

# Talent Management Pilot in Southern Health Foundation Trust

## Review/Evaluation Report

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### Background and introduction

The Thames Valley and Wessex Leadership Academy, in association with the national NHS Leadership Academy, invited Southern Health Foundation Trust to be one of three sites to pilot the introduction of talent management. The pilot was sponsored by the Executive Group who nominated the NE Hants Division as a pilot site for talent management.

Southern Health had already designed, developed and implemented talent management at senior management levels in the trust. This was conducted by the Executive Group with their direct reports and continues to be followed as an approach at this level. There was always an intention to roll out talent management across the trust so that all employees can eventually benefit from talent management in action.

This report focuses on reviewing the tailoring and implementation of talent management at a divisional level in the NE Hants Division. The local objectives set for this pilot were as follows:

- Create a better understanding of talent in the division
- Identify individuals showing strong signs of potential for increased responsibility and leadership roles
- Give attention and show interest in individuals' aspirations, development and well-being
- Support individuals to have new insights into themselves and their potential
- Develop a stronger leadership pipeline to feed succession planning
- Become better informed about training and development needs

The local sponsors for this were the Divisional Director, Nicky Seargent, and the Clinical Director, Paul Hopper.

### A phased approach

After much discussion, it was decided to take a phased approach to talent management, starting with Band 7s including the direct reports of Nicky Seargent and the four community matrons and other leadership roles. The intention is to be fully inclusive and, once this group has experienced the process themselves / developed further as leaders, for them to then run the process with Band 6s (supported and guided where necessary).

There were 3 line managers involved in this pilot (as both managers and recipients of talent management), 2 senior stakeholders (the Clinical Director and the Director of Nursing) and 8 band 7s/6s involved as participants.

## The approach taken



Southern Health was supported by Talent Works Limited in the design and implementation of this pilot. Talent Works presented a draft approach which was tailored and refined during consultation with the Divisional Director and her management team and input was also gained from those participating in the talent management pilot. This was also informed by the NHS Leadership Academy pilot materials and where possible these were integrated into the approach.

The general approach was to adopt the nine box grid. After some preparation, this allowed for an exploration with each individual as to their current performance and leadership potential. This was followed by a Talent Review Board or calibration session with all managers (the executive in the pilot) in order to gain a wider understanding of the talent pool as a whole. The agreed position on the grid was then fed back to each individual and their development/ ongoing support from their manager was discussed.

A more detailed project overview is shown as a flow diagram in Appendix 1 for reference.

## Feedback from Senior Stakeholders, Divisional Director and Managers

In a context of a well-established values-based annual appraisal process in Southern Health Foundation Trust and regular monthly one-to-ones, senior stakeholders and managers reported that despite these good people management practices talent management added something over and above this. They reported that talent or 'potential' was typically only discussed once a year and that this process brought it into sharper focus and made it a more continuous process. In general they were very positive about the increased insight that the talent management pilot has given them in their division, helped them make some better informed decisions about investments in development and they have identified some collective development needs across this tier of their division that can be supported in a collective basis.

The divisional director and clinical director have since been advocates of the talent management process to other divisional leaders. This has supported the subsequent introduction of talent management into other divisions in Southern Health, informed by this pilot.

Specific feedback collected through an evaluation questionnaire is summarised below.

**Ease of use:** The managers reported that the guide was provided at least 3 days in advance of the conversation, briefing on tools was provided in advance of the conversation and they had participated in specific training provided by the organisation. The forms and documented materials were rated as easy to understand.

**Identifying learning and development needs:** Talent management was rated as either critical or useful in identifying learning and development needs. This was because:

*“[It] Enables significantly more depth of conversation in regard to the individual as opposed to the appraisal that can lean towards performance management and refer more towards the team.”*

*“Helped to focus areas for personal development and impact on self and on team”*

**Identifying leadership potential/potential for growth:** Again talent management was rated positively here (critical or useful) in identifying leadership potential or potential for further growth. This was explained through these qualitative comments:

*“[It] Enabled conversations between senior team that would have not taken place previously considering the overall talents and professional growth of a number of staff members particularly in relation to future strategy and planning”*

*“Helped to frame useful discussions around personal and professional development and how this may be achieved”*

**Communication with staff:** The talent management pilot was seen as useful in terms of improving communication with staff. The benefits was described as follows:

*“Additional valuable opportunity for discussion, particularly helpful within the framework of staff development.”*

*“Added a different lens in which to view an individual”*

**What worked well:**

- Processes were very clear, great support, clear documentation
- Staff engaged as non-threatening
- Ability to have some different question types to challenge an individual.
- Thinking about not just behaviours but also personal drives and ambition.
- Value of the joint discussion at the review board because this gives opportunity to challenge at the time. Improves the quality and depth of feedback to the participant. The discussion also reduces the impact of any personal bias or relationship and gives a more rounded picture.
- The challenging discussions between the senior team (at the talent review board) was useful as it allowed line managers to see their direct reports through a different lens to support talent management.
- Although relating to the current role and present situation (and agreed that there will be movement around the grid depending on circumstances) the discussion does enable to look at potential in an alternative context and recognise the talent of individuals that might not be emphasised in their current role. Although some have struggled with the boxes in this context they are all very relevant but need thorough explanation with the feedback.
- The benefit for the division is that we are using the information gained from the process to inform the development of structures and suitability of individuals for roles.
- For the individuals concerned there were very valuable conversations that identified personal strengths and weaknesses that may not have been highlighted through the appraisal process, that are now influencing development and career decisions.

- The wealth of information gained on both sides has been used to inform the appraisal process in this cycle.
- To have the opportunity to ‘hold the mirror’ up to oneself as a professional –this was a different view from one seen through the appraisal process.

***What worked less well/ideas for improvement:***

- Would be useful to have a scale with regards to some of the questions
- It would have been useful to have a sliding scale or areas of overlap –as not always clear cut
- Need to be absolutely sure that initial conversations and guidance for managers clarifies terminology so that we are all reviewing in the same way, the suggested web resources would help with this
- Web resources: It is always helpful to have additional resources to help shape those kinds of conversations, and for staff to have access to resources to support their prep for the process in various formats

**Individual Feedback from participants**

There were 11 individuals participating in the talent management pilot in SHFT. We have received feedback questionnaires from 7 of these participants.

***Previous experience with people management processes:*** In general the participants had had positive experiences of people management processes. Everyone had had an appraisal in the last twelve months, this had helped to improve how they did their job and agree objectives. There was more of a mixed response when asked if this had helped them feel valued or if learning and development needs had been identified. This suggested that appraisals have a greater focus on performance management (as was felt by managers too – see above section) than perhaps on development/career progression.

***Preparation, support and following of agreed talent management process:*** Most had received the guide/paper at least 3 days in advance of the conversation and had either received a briefing on process and tool(s) provided by a manager in advance of the conversation or specific training from Talent Works (the consultancy supporting the pilot). Those who had received a briefing or training found the forms/materials easy to follow. The individual who did not receive any form of briefing or training, found materials hard to use. This confirms that training for managers and participants is an important part of successful talent management.

Finally participants were able to confirm that their managers had taken them through the planned elements of the talent management process, i.e. they had had a talent management conversation prior to the talent management board and a feedback session afterwards.

***Development and aspirations:*** Some people reported that the talent management process had helped identify their development needs for the **current** role, but for others this was less relevant.

*“Strengths and weaknesses were identified “*

*“No as I am retiring next year”*

Where development needs were identified, participants reported having access to development.

*“I am hoping to embark on a Pilot for Integrated Team Working and hope to use this opportunity to improve my current role and make a big difference to patient care and general standard of the service provided to commissioners. My line manager is supportive of this”*

Most people reported that the talent management process had not directly helped identify their development needs for a future or aspirational role, as for many this was less relevant and as a result they did not report access to development here.

*“I am not seeking to advance my career but would rather improve my performance in my current role.”*

Only a few were identified as having this **future** potential and it could be that those individuals did not complete the evaluation survey.

### General feedback

*“It was nice to receive good feedback from my line managers. It reassured me that I am doing a good job and made me feel more valued.”*

**Impact on participants:** the national NHS Leadership Academy requested that we ask participants to rate a number of statements against a range of different scales before and after the pilot. There was little change recorded before and after the pilot, so the general feedback across before and after is given below.

Questions	Responses
I look forward to going to work	Most said often
I am enthusiastic about my job	Most said sometimes
Time passes quickly when I am working	Most said often
I have clear, planned goals and objectives for my job	Most agreed
I always know what my work responsibilities are	Most agreed
I am trusted to do my job	Most agreed
I am able to do my job to a standard I am personally pleased with	Mixed levels of agreement here
The recognition I get for good work	Mixed levels of satisfaction
The support I get from my immediate manager	Most satisfied
The opportunities I have to use my skills	Most satisfied
The extent to which my organisation values my work	Most satisfied
I am satisfied with the quality of care I give to patients / service users	Most agreed
I feel that my role makes a difference to patients / service users	Most agreed
I am able to deliver the patient care I aspire to	Mixed levels of agreement here
My immediate manager gives me clear feedback on my work	Most agreed
There are opportunities for me to develop my career in this organisation	Most agreed
The person I report to creates opportunities for my professional growth	Most agreed
I am able to access the right learning and development materials when I need to	Most agreed

Please note that no pre measure was taken before the talent management pilot began. In an effort to overcome this, the questionnaire asked participants to rate the same set of questions remembering how they felt before the pilot and then again as they perceive things after the talent management pilot. This was not an ideal way to measure impact as it is hard to remember back to how things were before. It may be this measurement technique that caused most people to rate these questions in the same way before and after the pilot. There was one exception who tended to rate many of the questions less well after the talent management pilot.

As numbers are so small it does not make sense to create graphs of these before and after findings, especially as one individual skews the data to look less positive after the pilot when in fact most people felt things were the same or in some instances a little better.

### **Summary and recommendations**

The Talent Management Pilot has been very useful from a management perspective as it has delivered the following benefits:

- Time to focus on personal development with each individual outside of appraisal which is more performance-focused
- Shared view of talent and potential in the division to help with future planning and strategy
- Increased transparency of training investment in individuals
- More disciplined approach to training and development linked to performance and potential

Key lessons learnt through the pilot are as follows:

- Face-to-face briefing is required for all involved to ensure full understanding and buy-in to the process
- It can bring shared management attention to performance issues (already identified in appraisal) especially where lower potential is paired with this. As a result talent management may act as a catalyst for increased management of underperformance. This may mean that some individuals (currently under-performing) may feel less positive after talent management as they receive tougher messages about development investment available for future aspirations. This was the case for one individual.

Since the talent management pilot senior stakeholders (Divisional and Clinical Director) have spoken at senior leader meetings to recommend talent management as a useful intervention across the divisions. As a result this has been taken up by other divisions across the trust.

## Appendix 1

### Talent Management for Leaders in Division: Process Overview

