported in 2022.

The vacancy rate for combined treatment providers and LERO staff was 10%, in line with 2022 whereas the turnover rate was 19% in 2022 and 25% in 2023. For commissioning staff, the rates were 12% and 22% for vacancy and turnover respectively. Sickness rates were generally low as in 2022.

For drug and alcohol workers, the largest staff group, vacancy rates were 11% (15% 2022) and turnover 29% (14% 2022). Please refer to the specific report sections for caveats associated with these metrics.

Focus on treatment providers

The treatment provider data presented includes data from the voluntary sector, the NHS, the independent/private sector and also activity relating to treatment provision delivered by local authorities (LA-delivered treatment).

- 80% of treatment providers were within the voluntary sector and reported 9,667 WTE (78%, 8768 WTE 2022). The NHS (14%) was the second largest sector.
- An overall vacancy rate of 10% was reported ranging from 1% (LA delivered treatment) to 21% (NHS & independent/private sector) for all staff. For the largest staff group, drug and alcohol workers, vacancy rates ranged from 3% (LA delivered treatment) to 29% (independent/private sector).
- The rate of sickness for all staff ranged from 1.8% in the independent/private sector to 5.3% in the NHS.
- For drug and alcohol workers (the largest staff group) the turnover rates varied from 16% in LA-delivered treatment to 29% in the voluntary sector (1,169 leavers).

Executive Summary (3)

- As in 2022, there was a high number of volunteer/unpaid staff in the sector. Seven percent of the treatment provider workforce were unpaid/volunteers, down from 12% in 2022. There was a higher proportion of staff on bands 1-3 and band 5 and a lower proportion of staff on salary bands 4 compared to 2022. The majority (92%) of the drug and alcohol workers staff group were employed at band 5 or lower, earning less than £33.3k.
- 34% of staff had been in post for less than a year, in line with 2022, 84% were on permanent contracts and 72% worked full time.
- The ethnicity profile of the treatment provider workforce indicated that Asian or Asian British people were underrepresented compared to the English working age population. Eleven percent of the workforce reported a disability compared to 10% in 2022. Five percent (median) of staff identified as being part of the LGBTQ+ community.
- Nurses remained the largest group of non-medical prescribers (NMPs), with the majority of NMPs employed in the voluntary sector (71%) followed by the NHS (24%). The percentage of NMPs actively prescribing in their role had increased from 82% in 2022 to 88% in 2023.

Focus on commissioners

- 128 local authorities reported 466 WTE commissioning staff across ten roles (398 WTEs reported by 129 LAs in 2022). Thirty eight percent of commissioning roles were commissioners and coordinators for adult services. A smaller percentage (11%) of commissioner and coordinator roles were supporting services for young people this year and in 2022.
- As in 2022 the salary reported for each role varied considerably, highlighting a diversity across apparently similar roles. To some extent this will reflect the seniority of staff but may also reflect different banding of staff across authorities.
- 77% (78% 2022) of commissioning staff were full time, 79% (83% 2022) on permanent contracts and 30% (26% 2022) in post for less than a year.
- The commissioning workforce reported a vacancy rate of 12% in 2023,

a decrease from 14% in 2022. This was slightly above the 10% reported for treatment provider staff. Turnover rates had increased from 11% in 2022 to 22% in 2023. Sickness absence remained low and in line with 2022 at 1%.

- The ethnicity profile of the commissioning workforce indicated that Asian and Asian British people were underrepresented compared to the English working age population.

Focus on Lived experience recovery organisations (LEROs)

- Lived experience recovery organisations (LEROs) made 30 (23 2022) submissions from 26 local authority areas. The analysis within this section should be viewed with some caution but provides a broad overview of the workforce in these organisations. Where changes in workforce numbers are seen, it should be considered in conjunction with the increase in participation and higher submission numbers received from LEROs.
- LEROs reported 469 WTE compared to 184 WTE in 2022.
- Unpaid/volunteer staff accounted for 29% of the LERO workforce up from 17% in 2022 and 77% were band 4 (<£26.7k) or below, in line with 2022.
- LEROs reported 47% of staff in post for less than a year an increase compared to 2022 (34%) with 46% (42% 2022) on permanent contracts. Forty nine percent of LERO staff were full time, compared to 57% in 2022.
- LEROs reported a vacancy rate of 23% (47 WTE vacancies), a sickness rate of 2% and a 29% (66 WTE leavers) turnover rate.
- There was an underrepresentation of Asian or Asian British individuals (1%) in the workforce compared to the English working age population (10%).
- Within LEROs 56% of the workforce were female, below the 69% reported for treatment providers but an increase compared to 45% in 2022.

Conclusions

This is the second census of the drug and alcohol treatment and recovery workforce. It provides a comprehensive summary and reference point of the drug and alcohol service delivery and commissioning workforce in June 2023.

Based on 83% participation, similar to last year, the overall workforce reported in the census was 13,008 WTE (11,852 2022). It should be recognised that participants in 2023 were not identical to 2022. The treatment and recovery provider workforce was 12,073 WTE, an additional 803 WTE reported in the 2023 census compared to 2022. Within the voluntary sector the total WTE for 2023 was 9,667 (8,768, 2022).

Further work to extrapolate the census findings will be undertaken by the Office for Health Improvement and Disparities in the spring of 2024 to explore growth further.

There was also higher numbers of LA commissioning and LERO staff reported in the 2023 census compared to 2022. In the case of LEROs this will largely reflect increased participation. However, as with treatment providers, it should be recognised that similarly for both LA commissioning teams and LEROS, participants in 2023 were not identical to 2022.

The profile of the workforce remained largely unchanged. There was some evidence of workforce transformation with the proportion of unpaid/volunteers in treatment providers reducing and an increase in the proportion of non-medical prescribers actively prescribing in their current role.

However, challenges remain, including vacancy and turnover rates. Further, increasing workforce diversity continues to be challenging with Asian or Asian British people underrepresented in the workforce compared to the English working age population. The census also highlights opportunities to inform workforce and training plans to deliver on the ambitions for the 10-year strategic plan for the drug and alcohol workforce and more broadly the 10-year drug plan.

Introduction

Background

In response to Dame Carol Black's *Independent Review of Drugs*, the government published a new 10-year drug strategy *From Harm to Hope: A 10-year drugs plan to cut crime and save lives* in April 2022. It committed to a range of actions to support workforce transformation including:

- work to implement a comprehensive strategy to develop and expand the workforce.
- work to define and improve the training and skills of all sections of the drug treatment workforce, including registered health professionals, drug and alcohol workers and peer supporters.

The Office for Health Improvement and Disparities (OHID) and NHS England are delivering and leading the drug and alcohol treatment and recovery workforce transformation programme in order to deliver the ambitions of the drug strategy. A 10-year strategic plan for the drug and alcohol treatment and recovery workforce has been published. The plan provides direction on how to grow and transform the workforce to support the delivery of the ambitions of the drug strategy.

To support the delivery of the 10-year strategic plan, the NHS Benchmarking Network were commissioned to develop and undertake a census of the drug and alcohol treatment and recovery commissioning and delivery workforce.

This is the second annual census and provides an update as at the 30th June 2023 compared to the baseline position established as of 30th June 2022. The census provides comprehensive workforce data across treatment and recovery providers, local authority (LA) commissioners and lived experience recovery organisations (LEROs)*.

For the purposes of this report, the 'drug and alcohol treatment and recovery workforce' refers to the workforce within LA-commissioned treatment and recovery services, LEROs and LA commissioning teams. The data is summarised primarily by job role group; more detailed information for individual roles is provided in Appendix 1.

This is the most comprehensive workforce data collection for drug and alcohol commissioning and delivery workforce. The data presented in this report will be invaluable in supporting the continued development of the strategy and future workforce training needs.

The project aims were to:

- Provide a comprehensive summary and reference point of the drug and alcohol service workforce in 2023.
- Provide a series of outputs to support work nationally, regionally and locally to retain, diversify and grow the workforce.

*A lived experience recovery organisation (LERO) is an organisation led by people with lived experience of recovery. LEROs deliver a range of harm reduction interventions, peer support, recovery support and help people to access and engage in treatment and other support services.



Methods (1)

Scope

The aim of this work is to provide a detailed profile of the alcohol and drug commissioning and delivery workforce **within the following settings**:

- + Local authority (LA) drug and alcohol commissioning teams
- + LA-commissioned adult and young people's treatment providers in the NHS, local authority (services delivered directly by the LA), voluntary and independent sectors, including:
 - Community drug and alcohol treatment and recovery
 - Residential rehabilitation
 - Inpatient detoxification service providers
 - This includes services funded by LAs through the local drug and alcohol treatment budget including those funded by the public health grant, Supplemental Substance Misuse Treatment and Recovery grant (SSMTR), Rough Sleeping Drug and Alcohol Treatment (RSDATG), Individual Placement and Support (IPS), ADDER/Accelerator and any other drug and alcohol treatment and recovery related direct grant from OHID to LAs.
 - *Note: sub-contracted providers including those not delivering treatment/recovery services, such as harm reduction and family services, were brought into scope of the exercise. Records on those sub-contracted providers are not held so participation rates for those providers cannot be included.*
- + Lived experience recovery organisations (LEROs).

The following settings were **out of scope**:

- NHS-commissioned substance misuse teams in secure settings
- NHS-commissioned alcohol care teams (ACTs)
- Pharmacists in retail community pharmacies and hospital pharmacies (only pharmacists directly employed by treatment services are within scope)
- GPs treating dependence, in people dependent on drugs and alcohol, outside of a shared care arrangement with a specialist drug and alcohol treatment service, or not as part of a primary care-led specialist treatment service.

Treatment provider data was collected at provider level with separate submissions for each local authority in which services were delivered.

Data collection specification

Following its first iteration in 2022 the census design and outputs were reviewed in collaboration with NHS England, OHID and representatives from provider organisations, local authority commissioners and regional teams. The data collected remained largely consistent with the previous year. The changes made following feedback included:

- Providing separate templates for treatment providers, LA commissioning and LEROs to simplify collections
- Additional guidance and definitions
- Simplification on the split of adult and children and young people's (CYP) services
- Additional questions about commissioning arrangements
- Amendment of the psychological professions roles
- Minor changes to the demographic data collected

Methods (2)

Data collection

Time period

The data collection period launched on 10th July 2023 and closed 1st September 2023; extensions were granted where required to ensure maximum participation.

Support

A launch event was held that included a walkthrough of the collection template, explaining completion and outlining changes. Drop-in sessions were held throughout the data collection period to provide further opportunity for participants to raise queries. Project materials including collection templates, videos of template walkthroughs, frequently asked questions and links to drop-in sessions were uploaded to the project web page which can be found [here](#).

Validation

Following data collection, data was reviewed for completeness, consistency and plausibility. Where responses were deemed to be incorrect/unlikely or key fields were missing issues were raised directly with participants.

Analysis and report structure

The report is structured with an initial overview of the workforce across all sectors, highlighting where staff are employed by sector and region. It also includes an overview of workforce numbers by job role group¹. The overview is followed by three sections focussing on treatment providers (NHS, voluntary, independent/private and LA-delivered treatment²), LEROs and commissioners.

Each section summarises workforce by job role group, salary profile, time in post, contract detail as well as metrics for vacancies, sickness and turnover. Workforce

demographics for ethnicity, age, sex and disability are also analysed as well as the percentage of staff considering themselves part of the LGBTQ+ community. A section on specialist roles: non-medical prescribers, social workers and trusted assessors is also included for treatment providers. There is a summary of findings at the end of each section.

Whole time equivalent staff per 1,000 treatment number (episodes) are reported. Treatment episodes are categorised into a treatment 'journey' which is a treatment period of concurrent or consecutive episodes. For this report, the latest journey per individual which occurred (i.e., overlapped) between 1st July 2022 and 30th June 2023 has been selected.

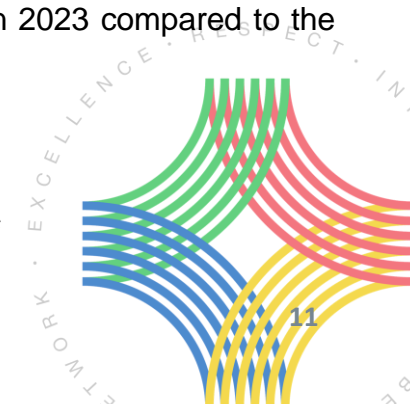
Throughout the report totals are based on actual rather than rounded values and may vary slightly to the sum of the rows.

Limitations

Whilst we now have data for consecutive years, it is not possible to make direct comparisons of the changes in whole time equivalent (WTE) between the two years due to the variation in participation of the number, scope and size of the organisations in each area that have returned data in each of the two years. Therefore, because of the limitations of not being able to make direct comparisons, this data should not be used to infer that the workforce size overall or by types / professions has increased or decreased by any given amount. The difference in the WTE of LEROs between 2022 and 2023 can mostly be accounted for by the fact that more LEROs participated in 2023 compared to the previous year.

¹Job role groups include a summary of individual job roles within a specific professional area, such as, drug and alcohol workers summarising the 12 more specific roles within this group. Details of the individual job roles within each group along with key analysis are included in Appendix 1

²LA-delivered treatment is where commissioners reported services that they directly managed or sub-contracted but did not identify a treatment provider separately



Participation



Participation (1)

Submissions were received from 538 participants. The table below shows the distribution by region and by sector. Local authorities submitted 128 returns for their commissioning staff. Treatment provider returns include local authority delivered treatment (44), NHS (53), Voluntary sector (258) and Independent/Private providers (25). LEROs made 30 submissions this year.

Eighty-three percent of expected treatment provider services submitted data, 85% for local authority commissioners and 53% for LEROs.

Participation by local authority is based on upper tier local authority level submissions for the LA commissioning workforce. Treatment provider participation is based on submissions from LA commissioned NDTMS treatment providers, subcontractors and LA delivered treatment compared to known submissions at service level from these cohorts. Some treatment providers submitted a single return encompassing multiple services and where this was the case all expected services covered have been counted as

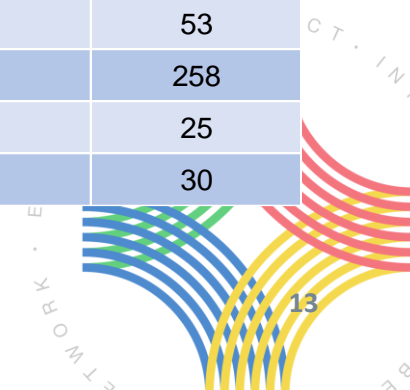
submitted. As we do not hold a complete list of all sub-contracted providers, the total number and participation rate of sub-contractors is an unknown. Some subcontractors have also been included within the treatment provision dataset to ensure the most complete coverage of the workforce is presented. LERO participation is based on known organisation numbers.

Services included in the 'National' column in the table below are treatment providers who reported services nationally rather than local authority or region specific.

Not all participants completed all sections of the workforce survey. Where partial data has likely impacted on the analysis, the number of responses is included for context.

Submissions by sector and region

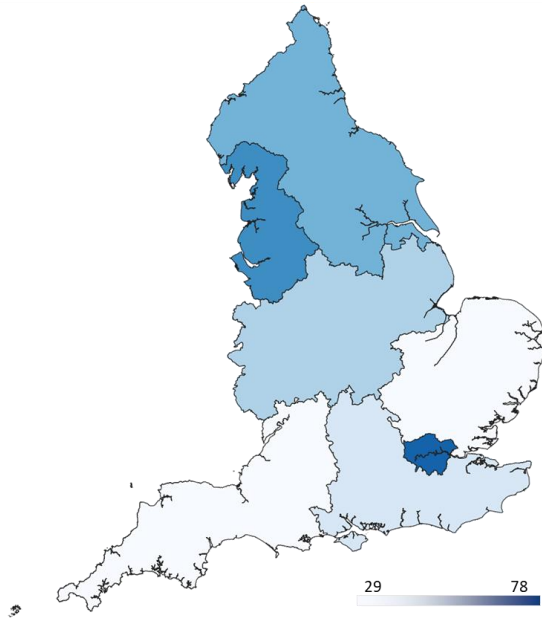
	East of England	London	Midlands	North East and Yorkshire	North West	South East	South West	National	Total
Local authority (LA) commissioning workforce	11	27	20	27	16	13	14	0	128
LA delivered treatment	3	7	5	10	7	5	5	2	44
NHS	2	14	5	6	14	6	4	2	53
Voluntary sector	22	57	40	41	42	25	20	11	258
Independent/Private	2	0	1	1	14	0	2	5	25
LERO	1	4	8	14	2	0	1	0	30



Participation (2)

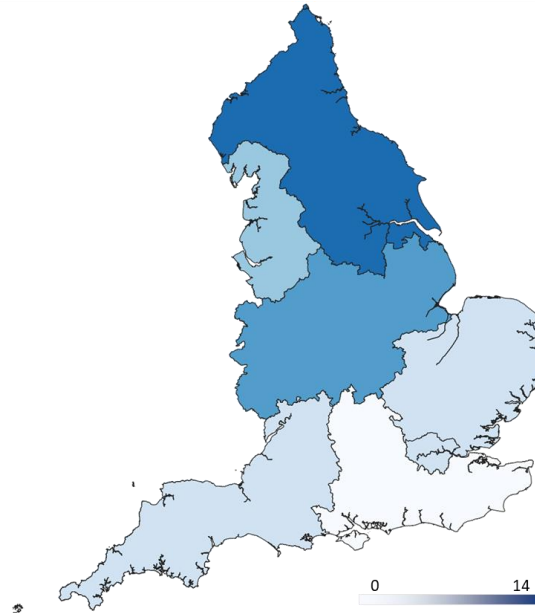
The maps below show the number of submissions by treatment provider, LERO and local authority. These maps should be viewed in conjunction with the table on the previous page to indicate the number of submissions in each region for each organisation type.

Participation by region:
Treatment Providers

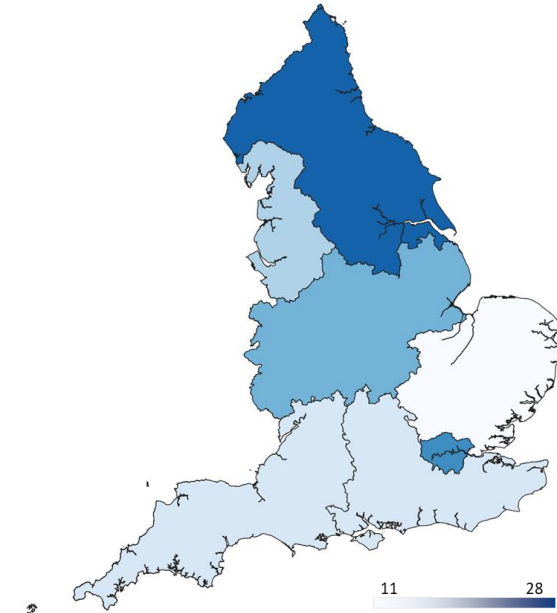


Includes all treatment provider sectors LA delivered treatment, NHS, Voluntary sector and Independent/Private

Participation by region:
LEROs



Participation by region:
Local Authorities

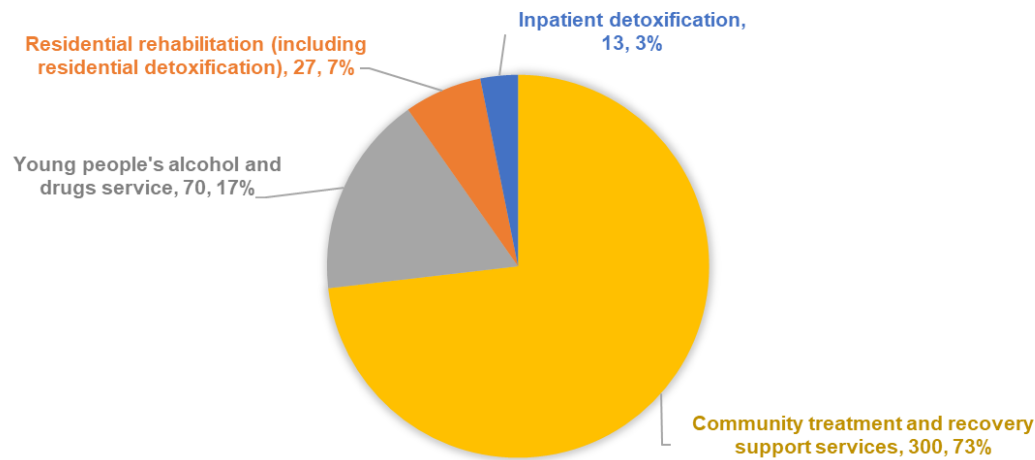


** Includes local authority commissioning staff*

Participation (3)

The table and chart below show the profile of treatment and recovery service provider submissions by service type. This includes treatment providers by sector and also LEROs.

Profile of submissions by service type



Nearly three quarters of respondents were community treatment and recovery support services (73%), (2022 69%) with the next largest cohort being young people's alcohol and drug services (17%), (2022 20%).

Smaller numbers of submissions were received from specialist services including 27 providers of residential rehabilitation (including residential detoxification) (7%) (2022 8%) and inpatient detoxification (3%) (2022 4%). Residential rehabilitation submissions were predominantly from independent/private and voluntary sector providers.

The majority of NHS submissions were for community treatment and recovery support services (81%) likewise with the voluntary sector (76%).

Fifty one percent of submissions (37) for young people's alcohol and drug services were received from the voluntary sector and 43% (30) were LA delivered treatment. Over two thirds of the LA delivered treatment submissions (68%) were for young people's services.

Submissions by service type and sector						
Service treatment type	Voluntary sector	NHS	Independent/private	LA-delivered treatment	LERO	Total
Young people's alcohol and drugs service	36	3	1	30	0	70
Community treatment and recovery support services	197	43	16	14	30	300
Residential rehabilitation (including residential detoxification)	20	0	7	0	0	27
Inpatient detoxification	5	7	1	0	0	13



Project Findings



Workforce overview

Includes all delivery and commissioning roles across all sectors:

Treatment providers (Voluntary / NHS / Independent / LA delivered treatment)

Lived experience recovery organisations (LEROs)

Commissioners (Local Authorities – LAs)

Total commissioning and delivery workforce composition (WTE)

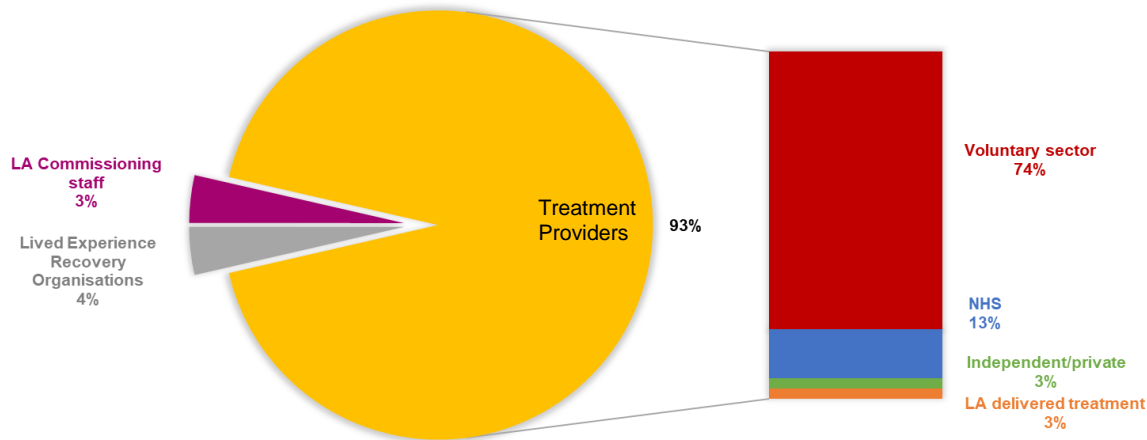
The chart and table below are based on the whole time equivalent (WTE) workforce numbers reported for the total workforce.

Treatment providers account for 93% (12,073 WTE) of the total drug and alcohol treatment and recovery commissioning and delivery workforce reported, LEROs 4% and LA commissioning staff 3%.

The majority of the treatment provider workforce was delivered by the voluntary sector (74%) followed by the NHS (13%), independent/private providers (3%) and LA-delivered treatment (3%).

Compared to 2022 there had been a fall in the proportion of the workforce within NHS services from 15% to 13% and LEROs had increased from 2% to 4% of the workforce, albeit with a higher LERO 2023 census participation rate compared to 2022.

WTE by sector



When split by staff group, almost half (49%) of the workforce for delivery treatment providers and LEROs combined were drug and alcohol workers (6,090 WTE), in line with the 48% reported in 2022. At sector level this equated to 25% of the LERO workforce and 50% of the treatment provider workforce. Of the overall combined cohort, 52% of drug and alcohol workers were recorded as 'other' drug and alcohol workers.

One third (34%) of the psychiatry workforce were substance misuse psychiatrists (on the substance misuse register) and 50% of this group were specialty doctors, associate specialists in psychiatry and staff grade doctors. In the peer support and service user development group, 72% of the 1,286 WTE reported were peer support workers similar to the 70% reported in 2022.

Workforce by staff group			
Staff group	Total WTE	% Total Workforce	WTE per 1000 TN
Peer support and service-user development	1,175	9%	4.0
Individual Placement and Support (IPS)	111	1%	0.4
Drug and alcohol workers	6,090	49%	20.9
Service management and administration	2,951	24%	10.1
Nurses	1,047	8%	3.6
Support Workers and Other Unregistered Clinical Staff	342	3%	1.2
Psychiatry	167	1%	0.6
Other doctors	39	0%	0.1
Psychological professions	285	2%	1.0
Allied Health Professionals (AHPs)	9	0%	0.0
Pharmacy professions	22	0%	0.1
Social work	117	1%	0.4
Other	187	1%	0.6
Total treatment provider and LERO staff	12,542	100%	43.1
LA Commissioning staff	466		1.6

Geographical profile of commissioning and delivery workforce

The map on the left shows the reported WTE per 1,000 treatment number by region. The remaining three maps show WTE for treatment providers, LEROs and local authority commissioning staff by local authority. Given the

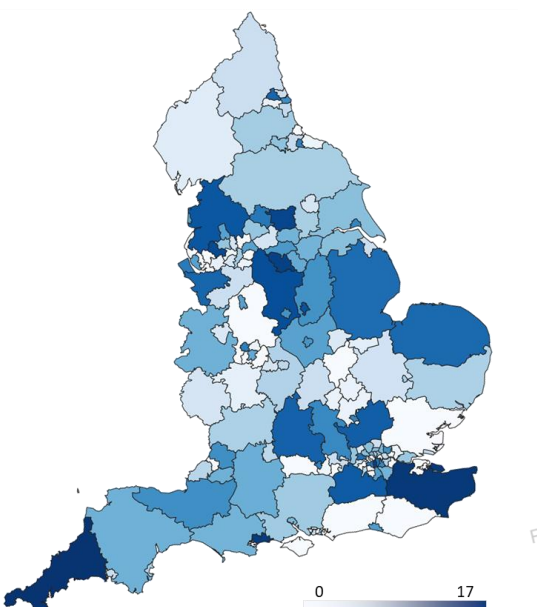
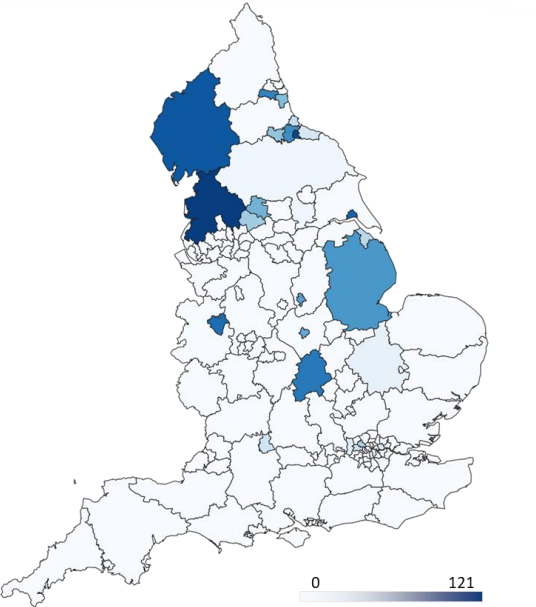
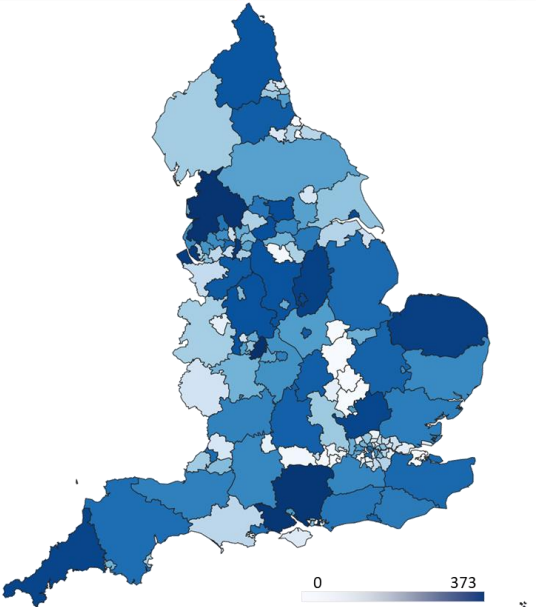
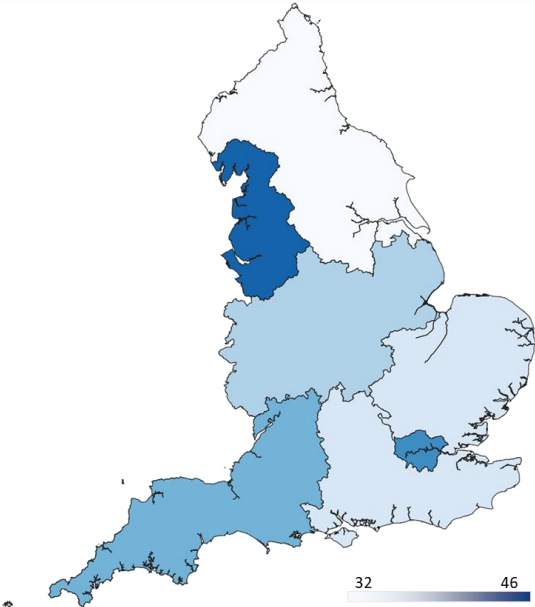
participation rates across treatment providers, LEROs and LAs, the WTE reflects the reported totals rather than the actual WTE.

**Treatment Provider
WTE per 1000
Treatment numbers**

**Treatment Provider
WTE by Local Authority**

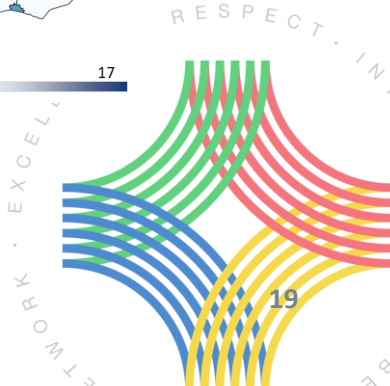
**LERO
WTE by Local Authority**

**Commissioners (LAs)
WTE by Local Authority**



Includes all treatment provider sectors LA delivered treatment, NHS, Voluntary sector and Independent/Private

¹ Treatment numbers for the 12 months 1st July 2022 to the 30th June 2023 provided by OHID



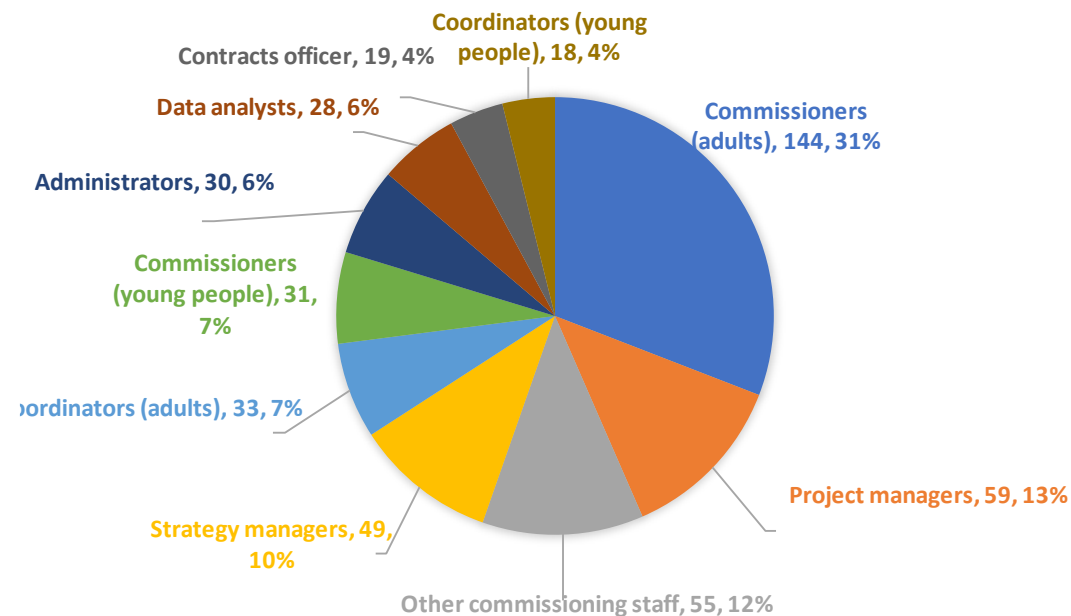
Commissioning workforce composition

The commissioning workforce reported in the census was 466 WTE (398 2022). It should be recognised that participants in 2023 were not identical to 2022.

Nearly half of the commissioning workforce (49%) was reported in commissioner and coordinator roles. The commissioning and coordination of adult services comprised 38% (43% in 2022) of the workforce with 11% (10% in 2022) attributed to the commissioning and coordination of services for young people.

Data analysts, project managers and strategy managers made up 30% of the workforce compared to 22% in 2022, whilst 6% (in line with 2022) were reported as administrators and 4% (5% 2002) as contracts officers. The percentage of staff recorded 'other' had fallen from 14% to 12%.

Local authority commissioning staff skill mix (WTE)



Commissioning Workforce by role		
LA Commissioning roles	WTE	%
Administrators	30	6%
Commissioners (adults)	144	31%
Coordinators (adults)	33	7%
Commissioners (young people)	31	7%
Coordinators (young people)	18	4%
Data analysts	28	6%
Project managers	59	13%
Strategy managers	49	11%
Contracts officer	19	4%
Other commissioning staff	55	12%
Total	466	100%



Workforce total by staff group and region (WTE)

The below table shows the reported WTE of the workforce by region and job role for treatment providers by staff group. LEROs and local authority commissioning teams are included by overall workforce WTE in each region.

The last three rows show the total reported treatment provider WTE, the treatment provider WTE per 1,000 treatment numbers and the total treatment provider submissions received from each region. The ratio of reported WTE/1,000 people in treatment should be viewed in conjunction with the

number of submissions. As detailed on page 13, the participation rate for treatment providers was 82%, it should be noted that where there are gaps in submissions this may artificially suppress the staff to treatment ratio reported.

Overall the reported WTE/ 1,000 people in treatment ratio of 41, slightly higher than the 39 reported in 2022. Regionally the ratios vary to those reported in 2022.

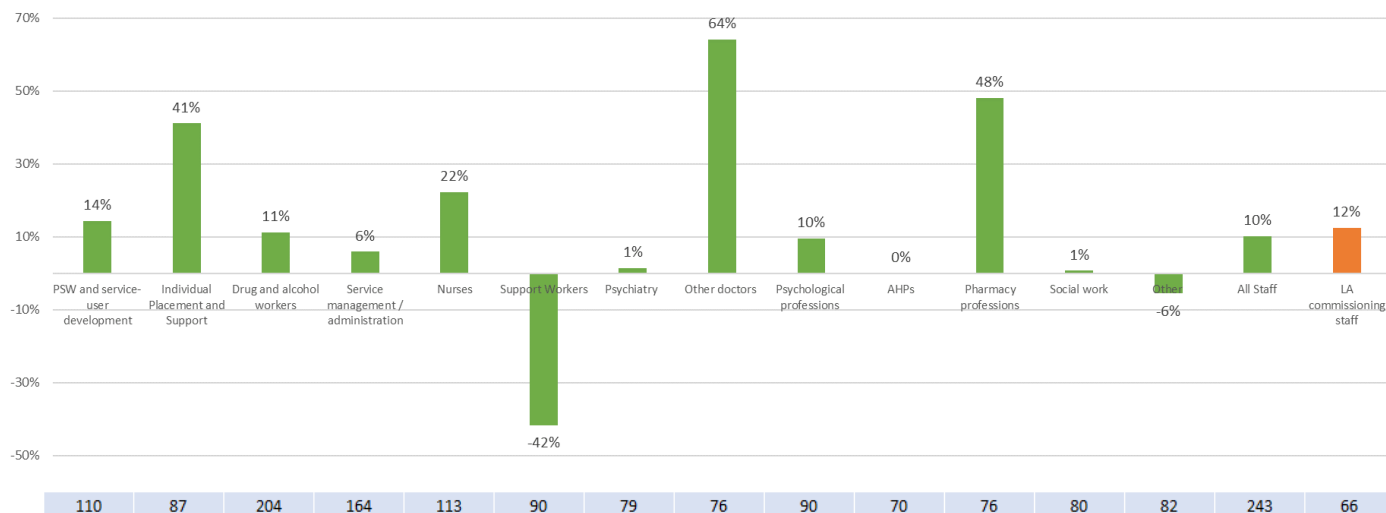
Workforce by staff group and region										
Treatment providers	East of England	London	Midlands	North East and Yorkshire	North West	South East	South West	National	Total	Reported WTE / 1000 treatment numbers by staff group
Peer support and service-user development	94	142	190	98	188	112	59	33	919	3.2
Individual Placement and Support (IPS)	4	4	18	28	36	3	5	1	99	0.3
Drug and alcohol workers	484	812	1,188	1,012	1,154	656	616	97	6,019	20.7
Service management and administration	197	409	523	481	541	286	293	120	2,849	9.8
Nurses	51	172	184	207	177	99	84	73	1,047	3.6
Support Workers and Other Unregistered Clinical Staff	10	30	40	62	73	1	23	91	329	1.1
Psychiatry	9	43	34	15	29	15	9	11	166	0.6
Other doctors	2	7	7	4	8	2	7	1	38	0.1
Psychological professions	16	78	31	14	40	30	28	38	275	0.9
Allied Health Professionals (AHPs)	0	5	2	0	1	0	0	1	9	0.0
Pharmacy professions	0	3	7	5	3	1	1	1	22	0.1
Social work	5	14	16	28	33	5	7	8	117	0.4
Other	3	13	35	10	48	3	10	64	185	0.6
Total reported treatment provider WTE	875	1,733	2,276	1,963	2,331	1,212	1,143	538	12,073	
Reported WTE / 1000 treatment numbers by region	35	44	41	33	47	35	41	...	41	
Treatment provider submissions	29	78	51	58	77	36	31	20	380	
LA Commissioning staff	29	93	79	92	60	49	63	0	466	
LEROs	1	13	116	215	121	0	3	0	469	

¹ Treatment numbers for the 12 months 1st July 2022 to the 30th June 2023 provided by OHID



Summary of workforce metrics (1)

Vacancy rate- all organisations

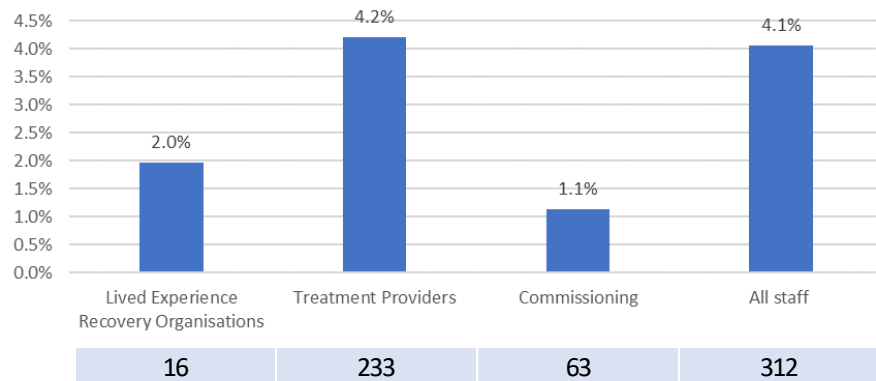


The vacancy rate for the delivery workforce (treatment provider and LERO) at 10% was in line with the 11% reported in 2022. The 12% vacancy rate for commissioning staff was slightly below the 14% reported in 2022. This compares to an 8.9% (June 2023)¹ vacancy rate reported by NHS Digital for all staff in the NHS.

For the three largest workforce groups, drug and alcohol workers, service management / administration and nurses the vacancy rates reported were 11% (15% 2022), 6% (8% 2022) and 22% (17% 2022) respectively.

The number of submissions including vacancy data is included below the chart. For the delivery workforce (treatment providers and LERO) 59% of submissions included vacancy data, for LA commissioning staff, 52% included vacancy data.

Sickness/Absence rate - all organisations



Sickness rates were collected at service level in 2023 rather than staff group level following feedback from participants. All three parts of the sector reported sickness rates below the rate reported by NHS Digital for June 2023 for all NHS staff (4.5%).²

Reported rates for the overall workforce in 2023 were between 1.1% and 4.2% with an average of 4.1% for all staff, lower than the overall rate reported for all staff in 2022 (4.3%).

The number of submissions including sickness data is included below the chart. This represented 53% of LERO, 61% of treatment provider and 49% of commissioning submissions.

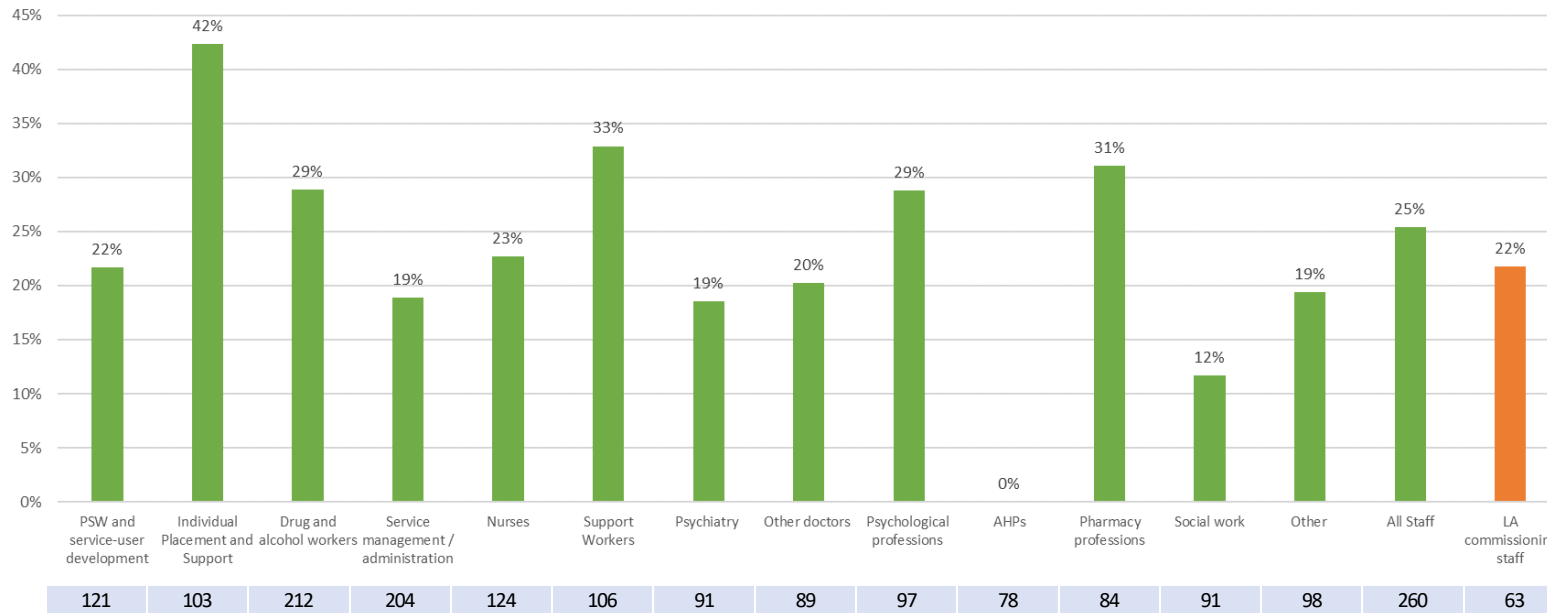
¹ <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey/april-2015---june-2023-experimental-statistics>

² <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/june-2023-provisional-statistics>



Summary of workforce metrics (2)

Turnover rate- all organisations



The turnover rate reported for all delivery staff in the treatment provider and LERO workforce of 25% was higher than the 19% reported in 2022 for all staff. The turnover rate for commissioning staff had increased from 11% in 2022 to 22% in 2023.

The number of submissions including turnover data is included below the chart. For the delivery workforce (treatment providers and LERO) 63% of submissions included turnover data, for LA commissioning staff, 49% included turnover data.

Bank & Agency spend	By organisation type for those who indicated they use they use bank and agency staffing			
	Organisations who use bank and agency	Bank and agency spend	Total staff spend	B&A spend as a proportion of total staff spend
Treatment Providers	63%	£20,379,733	£209,059,820	10%
LEROs	0%	-	-	-
Commissioners	12%	£769,195	£2,972,078	26%

Sixty three percent of treatment provider submissions stated that they used bank and agency (B&A) staff. Where costs were provided (146 treatment provider submissions) 10% of total staff costs were accounted for by B&A spend.

No LEROs reported using B&A staff.

Twelve percent of LA commissioners reported using B&A staff. Where costs were provided (8 LAs) B&A costs accounted for 26% of total staff costs.



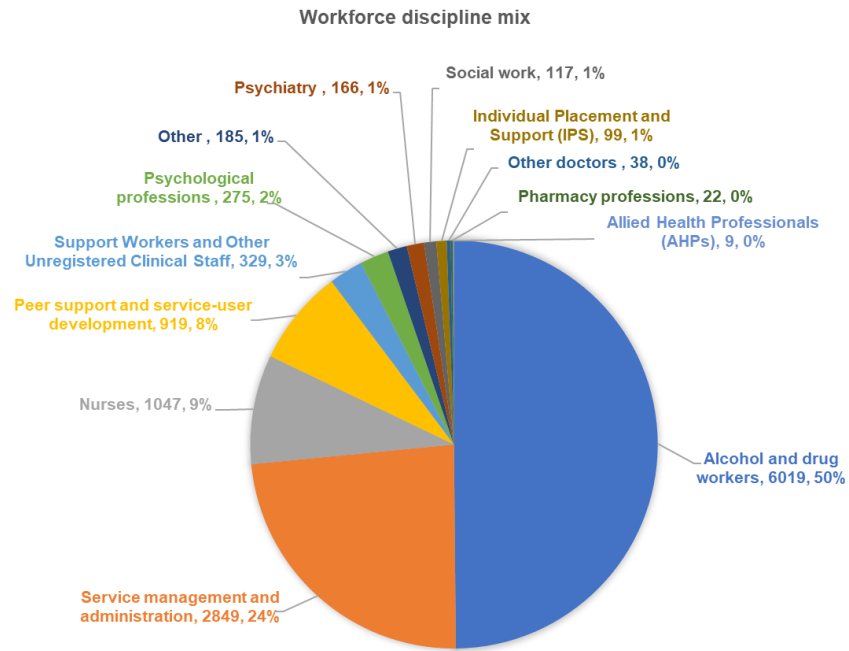
Treatment providers

Focus on treatment providers by sector only:

Voluntary / NHS / Independent / LA-delivered treatment

LEROs and commissioning staff are excluded from this section

Treatment provider workforce profile



Voluntary organisations accounted for 80% of the treatment provider workforce slightly higher than the 78% reported in 2022. The independent sector remained consistent at 3% of the workforce, the NHS accounted for 14% of the workforce (16% in the 2022 census) and 3% (4% in 2022) of the workforce was in LA-delivered treatment services.

Drug and alcohol workers accounted for half (50%) of the workforce in line with 2022 (49%). LA-delivered treatment services reported drug and alcohol workers increase from 49% in 2022 to 56% of the workforce in 2023.

Peer support and service-user development roles were 8% of the workforce in 2023 compared to 6% in 2022. However, there was variability by sector ranging from 1% of the workforce in the LA-delivered treatment services to 9% in the independent sector.

Nurses at 9% of the workforce was in line with 2022, with the NHS continuing to report the largest proportion (20% 2022, 22% 2023). Nurses made up 7% of the independent provider workforce in 2023 down from 11% in 2022. For the voluntary sector nurses were 7% of the workforce, consistent with 2022 (6%).

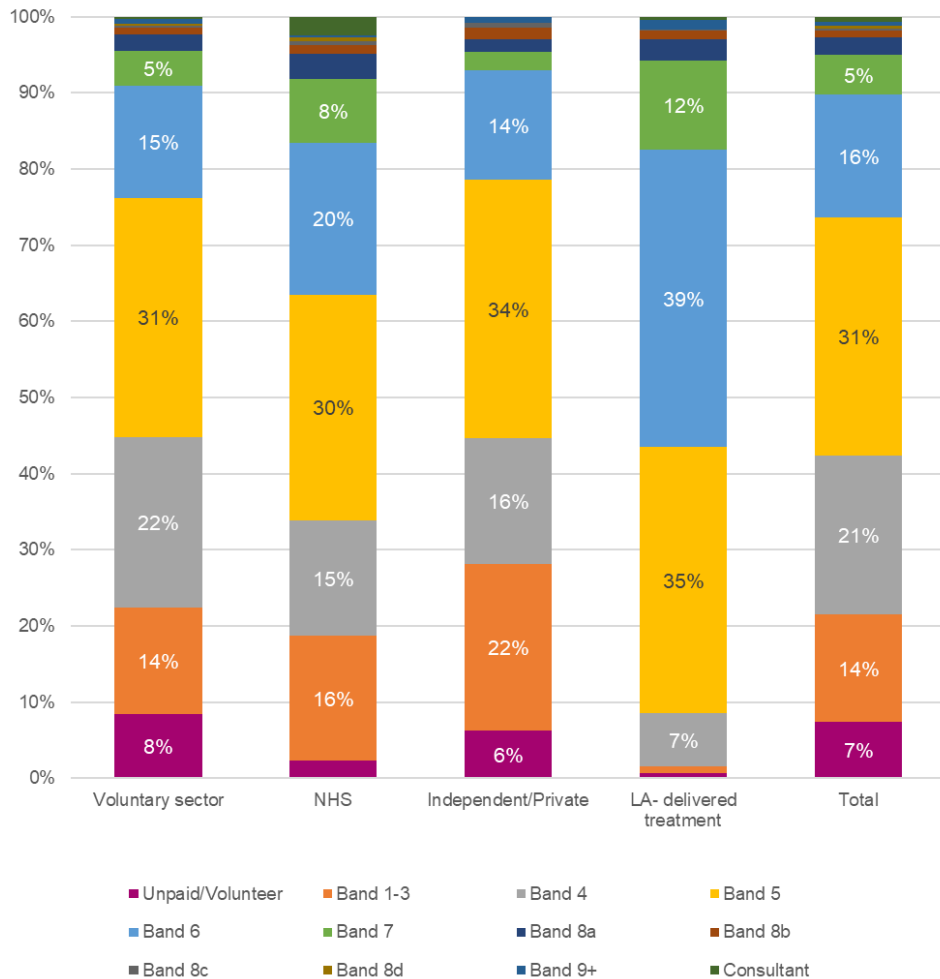
Treatment provider workforce by staff group and sector

Staff group	Voluntary sector		NHS		Independent/Private		LA- delivered treatment		Total	
	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%
Peer support and service-user development	815	8%	67	4%	34	9%	3	1%	919	8%
Individual Placement and Support (IPS)	73	1%	5	0%	18	5%	3	1%	99	1%
Drug and alcohol workers	5,091	53%	606	36%	129	35%	193	56%	6,019	50%
Service management and administration	2,378	25%	340	20%	72	19%	60	17%	2,849	24%
Nurses	642	7%	367	22%	24	7%	13	4%	1,047	9%
Support Workers and Other Unregistered Clinical Staff	167	2%	130	8%	22	6%	10	3%	329	3%
Psychiatry	102	1%	62	4%	1	0%	0	0%	166	1%
Other doctors	28	0%	4	0%	6	2%	0	0%	38	0%
Psychological professions	183	2%	57	3%	31	8%	3	1%	275	2%
Allied Health Professionals (AHPs)	7	0%	2	0%	0	0%	0	0%	9	0%
Pharmacy professions	15	0%	4	0%	3	1%	1	0%	22	0%
Social work	34	0%	34	2%	4	1%	44	13%	117	1%
Other	131	1%	9	1%	30	8%	15	4%	185	2%
Total (sector % of TP workforce)	9,667	80%	1,688	14%	373	3%	345	3%	12,073	100%



Salary profile – All treatment staff roles and by sector

Salary profile by sector



Fourteen percent of the workforce were on bands 1-3 (12% in 2022) and there had been a shift in the distribution of bands 4 and 5 with the proportion of staff employed at band 5 rising from 26% to 31% while the proportion of staff employed at band 4 dropped from 26% to 21%. The percentage of unpaid/volunteer staff within the workforce has decreased from 12% in 2022 to 7% in 2023.

As in 2022 there was notable variation in the salary profile by sector. The LA-delivered treatment profile is very different to other parts of the treatment provider workforce, with the largest proportion of staff (74%) on a band 5 or 6 and very few staff at band 4 and below (9%, 2022 18%). This compared to 44% of staff at band 4 or below in the voluntary sector, 33% in the NHS and 44% in the independent sector.

A larger proportion of staff on higher pay grades, band 7 and above, were reported in the NHS (15%) and LA-delivered treatment (17%), compared to the voluntary sector (9%) and the independent sector (8%).

Treatment provider workforce by salary and sector

	Voluntary sector		NHS		Independent/Private		LA-delivered treatment		Total	
	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%
Unpaid/Volunteer	820	8%	40	2%	23	6%	2	1%	885	7%
Band 1-3	1,340	14%	275	16%	82	22%	3	1%	1,700	14%
Band 4	2,173	22%	257	15%	62	16%	21	7%	2,512	21%
Band 5	3,032	31%	499	30%	127	34%	104	35%	3,763	31%
Band 6	1,428	15%	337	20%	54	14%	116	39%	1,935	16%
Band 7	447	5%	141	8%	9	2%	35	12%	632	5%
Band 8a	207	2%	57	3%	6	2%	8	3%	277	2%
Band 8b	78	1%	19	1%	6	2%	4	1%	106	1%
Band 8c	25	0%	7	0%	3	1%	0	0%	35	0%
Band 8d	26	0%	9	1%	0	0%	0	0%	35	0%
Band 9+	60	1%	3	0%	3	1%	4	1%	71	1%
Consultant	31	0%	42	2%	0	0%	1	0%	74	1%
Total (WTE)	9,668		1,688		373		298		12,026	

Totals reported are lower than the overall WTE as some participants did not provide a salary breakdown



Salary profile – by treatment staff role

Ninety-two percent of drug and alcohol workers (the largest workforce group), were employed at a band 5 or lower (< 33.3k). This percentage is similar to figures reported in 2022.

Seventeen percent of nursing staff (registered nurses, nursing associate and student nurses) were band 5 or below compared with 22% in this band in 2022. Most nursing staff were employed at a band 6 (47%) or band 7 (22%), consistent with 2022. A higher percentage were employed at band 8a and above (13%) compared to 2022 (8%).

Psychiatry staff were the highest paid group with 166 WTE made up of 56 WTE substance misuse psychiatrists (81 2022), 6 WTE older adult psychiatrists, 84 WTE specialty doctor/associates specialists in psychiatry and SAS doctors (51 2022), and 19 WTE training grades. To note, the change in the reported substance misuse psychiatrist WTE may reflect respondents reporting medics in different role types between the 2 census years as SAS doctors have also

changed.

Psychological professions made up 2.3% of the workforce with 285 WTE (419 2022, the difference is largely accounted for by the exclusion of support roles in 2023 – Appendix p67). Counsellors were the largest role within this staff group with 150 WTE (trained and qualified). Of the 59 WTE trainees 88% were unpaid/volunteers. Drug and alcohol treatment and recovery services often take on counselling volunteers who have completed a British Association of Counselling and Psychotherapy (BACP) accredited course and are completing their practice hours under the supervision of a BACP registered practitioner. Overall, 22% of the psychological professions workforce were unpaid/volunteers, lower than the 35% reported in 2022.

The 2022 census reported 37% of social workers were unpaid/volunteers which compared to just 3% in 2023.

Treatment provider workforce by staff group and salary

	Unpaid/ Volunteers	Band 1-3	Band 4	Band 5	Band 6	Band 7	Band 8a	Band 8b	Band 8c	Band 8d	Band 9+	Consultant	Total WTE
		< £23,600	£23,600 < £26,700	£26,700 < £33,300	£33,300 < £41,100	£41,100 < £48,100	£48,100 < £55,400	£55,400 < £66,200	£66,200 < £78,400	£78,400 < £94,500	£94,500+		
Peer support and service-user development	75%	13%	6%	4%	2%	0%	0%	0%	0%	0%	0%	0%	918
Individual Placement and Support (IPS)	2%	4%	23%	57%	13%	0%	0%	0%	0%	0%	0%	0%	99
Drug and alcohol workers	1%	11%	33%	47%	7%	1%	0%	0%	0%	0%	0%	0%	6,000
Service management and administration	1%	22%	10%	20%	31%	10%	4%	2%	0%	0%	0%	0%	2,847
Nurses	2%	0%	2%	13%	47%	22%	11%	2%	0%	0%	0%	0%	1,044
Support Workers and Other Unregistered Clinical Staff	0%	68%	25%	6%	0%	0%	0%	0%	0%	0%	0%	0%	320
Psychiatry	1%	0%	0%	0%	0%	4%	4%	5%	3%	18%	27%	38%	166
Other doctors	3%	4%	0%	0%	0%	0%	8%	7%	13%	10%	44%	12%	39
Psychological professions	22%	3%	17%	27%	10%	7%	3%	6%	4%	0%	1%	1%	279
Allied Health Professionals (AHPs)	0%	0%	19%	0%	38%	42%	0%	0%	0%	0%	0%	0%	5
Pharmacy professions	0%	0%	7%	12%	4%	18%	27%	18%	13%	0%	0%	0%	22
Social work	3%	1%	6%	14%	52%	19%	3%	1%	0%	0%	0%	0%	117
Other	10%	33%	21%	18%	8%	5%	2%	1%	0%	1%	0%	1%	172
All staff	7%	14%	21%	31%	16%	5%	2%	1%	0%	0%	1%	1%	12,026

Totals reported are lower than the overall WTE as some participants did not provide a salary breakdown

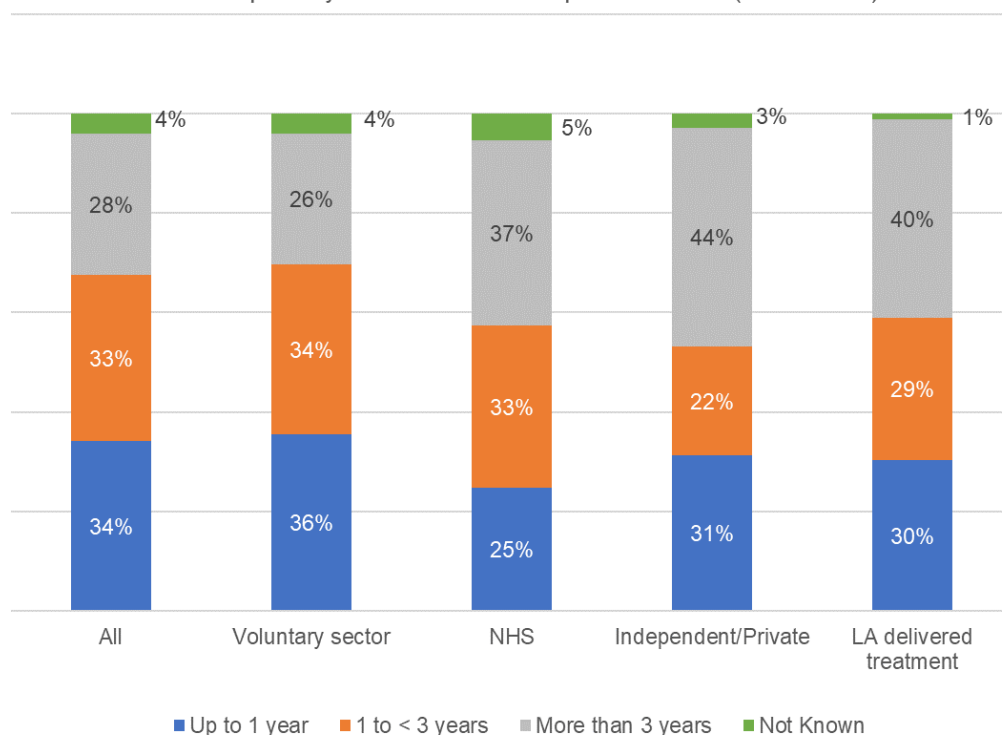
Time in post by sector – treatment provider staff

Thirty four percent of staff within drug and alcohol treatment services had been in post for less than a year, slightly lower than the position in 2022 (37%). The percentage of staff in post for less than a year in the voluntary sector had reduced slightly to 36% compared to 40% in 2022. The proportion had also reduced in the NHS from 29% to 25%. The independent sector and LA delivered treatment reported increases in this group (independent up from 24% to 31% and LA delivered treatment up from 17% to 30%).

Staff in post 1 to <3 years had increased from 21% in 2022 to 33% in 2023, with the number in post more than three years falling from 40% to 28%. The percentage of staff where time in post was not known increased from 2% to 4%.

For drug and alcohol workers specifically, 36% of staff had been in post for less than a year, compared to 38% in 2022. The number in post between 1 to <3 years had increased to 34% compared to 22% in 2022.

Time in post by sector- treatment provider staff (headcount)



Treatment provider workforce by staff group and time in post				
	Up to 1 year	1 to <3 years	More than 3 years	Not Known
Peer support and service-user development	48%	36%	9%	6%
Individual Placement and Support (IPS)	58%	35%	7%	0%
Drug and alcohol workers	36%	34%	26%	4%
Service management and administration	27%	32%	37%	3%
Nurses	30%	35%	30%	4%
Support Workers and Other Unregistered Clinical Staff	32%	32%	29%	7%
Psychiatry	22%	39%	35%	4%
Other doctors	19%	25%	47%	9%
Psychological professions	46%	33%	17%	3%
Allied Health Professionals (AHPs)	0%	33%	67%	0%
Pharmacy professions	29%	21%	50%	0%
Social work	40%	24%	36%	0%
Other	28%	21%	43%	9%
All staff	34%	33%	28%	4%

Voluntary sector		NHS		Independent/Private		LA-delivered treatment	
Responses	%	Responses	%	Responses	%	Responses	%
234	91%	43	81%	18	72%	28	64%



Time in post by staff group and sector – treatment provider staff

The voluntary sector reported an increase in the staff in post for a year or more compared to 2022 for peer support (PSW) and service-user development roles; IPS roles and social workers. However, it remained the case that these staff groups had high percentages of staff in post for less than a year.

Psychological professions reported a high proportion of staff in post for less than a year (52%) which may reflect the number of trainee counsellors included within this group.

It continued to be the case that the NHS had the highest percentage of PSW and service development roles in post for more than three years (24%).

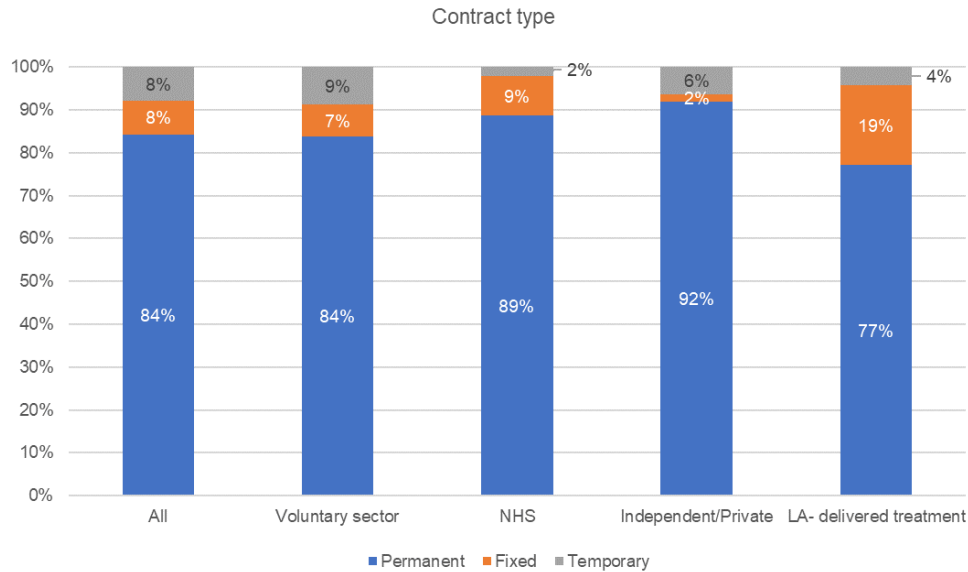
The independent sector reported the highest proportion of drug and alcohol workers in post for more than three years (50%), in line with 2022.

Treatment provider workforce by staff group, time in post and sector

	Voluntary			NHS			Independent/ private			LA-delivered treatment		
	Up to 1 year	1 to < 3 years	More than 3 years	Up to 1 year	1 to < 3 years	More than 3 years	Up to 1 year	1 to < 3 years	More than 3 years	Up to 1 year	1 to < 3 years	More than 3 years
Peer support and service-user development	51%	39%	9%	39%	37%	24%	88%	13%	0%	33%	0%	67%
Individual Placement and Support (IPS)	56%	37%	7%	100%	0%	0%	61%	28%	11%	33%	67%	0%
Drug and alcohol workers	39%	35%	26%	28%	44%	28%	25%	25%	50%	31%	29%	40%
Service management and administration	29%	34%	37%	23%	28%	49%	16%	25%	59%	24%	28%	48%
Nurses	35%	38%	27%	24%	34%	41%	20%	20%	60%	20%	40%	40%
Support Workers and Other Unregistered Clinical Staff	37%	38%	26%	25%	28%	48%	75%	25%	0%			
Psychiatry	24%	44%	32%	21%	32%	47%						
Other doctors	26%	33%	40%	0%	15%	85%	33%	0%	67%			
Psychological professions	52%	34%	14%	43%	40%	17%	19%	26%	56%	67%	33%	0%
Allied Health Professionals (AHPs)	0%	50%	50%	0%	0%	100%						
Pharmacy professions	26%	32%	42%	14%	0%	86%	100%	0%	0%	100%	0%	0%
Social work	54%	40%	6%	23%	7%	70%	100%	0%	0%	15%	6%	79%
Other	33%	24%	43%	33%	11%	56%	15%	15%	69%	50%	50%	0%
All staff	37%	35%	27%	26%	34%	39%	32%	23%	45%	28%	26%	46%



Contract type and hours – treatment provider staff

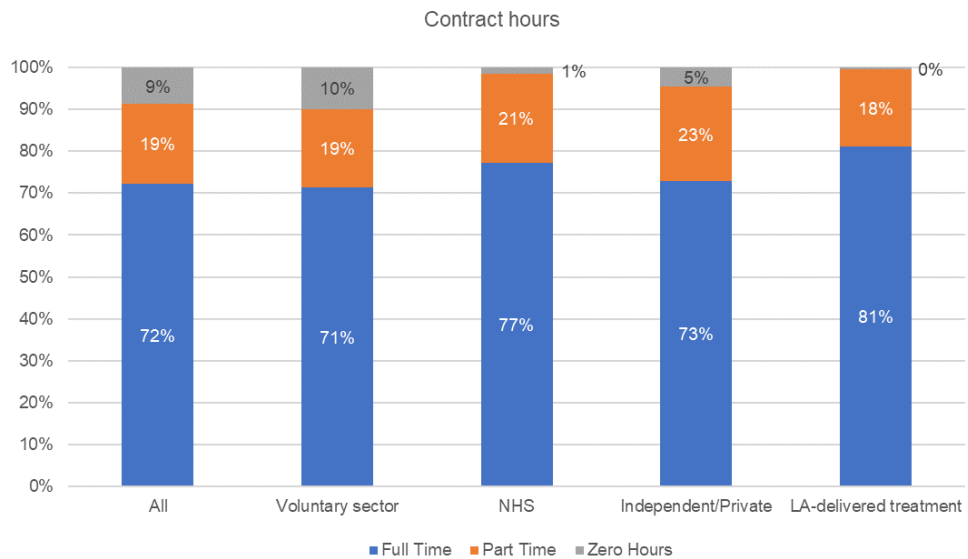


Most staff (84%) within drug and alcohol treatment and recovery services were employed on permanent contracts with 8% on fixed and 8% on temporary contracts. This was broadly in line with the profile reported in 2022.

At a sector level the profiles are also consistent with 2022 with the LA-delivered services standing out with a higher proportion of fixed term contracts.

The table below details the responses received for contract type.

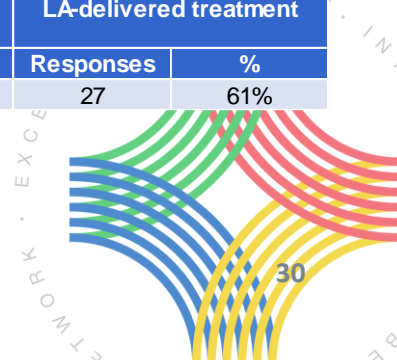
Voluntary sector		NHS		Independent / private		LA-delivered treatment	
Responses	%	Responses	%	Responses	%	Responses	%
239	93%	44	83%	20	80%	37	84%



The profile for contract hours shows that for all sectors there had been a slight increase in the percentage of staff working full time, overall increasing to 72% compared to 69% in 2022.

The table below details the responses received for contract hours.

Voluntary sector		NHS		Independent / private		LA-delivered treatment	
Responses	%	Responses	%	Responses	%	Responses	%
238	92%	42	79%	20	80%	27	61%



Contract type by treatment provider staff group and sector

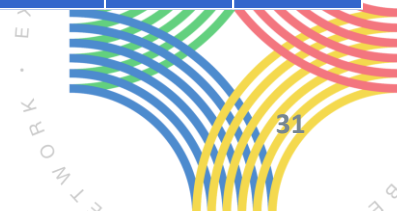
For drug and alcohol workers, the largest staff group, overall, 90% of staff were employed on permanent contracts, ranging from 77% in LA-delivered treatment to 99% in the independent sector. Overall, this was slightly higher than the 87% reported in 2022.

For most staff groups approximately 80% or more are employed on permanent contracts. For peer support workers and service-user development roles 27% were employed on permanent contracts, with the majority (67%) of staff on temporary contracts. This was a rise in the use of temporary contracts from 63% in 2022.

Psychological professions were employed on a mix of contract types (53% permanent, 28% fixed and 19% temporary), This profile had changed compared to 2022 when 61% of contracts were permanent, 10% fixed term and 29% were temporary.

Fifty nine percent of social workers were employed on permanent contracts, similar to 2022. However, there had been a shift away from the use of temporary contracts (40% in 2022, 2% in 2023) to more fixed contracts (2% in 2022 to 38% in 2023).

Treatment provider workforce by staff group, contract type and sector															
	Voluntary			NHS			Independent/ private			LA-delivered treatment			Total treatment providers		
	Permanent	Fixed Term	Temporary	Permanent	Fixed Term	Temporary	Permanent	Fixed Term	Temporary	Permanent	Fixed Term	Temporary	Permanent	Fixed Term	Temporary
Peer support and service-user development	24%	5%	71%	75%	25%	0%	42%	4%	54%	67%	33%	0%	27%	6%	67%
Individual Placement and Support (IPS)	73%	27%	0%	20%	80%	0%	100%	0%	0%	100%	0%	0%	76%	24%	0%
Drug and alcohol workers	90%	7%	3%	89%	9%	2%	99%	1%	0%	77%	18%	5%	90%	7%	3%
Service management and administration	93%	6%	2%	94%	4%	2%	100%	0%	0%	89%	2%	9%	93%	5%	2%
Nurses	85%	6%	9%	90%	7%	3%	90%	10%	0%	100%	0%	0%	87%	6%	7%
Support Workers and Other Unregistered Clinical Staff	89%	1%	10%	93%	4%	3%	100%	0%	0%				91%	1%	8%
Psychiatry	95%	1%	5%	76%	24%	0%				100%	0%	0%	88%	9%	3%
Other doctors	74%	8%	18%	93%	7%	0%	100%	0%	0%				79%	7%	13%
Psychological professions	46%	30%	24%	70%	28%	2%	93%	7%	0%	50%	50%	0%	53%	28%	19%
Allied Health Professionals (AHPs)	67%	33%	0%	100%	0%	0%							75%	25%	0%
Pharmacy professions	89%	0%	11%	100%	0%	0%	100%	0%	0%	100%	0%	0%	93%	0%	7%
Social work	44%	56%	0%	91%	9%	0%	0%	0%	100%	67%	33%	0%	59%	38%	2%
Other	73%	8%	19%	78%	11%	11%	100%	0%	0%	0%	100%	0%	76%	8%	16%
Total	84%	7%	9%	89%	9%	2%	92%	2%	6%	78%	17%	5%	84%	8%	8%



Contract hours by treatment provider staff group and sector

Whilst just less than three quarters (72%) of all staff within drug and alcohol treatment and recovery services work full time this varied by job role and sector.

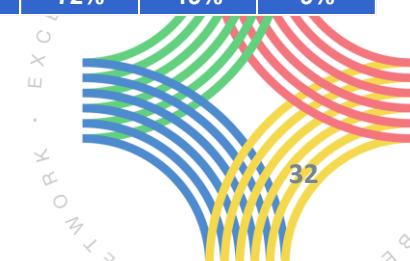
Sixty five percent of peer support and service-user development staff were employed on zero hour contracts, up on the 62% reported in 2022. The voluntary sector had the highest percentage of peer support and service-user development staff on zero hour contracts at 71% with other sectors favouring full and part-time contracts for this role type.

Similarly, psychological professions staff had a high proportion of zero hour contracts at 38%, up from 28% in 2022. These contracts were mainly attributed to trainee counsellors.

Social worker zero hour contracts had fallen from 39% in 2022 to 28% in 2023 with part time contracts increasing slightly from 11% to 15%.

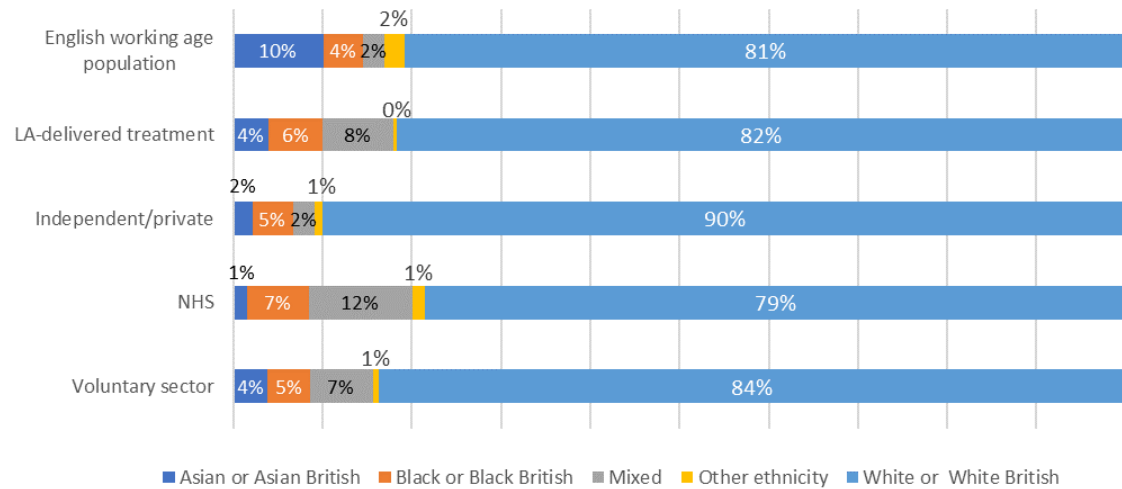
Overall, there had been a reduction in the proportion of staff on part time contracts, falling from 23% in 2022 to 19% in 2023.

Treatment provider workforce by staff group, contract hours and sector															
	Voluntary			NHS			Independent/ private			LA-delivered treatment			Total treatment providers		
	Full Time	Part Time	Zero Hours	Full Time	Part Time	Zero Hours	Full Time	Part Time	Zero Hours	Full Time	Part Time	Zero Hours	Full Time	Part Time	Zero Hours
Peer support and service-user development	17%	12%	71%	50%	34%	16%	38%	58%	4%	50%	1%	0%	19%	15%	65%
Individual Placement and Support (IPS)	97%	3%	0%	100%	0%	0%	89%	11%	0%	100%	0%	0%	96%	4%	0%
Drug and alcohol workers	80%	17%	3%	85%	15%	0%	78%	17%	6%	77%	1%	0%	80%	17%	3%
Service management and administration	79%	19%	2%	76%	21%	2%	76%	24%	0%	84%	0%	0%	79%	20%	2%
Nurses	67%	25%	8%	76%	23%	0%	80%	10%	10%	83%	0%	0%	70%	24%	6%
Support Workers and Other Unregistered Clinical Staff	66%	27%	7%	88%	13%	0%	78%	11%	11%		0%	0%	70%	24%	6%
Psychiatry	61%	33%	6%	63%	38%	0%					0%	0%	61%	35%	4%
Other doctors	30%	50%	20%	0%	100%	0%	100%	0%	0%	0%	0%	2%	25%	59%	15%
Psychological professions	28%	25%	48%	87%	13%	0%	70%	15%	15%	0%	2%	0%	39%	23%	38%
Allied Health Professionals (AHPs)	70%	30%	0%								0%	0%	70%	30%	0%
Pharmacy professions	68%	26%	5%	57%	43%	0%	0%	100%	0%	100%	0%	0%	64%	32%	4%
Social work	40%	13%	47%	79%	21%	0%	0%	100%	0%	96%	1%	0%	57%	15%	28%
Other	44%	33%	23%	67%	33%	0%	75%	25%	0%	100%	0%	0%	50%	31%	19%
Total	71%	19%	10%	77%	21%	1%	73%	23%	5%	80%	20%	0%	72%	19%	9%



Ethnicity and age profile – treatment providers

Ethnicity Mix - Treatment Providers

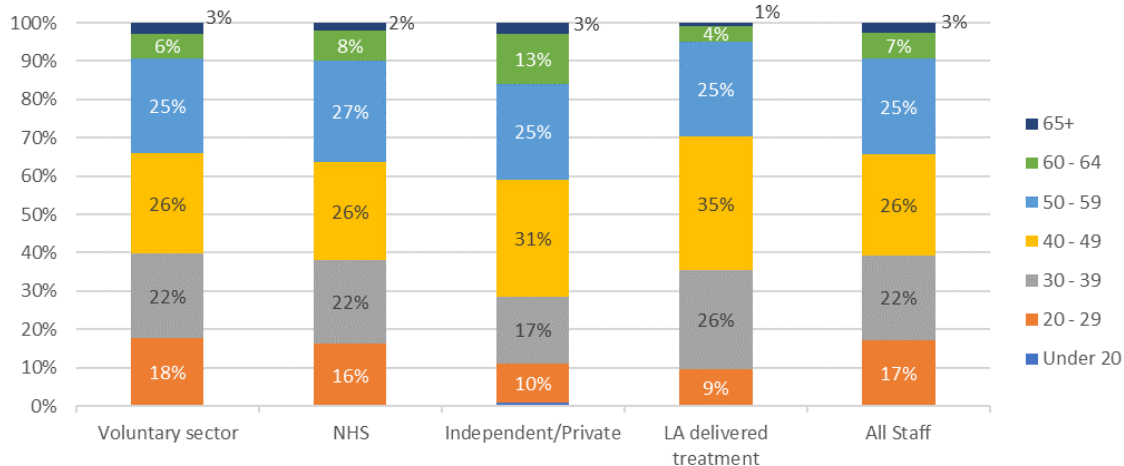


The proportion of the NHS and LA-delivered treatment workforce that were white or white British was in line with the English working age population at 81%. Both the independent and voluntary sectors reported higher rates at 90% and 84% respectively.

Asian or Asian British people make up 10% of the English working age population but were under represented in the treatment provider workforce across all sectors. Mixed ethnicity people were represented in the workforce at a higher rate than the working age population (2%), particularly in the NHS (12%), LA-delivered treatment (8%) and the voluntary sector (7%).

Unknown or not stated responses were included for all sectors (Voluntary – 16%, NHS – 10%, Independent – 13%, LA delivered treatment – 14%) but have been excluded from the chart to the left.

Age Profile - Treatment providers



The age profile was broadly similar across the sectors although there were some nuances. LA delivered treatment and independent/private providers had a smaller proportion of staff in the 20-29 category at 9% and 10% respectively, which were half that of the voluntary sector at 18%.

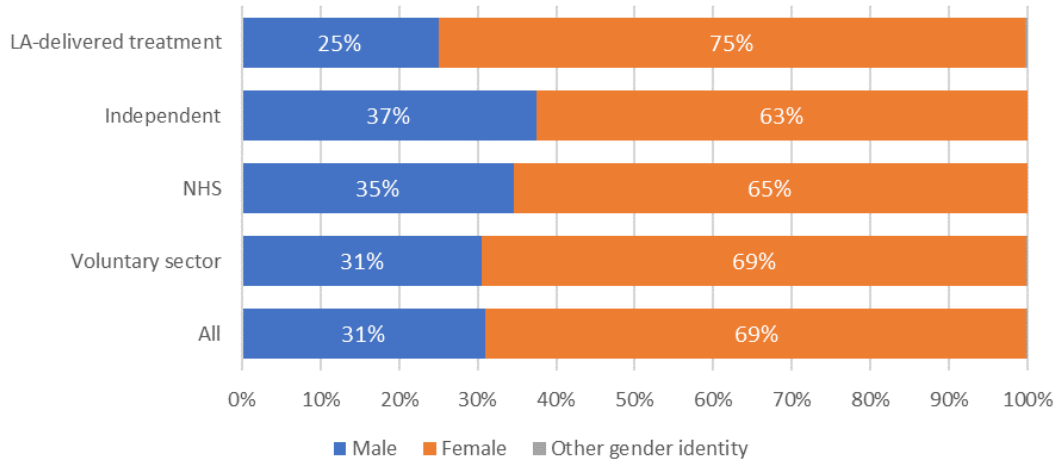
The independent sector reported 41% of staff aged 50 or over compared to 37% for the NHS, 34% for the voluntary sector and 30% for LA delivered treatment.



Disability, gender and sexual orientation profile

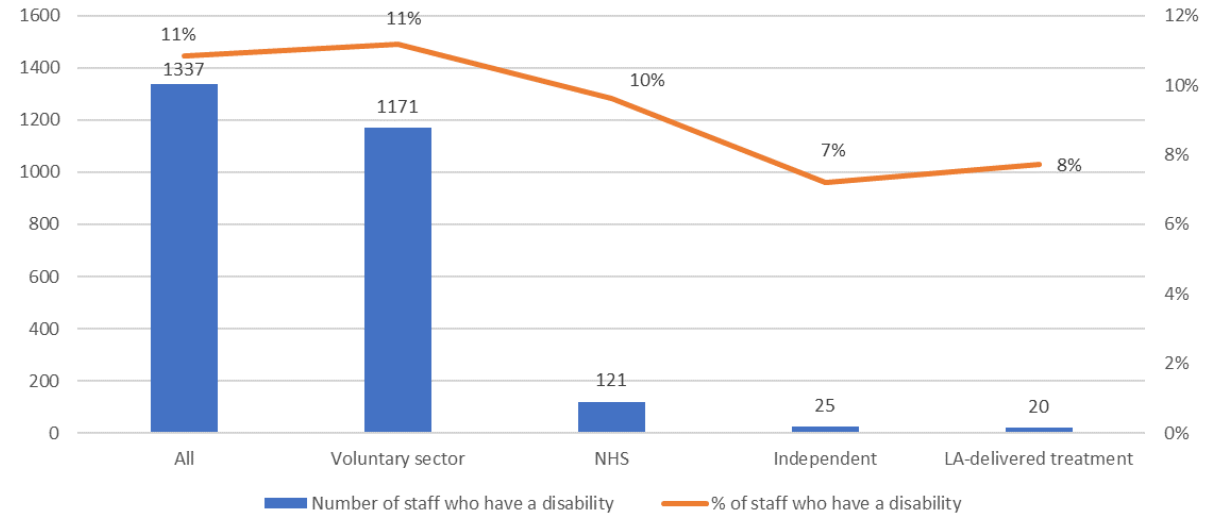
Overall, the treatment provider workforce was predominantly female (69%) ranging from 63% in the independent sector to 75% in LA-delivered treatment. This is higher than the 60% female workforce reported in 2022.

Workforce gender profile

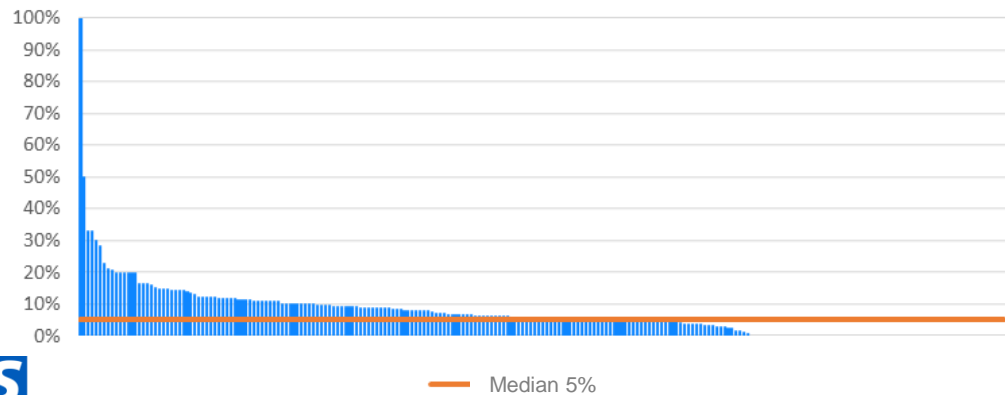


Overall, 11% of the treatment provider workforce had a disability, ranging from 7% in the independent sector to 11% in the voluntary sector.

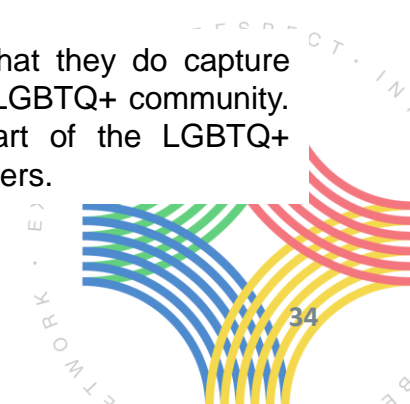
Number and percentage of staff with a disability by sector



Proportion of workforce who consider themselves a part of the LGBTQ+ community



Sixty two percent (235) treatment providers reported that they do capture metrics for staff who consider themselves a part of the LGBTQ+ community. Five percent (median) of staff identified as being part of the LGBTQ+ community, ranging from 0-100% across treatment providers.



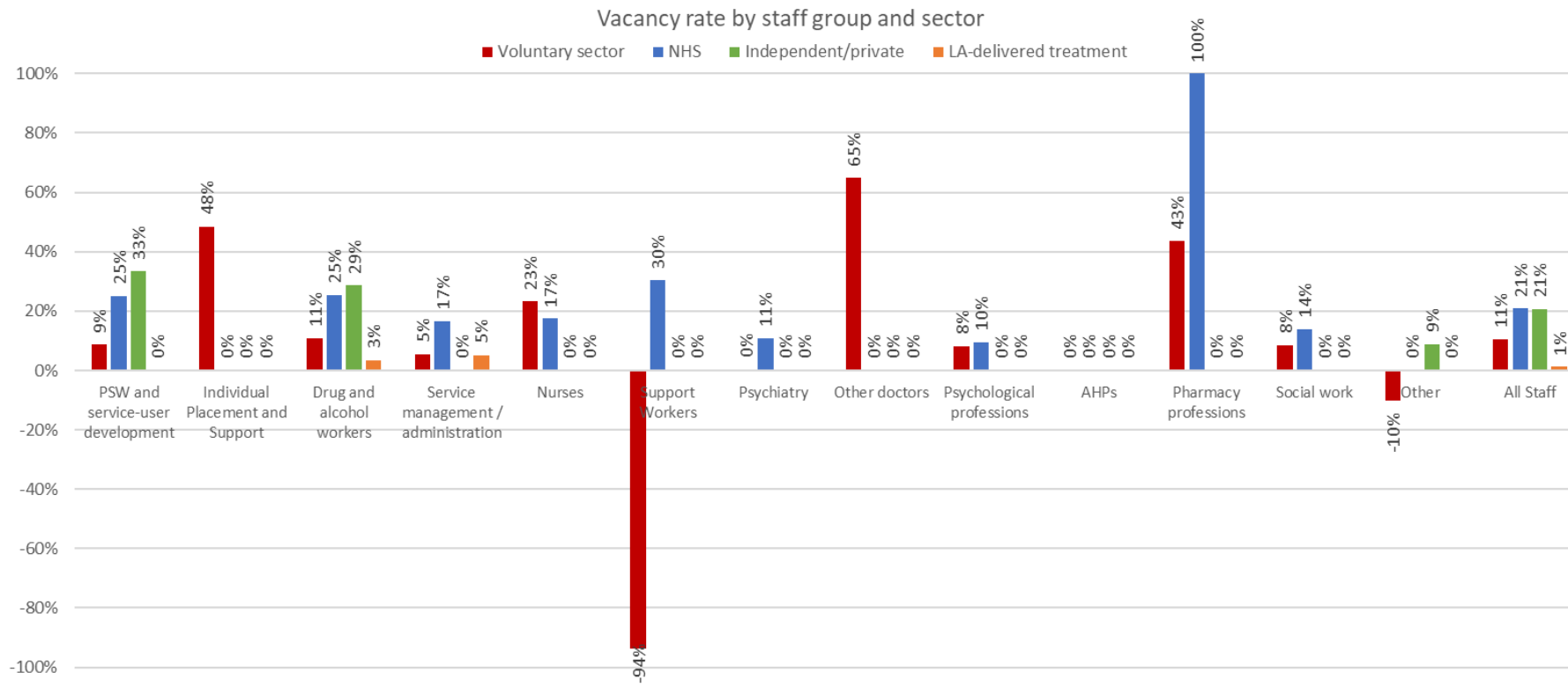
Metrics –vacancy, sickness and turnover

Vacancy rates by treatment provider staff group and sector

Vacancy rates by role reported in the chart should be read in conjunction with the table below which includes the number of vacancies. Vacancy rates are expressed as a percentage of funded establishment (the total WTE funded for the job group, i.e. staff in post and vacancies). Overall, the vacancy rate for treatment providers was 10% with a role profile by sector included below.

For drug and alcohol workers, the largest workforce group, the rates reported by

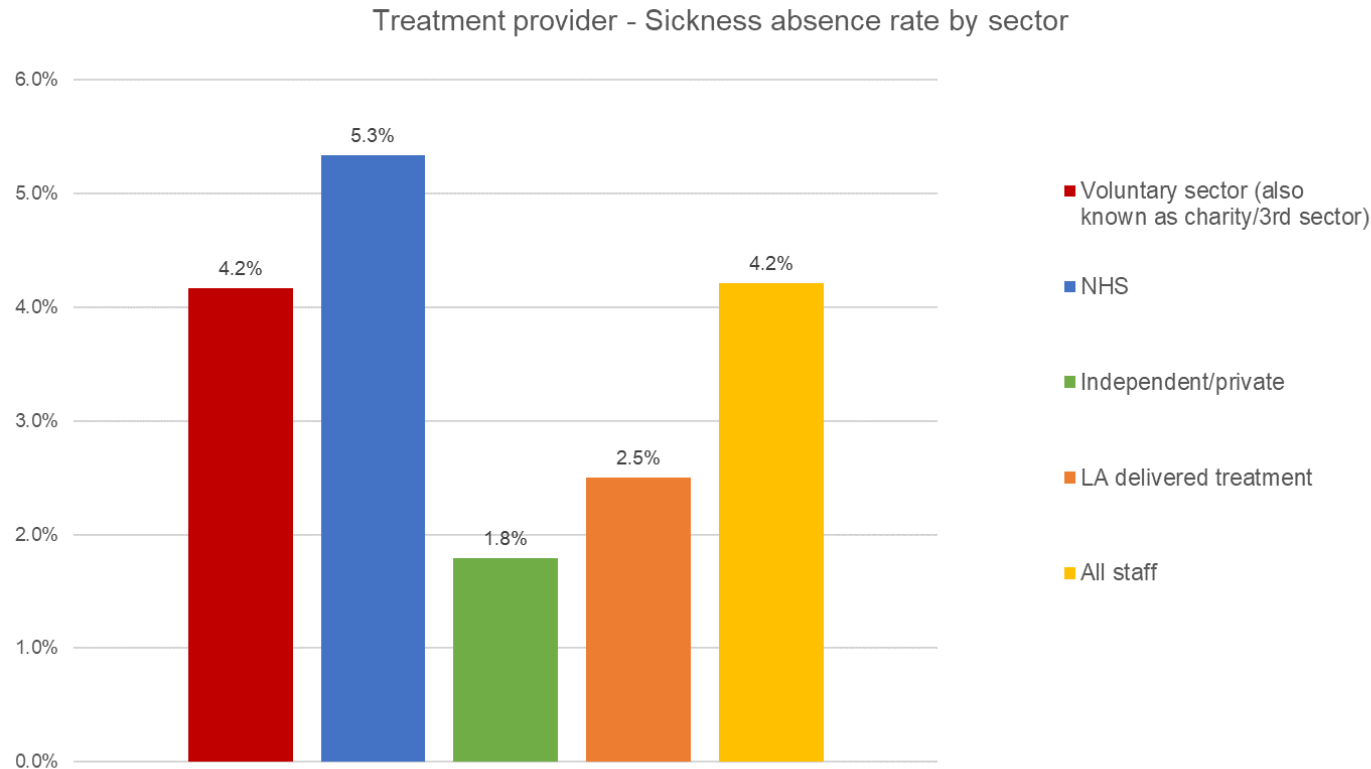
sector varied from 3% in LA-delivered treatment providers to 29% in the independent/private sector but note that these reference a relatively low number of vacancies. The voluntary sector reported a lower rate at 11% (13% 2022) but this represented 453 WTE vacancies. Note the negative bars reflect where providers confirmed they were employing staff above their funded establishment.



	PSW and service-user development	Individual Placement and Support	Drug and alcohol workers	Service management / administration	Nurses	Support Workers	Psychiatry	Other doctors	Psychological professions	AHPs	Pharmacy professions	Social work	Other	All Staff
Voluntary sector	11	35	453	87	136	-34	0	24	7	0	5	2	-4	723
NHS	2	0	46	11	20	3	1	0	1	0	1	2	0	87
Independent/private	3	0	6	0	0	0	0	0	0	0	0	0	1	10
LA-delivered treatment	0	0	12	1	0	0	0	0	0	0	0	1	0	14



Sickness rates by sector - treatment provider



Sickness absence rates were collected at service and sector level, but not at individual role level in the 2023 census.

The NHS reported the highest rate of the four sectors at 5.3% which was above the rate of 4.5% reported in June 2023 by NHS Digital for all staff working in the NHS¹.



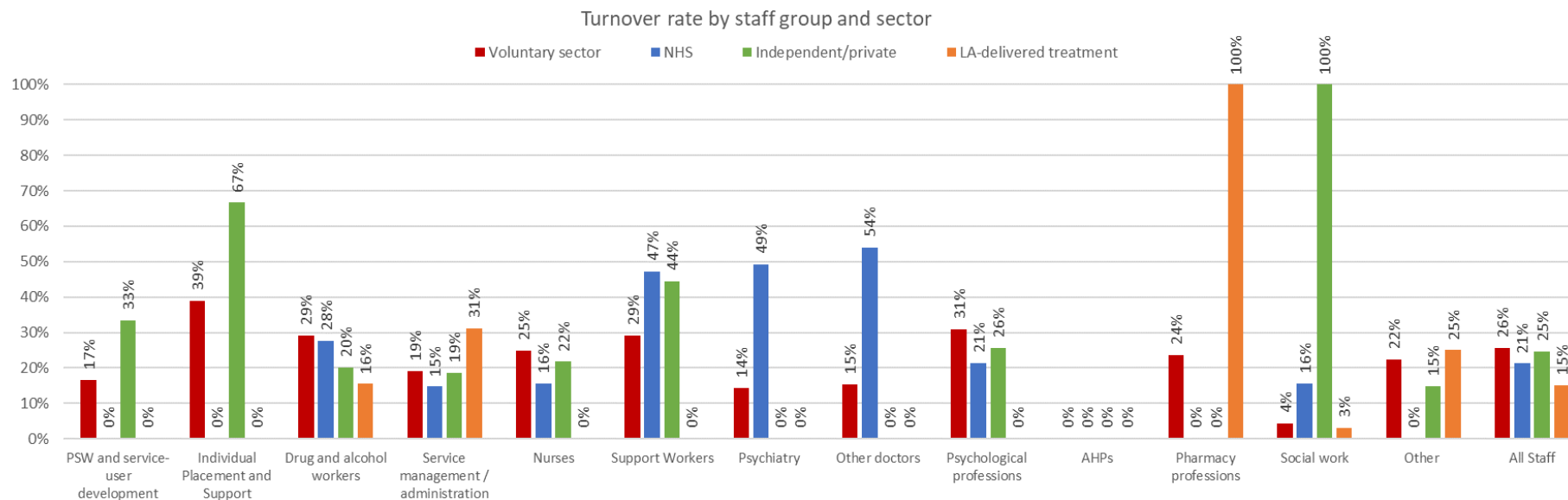
Turnover rates by treatment provider staff group and sector

Turnover rates reported by job role group were erratic with several based on low numbers.

The turnover rate for treatment providers reported for all staff across sectors was 25%, ranging from 15% in LA delivered treatment services to 26% in the voluntary sector.

For the three staff groups with the highest number of staff – drug and alcohol workers, service management / administration and nurses – the rates varied by sector.

For drug and alcohol workers the highest turnover rate was reported by the voluntary sector at 29% (1,169 leavers) compared to 16% (7 leavers) for LA delivered treatment providers. For service and administration staff, LA-delivered treatment services reported the highest rates at 31% (5 leavers) compared to 15% (11 leavers) in the NHS. Nurses had a 16% (22 leavers) turnover in the NHS compared to 25% (117) in the voluntary sector.



Leavers	Voluntary sector	NHS	Independent / private	LA-delivered treatment
PSW and service-user development	21	0	3	0
Individual Placement and Support	23	0	2	0
Drug and alcohol workers	1,169	43	14	7
Service management / administration	347	11	4	5
Nurses	117	22	1	0
Support Workers	33	3	4	0
Psychiatry	12	6	0	0
Other doctors	2	1	0	0
Psychological professions	23	3	5	0
AHPs	0	0	0	0
Pharmacy professions	2	0	0	1
Social work	1	4	4	1
Other	7	0	4	2
All Staff	1,758	93	40	16



Specialist roles



Focus on non-medical prescribers

As reported in 2022, nurses were the largest group of non-medical prescribers (NMPs), both overall and in each of the sectors representing 90% of the qualified NMPs, slightly above the 88% reported in 2022.

Overall, 71% of NMPs were employed in the voluntary sector, 24% in the NHS, 4% in the independent sector and 2% in LA delivered services. This compared to 68% in the voluntary sector, 28% in the NHS and 2% in both the independent and LA delivered treatment services in 2022.

The percentage of NMPs that were actively prescribing in their current role had increased from 82% in 2022 to 88% in 2023. The voluntary sector had the highest proportion of active NMPs (96%) with the independent (75%), NHS (70%) and LA delivered (50%) services all reporting lower rates of active NMPs.

Non-medical prescribers by role and sector															
	All treatment providers			Voluntary sector			NHS			Independent/private			LA-delivered treatment		
	Qualified	Active	% Active	Qualified	Active	% Active	Qualified	Active	% Active	Qualified	Active	% Active	Qualified	Active	% Active
Pharmacist	29	25	86%	20	18	90%	7	5	71%	2	2	100%	0	0	
Nurse	398	350	88%	278	267	96%	98	69	70%	14	10	71%	8	4	50%
Other	17	16	94%	17	16	94%	0	0		0	0		0	0	



Focus on social workers

Within the workforce section, respondents reported 108 WTE registered Social Workers (60 2022). However, in the specialist social worker section there were fewer social workers reported in 2023 (98 headcount) compared to 2022 (154 headcount) and they represented a slightly smaller percentage of the workforce at 0.9% compared to 1.5%. The difference likely reflects the different completion across the two sections of the census.

There was a higher percentage of social worker Assessed and Supported Year in Employment (ASYE) roles in 2023 at 11% compared to 3.6% but this was based on small numbers of staff.

The percentage of the social workers employed in the voluntary sector was in line with 2022 whereas the NHS reported employing a higher proportion of the social workers working in treatment services at 34% in 2023 compared to 25% in 2022. LA-delivered treatment social workers had decreased to 23% of social workers working in treatment services from 34% in 2022.

Social workers by role and sector (headcount)										
	Voluntary sector		NHS		Independent/ private		LA-delivered treatment		All treatment providers	
	Number	% Workforce	Number	% Workforce	Number	% Workforce	Number	% Workforce	Number	% Workforce
Social Worker	38	0.4%	35	2.6%	0	0.0%	25	8.8%	98	0.8%
Social Worker- (ASYE)	8	0.1%	4	0.3%	0	0.0%	1	0.4%	13	0.1%
Social Worker - Think Ahead posts (Students - year 1)	0	0.0%	0	0.0%	4	1.1%	0	0.0%	4	0.0%
Social Worker -Think Ahead posts (Assessed and Supported Year in Employment - year 2)	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	46	0.4%	39	2.9%	4	1.1%	26	9.2%	115	0.9%

Social workers by sector	40%	34%	3%	23%
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Focus on trusted assessors

Services were asked to report trusted assessors working in LA-commissioned drug and alcohol settings with the qualifications, skills, knowledge and experience needed to carry out health and social care assessments, and to formulate plans of care on behalf of adult social care providers¹.

One hundred and sixty six trusted assessors were recorded in the 2023 drug and alcohol workforce census compared to 70 in 2022. Three of the four

sectors reported higher numbers of staff in these roles. The voluntary sector reported 78 trusted assessors compared to 33 in 2022, the NHS reported 43 compared to seven in 2022 and LA delivered treatment service 43 compared to 13 in 2022. Only the independent sector reported fewer staff in a trusted assessor role with two staff in 2023 compared to 17 in 2022.

Trained trusted assessors by sector										
Trusted assessors**	Voluntary sector		NHS		Independent/ private		LA-delivered treatment		All treatment provider staff	
	Headcount	% Workforce	Headcount	% Workforce	Headcount	% Workforce	Headcount	% Workforce	Headcount	% Workforce
How many staff (in scope of this exercise) are trained as Trusted assessors?	78	1%	43	3%	2	1%	43	15%	166	1%



Treatment providers: summary of key findings

The key findings of the drug and alcohol workforce census for treatment providers are detailed below. They include data for submissions from the voluntary sector, the NHS, the independent/private sector and activity relating to treatment provision submitted by local authorities (LA-delivered treatment).

- We received 380 submissions for treatment provider organisations accounting for 12,073 WTE compared to 11,270 in 2022.
- The voluntary sector made up 80% (78% 2022) of the treatment provider workforce with 9,667 WTE, with the NHS the second largest sector at 14% (1,688 WTE) (16% 2022). The independent/private sector and LA-delivered treatment sector account for a smaller proportion of the workforce at 3% each (373 WTE and 345 WTE respectively).
- Drug and alcohol workers made up the largest proportion of the workforce at 50% (47% 2022), with service managers/administrators the next largest group at 24% (23% 2022) of the workforce and nurses 9% (9% 2022).
- The overall vacancy rate was 10%, ranging from 1% (LA-delivered treatment sector) to 21% (NHS & independent/private) for all staff and for the largest staff group, drug and alcohol workers, from 3% (LA delivered treatment) to 29% (independent/private providers).
- 7% of the treatment provider workforce were unpaid/volunteers down from 12% in 2022. There was a lower proportion of staff on bands 1-3 and band 4 and a higher proportion of staff on salary bands 5 and above compared to 2022. However, it remained the case that the majority of the drug and alcohol workers staff group (92%) were band 5 or lower (<£32k), compared to 73% within this salary range for all staff groups.
- Staff in post for less than one year were the largest group overall, with the

voluntary sector reporting the highest rate at 36% (40% 2022). The NHS had the lowest percentage of staff that had been in post for less than a year at 25%.

- Overall, 84%, of staff were on permanent contracts which was in line with 2022, with rates ranging from 77% in LA-delivered treatment services to 92% in the independent/private sector. 72% of staff work full time, up slightly from 69% in 2022.
- The ethnicity of the workforce across all sectors had a lower proportion of Asian or Asian British staff (1%-4%) than the English working age population (10%).
- The age profile was broadly similar across sectors although there were some nuances. LA delivered treatment had a smaller proportion of staff in the 20-29 age range category at 9% which was half that of the voluntary sector at 18%.
- 11% of the workforce reported a disability compared to 10% in 2022.
- Nurses remained the largest group of non-medical prescribers (NMPs), with the majority of NMPs employed in the voluntary sector (71%) followed by the NHS (24%). The percentage of NMPs actively prescribing in their role had increased from 82% in 2022 to 88% in 2023.
- There were fewer social workers reported in 2023 compared to 2022 and they represented a slightly smaller percentage of the workforce at 0.9% compared to 1.5%. There was a higher percentage of social worker ASYE roles in 2023 at 11% compared to 3.6% but this was based on small numbers of staff.

Commissioners (Local Authorities – LAs)

Focus on local authority commissioning staff only

LEROs and treatment providers are excluded from this section

Commissioning workforce composition

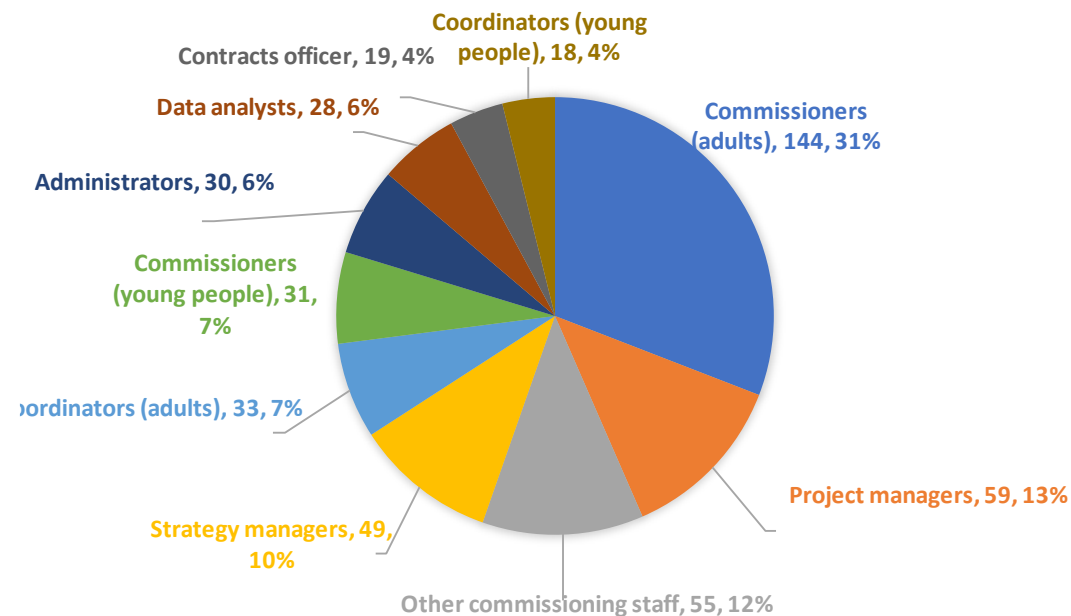
The commissioning workforce reported in the census was 466 WTE (398 2022). It should be recognised that participants in 2023 were not identical to 2022.

Nearly half of the commissioning workforce (49%) was reported in commissioner and coordinator roles. The commissioning and coordination of adult services comprised 38% (43% in 2022) of the workforce with 11% (10% in 2022) attributed to the commissioning and coordination of services for young people.

Data analysts, project managers and strategy managers made up 30% of the workforce compared to 22% in 2022, whilst 6% (in line with 2022) were reported as administrators and 4% (5% 2002) as contracts officers. The percentage of staff recorded 'other' had fallen from 14% to 12%.

Commissioning Workforce by role		
LA Commissioning roles	WTE	%
Administrators	30	6%
Commissioners (adults)	144	31%
Coordinators (adults)	33	7%
Commissioners (young people)	31	7%
Coordinators (young people)	18	4%
Data analysts	28	6%
Project managers	59	13%
Strategy managers	49	11%
Contracts officer	19	4%
Other commissioning staff	55	12%
Total	466	100%

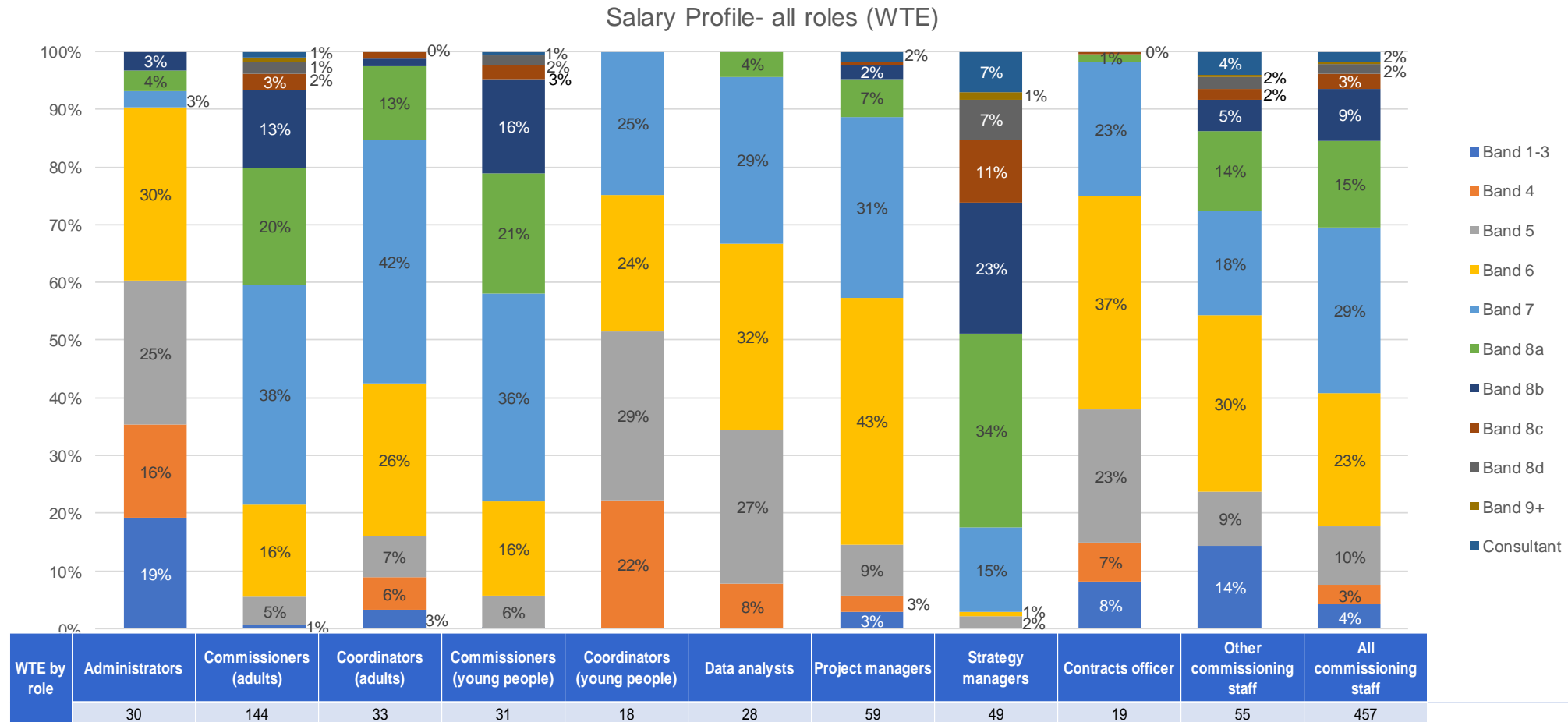
Local authority commissioning staff skill mix (WTE)



Salary profile for commissioning roles

As reported in 2022 there appears to be a wide range of salaries associated with apparently similar roles.

Whilst seniority may explain the ranges this may be an area for future review to determine the utility of collecting this data in its current format.



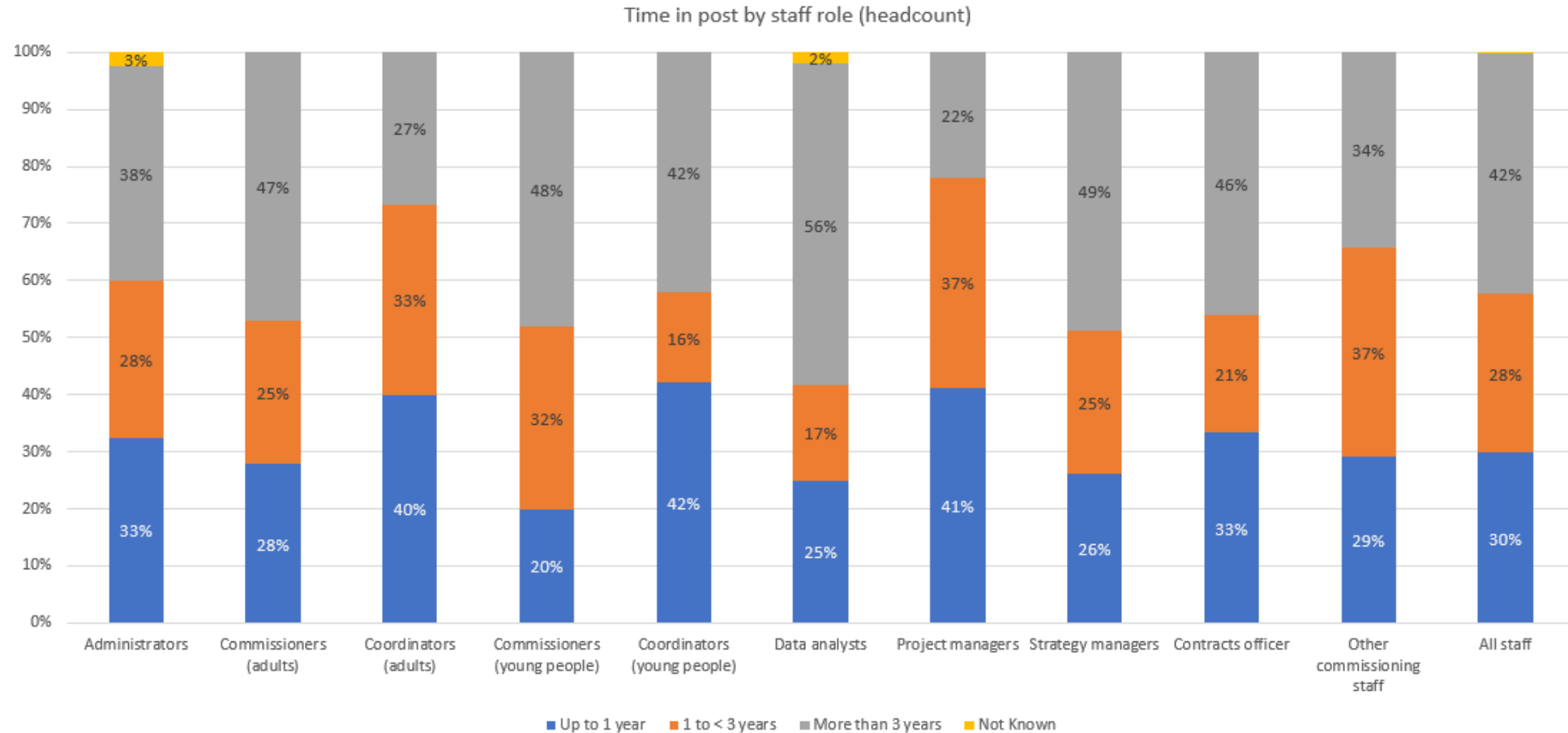
Time in post by commissioning staff group

Overall, 30% of commissioning staff had been in post for less than a year, 28% for between 1 < 3 years and 42% three years or more. This compares with 34% of treatment provider staff in post for three years or more.

At individual role level, as noted in 2022 there was wide variation in the time

staff had been in post. Data analysts continued to report a high percentage of staff in post for three years or more at 56% compared to 53% in 2022.

Coordinators for young people had the highest percentage of staff in post for less than a year at 42%.



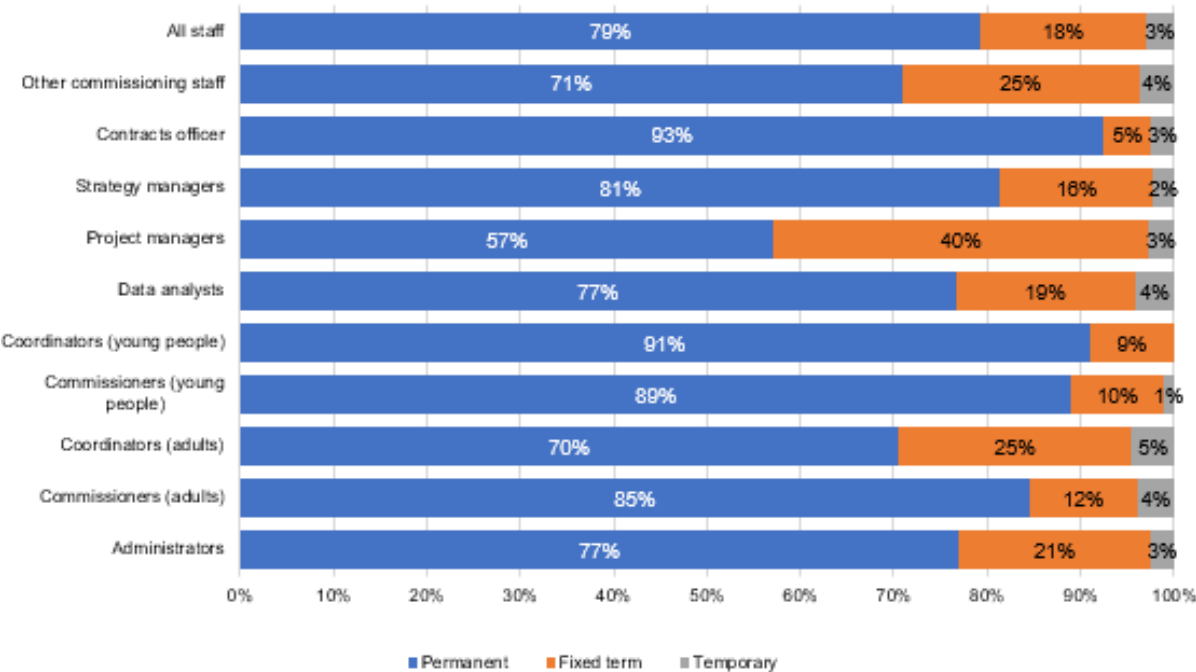
Contract type and contract hours by commissioning staff group

Seventy-nine percent of staff were employed on permanent contracts with rates ranging from 57% to 93%. The role that had the lowest rate of staff on permanent contracts was project managers (57%). For this role and across all commissioning staff groups, staff not on permanent contracts had fixed term contracts with low numbers of temporary contracts reported.

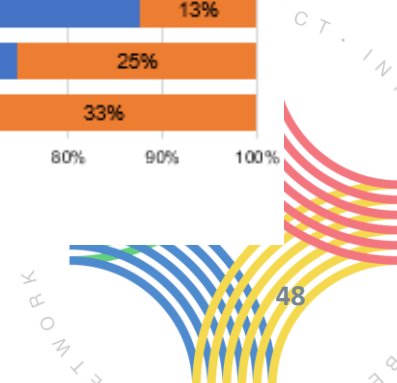
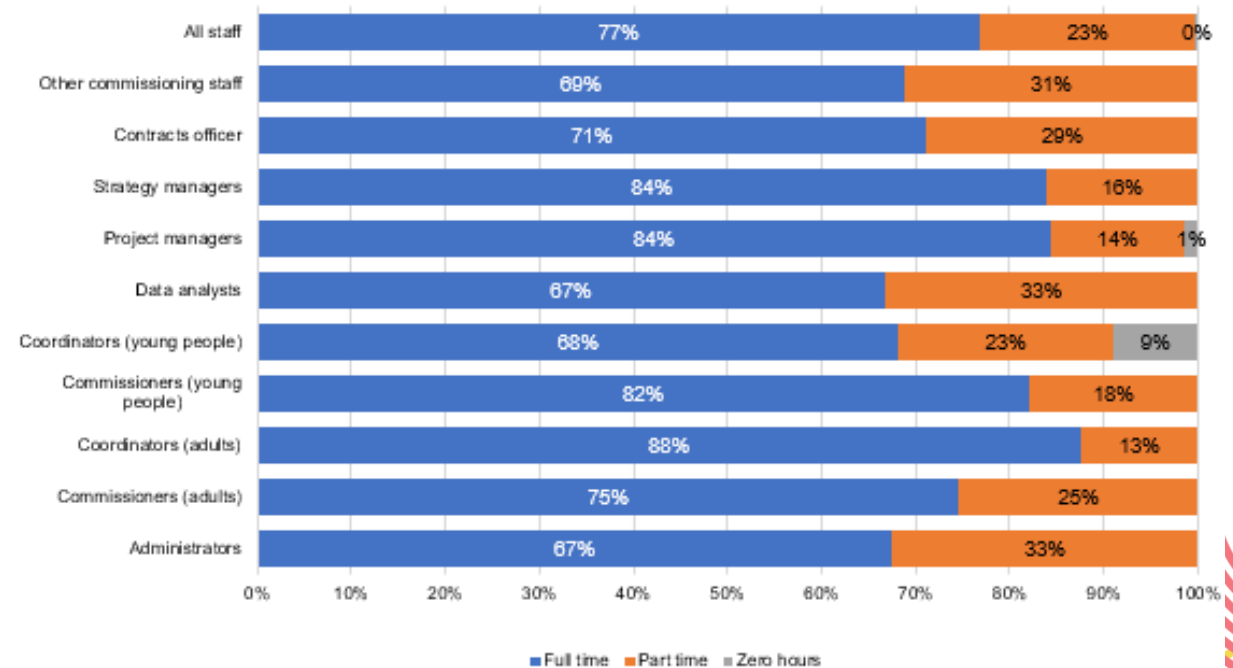
Seventy-seven percent of commissioning staff were on full time contracts ranging from 67% for data analysts and administrators and 88% for coordinators (adults). A similar profile, with slightly narrower range was reported in 2022, ranging from 66% to 84% of staff on full time contracts.

As reported in 2022 zero hour contracts are not widely used for these commissioning roles, with just two job roles reporting 1% and 9% respectively of staff on these contracts.

Contract type by staff group



Contract hours by staff group



Workforce metrics for commissioning staff

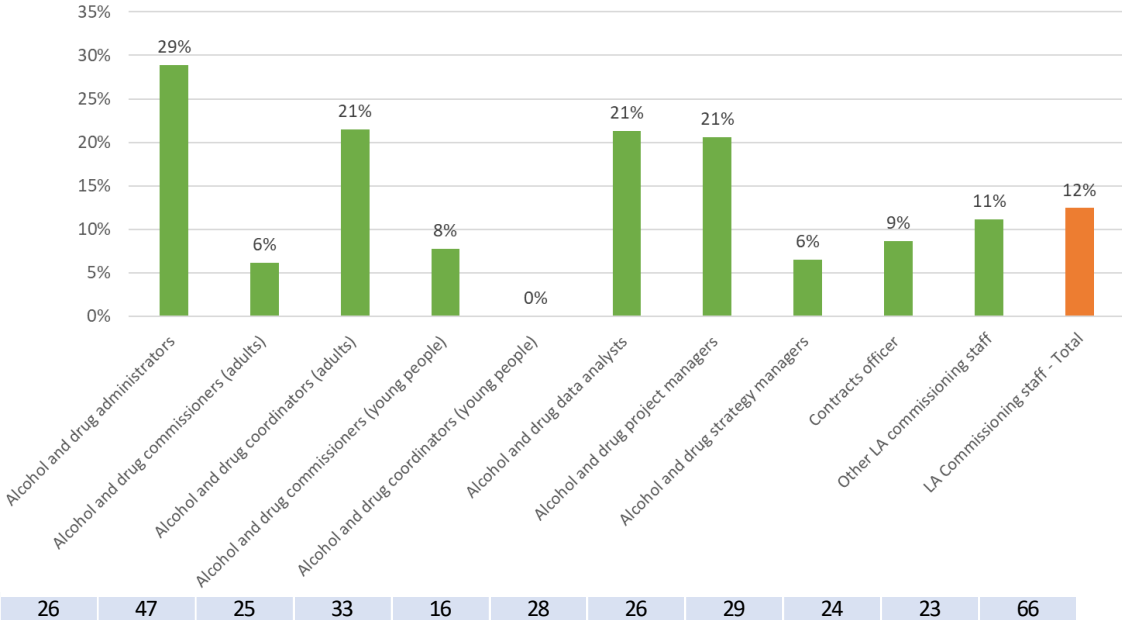
The commissioning workforce reported a vacancy rate of 12% in 2023, a decrease from 14% in 2022. This was slightly above the 10% reported for delivery staff (treatment providers and LEROs). Rates ranged between 0% for alcohol and drug coordinators (young people) to 29% for administrators. The largest workforce group, alcohol and drug commissioner (adults), reported a 6% vacancy rate.

Turnover rates for commissioning staff had increased from 11% in 2022 to 22% in 2023. Rates ranged from 0% for alcohol and drug coordinators (young people) to 43% for administrators. The largest workforce group, alcohol and drug commissioner (adults), reported a 25% turnover rate.

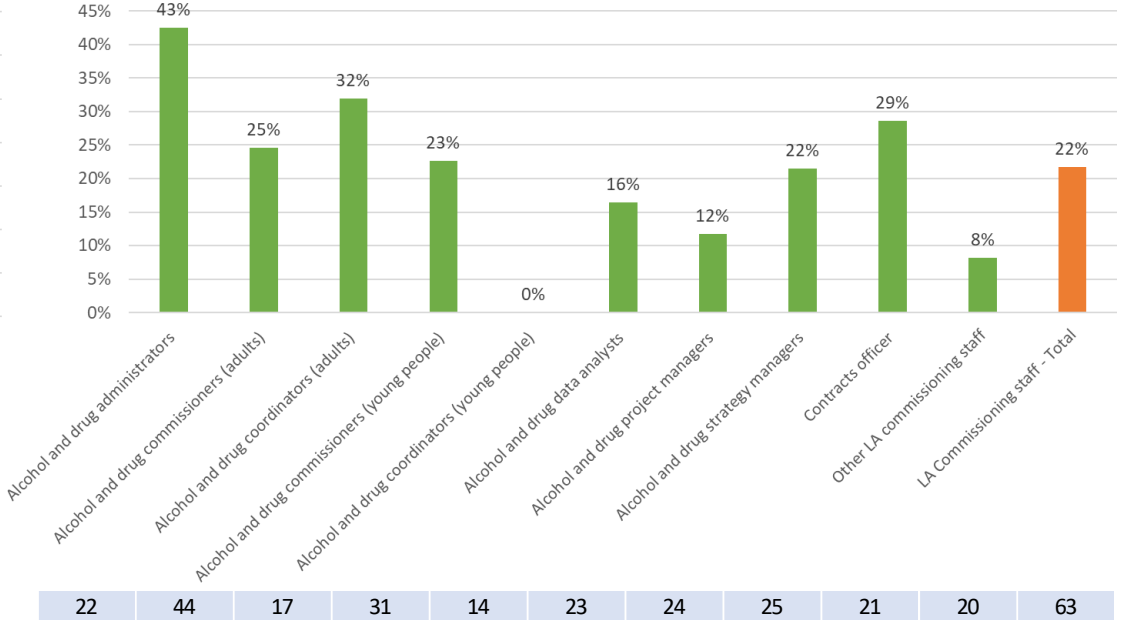
Commissioning staff reported a 1% staff sickness rate, lower than 2022 (2%). This was lower than the 4% reported for treatment providers.

The number of submissions including vacancy and turnover data is included below each chart. Overall, 52% of submissions included vacancy data and 49% of submissions included turnover data for commissioning staff.

Vacancy rate by role - Commissioning



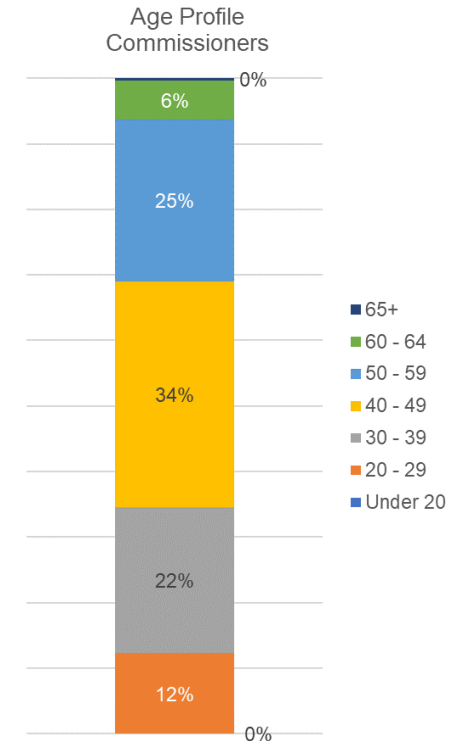
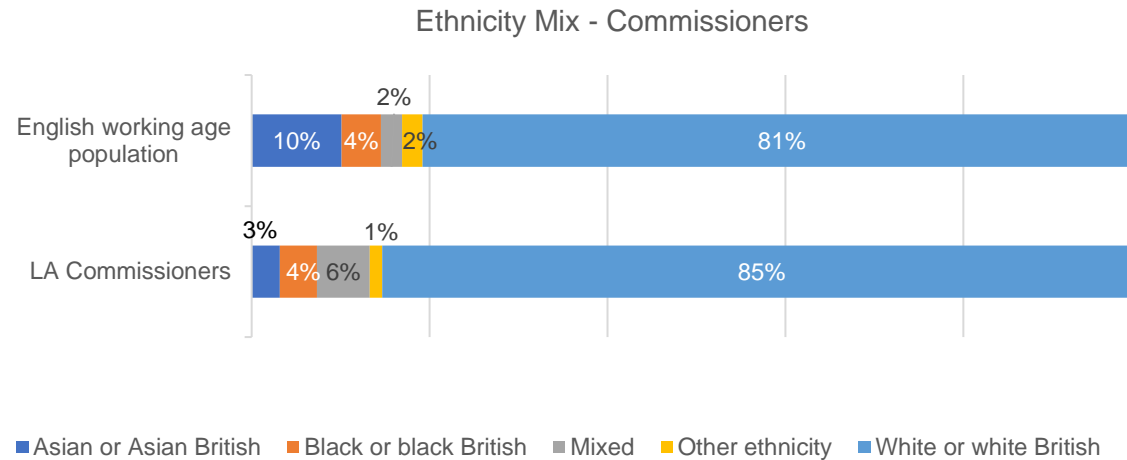
Turnover rate by role - Commissioning



Ethnicity and age profile – commissioners

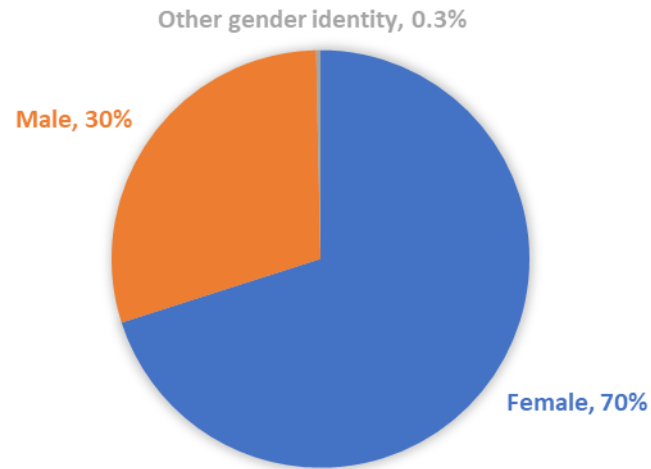
Eight five percent of the commissioning workforce was white or white British compared to 81% of the working age population. Black or black British staff were represented in the workforce in line with the English working age population whereas Asian or Asian British staff were underrepresented in the workforce at 4% compared to 10% in the working age population.

Most commissioning staff (56%) were aged between 30 and 49 with 31% aged 50 or over.



Disability, gender and sexual orientation profile

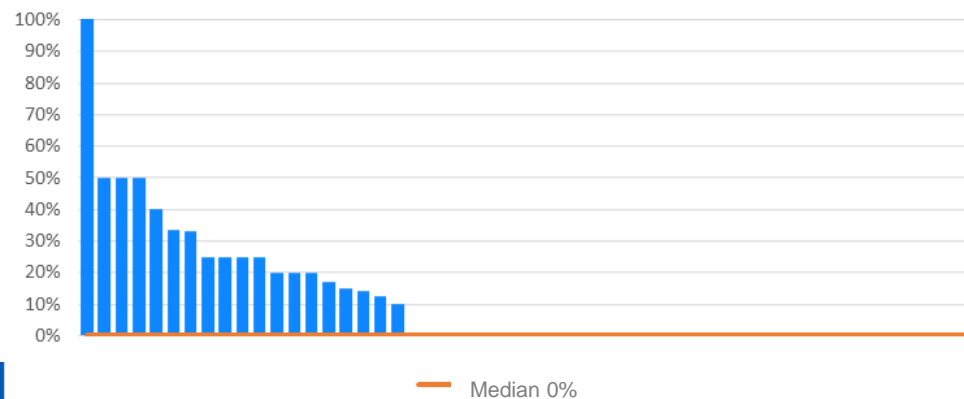
Workforce gender profile



Seventy percent of the LA commissioning workforce was female, which was in line with the 69% reported for treatment providers and higher than the 56% reported for LEROs.

Five percent of the commissioning workforce had a disability, lower than the rates reported for treatment providers (11%) and LEROs (5%).

Proportion of workforce who consider themselves a part of the LGBTQ+ community



Forty one percent (52) commissioners reported that they captured metrics for staff who consider themselves a part of the LGBTQ+ community. Commissioning staff who identified as being part of the LGBTQ+ community ranged from 0-100% (median 0%).



Commissioning: summary of key findings

Local authorities made 128 commissioning workforce submissions which compared with 129 in 2022*. The key findings for commissioning staff are summarised below:

- Local authorities reported 466 WTE (398 2022) commissioning staff across ten roles, the largest of which was 'commissioners (adult)' at 31% (33% 2022) of the workforce. The remaining staff were reported across the nine other roles with between 4% and 13% of the workforce in each. Eleven percent of staff were in commissioner and coordinator roles for young people this year, in line with 2022.
- As in 2022, the salary reported for each role varied considerably, highlighting a diversity across apparently similar roles. To some extent this will reflect the seniority of staff but may also reflect different banding of staff across authorities.
- Overall, 77% of commissioning staff were full time, in line with 2022 with 79% (83% 2022) on permanent contracts and 30% (26% 2022) in post for less than a year. Project manager roles had the lowest percentage of staff on permanent contracts (57%), 1% of staff on zero hour contracts and 41% of staff in post for less than a year.

- Coordinators for young people had the highest percentage of staff in post for less than a year (42%, ten of the 22 roles reported).
- The commissioning workforce reported a vacancy rate 12% in 2023, a decrease from 14% in 2022. This was slightly above the 10% reported for treatment provider staff. Turnover rates had increased from 11% in 2022 to 22% in 2023. Sickness absence remained low at 1%, in line with the 2% reported in 2022.
- The ethnicity profile of the commissioning workforce indicated that Asian or Asian British people were underrepresented at 3% compared to 10% in the English working age population.
- The age profile of staff in this sector showed 0% of staff under 20 and 31% were aged 50 or over.

**Fifteen of the 2022 submissions included information relating to LA delivered treatment provider staff as well as the commissioning workforce. Therefore 2022 includes LA delivered treatment provider staff in the metric and demographic analysis*

Lived experience recovery organisations (LEROs)

Focus on lived experience recovery organisations only

Commissioning staff and treatment providers are excluded from this section

Workforce composition - LEROs

Lived experience recovery organisations (LEROs) reported 469 whole time equivalent (WTE) staff in total, higher than the 184 included in the 2022 census. An increase was expected due to the number of submissions rising from 23 (in 2022) to 30 in 2023. Year on year comparisons should be viewed in the context of this wider participation.

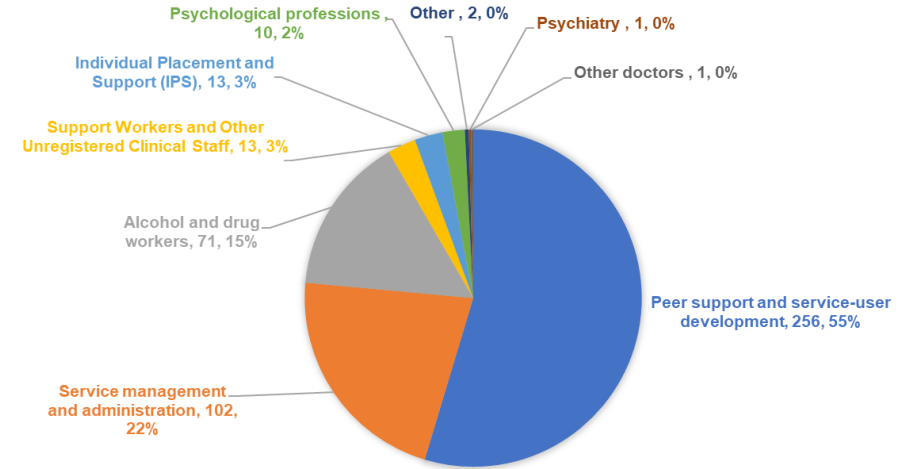
Peer support and service user development roles made up the biggest proportion of the LERO workforce at 55% which compares to 8% of treatment provider staff in these roles. The change from 2022 to 2023 likely reflects increased participation of LEROs (256 2023, 69 2022).

Drug and alcohol workers were the second largest workforce group recorded by LEROs at 15% of the workforce, lower than the 27% reported in 2022.

Service management and administration accounted for 22% of the LERO workforce, an increase on the 17% reported in 2022.

Within LEROs 29% of the workforce were unpaid/volunteers and 79% were band 4 or below (<£26.7k). This was a higher proportion of unpaid/volunteers compared to 2022 (17%) but in line with the percentage band 4 or below.

Workforce profile by staff group



LEROs by salary and role

	Peer support and service-user development		Individual Placement and Support (IPS)		Alcohol and drug workers		Service management and administration		Support Workers and Other Unregistered Clinical Staff		Psychiatry		Other doctors		Psychological professions		Other		Total	
	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%
Unpaid/Volunteer (WTE)	109	42%	0	0%	6	9%	10	9%	0	0%	1	100%	1	100%	8	80%	1	57%	136	29%
Band 1-3 (WTE)	86	33%	0	0%	29	40%	13	13%	4	30%	0	0%	0	0%	0	0%	1	43%	132	28%
Band 4 (WTE)	39	15%	1	8%	29	41%	17	16%	8	63%	0	0%	0	0%	1	10%	0	0%	95	20%
Band 5 (WTE)	19	7%	5	42%	7	10%	37	36%	1	8%	0	0%	0	0%	1	10%	0	0%	70	15%
Band 6 (WTE)	4	1%	5	36%	0	0%	10	9%	0	0%	0	0%	0	0%	0	0%	0	0%	18	4%
Band 7 (WTE)	0	0%	2	14%	0	0%	7	7%	0	0%	0	0%	0	0%	0	0%	0	0%	9	2%
Band 8a (WTE)	0	0%	0	0%	0	0%	6	6%	0	0%	0	0%	0	0%	0	0%	0	0%	6	1%
Band 8b (WTE)	0	0%	0	0%	0	0%	2	2%	0	0%	0	0%	0	0%	0	0%	0	0%	2	0%
Band 8c (WTE)	0	0%	0	0%	0	0%	1	1%	0	0%	0	0%	0	0%	0	0%	0	0%	1	0%
Band 8d (WTE)	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Band 9+ (WTE)	0	0%	0	0%	0	0%	1	1%	0	0%	0	0%	0	0%	0	0%	0	0%	1	0%
Consultant (WTE)	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Total	256		13		71		102		13		1		1		10		2		469	

Time in post, contract type and contract hours by staff group - LEROs

LEROs by staff group and time in post				
	Up to 1 year	1 to < 3 years	More than 3 years	Not Known
Peer support and service-user development	66%	53%	26%	100%
Individual Placement and Support (IPS)	4%	2%	1%	0%
Alcohol and drug workers	10%	16%	5%	0%
Service management and administration	15%	21%	59%	0%
Support Workers and Other Unregistered Clinical Staff	2%	2%	7%	0%
Psychiatry	0%	1%	0%	0%
Other doctors	0%	1%	0%	0%
Psychological professions	1%	4%	0%	0%
Other	1%	0%	2%	0%
All staff	47%	34%	19%	1%

LEROs by staff group and contract type			
Contract type	Permanent	Fixed term	Temporary
Peer support and service-user development	32%	50%	18%
Individual Placement and Support (IPS)	94%	6%	0%
Alcohol and drug workers	50%	44%	6%
Service management and administration	66%	32%	2%
Support Workers and Other Unregistered Clinical Staff	92%	8%	0%
Psychiatry	0%	0%	100%
Other doctors	100%	0%	0%
Psychological professions	30%	60%	10%
Other	0%	25%	75%
All staff	46%	42%	12%

Overall, 47% of the LERO workforce have been in post for less than a year compared to 34% in 2022. At individual role level, 5% of drug and alcohol workers were reported in post for more than three years compared to 2022 where no staff were reported in post for more than three years in this role.

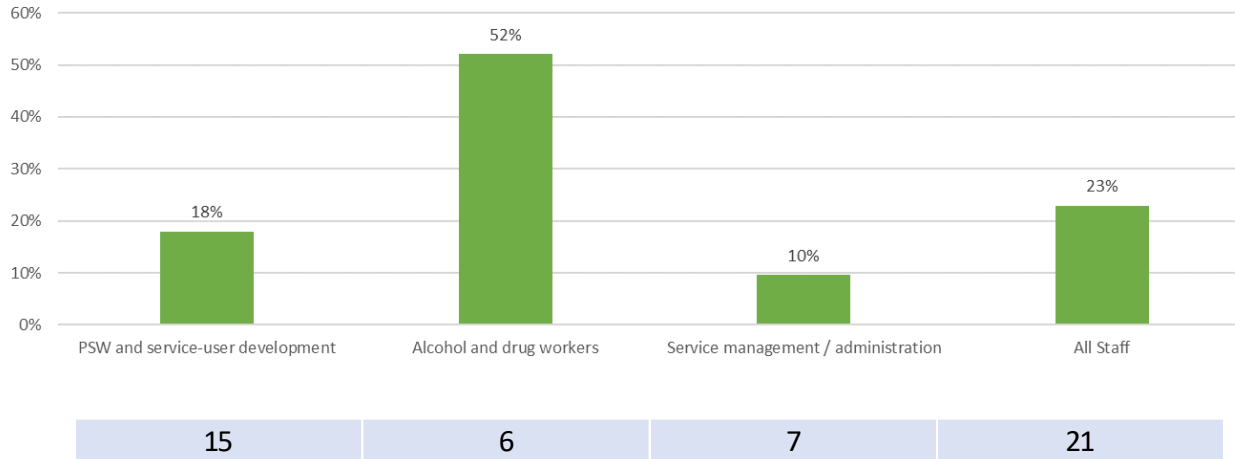
Forty six percent of LERO staff were on permanent contracts compared to 42% in 2022 but this was below the 84% reported by treatment providers. The percentage of staff on temporary contracts had fallen to 12% from 17%, with rates of fixed term contracts remaining stable year on year.

Forty nine percent of LERO staff worked full time, lower than the 57% reported in 2022. Zero hour contracts had increased from 4% in 2022 to 16% in 2023.

LEROs by staff group and contract hours			
Contract hours	Full time	Part time	Zero hours
Peer support and service-user development	39%	35%	26%
Individual Placement and Support (IPS)	80%	20%	0%
Alcohol and drug workers	56%	38%	6%
Service management and administration	71%	28%	1%
Support Workers and Other Unregistered Clinical Staff	38%	62%	0%
Psychiatry	0%	100%	0%
Other doctors	0%	100%	0%
Psychological professions	20%	70%	10%
Other	0%	50%	50%
All staff	49%	35%	16%

Workforce metrics - LEROs

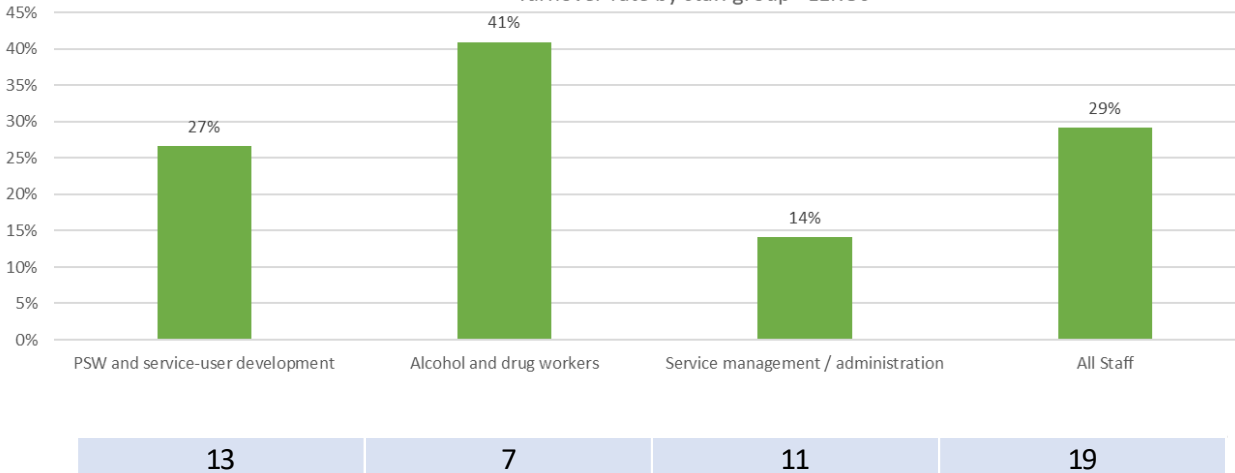
Vacancy rate by staff group - LEROs



LEROs reported an overall vacancy rate of 23% compared to the 10% vacancy rate reported by treatment providers.

The number of submissions including vacancy data is included below the charts. Overall, 70% of submissions included vacancy data reporting 47 WTE vacancies.

Turnover rate by staff group - LEROs



An overall turnover rate of 29% was above the 8% reported in 2022 and higher than the 25% reported by treatment providers in 2023.

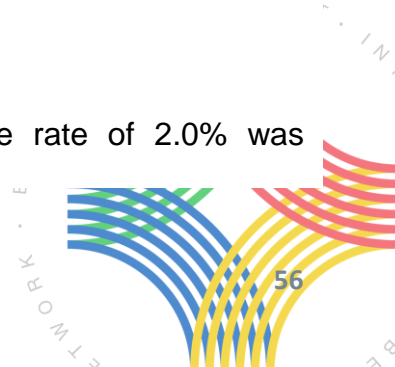
For individual roles, the highest number of leavers were reported for peer support and service user development roles (35 WTE, 54%) and drug and alcohol workers (10.4 WTE, 16%).

The number of submissions including turnover data is included below the charts. 63% of submissions included turnover data for LEROs.

For LEROs, an all staff sickness absence rate of 2.0% was reported.



*LERO staff groups with less than 5 submissions have been excluded from these charts but have been included in the 'All staff' category for LEROs.

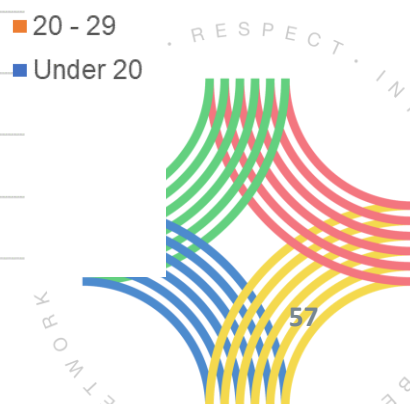
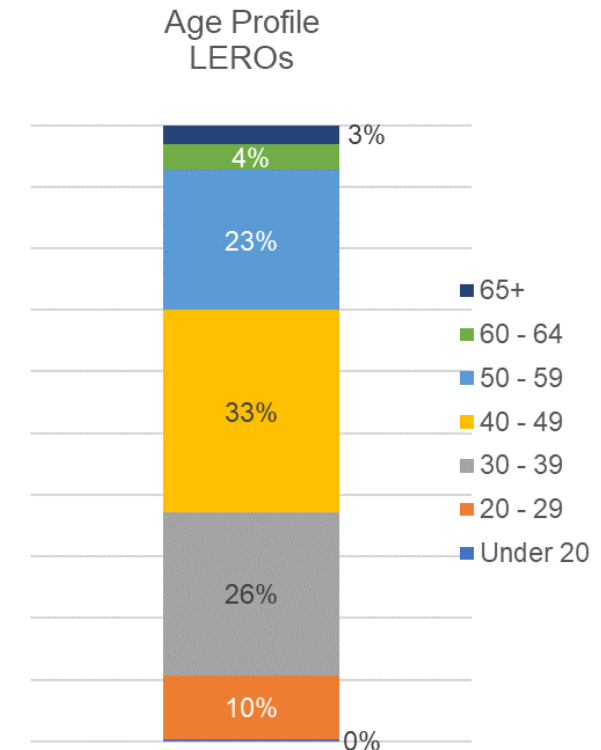
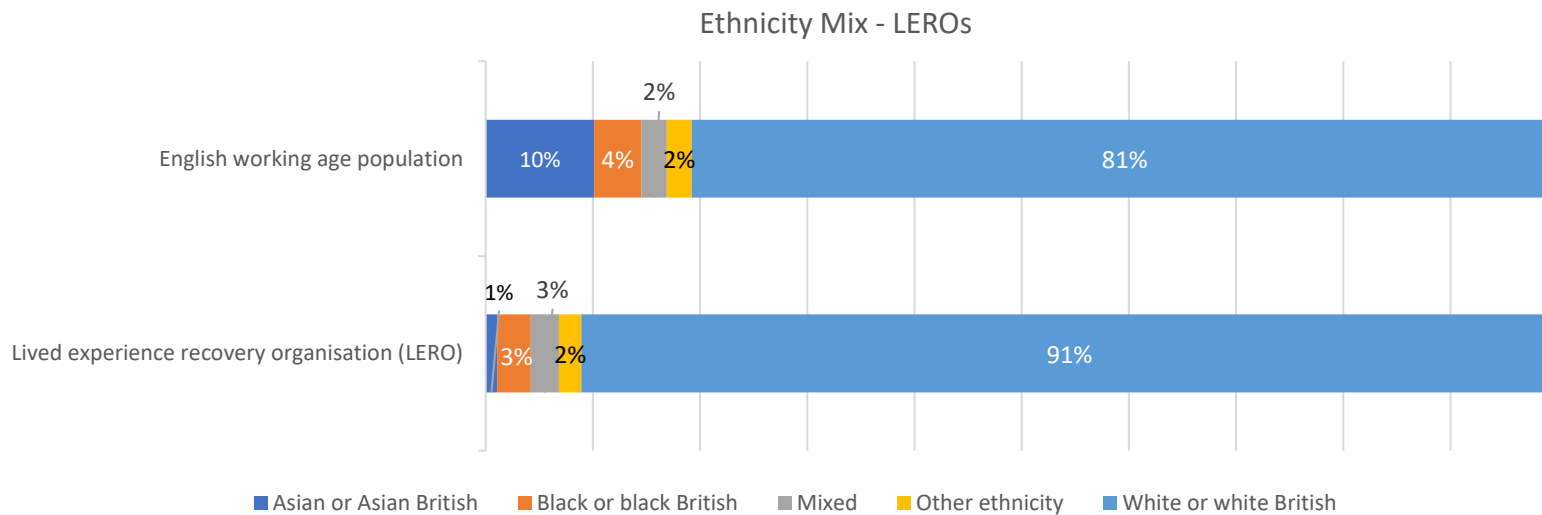


Demographic profile - LEROs

Ninety one percent of the LERO workforce was white or white British compared to 81% of the working age population. People with mixed and other ethnicity and black or black British people were represented in the workforce at the same or similar rate as the wider population, whereas Asian or Asian British staff were 2% of the workforce compared to 10% of the English working age population.

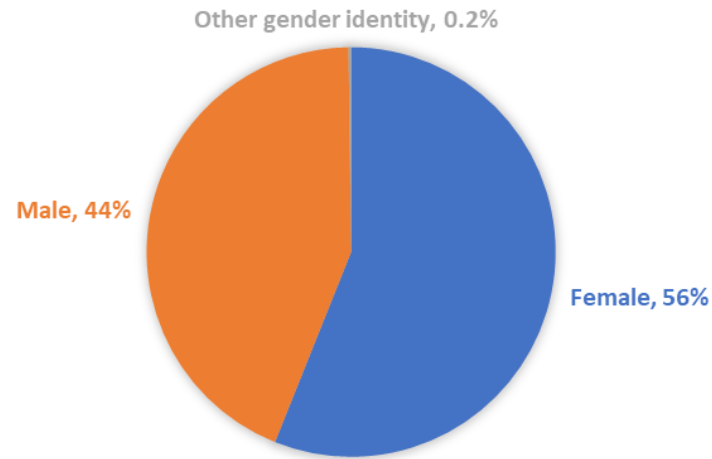
Compared to 2022, the diversity of the workforce appears to have reduced, yet the impact of wider participation from LEROs this year should be noted.

Thirty percent of the LERO workforce were aged 50 or over, in line with 2022. Staff aged 20 to 29 had increased to 10% of the workforce (5% in 2022).



Disability, gender and sexual orientation profile

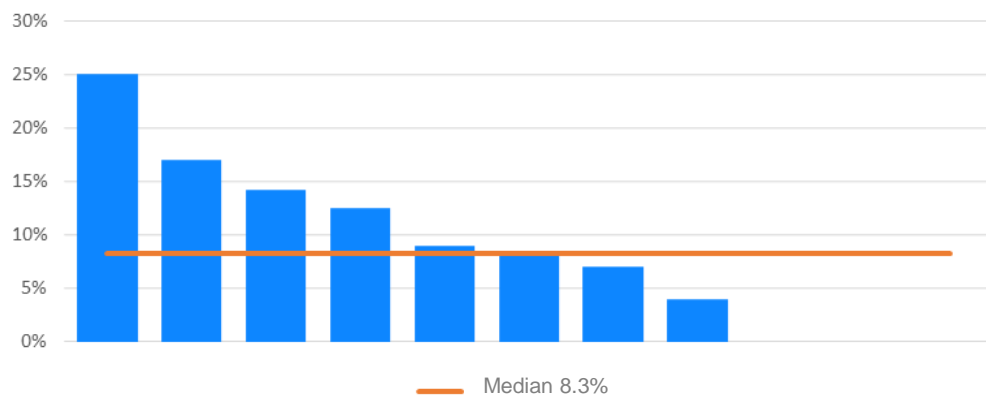
Workforce gender profile



Fifty six percent of the LERO workforce was female, which was lower than the 69% reported for treatment providers but higher than the 45% reported by LEROs in 2022.

Five percent of the workforce had a disability, however, 38% of the responses were 'unknown' so this should be considered when interpreting this information.

Proportion of workforce who consider themselves a part of the LGBTQ+ community



Thirty seven percent (11) of LEROs reported that they do capture metrics for staff who consider themselves a part of the LGBTQ+ community. A median rate of 8.3% of LERO staff identified as being part of the LGBTQ+ community, ranging from 0-25% across LEROs.



LEROs: summary of key findings

Lived experience recovery organisations (LEROs) made 30 (23 2022) submissions from 26 local authority areas. The analysis within this section should be viewed with some caution but provides a broad overview of the workforce in these organisations. Where growth is seen, it should be considered in conjunction with the increase in participation and thereby higher submission numbers received from this cohort.

The key findings for LEROs are noted below:

- LEROs reported 469 WTE compared to 184 in 2022 with peer support and service user development roles the largest at 256 WTE, 55% (45% 2022) of the workforce. The wider participation of LEROs this year will have impacted the increase in WTE reported.
- Unpaid/volunteer roles accounted for 29% of the LERO workforce up from 17% in 2022 and 77% were band 4 (<£26.7k) or below, in line with 2022. This compares with 7% of treatment provider roles being unpaid/volunteers and 42% at band 4 and below.
- LEROs reported 47% of staff in post for less than a year, an increase compared to 2022 (34%) with 46% (42% 2022) on permanent contracts. The remaining staff were on temporary (12% 2023, 17% 2022) and fixed term (42% 2023, 42% 2022) contracts.
- 49% of LERO staff were full time compared to 57% in 2022, which compared to 72% for treatment providers.
- LEROs reported a vacancy rate of 23% (47 WTE vacancies), a sickness rate

of 2% and a 29% (66 WTE leavers) turnover rate.

- There was an underrepresentation of Asian / Asian British individuals in the workforce compared to the English working age population. This was consistent across the treatment provider and commissioning workforces.
- 63% of the workforce was aged 40 or over compared to 75% in 2022. This was largely due to a reduction in the percentage of staff aged 40-49 from 44% in 2022 to 33% in 2023
- Within LEROs, 56% were female, below the 69% reported for treatment providers but an increase compared to 45% in 2022.

Appendices



Appendix 1

Staff group breakdown by role

Includes all delivery and commissioning roles across all sectors:

Treatment providers (Voluntary / NHS / Independent / LA delivered treatment)

Lived experience recovery organisations (LEROs)

Commissioners (Local Authorities – LAs)

Please note: Appendices include WTE data for 2022 and 2023, this should be interpreted in the context that the cohort of providers was not identical in both censuses and that LERO participation rates were higher in 2023 than in 2022. See the limitations noted on page 11 for more details.

Drug and alcohol workers

Drug and Alcohol Workers	2022		2023									
	% Total Workforce	*Total WTE	% Total Workforce	**Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Criminal justice alcohol and drug workers	5.1%	580	5.3%	664	2.3	46%	0.0%	39%	19%	90%	14%	1%
Young peoples' alcohol and drug treatment workers	3.3%	374	4.6%	570	2.0	42%	0.7%	35%	31%	91%	18%	1%
Young peoples' alcohol and drug early intervention and prevention workers	0.6%	74	0.5%	58	0.2	28%	0%	40%	23%	75%	20%	4%
Adult early intervention alcohol and drug worker including Identification and Brief Advice (IBA) roles	0.7%	78	1.0%	119	0.4	45%	0%	42%	28%	91%	21%	2%
Outreach alcohol and drug workers	1.6%	187	2.3%	285	1.0	44%	0%	43%	17%	85%	10%	1%
Harm reduction alcohol and drug workers	1.4%	163	3.4%	424	1.5	55%	0%	38%	32%	91%	18%	3%
Alcohol and drug specific housing support worker	0.6%	71	1.2%	147	0.5	67%	0%	40%	27%	77%	22%	3%
Alcohol and drug specific education, training & employment (ETE) worker	0.4%	40	0.4%	45	0.2	24%	0%	41%	31%	96%	26%	0%
Co-occurring mental health and alcohol and drug workers	0.4%	51	0.7%	86	0.3	24%	0%	43%	22%	82%	16%	0%
Specialist homelessness/rough sleeping alcohol and drug workers	1.7%	193	2.1%	263	0.9	50%	0%	46%	13%	72%	9%	3%
Family/parental alcohol and drug workers	1.7%	194	1.9%	243	0.8	39%	0%	34%	22%	92%	21%	2%
Other alcohol and drug workers	11.6%	1,330	25.3%	3,167	10.9	45%	0.2%	34%	27%	91%	18%	4%
All staff	47.5%	5,443	48.6%	6,090	20.9	45%	0.2%	38%	25%	90%	17%	2.8%

* Total WTE for 2022 includes drug and alcohol workers who were not disaggregated by role, therefore the total will not equal the sum of the parts.

** Total WTE for 2023 includes 19 WTE listed in treatment provider submissions who were not disaggregated by role, therefore the total will not equal the sum of the parts.

Service managers

Service managers	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Alcohol and Drug Service Manager / Team Leader	11.5%	1,312	12.5%	1,561	5.4	3%	11%	24%	39%	93%	12%	0.3%
Volunteer Coordinators	0.7%	78	0.7%	83	0.3	24%	0%	27%	41%	89%	27%	6%
Administrative - Manager / Administrator	6.0%	691	6.1%	769	2.6	79%	0%	33%	35%	92%	31%	2%
Data Manager / Analysts / Administrator	2.7%	309	2.0%	249	0.9	53%	1%	26%	34%	89%	24%	1%
Other service management and administration staff	2.0%	225	2.3%	288	1.0	0%	0%	0%	38%	84%	27%	6%
All staff	22.8%	2,615	23.6%	2,951	10.1	32%	7%	27%	37%	92%	19%	1%

* Total WTE for 2023 includes 1.8 WTE listed in treatment provider submissions who were not disaggregated by role, therefore the total will not equal the sum of the parts.

Pharmacy roles

Pharmacy roles	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Pharmacist	0.2%	21	0.1%	18	0.1	6%	72%	18%	64%	91%	23%	5%
Pharmacist - Pre-registration		0		0	0.0							
Pharmacy Technician - Accredited checking technician	0.0%	4	0.0%	4	0.0	13%	0%					
Pharmacy Technician - Non-accredited checking technician		0		0	0.0							
Pharmacy Technician (Trainee)		0		0	0.0							
Pharmacy Assistant		0		0	0.0							
All staff	0.2%	25	0.2%	22	0.1	7%	59%	18%	64%	91%	23%	5%

Nursing

Nursing	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Registered nurses	8.0%	921	8.0%	997	3.4	0.4%	14%	30%	31%	89%	25%	5%
** Advanced Level Practice Nurse (subset of total in registered nurses row)	0.4%	50	0.3%	33	0.1	0%	48%					
Nursing Associates - Band 4	0.2%	25	0.2%	21	0.1	90%	0%	24%	35%	94%	13%	13%
Student Nurse	0.3%	29	0.2%	26	0.1	85%	0%	68%	0%	9%	0%	59%
All staff	8.5%	975	8.4%	1,047	3.6	2%	15%	30%	30%	87%	24%	6%

* Total WTE for 2023 includes 3.4 WTE listed in treatment provider submissions who were not disaggregated by role, therefore the total will not equal the sum of the parts.

** Advanced level practice nurse is a subset of registered nurses

Support Workers and Other Unregistered Clinical Staff

Support Workers and Other Unregistered Clinical Staff	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Support Workers and Other Unregistered Clinical Staff	1.9%	218	2.7%	333	1.1	93%	0%	49%	23%	91%	26%	6%
All staff	1.9%	218	2.7%	342	1.2	84%	4%	49%	23%	91%	26%	6%

* Total WTE for 2023 includes 8.6 WTE listed in treatment provider submissions who were not disaggregated by role, therefore the total will not equal the sum of the parts.

Social work roles

Social Work roles	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Social Workers (registered to practice on the Social Work England register)	0.5%	60	0.9%	108	0.4	5%	4%	19%	55%	83%	14%	0%
Social Workers - Pre-registration	0.6%	74	0.1%	9	0.0	78%	0%	78%	0%	8%	17%	66%
All staff	1.2%	134	0.9%	117	0.4	7%	4%	40%	36%	59%	16%	27%

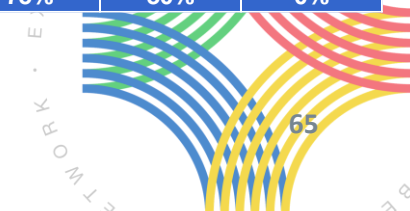
Peer support, service development, activity facilitation & placement and support staff group

Peer support, service development, activity facilitation & placement and support staff group	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Peer Support Workers	6.0%	684	7.4%	922	3.2	97%	0%	52%	8%	22%	22%	58%
Service-user Development Workers	0.9%	104	0.9%	118	0.4	73%	2%	46%	20%	62%	18%	32%
Activity facilitator	1.7%	193	1.1%	134	0.5	88%	0%	47%	13%	43%	15%	49%
Individual placement and support (IPS) employment specialist worker	0.5%	52	0.6%	78	0.3	39%	0%	65%	5%	77%	1%	0%
Senior individual placement and support (IPS) employment specialist worker	0.2%	19	0.3%	34	0.1	0%	0%	47%	11%	82%	16%	0%
All staff	9.2%	1,052	10.3%	1,286	4.4	68%	0%	51%	9%	33%	19%	50%

* Total WTE for 2023 includes 1 WTE listed in treatment provider submissions who were not disaggregated by role, therefore the total will not equal the sum of the parts.

Allied health professionals (AHPs)

Allied health professionals (AHPs)	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Occupational Therapist (OT)	0.0%	3	0.0%	4	0.0	0%	0%	0%	50%	67%	33%	0%
Occupational Therapist (OT) (Trainee)		0		0	0.0							
Other AHPs	0.1%	6	0.0%	5	0.0	19%	0%	0%	100%	100%	29%	0%
Other AHP trainee	0.0%	2		0	0.0							
All staff	0.1%	11	0.1%	9	0.0	11%	0%	0%	67%	75%	30%	0%



Psychiatry roles

Psychiatry roles	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Substance Misuse Psychiatrists (on the substance misuse register)	0.7%	81	0.5%	56	0.2	0%	100%	11%	45%	91%	36%	0%
Other Adult Psychiatrist (not on the substance misuse register)	0.1%	6	0.1%	6	0.0	0%	100%	13%	75%	88%	63%	0%
Other CYP Psychiatrist (not on the substance misuse register)	0.0%	2		0	0.0							
Specialty doctor / Associate Specialist in Psychiatry / staff grade (SAS doctors)	0.4%	51	0.7%	84	0.3	0%	98%	24%	31%	92%	34%	6%
Psychiatry - Training grade doctors ST4-ST6	0.1%	16	0.1%	10	0.0	3%	76%	55%	9%	45%	22%	11%
Psychiatry - Trainee grade CT1-CT3	0.1%	10	0.1%	7	0.0	29%	41%	50%	0%	83%	25%	0%
Psychiatry - Trainee grade FY1-FY2	0.0%	2	0.0%	2	0.0	0%	100%	50%	0%	50%	0%	0%
All staff	1.5%	168	1.3%	167	0.57	0%	96%	22%	35%	88%	35%	4%

* Total WTE 2023 includes 1 WTE listed in LERO submission grouped roles, therefore the total will not equal the sum of the parts.

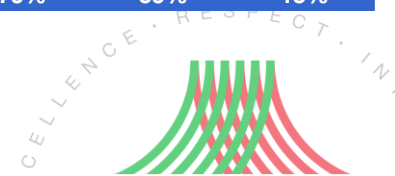
Other doctors

Other doctors	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
General Practitioners	0.4%	50	0.3%	34	0.1	8%	92%	17%	51%	85%	67%	13%
General Practitioner trainee (ST1, ST2 or ST3)	0.1%	6	0.0%	3	0.0	0%	100%	50%	0%	20%	0%	40%
Physician Associate	0.0%	5	0.0%	2	0.0	0%	100%	33%	0%	67%	0%	33%
All staff	0.5%	61	0.3%	40	0.1	4%	96%	19%	47%	79%	59%	15%

* Total WTE 2023 includes 1 WTE listed in LERO submission grouped roles, therefore the total will not equal the sum of the parts.

Treatment providers: Other staff

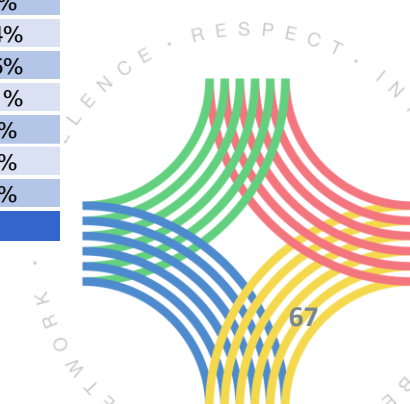
Treatment providers: Other staff not captured in identified groups	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Other staff (not included in the roles above)	2.9%	332	1.4%	187	0.6	65%	4%	28%	43%	75%	32%	20%



Psychological professions

Psychological professions	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Consultant Psychologist - Registered	0.1%	16	0.2%	22	0.1	5%	95%	19%	22%	96%	48%	0%
Practitioner Psychologist - registered	0.2%	23	0.3%	33	0.1	6%	60%	37%	21%	82%	55%	7%
Trainee Psychologist (non-registered)	0.0%	4	0.1%	7	0.0	86%	0%	77%	0%	8%	0%	85%
Clinical Associate in Psychology				0	0.0							
Assistant Psychologist - (non-registered)	0.3%	31	0.3%	39	0.1	56%	0%	49%	2%	67%	0%	0%
Counsellor - registered	0.9%	105	0.8%	100	0.3	24%	0%	26%	42%	80%	34%	15%
Trainee Counsellor (non-registered)	1.0%	110	0.5%	59	0.2	92%	0%	63%	1%	7%	13%	86%
Psychotherapist - registered	0.1%	12	0.1%	9	0.0	30%	16%	38%	38%	78%	38%	0%
Trainee Psychotherapist (non-registered)	0.0%	3	0.0%	1	0.0	100%	0%	67%	0%	33%	0%	67%
Mental Health and Wellbeing Practitioner			0.1%	15	0.1	67%	7%	71%	7%	71%	7%	7%
Psychology / therapy support role	1.0%	115										
All staff	3.7%	419	2.3%	285	1.0	25%	20%	47%	16%	49%	20%	41%

Psychological professions by organisation and sector	Treatment Providers												LEROs		Total	
	Voluntary sector		NHS		Independent/		LA- delivered treatment									
	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%	WTE	%		
Consultant Psychologist – registered	11	6%	11	19%	0	0%	0	0%	0	0%	22	8%				
Practitioner Psychologist – registered	22	12%	9	16%	1	3%	0	0%	0	0%	33	11%				
Trainee Psychologist	4	2%	3	5%	0	0%	0	0%	0	0%	7	2%				
Clinical Associate in Psychology	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%				
Assistant Psychologist – non-registered	23	13%	16	28%	0	0%	0	0%	0	0%	39	14%				
Counsellor – registered	65	36%	6	11%	21	67%	2	64%	6	2%	100	35%				
Trainee Counsellor	51	28%	2	3%	2	6%	0	0%	4	1%	59	21%				
Psychotherapist – registered	0	0%	3	5%	4	14%	1	36%	0	0%	9	3%				
Trainee Psychotherapist	0	0%	0	0%	1	3%	0	0%	0	0%	1	0%				
Mental Health and Wellbeing Practitioner	6	3%	7	12%	2	6%	0	0%	0	0%	15	5%				
Total (WTE)	183		57		31		3		10		285					



Local authority: Commissioning roles

Local Authority - Commissioning roles	2022		2023									
	% Total Workforce	Total WTE	% Total Workforce	*Total WTE	WTE per 1000 Treatment numbers	% Salary < £26,700	% Salary > £48,100+	% < 1 year in post	% > 3 years in post	% Permanent contract	% Part Time	% Zero hours
Local authority alcohol and drug administrators (LA)	0.2%	24	0.2%	30	0.1	35%	7%	33%	38%	77%	33%	0%
Local authority alcohol and drug commissioners (adults) (LA)	1.1%	131	1.1%	144	0.5	1%	40%	28%	47%	85%	25%	0%
Local authority alcohol and drug coordinators (adults) (LA)	0.3%	38	0.3%	33	0.1	9%	15%	40%	27%	70%	13%	0%
Local authority alcohol and drug commissioners (young people) (LA)	0.3%	39	0.3%	31	0.1	0%	42%	20%	48%	89%	18%	0%
Local authority alcohol and drug coordinators (young people) (LA)			0.1%	18	0.1	22%	0%	42%	42%	91%	23%	9%
Local authority alcohol and drug data analysts (LA)	0.2%	24	0.2%	28	0.1	8%	4%	25%	56%	77%	33%	0%
Local authority alcohol and drug project managers (LA)	0.3%	33	0.5%	59	0.2	6%	11%	41%	22%	57%	14%	1%
Local authority alcohol and drug strategy managers (LA)	0.3%	33	0.4%	49	0.2	0%	82%	26%	49%	81%	16%	0%
Local authority contracts officer (LA)	0.2%	21	0.1%	19	0.1	15%	2%	33%	46%	93%	29%	0%
Other LA commissioning staff (LA)	0.5%	56	0.4%	55	0.2	14%	28%	29%	34%	71%	31%	0%
All staff	3.5%	398	3.6%	466	1.6	7%	31%	31%	41%	79%	23%	0%

*Total includes 9 WTE where salary banding was not supplied. These 9 WTE are excluded from all other calculations in this table.

Appendix 2

Metrics definitions



Metrics definitions

Description	Definitions
Whole time equivalent (WTE)	A measure of working time expressed as a proportion of the standard whole time working for a grade EXAMPLE - The standard hours for a nurse are 37.5 and an individual Nurse contracts to work 22 hours per week, then that employee's WTE is 22 divided by 37.5 = 0.59 WTE. If the standard hours for a full time Junior Doctor are 40 hours a week and an individual Junior Doctor contracts to work 40 hours per week, then that employee's WTE is = 1.0
In post WTE	WTE as at 30th June 2023. This includes contracted staff in post and bank and/or agency cover who were in place on this date, this should include all staff you directly employ regardless of the location in which they work. Please only include staff employed directly by your organisation or via an agency to fill a specific role. Do not include staff employed by other organisations working within your organisation as part of a service agreement - these staff should be captured by the employing organisation.
Number of vacancies	The difference between the number of reported Whole Time Equivalent (WTE) permanent or fixed-term staff in post and planned workforce levels. Establishment - WTE permanent or fixed term staff in post.
Funded Establishment	Describes the authorised amount of time which may be contracted for a position. Each grade and the amount of WTE within each grade are added to calculate the budgeted WTE for the block.
Average WTE staff in post	The In Post : Whole Time Equivalent (WTE) at the start of the census period+ In Post : Whole Time Equivalent (WTE) on the last day of the census period/2 (excluding bank or agency staff)
Joiners in the period	The WTE of new staff that joined the service during the period. This could include staff who both joined and left their role within the 12 month period.
Leavers WTE	Staff who left their post between 1st July 2022 and 30th June 2023.
Sickness absence days	Total number of WTE staff sickness days including non working days. For example, a member of staff that usually works Monday to Friday and is off sick Friday through to Monday would report 4 days sickness. In line with NHS Digital definition.
Total available days	Total number of contracted WTE staff days available in the period. For example, a full time member of staff would have 365 available days compared to 182.5 for a staff member working 0.5WTE. Excludes: Maternity Leave & Unpaid Leave.
Bank and agency spend	Agency Spend is the total cost of shifts filled by Agency Staff Agency Staff those who work for your organisation but who, for the purposes of the transaction, are not on the payroll of your organisation. Bank Spend is the total costs of shifts through both in-house and outsourced banks Bank Staff refers to workers who can be contacted to work on Bank contracts so represents non substantive post (including fixed-term). Work by bank staff should be treated as a separate contract and thus does not include standard overtime. Bank and Agency Spend is the sum of bank and agency expenditure.
Total staff spend	Total staff spend including bank and agency staffing and overtime.

Metrics calculations	Numerator	Denominator
Vacancy rate	Vacancies	Funded Establishment
Turnover rate	Leavers	Average staff in post
Sickness absence rate	Sickness absence days	Total available days

