

DATE: 20 March 2008

**Social Care and Inclusion Performance Scorecard
Third Quarter Outcomes October-December 2007**

Ward(s) All

Portfolios: Cllr Barbara McCracken, Social Care, Health And Housing

Summary of report:

At the July 27 2006 meeting of the Health, Social Care and Inclusion Scrutiny and Performance Panel, panel members agreed to receive quarterly information on a representative selection of performance indicators (PIs) in order to further scrutinise the robustness of the improvement measures across the directorate.

It was agreed to produce a balanced scorecard for an agreed set of indicators and any other exception indicator that was classified as "red" using the traffic lights system. This report covers the Social Care and Inclusion scorecard measures for the third quarter of 2007-08 i.e. October to December 2007-08.

Background papers:

"Towards a Scrutiny Performance Scorecard" Health, Social Care and Inclusion Scrutiny and Performance Panel presentation July 27 2006

Reason for scrutiny:

To enable scrutiny of key performance indicators in accordance with statutory guidance.

Scrutiny panels are responsible for holding cabinet to account for the delivery of the Council's strategic goals and individual portfolio targets.

Resource and legal considerations:

Any resource implications arising from improving performance will be found from within approved budgets. There are no legal considerations arising from this report.

Citizen impact:

Improvement in the performance of agreed performance measures including PIs will impact on better outcomes for vulnerable adults, those with housing needs and other service users.

Environmental impact:

There is no specific environmental impact from this report.

Performance management:

The scrutiny and performance panel's scorecard contains PIs that inform the overall assessment of Adult Social Care and Strategic Housing Services. These performance measures contribute towards the CPA process. All risks identified in relationship to progressing performance are found in the relevant service plans and the directorate risk register and are subject to regular review and management. PIs that have a red traffic light designation will be subject to corrective measures action plans.

Equality Implications:

The performance targets include actions that ensure delivery of equitable services.

Consultation:

There are no specific consultation requirements relating to this report.

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1 **PERFORMANCE DATA SUMMARY: SOCIAL CARE AND INCLUSION THIRD QUARTER OUTCOMES OCTOBER TO DECEMBER 2007**

- 1.1 On the 16 June 2007 Panel agreed to continue to receive quarterly reports on a representative list of 15 PIs across the Social Care and Inclusion Directorate. It was also agreed that any other headline indicator in the directorate that was identified as “red” - i.e. would not meet target with existing actions - should be added to the list as long as it remained red. A jargon free explanation of the various PIs is included with the full score card **see Appendix 2**.
- 1.2 This report covers the third quarter of 2007-08. Of the 15 PIs on the Panels score card: 5 are red; 2 amber; 5 green and 3 NA. In addition there are 9 PIs for “red” exception reporting. The overall Scorecard with data for the three quarters is available as **Appendix 1**. All red indicators are subject to corrective actions plans.
- 1.3 Performance indicators that have scored “Red” in the third quarter are unlikely to meet their target by the end of 2007-08. However this “traffic light” rating is only one means of evaluating the specific area indicator. In addition the Panel may wish to take into consideration the performance of the indicator against any national standard (banding), benchmark or the performance of neighbouring councils or councils identified by the Audit Commission as having similar demographics as Walsall.

2 **SUPPLEMENTARY INFORMATION ADULT SOCIAL CARE INDICATORS**

- 2.1 Adult Social care PAF indicators are grouped into annually revised bandings as a guide to inspectors and managers in identifying areas of comparative strength and weakness. These bandings are set national by CSCI and as follows: Band five = Very good; Band four = Good; Band three = Acceptable, but possible room for improvement; Band two = Ask questions about performance; and Band one = Investigate urgently.
- 2.2 To ensure a manageable process the Panel’s scorecard focuses on a limited selection of 15 indicators. With the additional red/not on target exception additions this may give an unbalanced view of the adult social care section as this unfortunately excludes a number of additional high performing indicators that are not on the select list and *are* performing well. These include:
- 2.2.1
- C30 (3rd Quarter band five of five) **Adults with learning disabilities helped to live at home** per 1,000 population aged 18-64
 - C31 (3rd Quarter band five of five) **Adults with mental health problems helped to live at home**
 - C72 (3rd Quarter band five of five) **Admissions of supported residents aged 65+ to residential/ nursing care** per 10,000 population
 - C29 (3rd Quarter band four of five) **Adults with physical disabilities helped to**

live at home

- C73 (3rd Quarter band four of five) **Admissions of supported residents aged 18-64 to residential/ nursing care** per 10,000 population
- D37 (3rd Quarter band four of five) **Availability of single rooms**
- E47 (3rd Quarter band three of three) **Ethnicity of older people receiving assessment**
- E48 (3rd Quarter band three of three) **Ethnicity of older people receiving services following an assessment**

2.3 Of the red Adult Social care indicators performance for 2007-8 will see a number of local targets that will not be met by year end and. At the same time several of these unmet targets are in fact *high scorers* in the national band set comparisons or when compared to the average for comparable or neighbouring councils. What follows is a short summary of the "red" social care indicators clarifying the existing performance in comparison to the national bands and comparable councils as appropriate.

2.3.1 **BAND FIVE - VERY GOOD**

- D75 (3rd Quarter band five of five) **Practice learning**

Despite the fall from 22 to 18.6 the year end prediction remains a five band performance.

2.3.2 **BAND FOUR - GOOD**

- C28 (3rd Quarter band four of five) **Intensive Home care**

Intensive homecare improved during the year to Oct 2007 and remains band four.

- D54 (3rd Quarter band four of five) **% Equipment delivered in 7 working days**

A slight fall within year but still a band four performance.

- D55 (3rd Quarter band four of five) **Acceptable waiting time to assessment**

The year end prediction will fractionally miss the target (90%) by 0.5% with performance showing a major recovery of 3 bands.

- D56 (3rd Quarter band four of five) **Acceptable waiting time to care package**

The year end prediction is a two band improvement to 90.5% or band five.

- E82 (3rd Quarter band four of five) **% of assessments leading to a service.**

The proportion of assessments leading to a service has in fact risen to 78%.

2.3.3 **BAND THREE - ACCEPTABLE, BUT POSSIBLE ROOM FOR IMPROVEMENT**

- D40 (3rd Quarter band three of four) **Clients receiving a review**

Previous comparable council averages were between 69-70% in 2006-07. Investment in social work capacity and team activity has raised the possibility of a band 4 75% score by year end.

- C51 (3rd Quarter band three of five) **Direct Payments**

Current performance reflects a one band improvement from two to three however it will remain below the comparable council averages of 98-106.

2.3.4 **BAND TWO - ASK QUESTIONS ABOUT PERFORMANCE**

- B12 (3rd Quarter band two of four) **Unit cost of residential care, nursing care for all client groups plus intensive home care-** and
- B17 (3rd Quarter band two of four) **Average gross weekly expenditure on home care for adults and older people**

Both Unit cost indicators have risen and therefore scored lower as overall expenditure has increased but activity/placements decreased. This is a *deliberate* transitional result of directorate policy to reduce low cost high volume residential and nursing placements and expand support in the community. The council have engaged specialist negotiators “4Cs” - who are currently working with independent sector domiciliary care providers and residential and nursing home providers - to achieve lower unit costs. The re-tender of independent domiciliary care should reduce the costs of intensive home care further in 2008-09.

- C32 (3rd Quarter band two of five) **Older People helped to live at home –**
Performance in this area has involved, benchmarking with comparable authorities, and quality assuring to check that all relevant activity is counted towards this indicator and auditable. The January figure shows a further increase to 71. However this performance remains below the average for comparable councils of 81-85.

- C62 (3rd Quarter band two of five) **Carers assessments leading to a service –**
2005-06 %2005-07 saw this indicator performance rise from 3.4% to 6.3%. The fall back in 2007-08 to 5.4% has resulted in work to ascertain whether this reflects under recording of assessment activity despite actual services being put in place for carers and a significant review of overall Carers support activity with a CSCI sponsored expert. Both projects should complete by the end of the fourth quarter.

2.4 The year end review of Adult social care’s performance will consider progress against local targets, national bands and local and comparable council performance.

APPENDIX ONE

No.	Description	2005/06 Outturn	2006/07 Outturn	Target 2007/08	2007/08	2007/08	2007/08	Target 2008/09	Performance compared to		RAG
					Quarter 1	Quarter 2	Quarter 3		2006-07 Outturn	Qtr 2	
ADULT SERVICES SOCIAL CARE PERFORMANCE ACTIVITY											
C28 BV53	Intensive home care	15.1	13.9	16	15.5*	14.6 ????	14.7 ????	To be reviewed	↑	↑	R
C32 BV54	Older people helped to live at home per 1,000 population	68.5	64.0	80.0	58.3	66.1 ??	66.3 ??	TBR	↑	↑	R
C62	Carers' assessments leading to services	3.40%	6.3%	10.0%	6%	6.2% ???	5.4 ??	TBR	↓	↓	R
D40	Clients receiving a review	50.70% ??	65.0% ???	95.0% ????	60.8% ???	65.9% ???	67.1% ???	TBR	↑	↑	R
D54 BV56	% of items of equipment and adaptations delivered within 7 working days	78.10%	85.0%	90.0%	88.5%	81.1% ????	83.9 ????	TBR	↓	↑	R
D55 BV195	Acceptable waiting times for assessments	86.10%	70.9%	90%	72.6%	83.0% ???	85.5 ????	TBR	↑	↑	R
D56 BV196	Acceptable waiting times for care packages	87.00%	83.0%	95.0%	88.9%	84.9% ???	88.5 ????	TBR	↑	↑	R
C51 BV201	Direct payments	82	87	138.5	82	87 ??	90.1 ???	TBR	↑	↑	R
E47 LAA	Ethnicity of older people receiving assessment	0.82	1.10	1<2	1.25	1.25 ???	1.29 ???	TBR	↔	↔	G
D75	Practice learning	11.7	22.2	23	7	16.85 ????	18.6 ????	TBR	↓	↑	R
E82	The percentage of assessments which lead to service being provided	78%	69% ????	68-77% ????	74.5 ????	78% ????	78% ????	TBR	↓*	↔	R

CUSTOMER CARE (SOCIAL CARE)											
Local	% of complaints that were resolved in period within indicated timescale (stages 1 and 2)	40%	62%	70%	82%	80%	62%	TBR	↑	↓	A
Local	% of complaint issues that indicated the need for a revision of policy or procedure following the completion of stage 1 or 2 complaint investigations	0	9 (5%)	16 (8%)	3 (7%)	3 (9%)	6 (14%)	TBR	↑	↔	G
FINANCE											
PAF B12	Unit cost of residential care, nursing care for all client groups plus intensive home care	£465 ????	£479 ???	£493 ???	£530 ??	£540 ??	£533 ??	TBR	↓	↓	R
PAF B17	Average gross weekly expenditure on home care for adults and older people	£14.40 ????	14.80 ???	£15.20 ???	£17.00 ??	£16.46 ??	£16.22 ??	TBR	↓	↑	R
HUMAN RESOURCES (SOCIAL CARE)											
SAS 8.3 GN250	Recruitment & Retention Indicator (Staff Turnover) Percentage of SSD directly employed staff that left during the year.	6.66%	8.50%	7.00%	10.79%	10.2%	8.6%	TBR	↓	↔	A
SAS 8.3 GN251	Recruitment & Retention Indicator (Staff Vacancies): Percentage of SSD directly employed posts vacant.	11.20%	12.30%	11.00%	21.06%	24.75%	NA	TBR	NA	NA	R
HOUSING PERFORMANCE ACTIVITY											
KPI 2a	Percentage of service users who have moved on in a planned way	71.57%	76.91%	72.00%	81.96%	81.72	To follow at Q.4 200 (cumulative total)	TBR	↑	↓	G
LPI 4	Number of non decent private sector homes occupied by vulnerable households made decent.	170	269	200	34.0	121.0		TBR	↑	↑	G
BV213	Number of cases where homelessness has been prevented - total cases	119	285	355	132	110		TBR	↑	↑	G
		Cases	DCLG score 3	CLG score 4							

LPI 7	Average length of time for major adaptations from OT referral to work beginning (non waiting list) in Weeks	42.1	39.66	40.00	8.67	24.86	41..57	TBR	↓	↓	R
LPI 18	RSL Void turnaround time	N/A	New Indicator	NA	31.66 days	30.45 days	32.52	TBR	NA	↓	NA
LPI 19	Homeless households in TA who accepted an offer of accommodation	N/A	91	NA	9	16	30	TBR		↑	NA
LPI 20	Homeless at home households who accepted an offer of accommodation	N/A	66	NA	7	11	19	TBR		↑	NA

APPENDIX 2

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
B12 : Average gross weekly expenditure per person on supporting adults and older people in residential and nursing care and providing intensive home care	Represents the average weekly cost for one weeks care in residential care, nursing care or via intensive home care. This is for In House and external provision covering all client groups (Older people, Learning Disability, Mental Health and Younger Adults)	The indicator consolidates all expenditure and activity together to produce an average weekly cost.	In 06/07 the total expenditure in this indicator was £58.455m divided by resident weeks of 110,233 producing a weekly unit cost of £530
B17 : Unit cost of home care for adults and older people	Represents the average gross hourly cost for home help/care in any specific year	The indicator consolidates all expenditure for home care/home help for all adult client groups and older people during the year and activity (number of home help/care contact hours for all adult client groups and older people).	The unit cost of homecare has increased following the establishment of specialist homecare provision. Independent provider costs vary. Specific initiatives to improve this indicator during 08/09 such as retendering domiciliary care. 06/07 outturn £14.80, 07/08 target £15.20.
C28 : Intensive home care	Number of households getting Intensive home care in a specific week - per 1,000 population aged 65 & over	Intensive homecare is more than 10 hours & 6 or more visits in a week. This is measured on a sample week in September, designated by Dept. of Health	With a population of 42,969, an indicator figure of 15 would represent 645 households. Therefore a target indicator figure of 16, would represent 688 households whereas 600

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
			households gives an indicator of 13.9
C32 : Older people helped to live at home	Older people, aged 65 & over, helped to live at home on a specific date - per 1,000 population aged 65 & over	We help people to remain in their own homes by providing services such as homecare, day care, meals on meals, direct payments, short-term breaks and professional support	With a population of 42,969 we need to help 4297 people to score 100. Therefore a target indicator figure of 80 represents 3438 people and an indicator of 65 represents 2793
C51 : Direct payments	Adults (aged 18-64) and older people (aged 65 & over) receiving direct payments, on a specific date, per 100,000 population aged 18 or over (age standardised)	If a person is assessed as eligible for a social care service from us, they have the option of taking the service as a 'direct payment' i.e. a sum of money which they choose to spend on the provider and package of care they want instead of what we would provide	The calculation of the indicator is complicated because it depends on the numbers in different age groups. Therefore a target indicator figure of 104.5 represents approximately 200 people whereas 150 people gives an indicator of approximately 80.
C62 Carers assessments leading to services	The number of people receiving a 'carer's break' or a specific carer's service during the period, following an assessment or review as a percentage of all clients getting a community-based service	This differentiates services which we provide to enable a carer to continue in their role from the services which we might provide for the cared-for person. Often this is a break, perhaps to enable the carer to take a holiday, or to attend a weekly leisure activity but it	In a year we help approximately 6,000 people with a community-based service so for a target indicator of 10% we need to provide a service for 600 carers.

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
		could also be training or emotional support	
D54 : equipment and adaptations delivered within 7 working days	Percentage of items of equipment and adaptations delivered within 7 working days over the year	This covers all equipment and adaptations except those that require construction, structural work or more than just a simple fitting. The time measured is from the decision to supply to satisfactory installation.	Since the setting up of the Integrated Community Equipment Stores, all these deliveries are monitored through them.
D55 : Acceptable waiting times for assessments	For new older (65 & over) clients, the average of (1) the percentage where the time from first contact to contact with the client is less than 2 days and (2) the percentage where the time from first contact to completion of assessment is less than 28 days.	A potential client might come to our notice in various ways: through their GP, from hospital, from a neighbour, from their own contact with us, etc. This (the referral) is the starting point and the aim is to firstly speak to them and secondly assess their needs as quickly as possible.	Although there are a number of legitimate reasons for a delay (e.g. difficulty getting hold of the client).
D56 : Acceptable waiting times for care packages	For new clients, aged 65 & over, the percentage for whom the waiting time from completion of assessment to receipt of all services is less than 28 days.	The time is measured from the end of the assessment process to the date that the last of the services we have agreed to provide is put in place.	An assessment will result in a care plan, identifying all the services we are to provide; these must all be put in place to complete the process.
D75 Practice Learning	Number of assessed social work practice learning days per	(i) Number of assessed social work days (those that are part of	The number of practice learning days provided by a

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	whole time equivalent social worker	students' assessment for their social work degree or the Diploma in Social Work) <i>directly provided by the council</i> . PLUS (ii) Number of social work assessed days <i>directly supported by the council</i> in the voluntary, private sectors or in other sectors such as health, education.	council to student social worker to learn "on the job". A score in excess of 17 is the highest banding for this indicator.
E47 : Ethnicity of older people receiving assessment	The percentage of service users receiving an assessment that are from minority ethnic groups , divided by the percentage of older people in the local community that are from minority ethnic groups	Minority ethnic groups are all other than white and the count is of all those aged 65 & over receiving an assessment in the year	The proportion of ethnic minority groups in the borough population is 4.57 %. Our indicator score is bound to fluctuate a bit but we aim for something over 1.0 (which would represent 4.57% of those assessed coming from minority groups) but under 1.5 (which would represent 6.85% of those assessed)
E82: Assessments of adults and older people leading to provision of service	The percentage of assessments undertaken, which lead to service being provided	Measurement of proportion of people aged 18+ assessed which in turn results in the delivery of a care package. Above 77.0% is considered is too high. Conversely, under 68.0% considered too low.	06/07 outturn 69.0%; 07/08 target 68-77% which in turn equates to a 5 band range. As staff focus their assessment activity there is perverse tendency for those

INDICATOR	FULL DESCRIPTION	EXPLANATION	<i>MEANING</i>
			in receipt of a package to rise but the score of the indicator to fall.
AN INTRODUCTION TO STRATEGIC HOUSING INDICATORS REFERRED TO IN THIS REPORT			
KPI 2a Percentage of service users who have moved on in a planned way	This indicator measures the number of service users who have moved on in a planned way as a percentage of service users who have left the service. Planned moves include moving into supported housing, permanent accommodation or back to family. Unplanned moves include abandonment, eviction, custody and sleeping rough.	The objective of short term accommodation based services, direct access accommodation, outreach services to rough sleepers and outreach services to service users in unstable accommodation is to move service users on to a more independent outcome agreed as part of the support planning process.	Local target is 70% and measures the effectiveness of individual services against service provision as a whole.
LPI 4 Number of non-decent private sector homes occupied by vulnerable households made decent	The number of non-decent private sector homes occupied by vulnerable household made decent	The Government target is for all local authorities to ensure 70% of private accommodation occupied by vulnerable households meets the Decent Homes standard by 2010	Vulnerable households have been defined as those in receipt of at least one of the principal means tested or disability related benefits. The governments Decent Homes Target Implementation Plan sets out a trajectory for delivery that includes targets for specific years up to 2020 expressed as the proportion of

INDICATOR	FULL DESCRIPTION	EXPLANATION	<i>MEANING</i>
			vulnerable households in the private sector living in Decent Homes. The relevant target percentages are 65% by 2006, 70% by 2010, and 75% by 2020. There is also a target that this proportion will increase year on year.
BV213 Number of cases where homelessness has been prevented	Number of households who considered themselves as homeless, who approached the local housing authority's housing advice service(s), and for whom housing advice casework intervention resolved their situation.	The purpose of this indicator is to measure the effectiveness of housing advice in preventing homelessness or threat of homelessness. The provision of comprehensive advice will play an important part in delivering the housing authority's strategy for preventing homelessness in their district.	The aim of this indicator is to prevent the household presenting as homeless and homeless papers being taken. Also avoids the use of temporary accommodation. The indicator is calculated by recording the number of cases assisted through successful casework intervention and dividing this figure by the number of households in the local authority area to produce a figure per thousand households.
LPI 7 Average length of time for major adaptations from OT	Average length of time waiting for major adaptations from assessment to work beginning	A major adaptation is defined as all work costing £500 or more. This indicator measures the time in	This indicator looks at all cases and measures the average number of weeks

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
referrals beginning (Non waiting list) work (Non waiting list)	on site	week from the point that a disabled customer is referred to housing improvement to building work starting on site.	from referral to work starting.
LPI 18 Registered Social Landlord void turnaround time	Average time in calendar days to re-let Registered Social Landlord void properties.	<p>The purpose of this indicator is to measure the amount of time taken from when a property becomes void (empty) to when the property is available to be re-let. The outcome of this indicator will play an important part in delivering the housing authority's strategy for reducing homelessness in the district.</p> <p>This is an RSL led indicator therefore Strategic Housing is unable to dictate a target for this indicator.</p>	This indicator looks at all void properties and measures the average number of days from void date to re-let date.
LPI 19 Homeless households in temporary accommodation who accepted an offer of accommodation	Accepted homeless households with a housing duty leaving temporary accommodation secured under s.193 who have accepted a Part 6 offer of accommodation (s.193(6)(c)) – including LA nomination.	The council has a duty to households made homeless through no fault of their own (s193). This duty is to secure an offer of accommodation (part 6). The council does this by nominating homeless households to housing providers. This group of people are	The purpose of this indicator is to count the number of offers made and accepted by homeless households living in temporary accommodation. Low levels of accepted offers may lead to "silting up" of temporary accommodation

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
		in temporary accommodation. The agreement with housing providers is that 25% of properties are offered to homeless households.	
LPI 20 Homeless at home households who accepted an offer of accommodation	Accepted homeless households with a housing duty but NOT requiring Local Authority temporary accommodation secured under s.193 who have accepted a Part 6 offer of accommodation (s.193(6)(c)) – including LA nomination.	The council has a duty to households made homeless through no fault of their own (s193). This duty is to secure an offer of accommodation (part 6). The council does this by nominating homeless households to housing providers. This group of people are temporarily staying with family or friends. The agreement with housing providers is that 25% of properties are offered to homeless households.	The purpose of this indicator is to count the number of offers made and accepted by homeless households living in temporary accommodation. Low levels of accepted offers may lead to “silting up” of temporary accommodation
AN INTRODUCTION TO CUSTOMER CARE INDICATORS REFERRED TO IN THIS REPORT			
No. complaints leading to a revision of policy or procedure	The number of times that complaints about Social Services functions, which have raised issues which tell the authority something we were not previously aware of, then lead to a change of policy or procedures.	Most complaints are resolved by providing the complainant with an explanation, and or an apology where mistakes have been made. In either event a small number may require a review of service delivery, and/or a reassertion or revision of a policy or procedure.	We receive compliments as well as complaints, and many complaints are unfounded, Any patterns or trends within complaints may expose a need for a change of policy or procedure.
% of complaints	The percentage of complaints	There is a legal requirement that	Complaints that are not dealt

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
resolved in indicated timescale	that have been resolved-provided with a response that satisfies the complainant - within the indicated timescale.	councils provide a specific Social Care complaints and representations procedure. Complainants have a <i>legal entitlement to progress</i> through a three stage escalating system culminating in a referral to the Local Government Ombudsman if unsatisfied at any of the stages.	with promptly are more likely to be carried on to the next stage. The target within the borough is that 75% are resolved within the timescales; this is a better indicator of quality than a target of reducing the number of complaints.
AN INTRODUCTION TO HUMAN RESOURCES INDICATORS REFERRED TO IN THIS REPORT			
% of SSD directly employed staff that left employment	Recruitment & Retention Indicator (Staff Turnover) Percentage of SSD directly employed staff that left during the year to 30 September.	This indicator is normally produced in the autumn for the social care statutory return. IT is used to highlight any staffing difficulties.	Contrasting recruitment with vacancy levels annually over time (a snap shot held each September) or quarterly enables managers to identify areas of potential staff shortage.
% of SSD directly employed posts vacant	Recruitment & Retention Indicator (Staff Vacancies): Percentage of SSD directly employed posts vacant on 30 September.	This indicator is normally produced in the autumn for the social care statutory return. IT is used to highlight any staffing difficulties.	Contrasting recruitment with vacancy levels annually over time (a snap shot held each September) or quarterly enables managers to identify areas of potential staff shortage.