Children's Social Work and Child Protection

Social Worker Survey: Autumn 2016

1. Introduction

The final report of the Social Work Taskforce (2009)[1] recommended that Councils undertake an annual social work 'health check'. These annual 'health checks' now form part of the Employers Standards for Social Work[2]. In DCC a survey of all case holding social workers was undertaken between15th November to 9th December 2016.

The sample group and questions are dissimilar to those of the 2015 survey so it is not possible to undertake any direct comparisons of results.

2. Summary of Key Findings.

From the overall responses received, headline findings are that;

✓ Managers are creating an environment where individuals are feeling supported and listened to.
✓ A significant proportion of the management population are aware of the Childrens Social Work and CP Improvement Plan and where to find a copy of the latest version.
✓ Individuals feel that their line managers are knowledgeable and experienced to be able to support them in their work.
✓ ASYE's report that they are receiving the support they need to complete their assessed year
✓ Over two third of Social Workers responding have had a case audited within the last 6 months.
✓ A high proportion of individuals could describe improvements in practice related to learning or training they have recently undertaken.
✓ Some annual appraisals had not been completed at the point of survey.

3. Response Rate

A 56% response rate, 364 staff (see Appendix 3) was achieved. This is a very significant improvement from 37% in 2015. 13 responses could not be included in the final sample as they were not from staff who were part of the targeted cohort (e.g. 'teacher').

This survey was specifically designed to evaluate the impact of the current Improvement Plan within the Children's Social Work and Child Protection Service and was sent to key practice roles; (ASYE's, Early Help Practitioners, Family Practitioners, Community Support Workers (Adoption and Fostering), Independent Reviewing Officers, Referral Coordinators, Residential

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[1] Building a Safe, Confident Future - The Final Report of the Social Work Task Force 2009
[2] The Standards for Employers of Social Workers in England 2014; http://www.local.gov.uk/home/-/journal_content/56/10180/3511605/ARTICLE

Support Workers, Youth Offending Officers, Adoption and Fostering Support Workers, and Social Workers).

The initial results from this anonymised survey have now been analysed and key findings are outlined within this report. A more detailed breakdown of responses for work groups, can be found within the Appendices. It is important to note the tone as well as the content of the additional comments included by respondents. There is a significantly more positive tone found in the language used in responses than that reported in 2015.

4. Initial Recommendations

The importance of continuing progress to reduce caseloads further is recognised. Further, the findings reinforce the importance of ensuring stable and effective frontline managers, through continuing focused work in this area which includes the remaining cohorts of the TM Development Programme that will be starting early in 2017.

Specific other recommendations to consider include;

1. The outcome of the survey to be communicated to staff within 12 weeks of closing date (March).

2. The responses will be discussed by the wider management team and SMT will draft an action plan following this. Specific issues to be addressed include;

    a. A review of the CSW and CP Communications Strategy, including communication regarding the Academy offer.
    b. Specific updated communications to staff on progress of the Improvement Plan.
    c. To further engage staff on specific practice improvements; including development of risk assessment tools and evidence based interventions.

3. To ensure the action plan is shared with staff.

4. SMT will utilise findings at the workforce planning development day (being held on 2nd February) to inform priorities.

5. Continue with ongoing engagement with staff so that collecting and using views is part of continuous improvement not special activity – Staff Reference Group.

6. To ensure all appraisals are completed by the end of January target date.

5.   Summary Analysis of All Responses

A summary of all the responses to the survey can be found below. Appendices provide a further breakdown of responses, though the low level of response should be noted in some areas.

5.1 Working as a team
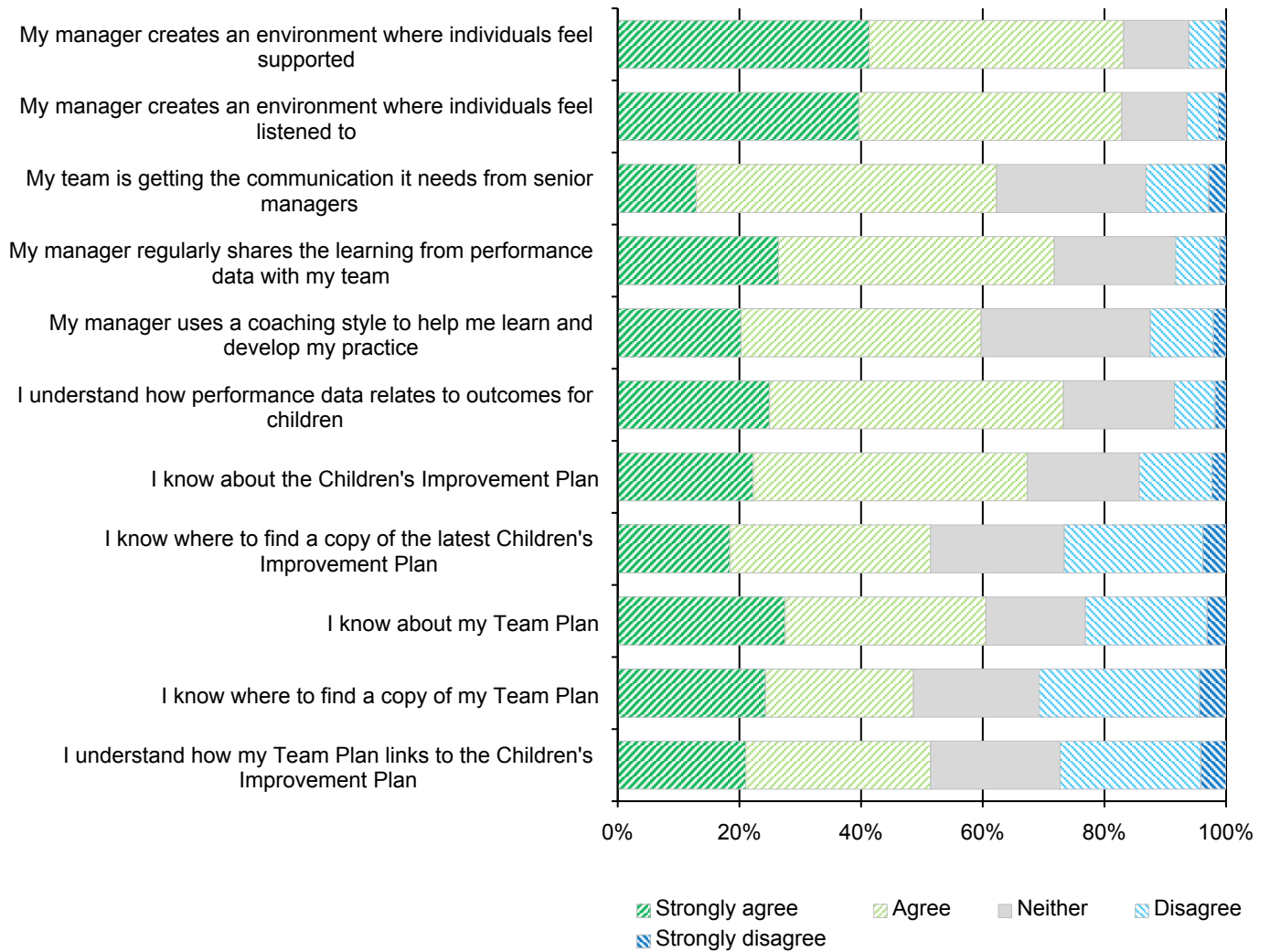
	Agreed		
	Manager	Non-manager	Social Worker
I know about the Children's Improvement Plan	94%	61%	60%
I know where to find a copy of the latest Children's Improvement Plan	87%	48%	40%

Comments

- 83% said their manager created an environment where the felt supported and listened to.
- 73% understood how performance data relates to outcomes for children.
- 49% knew where to find a copy of my Team Plan, and
- 51% knew how this linked to the service Improvement Plan.

This demonstrates very good progress however about half of the staff are not yet sufficiently connected to the key plans and if manager responses are excluded, the rate is lower for frontline practitioners. The current appraisal process is designed to address this.

5.2 Managing my work
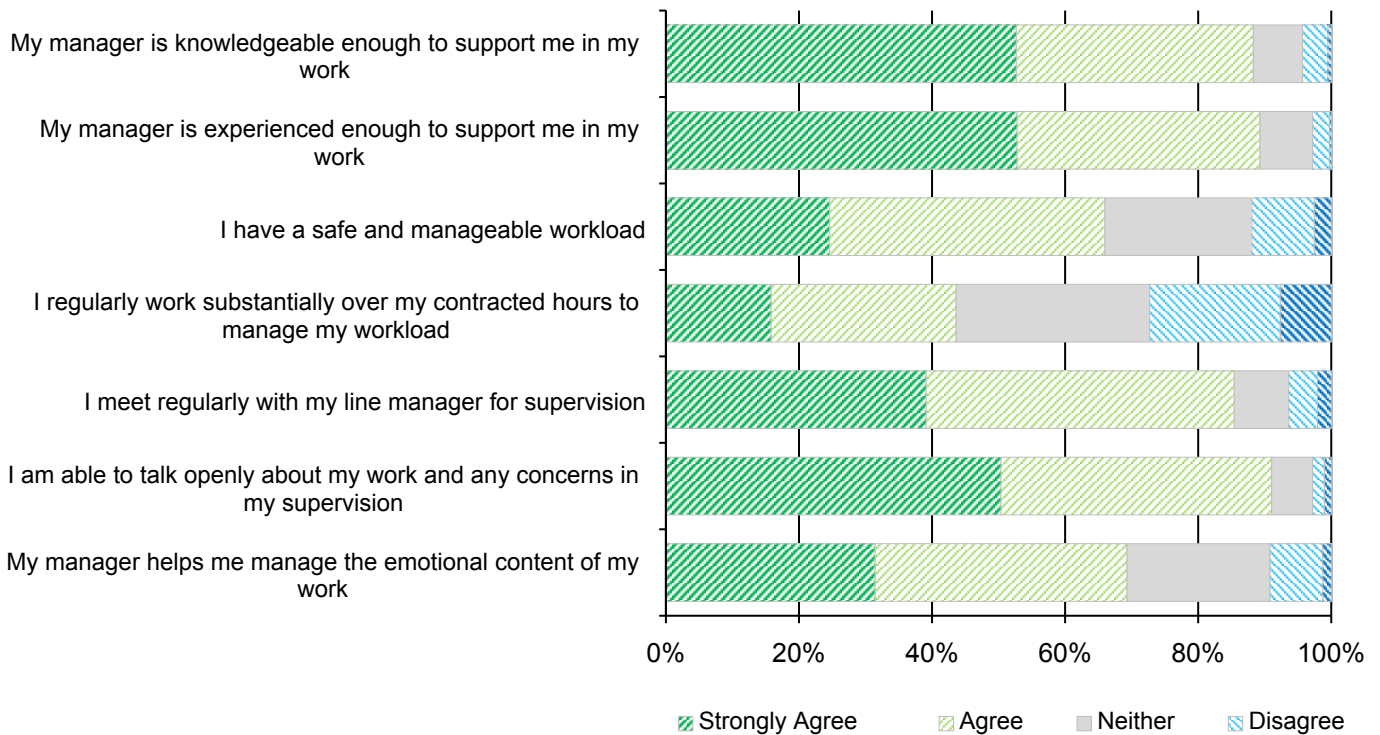
Comments

Respondents said managers were supporting them in their work and that they were able to talk openly about their work;

- 91% said they were able to talk openly about their work to their manager.
- 88% said their manager was knowledgeable enough to support them in their work.
- 44% said they regularly worked substantially over their contracted hours
  (56% due to late visits, 73% administration, and 34% other).
- 12% disagreed that they had a safe and manageable workload.

Those who said we could do more to help manage the emotional content of the work, suggested we could do the following to help:

- Consistent and supportive management.
- Training in building and improving resilience.
- Regular supervision with time to talk about the emotional impact, reflect, and be listened to.
- More discussions around case and children in supervision.
- Reflective supervision.
- Opportunity to talk through issues at end of day.
- Space to talk, in confidence (not open plan office).
- Being in the same office as rest of team.
- Greater understanding of work content, and realistic planning.
- Planned sharing and handing over of work.

This is a very strong endorsement of the management support available to staff in Devon. Further work is required to drill into the findings in relation to working over contracted hours. Social work is not a 9-5 job and late visits are part of the job. However, we need to be satisfied that staff are able to claim their time back through TOIL arrangements.

Safe and manageable caseloads are a key improvement priority. We have seen a managed reduction from average 25 (April 2016) to <18 (December 2016). Staff in their responses will be reflecting on a period of considerable shift, with more progress planned. Monitoring this indicator will be included in the next health check.

5.3 Supervision
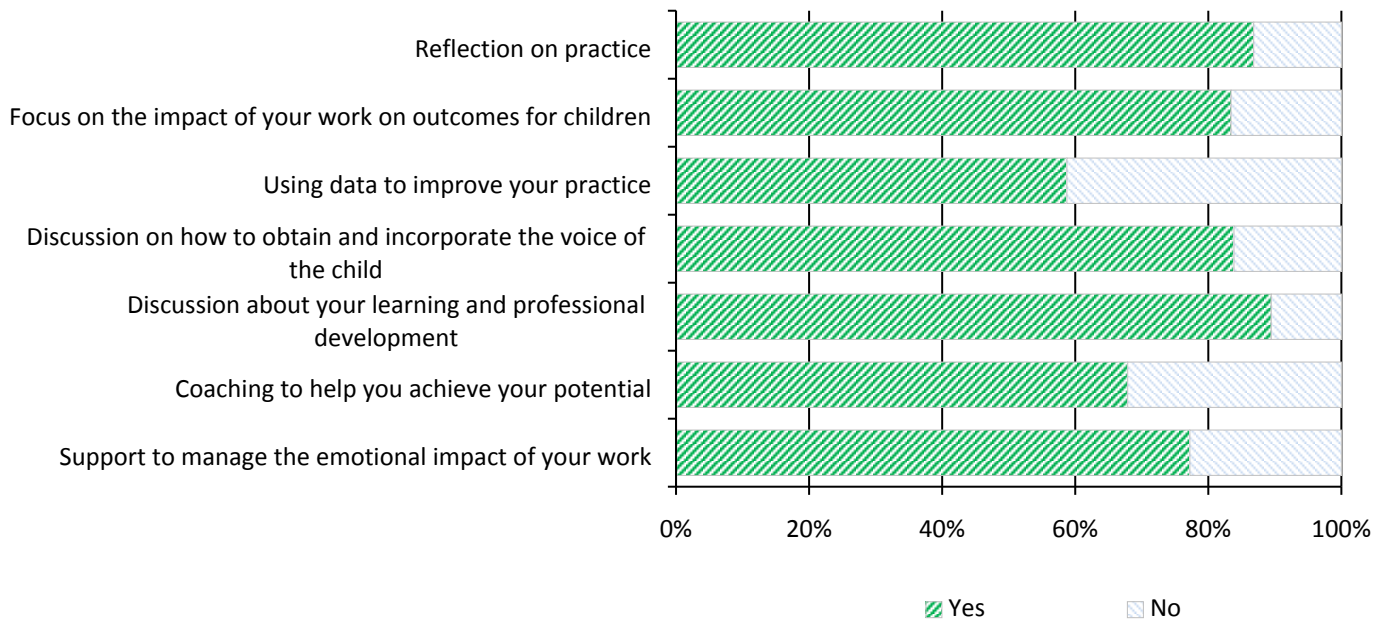
Comments

- 89% said discussion around learning and professional development.
- 87% reported reflecting on practice
- 59% said supervision used data to improve on practice.

Whether ASYEs feel they get the support they need to complete their assessed and supported first year in practice;

- 92% of ASYE's responding said they got the support that they needed to complete their assessed year in practice.

Where improvements could be made to the support offered by the Team Manager;

Several general comments were made, for example;

- Around permanency, availability, and nature of (agency) Team Managers and potential impact of this on supervision.
- A few mentioned that Team Managers could better intervene with caseloads, listen, be less process driven, and consider their issues.

Again a strong endorsement of practice management through supervision processes. From an under-developed start point in the use of data, the progress made is encouraging though with more to do. The potential to further develop a coaching style to support practice development is noted.

5.4 Tools and Working Practices
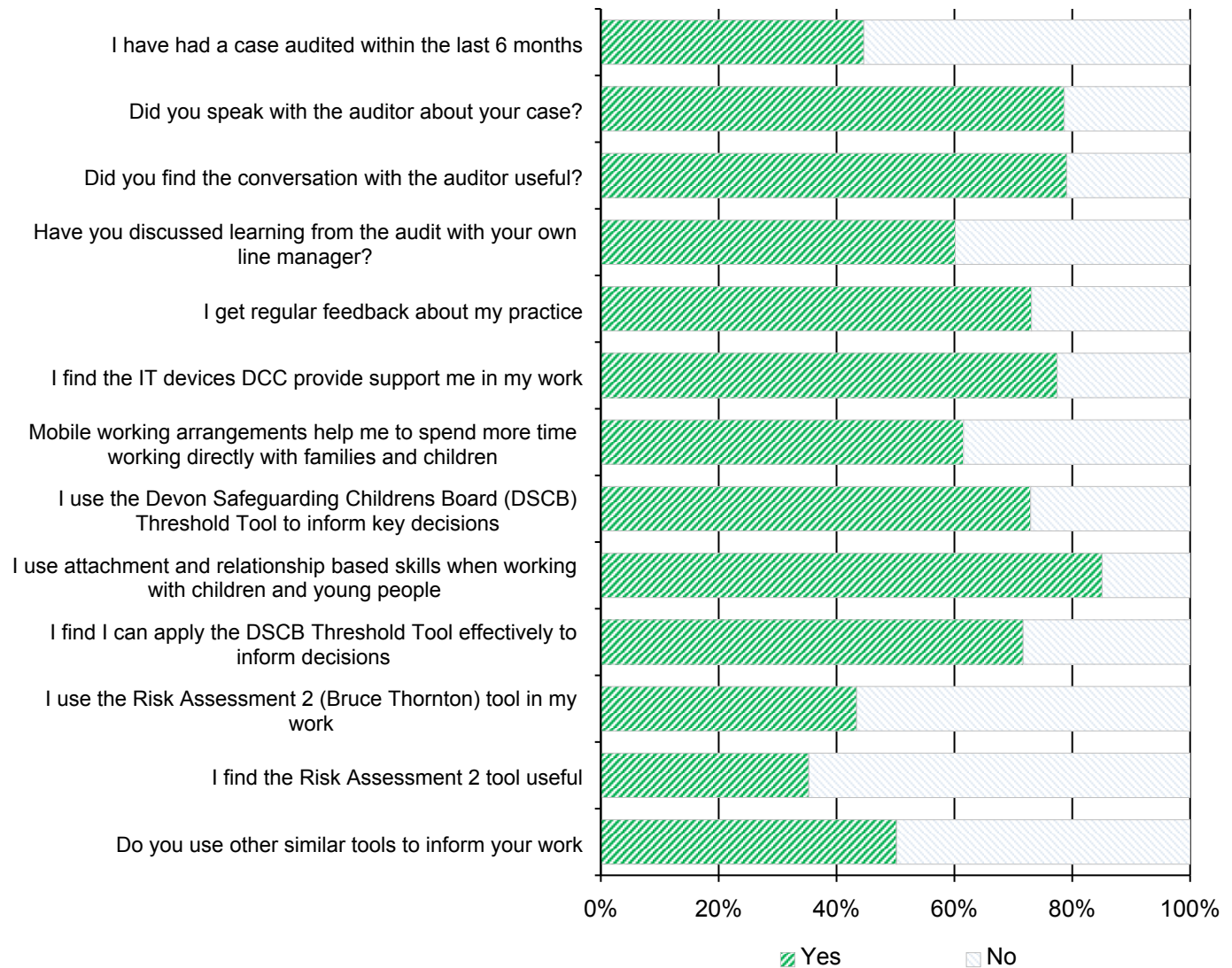
	Yes		
	Manager	Non-manager	Social Worker
I use the Risk Assessment 2 (Bruce Thornton) tool in my work	44%	34%	58%
I find the Risk Assessment 2 tool useful	37%	35%	40%

Comments

- 85% said they use attachment and relationship based skills when working with children and young people.
- 45% said they had a case audited, with 79% of those saying it was useful.
- 43% used the Risk Assessment 2 (Bruce Thornton) tool in their work, with 35% finding it useful.

Of those using other similar tools to inform their work, the following were mentioned:

Signs and Safety (9)
ASSET+ (8)
Jeff Fowler Checklist (7)
3 Houses (6)

3 Islands (6)
Graded Care Profile (5)
Home Inventory(5)
Genograms (4)

Home Conditions
Assessment Tool (4)
Parent Assessment Manual
(PAM) (4)

(3) CSE Risk Assessment, Kids Needs Cards.

(2) Attachment and Relationship, Attachment Based Theory, BAAF Tools, Blob Tree, CAADA, CHC, Coram Tools, CSE, DASH, Eco Maps, Family

Solution Service RA, FGC RA, Framework Assessment, Inside Outside Hurting Tool, Parenting Capacity Assessment, Pre-Birth Risk Assessment, Shown Tell

Me, Social Care Histories, Solution Focused Therapy, Strengthening Families Program.

(1) 3 Island, ADAM, AIM 2 Assessment, All about me (CAFCASS), Analytical Approach, Assessment Framework, Assessment Triangle, Attachment Dolls, Attachment Theory, Audits, Barnardo's DV Risk Assessment, Brook Traffic Light System, Bruce Thornton, Bruce Thornton (Home Conditions), Bruce Thornton Tools, CAHMS Report, Capacity to Change Model, Children's basic Needs, Children's Basic Needs Spider Graph, Coaching, Collingwood Theory Model, Complex Risk Assessment, CSE RA, Data Analysis, Devon Assessment Framework (DAF), Direct Work , DoH Framework, DOLS, Domestic Violence Assessment Tools, DSCB Threshold Tool, Duluth, Early Years Network

Meetings, EDT Report, EH Triage, EHA, Emotional Barometer, Emotional Based Interventions, Every Child Matters, Evidence Based Practice, Family Star , Family Start Outcome, Flow Charting, Football Card Game, Formal Assessments, Holistix Data, Impact of Parental MH, JACAT Report, Jenga, K1, Kit Model, Life Experiences Academic Studies, Locality Alliance Meetings, Logs, MACSE, MARAC, Mental Health Tools, Mentoring, Misper Reports, Motivational Interviewing, Motivational Survey, Munroe Report, National Minimum Standards, Online tools, PACE, Parents Plus Training, Past History, Pathway Plan, RA Tools, RA1, RA2, Request for Additional Service (RFAS),

Reports, Research Practice Tools, Return to Home Interview, RISE Report, Risk Assessment One Tool, Risk Indicator Tools, Rob Tucker RGT, Safeguarding Children Framework, Salford Neglect One, School Location Reports, SCR, Service Development Days, Services Tools, SFA Scaling, Single Assessment, SMART, Solution Focused Talk, SPA, Strength Based Approach, Strengths Based Model, SUBO, Support Network Spider Diagram, Support Networks, Team Around the Child (TAC), Tennets of PACE, Theraplay, Think Family, Time out, Timeline, Toxic Trio Training, Webster, Stratton, and Solihull, Wellbeing Scales.

There are some interesting findings in this area but perhaps a bit too patchy to draw any firm conclusions. It is positive that staff are aware of such a wide range of evidence based approaches however we need to ensure they are used in a way which supports improved practice and outcomes for families.

If manager responses are removed; the percentage of staff who had had a case audited would increase. Nevertheless, this suggests that audit as a tool to support development and improvement has more potential than is currently being realised.

5.5 Learning and Development

Resources used in the last 6 months;
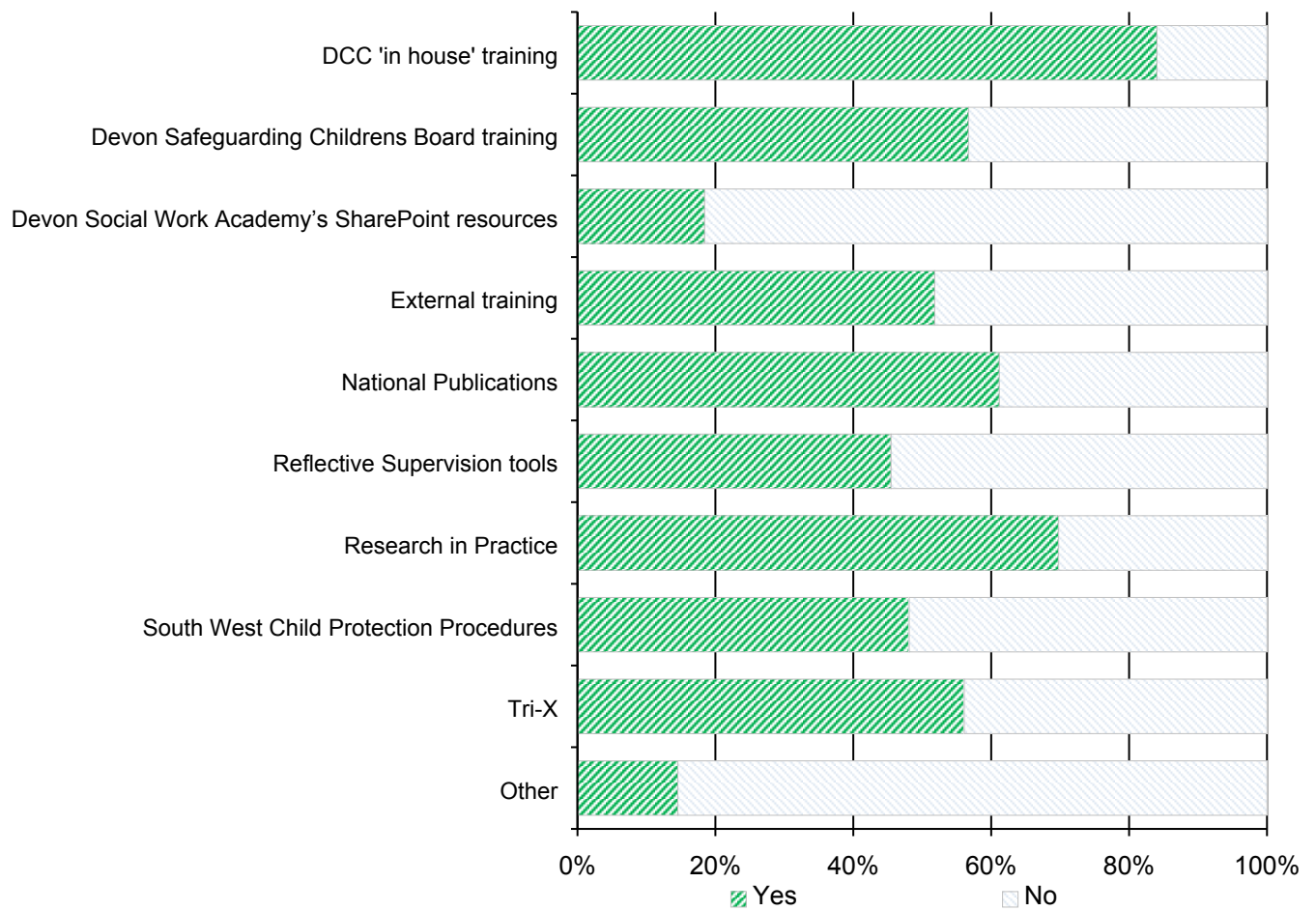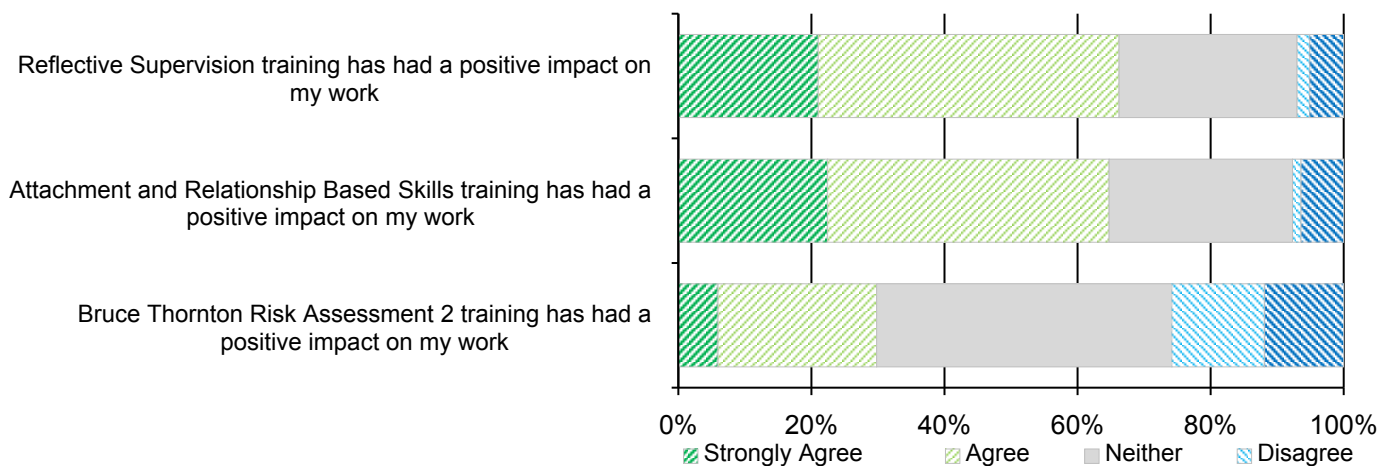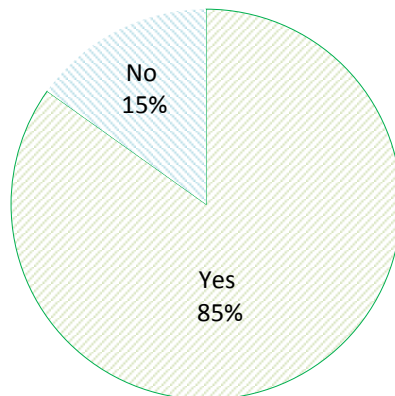

Comments

- Most selected tool was DCC in house training (84%)
- Devon Social Work Academy's Sharepoint resources were the least used (18%)
- 66% said Reflective Supervision training had a positive impact on their work, 65% Attachment and Relationship Based Skills, whilst fewer, 30%, said the Bruce Thornton Risk Assessment had a positive impact.

5.6 Training impact

Whether practice improved as a result of training or learning participated in during the last 12 months;

Comments

85% said their practice had improved as a result of training or learning in the last 12 months.

A number of respondents indicated that their training allowed them to gain more knowledge and improve upon their daily work. Training provided an opportunity to gain better understanding and reflect on practice. Through learning respondents were able to gain a greater awareness. Specific examples were given around a number of areas, particularly 'Attachment Training' and 'ADAM'. Some quotes that illustrate this include;

- "A deeper understanding of attachment theory has helped me when contributing to managing transitions for children. Very good course, Fostering Permanence in particular."

- "Attachment and relationship training assisted in terms of reflecting on current practice, values and to develop tools for direct work with children and families to inform assessments."

- "Attachment theory has highlighted to me the importance of disorganised attachment and its impact on the relationship between children and carers."

- "Attachment training has been useful insight into how much more I could contribute and how much more value I could give to my role. As the one person that sees the child interacting with their parent over an extended period further training would inevitably enable me to contribute more knowledgably and authoritatively."

- "Attachment training has helped me understand the underlying problems that link directly to poor relationships and why…"

- "Attachment training has made huge improvements in managing the needs of carers working with traumatised children."

- "Attachment training helpful in aiding me to understand how trauma affects later behaviour."

- "I have used the Attachment and relationship-based training tools in three separate cases specifically, and in one case this has been amazingly helpful in making it possible to rehabilitate the children to parental care."

- "ADAM has increased my knowledge and supported me do some effective work with families and this has informed parenting assessments well."

- "…ADAM and DDP1. This has improved my knowledge of attachment issues for children, their impact on foster carers and therefore enabled me to consider these issues in permanent placement matching and thereby increasing child placement stability."

- "I have worked as a Social worker /manager for over 20 years and my working style is well defined. However, I have found aspects of the ADAM training useful and the risk assessment we work with has been very informative."

- "The ADAM training gave me tools and ideas to work with families to impart knowledge, and gauge understanding about Attachment issues."

- "The ADAM training has proved pertinent in providing tools and being able to understand the parents' responses to their children."

- "Using the ADAM training has made me able to work confidently with adults and children to assess and then support their needs. I am better aware of what to look for and how to record my observations"

All comments included in Appendix 6

Whether any difficulties are experienced in transferring learning into practice;
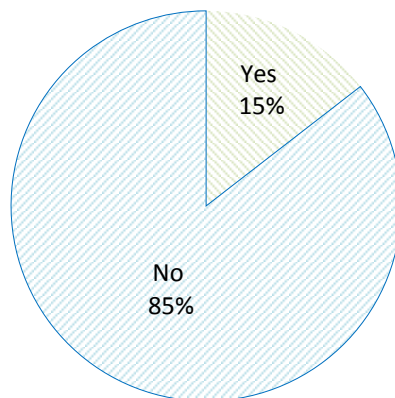
Comments

From those staff who said they had experience difficulties in transferring learning into practice, time and difficulties applying the learning in practice appeared to be the key issues. A few mentioned that difficulties arose if not everyone was up to date or on board with the techniques being applied. Specific comments included;

- "Less pressured case load would allow time to apply learning, this is frequently lost due to working without time for reflection or discussion with team/manager about how learning can be applied."

- "Sometimes the time to slot the new ideas in and also learning the skills to encourage clients to take these on-board as well. I expect this will become easier with time."

- "It takes a while to 'absorb' the knowledge and put learning into practice. With high workload, it is easy to follow the old habits. But there are workshops provided in our area to support us with implementing the knowledge into practice and I feel supported by my manager to try to use the new techniques and tools."

- "Continued CPD and follow up in supervision with specific practice examples/experiences."

FINAL

All comments in Appendix 6

Whether learning needs are being met;

No
18%

Yes
82%
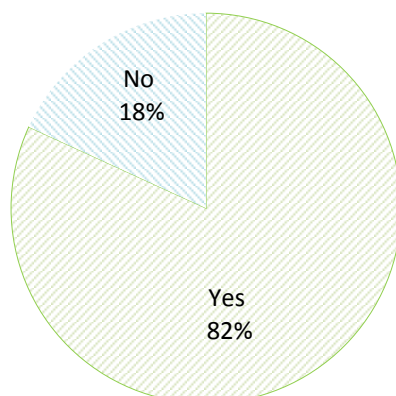
Comments

82% said their learning needs were being met. For those that didn't, time and workload appeared to be a key factor.

- "Due to commitments of work I am often unavailable for training; the last training I was booked on was cancelled due to an emergency with a client."

A few mentioned lack of availability or access to relevant training, whilst others used the space to request specific training on:

Attachment
Autism
Child protection (disabled children)
Childcare Award
Communication with children (disabled children)
Domestic abuse in families
DDP level 2
First aid
Managing budgets
PAM assessment training (for courts)
Prevent Training
Sexual Abuse
Sexually Problematic Behaviour
Sensory Integration/ Theraplay
Shadowing
Strategic Commissioning skills
Therapeutic parenting techniques training
Working with adolescents/parenting of.
Transactional analysis
Transgender.

Taken together these findings indicate impactful learning and development. A couple of areas require attention but overall a picture emerges of a workforce that is fully engaged and committed to professional development.

5.7   Workforce development

Whether annual appraisals will be completed by 31st December 2016;
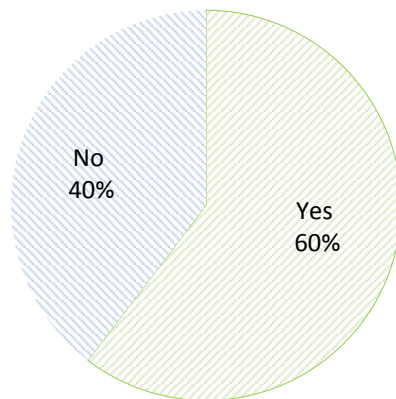
Comments

40% of respondents will need to have their annual appraisal completed by the revised deadline of 31st January 2017.

If you are an agency Social Worker, what would encourage you to take a permanent position with Devon County Council?

Fewer than thirty people responded to this question, with those who did mentioning rate of pay as significant. Other factors mentioned as significant were good support and training, flexibility in working patterns, manageable caseloads, and career progression.

Which three of the following factors would be the most important in retaining you as a Social Care Worker in the Children's Social Work and Child Protection Service in Devon County Council?
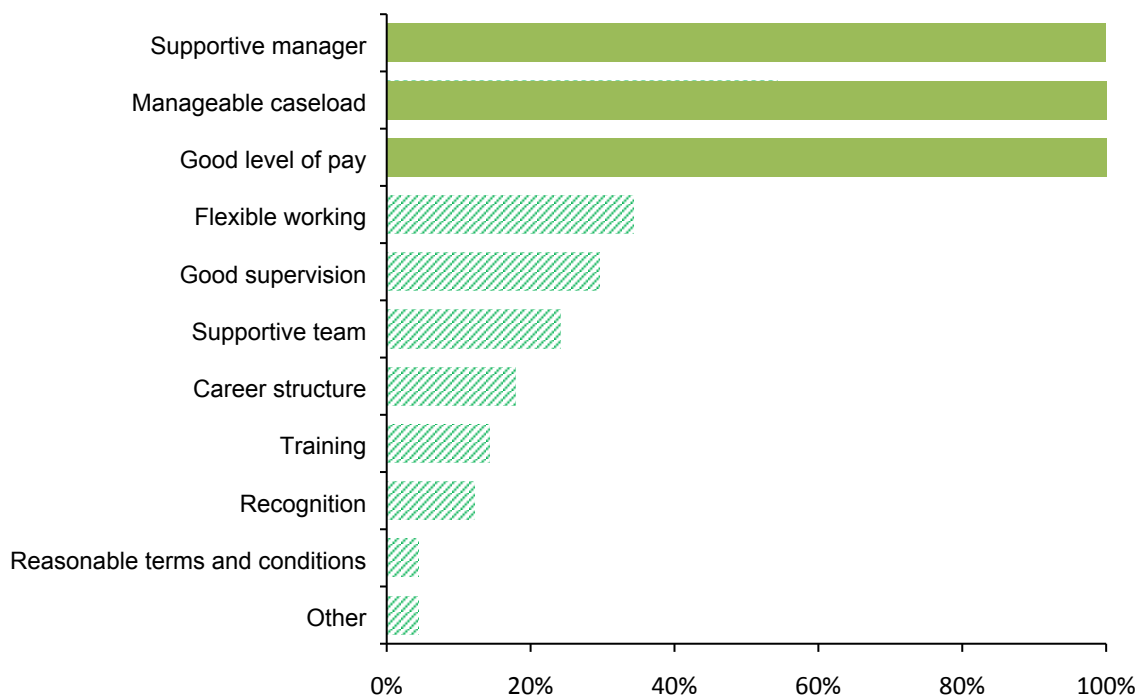
5.8 Other

Frustrations mentioned by staff in this area included parking at County Hall and the pace of change.

The following are edited suggestions for questions (omitting comments made regarding specific issues). The questions may be useful to inform further surveys, be asked as part of ongoing staff engagement, team meetings, or in other suitable settings.

Improving practice and management;
- Ideas to improve communication with staff regarding service changes and improvements
- Ideas to further improve the service
- What areas of service hinder or help your role
- What the barriers may be to spending more time working directly with families
- How social care and early help can work together more productively.
- Emotional support to workers
- How to ensure effective career progression
- Case recording
- Work with partners.

Resources;
- How the IT equipment is or isn't supporting our work.
- Hot desking.
- Parking
- How to maintain confidentiality of data and secure storage when working from lots of different bases and we are not yet a paperless culture?
- Office environment
- What resources would enhance your work with children and families?

Recruitment and retention;
- Ideas regarding retention and progression of staff.
- Salaries.

Wellbeing;
- Wellbeing and stress levels.
- Caseload management.
- Mobile working
- Value and impact.
- Job satisfaction
- Team effectiveness.

Training;
- What training do you think is needed to improve your work with children and families?
- Other learning and development needs.

Perception;
- Of service users and wider community about the service and social work.

The strong response rate, coupled with the thoughtful individual comments that run throughout the survey, suggest a workforce that is engaged and increasingly purposeful.

6. Consideration of progress against findings of last OFSTED Report

The 2015 OFSTED "Inspection of Devon County Council services for children in need of help and protection, children looked after and care leavers" highlighted a number of areas as requiring improvement.

"Establish a stable, permanent middle and senior officers' group in children's services"
p4 para 9

Survey findings indicate that;

- ✓ Managers are creating an environment where individuals are feeling supported and listened to.
- ✓ Senior Managers are communicating with teams
- ✓ Senior and frontline managers are effective at ensuring staff are aware of improvement plans.

	Agree	Disagree
My manager creates an environment where individuals feel supported	83%	6%
My manager creates an environment where individuals feel listened to	83%	6%
My team is getting the communication it needs from Senior Managers	62%	13%

	Agree	Disagree
I know about the Children's Improvement Plan	67%	14%
I know where to find a copy of the latest Children's Improvement Plan	51%	27%
I know about my Team Plan	61%	23%
I know where to find a copy of my Team Plan	49%	31%
I understand how my Team Plan links to the Children's Improvement Plan	51%	27%

"The last six months have seen notable progress made against recommendations from the previous inspection, including the improvement of risk assessment" p7 para 16

Survey findings indicate that;

- ✓ The majority of staff use DCB threshold tool and find it effectively informs key decisions
- ✓ The majority of staff use attachment and relationship based skills when working with children and young people
- ✓ Staff are aware of and are using a wide variety of practice tools
- ✓ There is a need to explore the use of the Risk Assessment (2)Tool by practitioners.

	Yes	No
I use the Devon Safeguarding Childrens Board (DSCB) Threshold Tool to inform key decisions	73%	27%
I use attachment and relationship based skills when working with children and young people	85%	15%
I find I can apply the DSCB Threshold Tool effectively to inform decisions	72%	28%
I use the Risk Assessment 2 (Bruce Thornton) tool in my work	43%	57%
I find the Risk Assessment 2 tool useful	35%	65%

Do you use other similar tools to inform your work	50%	50%

"Although still overly narrative and lacking reflection, the regularity and quality of management oversight and supervision has also improved..."p14 para 51

Survey findings indicate that;

- ✓ The majority of staff say their supervision provides opportunities to reflect on practice (87%),
- ✓ The majority of staff say their supervision provides opportunities to consider how to incorporate the voice of the child (84%).

Does your supervision include?		
Discussion about your learning and professional development	89%	11%
Reflection on practice	87%	13%
Discussion on how to obtain and incorporate the voice of the child	84%	16%
Focus on the impact of your work on outcomes for children	83%	17%
Support to manage the emotional impact of your work	77%	23%
Coaching to help you achieve your potential	68%	32%
Using data to improve your practice	59%	41%

"..The establishment of more routine measures of performance and quality assurance reporting have been introduced, contributing strongly to staff retention."p37

"The need is recognised for further work to achieve better performance and quality assurance information, and consequently greater consistency in management oversight."p37

Our survey indicates that;
- ✓ 45% of staff have had a case audited within the last 6 months
- ✓ 79% of staff found this useful.

We have work to do to improve our audit activity but the learning from case audits for individual staff members is helpful.

Case Audits		Yes	No
I have had a case audited within the last 6 months		45%	55%
Yes	Did you speak with the auditor about your case?	79%	21%
	Did you find the conversation with the auditor useful?	79%	21%
	Have you discussed learning from the audit with your own line manager?	60%	40%

Not all of the OFSTED report recommendations were addressed by the survey and comparison with responses from last year's staff survey is not possible as we asked different questions of a different group of staff. This survey results show overall good progress in relation to some OFSTED inspection report recommendations and highlights for us the work need to do in other areas.

7. Summary and Conclusions

Overall, this is a very positive health check with encouraging findings relating to how the improvements made to date across the service are being experienced by frontline practitioners and to hear their views about how this is impacting on their ability to carry out increasingly effective and purposeful work with children and families.

It is very affirming to hear how well supported workers feel; demonstrating broad progress in the quality of supervision and the support provided by front line managers. This is particularly important given our investment in ASYE recruitment and development as a key strategy to develop a permanent, stable and skilled workforce. It also evidences the value of the current investment in TM development.

The findings reinforce the need to continue investing in development alongside further reduction in caseloads and work to develop the offer of the Academy to have in place a clear and focused learning and development offer for practitioners and managers.

Appendices 1 & 2

Additional reports

Social Workers	Managers
CSW 2016 Social Workers.xls	CSW 2016 Managers.xls

Appendix 3 - Response matrix

Percentage responding (%)	Atkinson Unit	Children and Families	Disabled Children's Service (DCS)	Early Help	Emergency Duty Team (EDT)	Fostering and Adoption	Independent Reviewing Unit (IRU)	Multi Agency Safeguarding Hub (MASH)	Participation	Workforce Academy	Youth Offending Team	Other	Grand Total
Assessed Supported Year in Employment	-	22	0	-	-	-	-	-	-	-	-	-	30
Early Help Practitioner	-	-	-	267	-	-	-	-	-	-	-	-	300
Family Practitioner	-	37	-	42	-	25	-	-	-	-	-	-	46
Community Support Worker (Adoption and Fostering)	-	-	0	0	0	21	-	-	-	-	-	-	7
Independent Reviewing Officer	-	-	-	-	-	-	0	-	-	-	-	-	57
Referral Coordinator	-	4	-	-	-	-	-	67	-	-	-	-	22
Residential Support Worker	8	-	-	-	-	-	-	-	-	-	-	-	8
Youth Offending Officer	-	-	-	0	-	0	-	0	0	-	24	-	16
Adoption and Fostering Support Worker	-	-	-	-	-	55	-	-	-	-	-	-	55
Social Worker	-	43	64	-	9	43	-	44	-	0	-	-	50
Assistant / Deputy Team Manager	-	29	100	-	-	33	-	50	0	-	-	-	42
Team Manager	50	52	133	50	0	50	-	33	-	-	57	-	59
Operational / Area Manager	-	120	100	-	-	67	0	100	-	-	-	-	83
Senior Manager	25	100	-	0	-	100	-	0	0	0	-	-	75
Grand Total	33	51	60	53	7	46	126	48	100	80	42	-	56

Number responding (n°)	Atkinson Unit	Children and Families	Disabled Children's Service (DCS)	Early Help	Emergency Duty Team (EDT)	Fostering and Adoption	Independent Reviewing Unit (IRU)	Multi Agency Safeguarding Hub (MASH)	Participation	Workforce Academy	Youth Offending Team	Other	Grand Total
Assessed Supported Year in Employment	0	8	0	0	0	0	4	0	0	0	0	0	12
Early Help Practitioner	0	0	0	8	0	0	0	0	0	0	0	1	9
Family Practitioner	0	19	0	10	0	1	5	0	0	0	0	2	37
Community Support Worker (Adoption and Fostering)	0	0	0	0	0	3	0	0	0	0	0	0	3
Independent Reviewing Officer	0	12	0	0	0	0	0	0	0	0	0	0	12
Referral Coordinator	0	1	0	0	0	0	0	6	0	0	0	0	7
Residential Support Worker	1	0	0	0	0	0	0	0	0	0	0	0	1
Youth Offending Officer	0	1	0	0	0	0	0	0	0	0	4	0	5
Adoption and Fostering Support Worker	0	0	0	0	0	6	0	0	0	0	0	0	6
Social Worker	0	65	16	0	1	28	18	4	0	0	1	0	133
Assistant / Deputy Team Manager	1	5	1	0	0	1	0	1	0	0	0	1	10
Team Manager	1	13	4	3	0	6	1	1	1	0	4	1	35
Operational / Area Manager	0	6	1	0	0	2	0	1	0	0	0	0	10
Senior Manager	1	2	0	0	0	1	0	0	0	0	1	4	9
Other	2	29	10	4	0	5	1	1	5	4	0	14	75
Grand Total	6	161	32	25	1	53	29	14	6	4	10	23	364

Number on system	Atkinson Unit	Children and Families	Disabled Children's Service (DCS)	Early Help	Emergency Duty Team (EDT)	Fostering and Adoption	Independent Reviewing Unit (IRU)	Multi Agency Safeguarding Hub (MASH)	Participation	Workforce Academy	Youth Offending Team	Other	Grand Total
Assessed Supported Year in Employment		37	3										40
Early Help Practitioner				3									3
Family Practitioner		52		24		4							80
Community Support Worker (Adoption and Fostering)			20	7	3	14							44
Independent Reviewing Officer							21						21
Referral Coordinator		23						9					32
Residential Support Worker	12												12
Youth Offending Officer				6		1		4	4		17		32
Adoption and Fostering Support Worker						11							11
Social Worker		152	25		11	65		9		3			265
Assisstant / Deputy Team Manager		17	1			3		2	1				24
Team Manager	2	25	3	6	1	12		3			7		59
Operational / Area Manager		5	1			3	2	1					12
Senior Manager	4	2		1		1		1	1	2			12
Grand Total	18	313	53	47	15	114	23	29	6	5	24	0	647

Contract	Count
Agency	33
Fixed term contract	12
Permanent	332
Total	377