Do OD: Talent Management Workshop Numero Uno

June 2014

Premiered at the OD in The NHS II Conference, 7 July 2014
So what is TALENT?

- David Beckham – you can *see* this talent
- Talent is at all levels, not just the top
- Ability, opportunity and the right attitude/behaviours to develop – work at it!
- Unlocking and optimising raw untapped potential
- Resilience
- Knowledge
- Raw capability
- ‘Everyone has it – but it’s unlocking/finding it…and helping individuals see it’
...And TALENT MANAGEMENT?

- Talent – are they ready now?
- Impossible → Possible
- You need support to unlock talent
- Creating the opportunity to ‘do it’ and improve it—stretch!
- Inclusive
- Providing scope to move from potential to actual
- Retain or let go – brave.
- Getting people to believe in themselves
- Not time bound
- Not confined to appraisals
- Formal programme?
- Is it always ‘upward’?
What enables TALENT MANAGEMENT?

• Need to enable managers to spot and recognise potential
• It’s about the conversation – get to know staff
• Organisational readiness and environment
• Links beyond the organisation – possibilities
• Open mind – challenge your perceptions
• Development and deployment
• Career path – it’s about the journey and the destination
OD Role in TALENT MANAGEMENT

- To be a TM Champion and catalyst
- Enable and support others
- Connector with line management
- Pull together resources and tools such as coaching, mentoring and development for individuals
- Explore possibilities
- Be aware of organisational needs
- Systematic and planned
- Conversations for all
- Create opportunities, space and systems
- No failure – only feedback
- Challenge – ‘Why not?’
What does TM look like now in the NHS?

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<th>Great</th>
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<tr>
<td>✓ Good in some places – Undergrads, Postgrads, Professional paths etc.</td>
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<td>✓ Values based approach being used to support whole TM approach</td>
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<table>
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<th>Not So Great</th>
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<tr>
<td>✗ Components present – just not joined up</td>
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<td>✗ Poor performance not actively managed across the organisation – it is tolerated</td>
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<td>✗ Talent is managed in silos; team, organisation, region, profession</td>
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<td>✗ Not good at retaining and identifying</td>
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<td>✗ Inconsistent and still a mystery to staff</td>
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<td>✗ What it looks like and what it feels like differs</td>
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<td>✗ Hierarchical or defined paths</td>
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<td>✗ Core group of staff (bands 1-4) are ignored – ‘forgotten tribe’</td>
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<td>✗ Hard to keep the contributors engaged and interested</td>
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What should TM look like in the future?

| ✓ Across the full health and social care system – make it easier for people to move across organisations in all sectors |
| ✓ Standardisation – shared purpose? |
| ✓ Clinical and non-clinical divide has disappeared |
| ✓ Develop staff to be leaders, and lead change, regardless of role or environment |
| ✓ Everyone’s responsibility to manage and develop talent |
| ✓ Integrated and inclusive TM to reflect an integrated and inclusive NHS |
| ✓ Evolve and develop existing roles to meet increasing/different needs |
| ✓ TM is valued – recognition that it enhances/develops individuals and organisation – and that it works |
| ✓ We pull rather than push |
Questions to Ponder....

What is stopping the NHS?

Where do we recruit from? Trial period? Prove new starters can perform?

How do we deal with under performance?

How do we get the right people on the right development intervention?

How do we manage talent data – ESR not working?

Too much focus on leadership? More focus on people management skills?

How do we develop all our managers to be operational in TM?
Gaps for Do OD to explore and tackle...

- TM and OD needs to be championed and owned by the Board and senior managers
- How does the NHS support Boards/CEOs to understand the importance of TM?
- Amend the perception of TM – a tool to support performance and culture change – link to KPIs and outcomes
- Link OD and TM back to the patient
- Ensure TM takes an inclusive approach
- National HR policies regarding this – the NHS is one employer
- More focus on staff performance, linked to behaviour and values
- How do you rate ‘ambition’?
What can we do?

• Keep it simple and define TM – no jargon
• A focus on values and behaviours – what the patient would see
• What does integrated health care look like? Define this so talent strands can be developed
• What is working well where and why? Share best practice and reduce duplication
• Benchmarking with other organisations and sectors
• Take stock toolkit/checklist to start the conversations
• Real life case studies of TM in the NHS – e.g. the benefit statement of TM – tube map?
• The data can’t just sit there – what do we do with it?
Tweet-Ups from the sessions

• @NHSE_DoOD
• @NHSAdamTurner
• @KellyAngusHR
• @KarenDumain1
• @AmandaGrindall

• @mrfazack
• @faithllanelli
• @Echallans
• @jmcatlin
• @jackebones