



The East Midlands
Leadership Academy



Inclusive Leadership for a Purpose



Developing NHS Talent in the East Midlands

Thematic Analysis of
East Midlands Talent
Interviews



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1. Introduction

Following on from the inclusive Talent Management programme of work designed to help organisations implement their own best-fit talent strategies, the national focus on talent management and succession, as well as the recommendations from the Smith and the Rose reports into NHS leadership requiring organisations to demonstrate their talent strategies, the East Midlands Leadership Academy commissioned a project to capture rich intelligence on the levels of talent management maturity in the region.

We asked Executive Teams and their Talent Leads in each East Midlands NHS organisation to engage in a talent management interview exercise, to allow the East Midlands Leadership Academy to understand progress and challenges within the talent and succession agenda. We intended that this would inform our work in collecting an evidence base around system Talent Management challenges, and how we as an East Midlands system can best solve these challenges.

The expected outcomes and benefits were numerous; we anticipated that members would be more likely to be open and receptive in a face to face format whereby the data we collected would have more depth, engagement would be greater in that we would expect better return rates and, in turn, we could offer some consultancy advice about next steps they may wish to take.

The project was initiated in late December with face to face interviews taking place throughout January to March.

2. Our Interview Approach

2.1 Who did we interview?

We invited both provider and commissioning organisations to participate in our interviews, with 25 member organisations agreeing to give their time to support this regional project; this represents a 68% return from a total of 37 organisations invited. At the time of writing up our findings, data has been received from 23 of those interview sessions.

Those interviewed typically were either the nominated strategic or operational lead for talent or, in smaller organisations (CCGs), senior leaders that were responsible for talent as part of a wider portfolio.

2.2 What did we want to find out?

Our intention was to capture evidence on the different approaches that organisations employed to develop their workforce; what challenges they may be experiencing in recruitment, attraction, retention and succession planning; their views on thinking systemically about talent and what support they may need to develop their talent management, both culturally and operationally.

Additionally, we wanted to get a sense of how far respondents had progressed organisationally in the way they manage talent and we posed questions to understand what they had done in the past, what they were doing now and where they would like to be in two years' time.



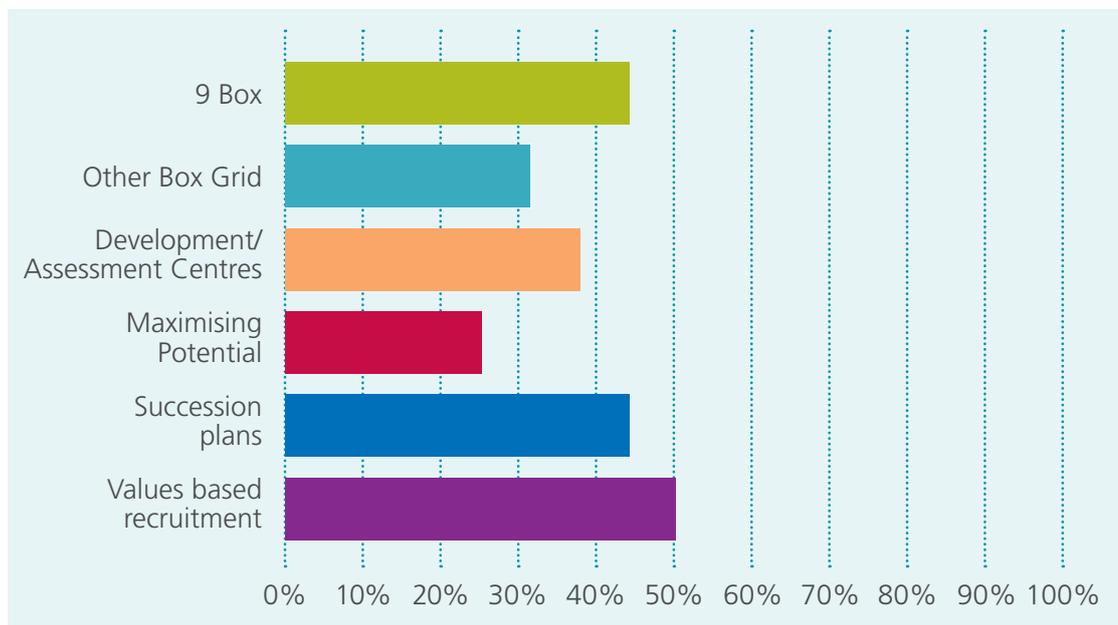
3. Thematic Analysis – Quantitative

This report aims to illustrate the collective data we have gathered as part of this exercise, using both quantitative and qualitative measures.

3.1 Talent Management Methods Used

Whilst a range of tools are used (see below), feedback would suggest that consistency of application is disparate and not well aligned in some cases. The research clearly indicates, however, a strong emphasis on adopting values-based recruitment practices.

With respect to use of national tools and frameworks, limited utilisation has occurred. Two prominent reasons have arisen to explain variance in usage, firstly a lack of awareness that such tools exist and how to access them and, secondly, organisations understanding the tools are available but choosing to develop their own tools that are more bespoke to the organisation; this is particularly prevalent in larger trusts.



3.2 Talent and Leadership Development Programmes of Support

All of those that responded accessed regional and national leadership programmes to support their talent management as well as supported study leave to enable individuals to focus on personal development. Similarly, almost all (86%) designed their own leadership development programmes to support leaders. Over half (63%) had adopted the healthcare leadership 360 model, together with other psychometric tools, as part of their talent management strategy and there was also a high response when it came to offering coaching and mentoring support (95%) for individual development. Stretch assignments were also being used regularly within organisations to develop potential within leaders (82%).

More bespoke talent development interventions, such as talent development centres (31%) and targeted support towards specific talent pools (36%), were lower in utilisation and adoption; however evidence would suggest that there is a growing appetite from organisations to tailor their talent management approach in this direction.

The use of apprentices (36%) and the graduate management scheme (50%) was variable.

Answer Choices	Responses	
Organisational leadership programmes	86.36%	19
Specific talent pool development programme	36.36%	8
Coaching and Mentoring	95.45%	21
Healthcare leadership 360 model	63.64%	14
Psychometric feedback tools	63.64%	14
Study leave – individual specific training	86.36%	19
Stretch assignments and secondments	81.82%	18
Graduate management trainees	50.00%	11
Regional / national leadership programmes	100.00%	22
Technical skills training	81.82%	18
Development / assessment centres	36.36%	8
Other 360 tool	31.82%	7
e-learning	59.09%	13
Ad-hoc self-improvement workshops	81.82%	18
Clinical placements	31.82%	7
Apprentices	36.36%	8
Total Respondents: 22		

3.3 Talent Engagement Scale

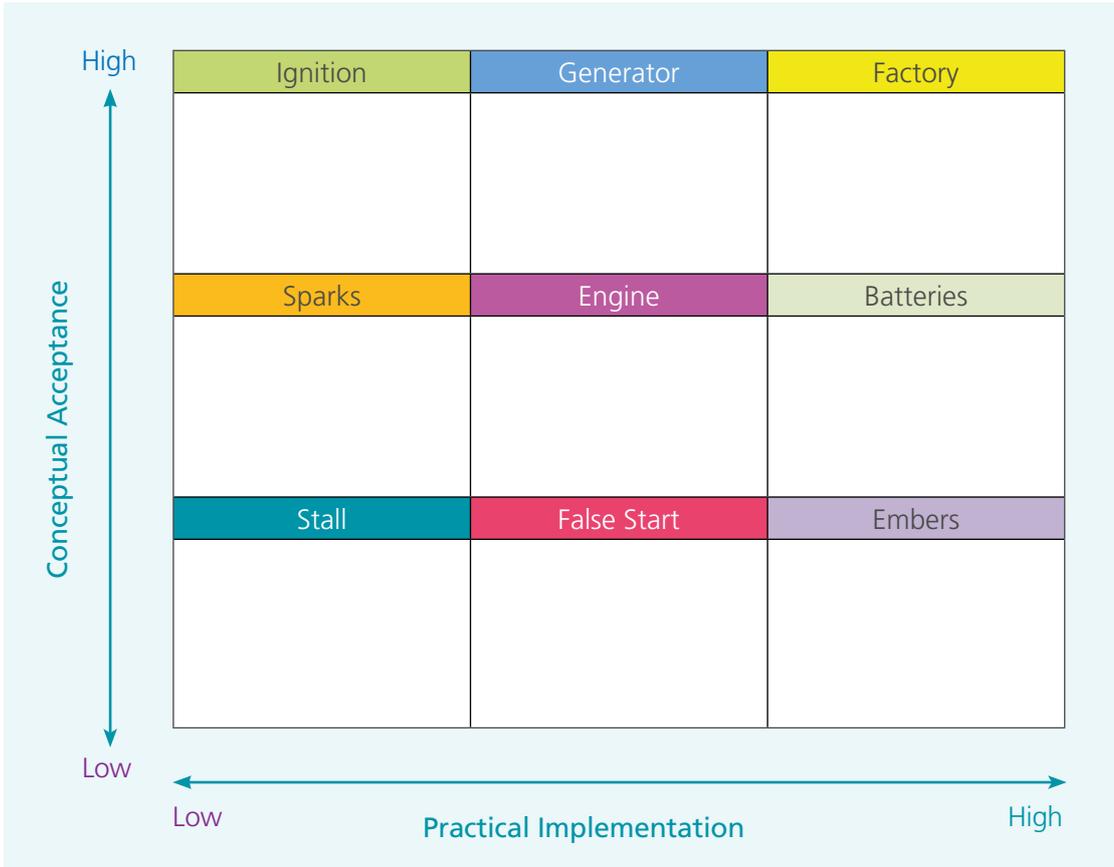
Led by the NHS Leadership Academy, the talent LDP network has created a Talent Engagement Scale to help organisations map where they are, at both a conceptual and implementation level. The tool enables organisations to assess their current position, as well as gain an understanding of what measures they may need to undertake to accelerate up the grid, in order to improve conceptual and practical implementation of talent management.

To understand the shift in progression, we asked interviewees to map where they were two years ago, where they are now and where they need to be in two years' time. This exercise provided useful intelligence as to how we might target and tailor our support.

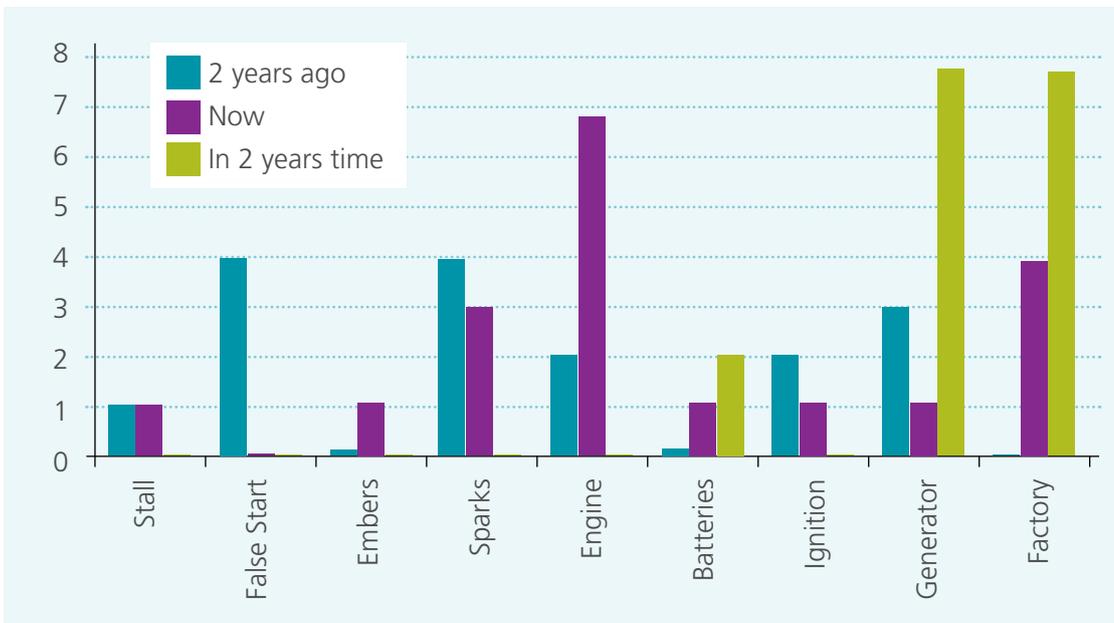
It is worth noting that, given that most CCGs were in start-up stage two years ago, some did not feel able to map their organisation at this point.



Talent Engagement Scale



The chart below provides a visual representation as to how organisations have progressed from two years ago and how they wish to progress in two years' time, as well as where they consider themselves to be presently.



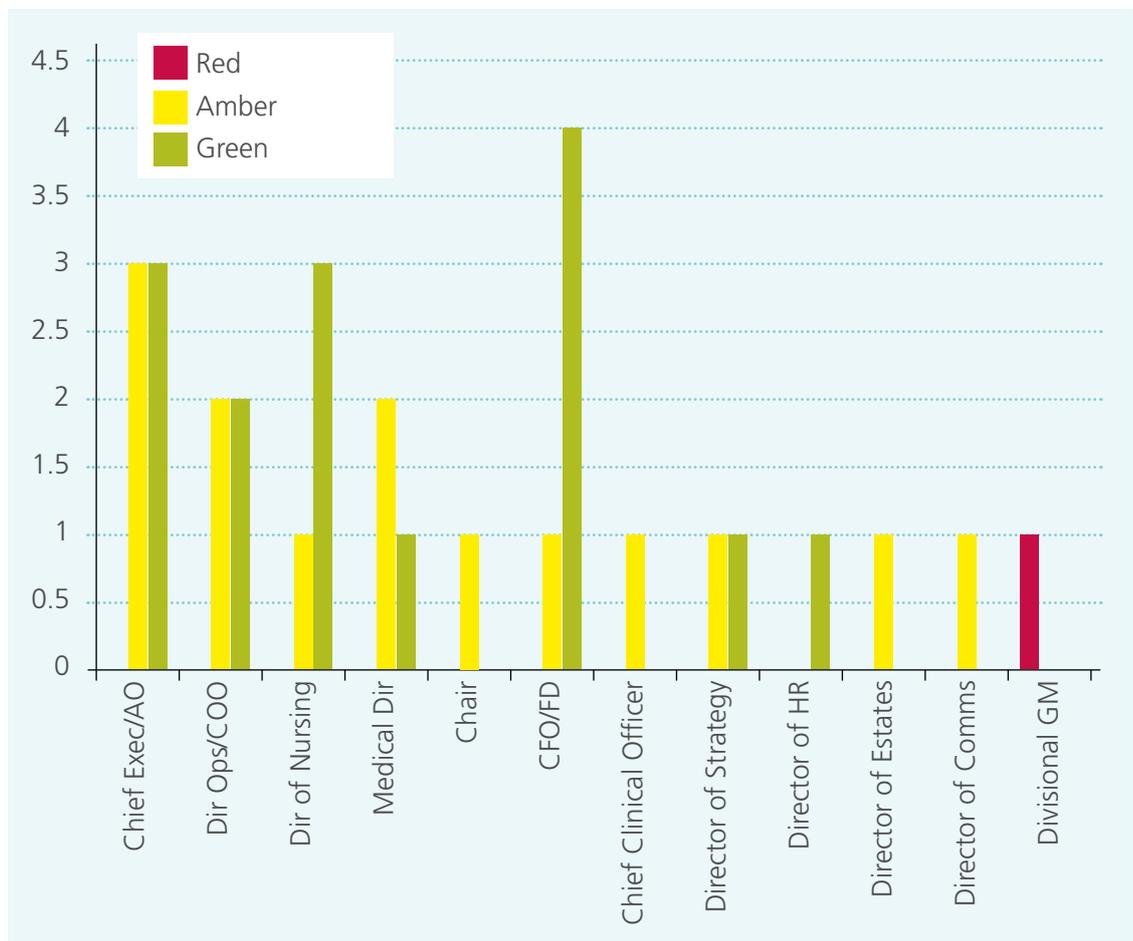
Encouraging growth from low conceptual acceptance and implementation to medium and high conceptual acceptance and implementation is clearly indicated, as well as a strong aspiration from all organisations interviewed to progress to high conceptual acceptance and implementation in two years' time.

3.4 Succession Planning and Talent Pipeline for Senior Posts

From our research, many organisations had not undertaken succession planning of their senior teams in a formal, process-driven way. Equally, the majority of those interviewed conveyed that their executive teams were relatively stable. Some organisations were also reluctant to share data that was deemed confidential to the organisation. Due to these factors, data collection in this area is limited; however, illustrated overleaf is aggregated data from what was supplied.

Using a RAG rating, organisations were asked to rate their senior executive posts using the following scale:

Green	Person in role, successor identified who can also act up in an emergency
Amber	Person in role may leave soon, someone can act up in emergency, however not looking to apply for role
Red	No person in role, no successor identified internally, finding role hard to recruit to



4. Thematic Analysis – Qualitative

4.1 Talent Activity and Planning – Past and Present

To understand the level of progression made in our member organisations, conversations were had to establish what they had done over the past two years and what they were planning to do within the next two years.

Broadly, work conducted historically fell into six key themes:



4.1.1 Review of Appraisal Process and Talent Management Tools

Data would suggest that focus is being placed on shifting the appraisal process beyond a compliance exercise with greater energy being invested to create closer alignment with a values and behaviour based model (VBR).

As an example, **Nottingham City CCG** has conducted a full appraisal review from an equality and diversity perspective to ensure that its talent management approach is an inclusive one.

Nottingham University Hospitals NHS Trust has created a talent conversations DVD to support managers in their development when nurturing talent and the trust has seen an increase of appraisal completion at 90%.

Many of the organisations interviewed did align their appraisal systems with ESR and were also using succession planning tools at a senior level to understand their talent pipeline; however this was inconsistent and many were at early stages of implementation.

4.1.2 Bespoke Leadership Development Programmes and Support

Almost all organisations interviewed had developed in-house bespoke leadership development programmes to support the growth of their talent, many of which were targeted to specific workforce groups or levels of seniority. Several organisations interviewed delivered tiered leadership development programmes aimed at bands 4, 6–7 and senior leaders. Indeed, some organisations have steered away from formal talent management processes and have preferred to invest in leadership development as a route to grow their own.

Nottinghamshire Healthcare NHS Foundation Trust is a prime example of this:

“We focus less on talent management structures and frameworks, and more on encouraging behaviours and culture to spot and inspire leadership talent. Initiatives include Executive Leadership Council and Invest to Lead.”

Due to the varying size of CCGs, the different workforce structures they have and the relative newness of their organisational set-up, a greater emphasis has been placed on developing their leaders organically through bespoke work, as opposed to setting up technical frameworks. Much of the focus has been around development of governing bodies and GP readiness to serve on CCG Boards.

In 2016 we commissioned an organisational development programme focusing initially on our Governing Body and Executive Committee. This comprised team development focused on building strong relationships, and was supported by individual coaching. Lincolnshire West CCG

Appointment of lay (PPI) members and giving them opportunities to develop. It is difficult to find individuals in this category that also have non exec capabilities. Nottingham City CCG

4.1.3 Board Engagement

A proportion of members interviewed have invested significant resource in creating a shared understanding of their organisational talent approach at board level and have felt it was important to create engagement at this tier, to enable talent management to be culturally embedded successfully.

Lincolnshire Community Health Services have spent significant time and resource in creating a people strategy at board level that is congruent with their organisational strategic aims, resulting in significant success in their levels of staff engagement.

Creating, and gaining executive support for, a business-focused people strategy – being recognised as one of the top 100 places to work – moving LCHS from bottom 20% to top 20% in annual staff engagement survey.

4.1.4 Staff Engagement

Opening up opportunities to engage the workforce in supporting talent management progression was identified as a key priority for some trusts, with a good proportion of organisations establishing staff communication groups and champions.

Our staff survey results put us into the top 20 CCGs in the country, scoring very well in terms of the wellbeing of our staff. We have a staff communications group and they have suggested improvements to our communications system. Lincolnshire West CCG

From an organisational development perspective, **Nottingham University Hospitals Trust** has taken the innovative approach of co-creating a new people strategy with clinical leaders, in order to align the people strategy with the organisational strategy, which now includes talent development for the first time.

4.1.5 Attraction, Retention, Talent Spotting, Development and Skills Transfer

An interesting theme to arise from this exercise is that organisations are seeking innovative new ways to improve the way they go about attracting and developing talent, moving away from traditional talent management planning frameworks.

Addressing the challenge of GP recruitment and retention, **Nottingham City CCG** has sought active support from its Corporate Medical Lead for a Regional GP Fellowship Scheme. The scheme is intended to attract and retain talented young GPs within the region. Additionally, the CCG is also exploring new ways to attract GPs to gain experience as Clinical Leads by offering a more flexible, sessional and project based approach.

To support transferability of skills, the **East Midlands Ambulance Service** has constructed a 'job families' framework:

In terms of transferability of skills across the organisation, roles are congregated into 'job families' to help individuals and managers identify talent linked to roles that might initially seem outwith an individual sphere of expertise.

4.1.6 Collaboration and System Talent

As articulated strongly in the Five Year Forward View, the spotlight is readily focused on creating a more integrated system in health and social care. As such, most organisations are acutely aware that more needs to be done to work collectively on talent, viewing it from a systems perspective.

Work has already started, with the emergence of a variety of transformation programmes supported by the LETCs where a focus is being placed on system workforce, talent, organisational development and culture change, attraction and retention.

Sustainable Transformation Plans will continue to shine a light on this important shift and are likely to provide further opportunities for system collaboration.

Most organisations are acutely aware that more needs to be done to shift mind-sets towards a systems talent perspective and some organisations have been early adopters of this.

Although in early stages of implementation, pockets of innovative practice and collaboration are starting to emerge.

Derbyshire Talent Forum

In Derbyshire, a health and social care system-wide talent forum has been established. The group comprises of talent lead representatives from acute, mental health and community services, CCGs and social care. With strong senior support and a mandate from human resource directors in the patch, the group meets regularly to explore system talent and workforce challenges and has started to explore building a collective system vision for talent. A key talent challenge identified early on in its formation was that there was a limited talent pipeline for general managers across the system, both in terms of numbers and the skills required for the future. There was a collective appetite to address this challenge which led to the forum pooling resources to design and deliver a general managers development programme.

System wide talent academies have also started to emerge as a result of the LETC and transformation work. In Lincolnshire, there are five work streams that have a talent focus – talent academy, attraction, workforce supply and demand, strategic workforce planning and organisational development and culture. A similar collective approach is also being initiated in other areas. The Better Care Together programme in Leicestershire for example, has set up some clear governance and work stream groups to support collaborative talent, attraction and retention, workforce, organisational development and culture.

A clear barrier to adopting a systems talent approach is an organisation's ambition to grow and hold on to their own; however our survey indicates that thinking has started to advance beyond this, as articulated by one of the CCGs we interviewed:

We acknowledge the risks involved in developing such a high performing cohort as salary restrictions and promotional opportunities may mean we lose them to the wider system. We frame this within the concept of developing leading for the health system, rather than just our organisation – challenging though this may be.

Some focus is also being applied to the development of systems leadership behaviours to enable leaders to operate beyond traditional hierarchical and organisational boundaries.

We have focused on the development of systems leadership skills and behaviours to cope with ambiguity and work across organisational boundaries. This has identified a number of 'rising stars' who have taken on new leadership initiatives - designing new clinical pathways etc.

4.2 Talent Management Aspirations for the Future

A proportion of organisations that we spoke to stated that they have ambitions to continue and develop the work they had already started so that their strategy is more aligned as well as culturally and operationally embedded. Whilst many organisations are actively doing talent management, there was a view that practice was fractured – while there were pockets of excellent practice happening in certain areas, there was a need for processes to be synergised more effectively – for example, all organisations have an appraisal system in place. These systems were not however, necessarily joined up to wider talent management initiatives.

The team will continue to develop and support managers across the Trust in the development of this work and link it closely to organisational 'hot spots' where quality needs to improve.

Bring people together to create communities of practice, develop a light touch talent management framework including succession planning to create competing narrative – a great place to work and learn.

Implementation of iTM tools and use of workforce data to populate succession planning tool to identify gaps and map to 9 box grid. Creation of new career development pathways with a diagnostic phase to identify talented individuals – pilot currently underway with band 6 nurses.

By using an every broadening talent toolkit including the 9-box grid to cascade talent management practices across the organisation making sure there is a link back to the individual. Through our new divisional organisation encourage identification of future talent to build our talent pipelines, particularly for clinical leadership roles.

More generally, greater thought is also being invested in establishing mechanisms beyond traditional routes to provide development, challenge and stretch for their workforce by means of offering shadowing opportunities, secondments and encouraging leaders to contribute to cross-cutting integration projects. Many of the talent leads interviewed had considered what talent development meant in the context of growing future talent to support the system and were beginning to formulate ideas about how their own organisational talent strategy could support this.

To define new ways of working to take into account higher levels of accountability, personal impact and resilience. Engagement of senior leaders in dialogue to define a shared view of the leadership behaviours we require for the future.

Our view is that a pre-condition for introducing an integrated talent management framework is the engagement of senior leaders in a dialogue to define and articulate a shared understanding of what effective leadership behaviour will look like in the NHS of the future. Without this shared understanding of, commitment to and role modelling of (systems) leadership behaviours, it is likely that any framework will have only a limited effectiveness. By building a framework of future focused behaviours and competencies it will be possible to consider the entire talent cycle, from identifying potential and spotting talent to enabling leaders to move successfully within the health system.

Development of a new framework of opportunities for key people to gain experience in other organisations and part of the wider system – shadowing, joint insight, secondments, cross-cutting projects. Ensure the talent management framework reflects transformation within the system e.g. Vanguard sites for Better Together and commissioning on an outcome rather than activity basis.

Continue to develop partnerships and relationships to enable scanning and the identification of talent gaps and potential across the local Nottinghamshire system • Consider talent development more consciously in selecting individuals for cross-cutting projects involving partner organisations • Recognise fully the importance of systems leadership skills and provide training and other interventions to develop capability to work effectively across the local system.

4.3 Key Organisational Talent Management Challenges

A thematic analysis of key organisational talent management challenges indicates clear common strands:



4.3.1 Talent Pool for Key Roles

Commissioners and providers both cite limited talent pipelines of key executive and clinical roles as a major issue inhibiting talent development progression within the system.

Key Roles	Challenge
<p>GP Clinical Leadership on CCGs</p>	<p>In some cases, CCGs struggle to engage GPs to fully participate as members of the CCG in a Governing Board Member capacity. Reasons cited form mainly around limited resources to balance the needs of the day to day running of their businesses. This is coupled with the need for GP clinical leaders to gain wider insight of the health and social care system to effectively operate at a strategic level, as well as a genuine willingness to contribute to broader strategic decision making.</p> <p>Many of the CCGs interviewed are working hard to support GP development and would welcome further support to progress this agenda.</p>
<p>Clinical and Medical Workforce – Attraction and Desirability of Senior Posts</p>	<p>Attracting medical trainees to the region is a challenge across the East Midlands, with only 65% of vacancies being filled.</p> <p>There appear to be significant motivation issues to attract the clinical workforce to aspire and apply for more senior posts within an organisation. Nursing, physiotherapy and occupational therapy warrant a particular mention. Recruitment to ward level posts was highlighted as a particular challenge. The story here is not specifically about the lack of talent but more about the nature of those roles and perceived attractiveness.</p>
<p>General Managers, Divisional Directors and Executive Directors</p>	<p>From our analysis, indications are that there is significant ‘churn rate’ of divisional directors, typically spending no more than 2 years in post.</p> <p>Recruiting COOs, Operational Director, Heads of Service and GMs and AGMs is also considered by many of those interviewed as a challenge with one organisation citing that they are in their 4th round of interviews for a COO vacancy.</p> <p>There appear to be negative perceptions surrounding these roles in that there are a lack of positive motivators to engage talent – often considered too big and too challenging, highly pressured and involving danger of burn out. Coupled with this, the increasing need for people operating in those roles to become more commercially, financially and politically savvy adds greater intensity in the environment they operate in and the talent pool is deemed to be limited.</p> <p>Recruiting Finance Directors that also have transformation and turnaround experience comes out in our analysis as an emerging need and was also considered a challenge. Senior level finance skills in commissioning are becoming more specialised and may also be seen as poorly paid in contrast to other sectors.</p> <p>A consistent theme that appeared strongly in our research was the barriers of engaging clinical and medical leaders to take on Executive Director posts. Perceptions of undesirability of Director of Nursing and Medical Director roles was referenced as a problem as was the lack of engagement because of perceptions that this would move individuals away from a clinical / medical domain.</p>

4.3.2 Attraction and Retention

Looking beyond talent pipeline development, other factors were highlighted as playing a part in recruitment, retention and attraction difficulties.

The perceived attractiveness and accessibility of a location has an impact on where people want to work. In particular, when conducting our research organisations operating in Lincolnshire referenced their location as a key barrier when attracting and recruiting new staff.

We have problems in attracting the quality and quantity of skilled people we need for many roles. As a result, we recruit internationally including a recent recruitment exercise in the Philippines and have challenges in recruiting and retaining nurses, doctors and AHPs. Our geographical location – perceived as being out of the mainstream and – reputational issues are contributors to these challenges.

Interestingly, of the two Trusts that were interviewed that had been placed in special measures, both said that they felt it had a negative effect on their ability to attract and recruit due to perceptions around organisational reputation. Politics played out in the media are also referenced as making an undesirable impact in promoting the NHS as an Employer of Choice. Finance and competition were also considered prohibitive factors for particular roles. For example, a number of CCGs interviewed referred to the senior NHS financial workforce as having to now demonstrate a different set of skills in terms of greater strategic insight as well as transformation and turnaround experience. This presents a challenge in recruitment when financial incentives do not match the perceived offer that other sectors can accommodate.

4.3.3 Future Leadership and Culture Change

Many of the organisations we spoke to are starting to think about talent for the future and what that means in the context of transformational change across the entire health and care service.

This for some is a radical shift in thinking and the challenge for organisations, in terms of supporting cultural change to re-think how we nurture talent and articulating what future leadership looks like, is a big one particularly against the backdrop of a highly regulated, resource lean, and often fragmented and financially constrained system.

A key challenge for us is understanding, at an organisational level, the skills and behaviours we have and what we will need for the future. Some of this information is held at divisional/department level but is held in silos. With extremely lean resourcing most of our time and energy is taken up with responding and reacting to, often urgent, organisational needs.

Focusing on mind-set and behaviour before implementing structures and frameworks. Defaulting when thinking about leadership to a limited view of what clinical leadership looks like rather than a more systemic view. Engaging line managers in culture change.

4.3.4 Finance, Resources and Competition for Talent

Whilst there was a very strong internal appetite and capability to think more creatively about talent, the capacity to do so was indicated as problematic. Equally, whilst a collective

will was clearly apparent, the ability for organisations to release staff to further their own development whilst balancing the need to maintain sufficient staffing levels, was clearly a dilemma that many organisations faced.

Releasing time from pressing often urgent reactive situations to allow the thinking and preparation time to go into this activity. This applies to the OD team and also line managers across the organisation for training initiatives.

The volume of work to be done provides additional challenge in freeing people for secondment due to absence of backfill.

Protectionism over talent was also indicated as something that some organisations considered when thinking about offering opportunities for leaders outside of the organisational environment particularly when a small talent pool is in existence. Fear of losing talent is seen by some as a blocker when considering creating stretch opportunities for talented leaders to experience different environments within the system.

Competition between organisations for a small talent pool – this can lead to people being denied the opportunity for secondments due to a fear that they will be ‘poached’ by the host organisation.

4.4 Emerging Themes around CCG and Primary Care Talent Development

Clinical Commissioning Groups’ approach to talent management, beyond anecdotal evidence from account management relationships, was relatively unknown prior to this qualitative interview project and one of our focuses was to understand the different challenges they may face compared with larger, more established provider organisations.

A thematic overview of what our study found is outlined below.

- The CCGs have grown from a standing start over the course of the last 3 years, so may not always have Talent Management strategy or Succession Planning documents formally structured. However, there is a wealth of talent management activity taking place on a more individually targeted scale than may be seen in the larger provider organisations. The rapid organic growth of the organisations has led to a focus on the ‘doing’ rather than the capture of systems and processes underpinning this, a situation that is being rectified as time and resource allow.
- Their small size mitigates against them being able to provide the scope of development they would wish to offer their talent pool, and there is a recognised requirement to work in a systemic way across providers and commissioners to allow the free flow of staff in order to develop true systemic leadership.
- The size of the CCGs’ workforce means that there is a clear developmental relationship between the organisation and the individual, with open communication channels – often the CO can ‘address the troops’ directly. This results in talent being identified at an early stage, though expectations need to be managed in terms of what realistic progression is possible based upon size and geography.
- For talent management support to be effective for the CCGs, it must fit with the availability of staff to attend development programmes, and help meet the geographical challenge by offering more local accessibility.

- The main recruitment problems tend to focus on the attraction and retention of GPs to the Governing Body, and the additional challenge of engaging them in talent management. Increasing numbers of salaried GPs means there is less investment on the GP in terms of buying into an area for the longer term. The national shortage of GPs means this will be an even more pressing problem in years to come, as the current ageing membership moves into retirement.
- Due to their commissioning responsibilities the CCGs really 'get' integration, and recognise the opportunities for cross organisational collaboration, and the development of future leaders who will be available to the wider health system. Yet the constraints and competing compelling priorities they must meet result in a lack of time and opportunity to really pull this together across systems. So whilst time and energy is focused on the development of their own people, doing this across the system is currently, for some, beyond their capacity. The commitment and desire to make this happen, and the recognition that it must, is not in question, and may be an area in which EMLA can assist.
- There was much appreciation expressed for individual members of the Academy who worked closely with individual CCGs to develop bespoke development programmes, and this approach was deemed to be most appropriate to their emerging needs.

4.5 Talent Management System Challenges

Thinking more systemically, the study aimed to grasp where organisations' thinking was placed when considering opportunities and challenges beyond their own organisational boundaries in the talent landscape.

Additionally, the research aimed to capture insight as to what activity was currently taking place to create better collaboration in a system wide way.

A summary of our findings is outlined below:

Challenges

- There is a danger that organisations can become islands and that different cultures can cause conflict with poor communication leading to a clash of cultures.
- Significant competition between organisations for a small talent pool.
- Lack of capacity in terms of sufficient people with well-developed systems leadership skills to make the most of challenges/opportunities – currently not enough consistency in terms of views about what effective systems leadership looks like.
- General shortage of senior clinical practitioners.
- Limited willingness from GPs to take leadership roles to support the wider system.
- There appears to be a lack of understanding of talent 'hot spots' across the system which are impacting more widely on other organisations.
- The increasing pressures on organisations to make cost improvements despite increasing demand is having an impact on retention across the system.

Opportunities

- Opportunity to develop hybrid roles with skills, behaviours and mind set to work across the system – current initiative to develop Acute/Community Nurses.
- Look at NHS culture more widely to ensure talent management really is for everyone.



- Need to cut through the 'rhetoric and bravado' around the range of Vanguards and other systems integration initiatives to make sure that learning from pilots is maximised and shared.
- Increasing importance of systems leadership and the need to create more opportunities for individuals to gain broader experience across organisations (including social enterprises and local authorities) to embed and refine skills.
- Opportunity to be less 'territorial' allowing greater role modelling of constructive system behaviours.
- Case for local partners to develop shared solutions to a) develop talent b) attract talent c) understand and influence workforce supply and demand d) create a strategic workforce plan e) develop a shared culture and OD plan.

Collaboration in Action

- Long term partnership with NUH and Better Together Vanguard will set the agenda for systems talent management
- The Lincolnshire HR/OD/Workforce leads have created a health and social care community programme board, supported by the LETC. Focus of the programme is to create a 'burning ambition' for change across the local system to develop a shared vision of integrated care.
- In Derbyshire, executives are fully supportive of taking a system wide view of talent in the county and have provided a mandate to establish and grow the Derbyshire Talent Forum.
- A Whole System Diagnostic across Mid-Notts has been developed as well as OD and Workforce Planning work streams as part of the Better Together Programme.
- In Leicestershire, as part of the Better Care Together programme, system-wide work streams have been set up, supporting collaborative partnerships with a focus on talent, workforce and OD.
- ITransformation Leads at the East Midlands Leadership Academy are involved in all these areas of collaborative integration work providing systems leadership consultancy to support transformation in OD, leadership and culture.

4.6 Talent Management Support from the East Midlands Leadership Academy

A range of recommendations were proposed as to how EMLA could support the ongoing development of talent management on a region wide basis and these ideas will be further explored at an event planned in May.

Broadly, suggestions of support fell into four key themes:

Locally Based Programmes

A key challenge cited by some organisations was the limitations experienced when releasing staff due to time and resource constraints. For those organisations less centrally based i.e. outside of the Derbyshire, Leicestershire and Nottinghamshire, greater accessibility to EMLA programmes would be more viable if programmes were delivered more locally.

Programmatic Offers Aligned to Career Management

Provision of a programmatic offer that clearly indicated how each offer may support different career pathways would be welcome. This would help organisations to signpost individuals to the best fit intervention for their talent development and career management.



Talent Management Consultancy

There appeared to be a limited awareness of the tools and resources available at both national and regional level that can support talent management and succession planning. Greater awareness of what can be accessed could be enhanced through better communication campaigns as well as account management processes. An offer of one to one support was particularly highlighted in our interviews with CCGs as something that would be beneficial.

Sharing Best Practice

Due to the region-wide engagement EMLA has with the East Midlands system, many organisations interviewed felt that EMLA was uniquely positioned to identify and share best practice to enable progression in the transformation of the talent management environment.

Equally, there was a strong sense that what was missing was region wide centralised support that could identify the skills gaps and workforce challenges across the system as well as provide developmental solutions to address some of those challenges. Interviewees did not explicitly suggest that EMLA perform this role however there was a sense that there was a significant gap offering this support since the demise of the SHA.

5 Practical Next Steps

To aid collaboration, co-design and the sharing of best practice with our talent management practitioner community, EMLA will be hosting an event in May to share a high level thematic analysis of our findings.

Our aim is to facilitate a conversation with our members around how we can progress talent management development in the region based on what we know from our one to one conversations. Our aspiration is to co-design a programme of activity based on the outcomes of that event.

A high level summary of our findings will also be published and shared with our members.

Moving forward, we will actively engage with our members to increase awareness of the talent improvement tool that the national NHS Leadership Academy is in the process of producing to enable organisations to further embed talent management in their organisations and to work with them to develop action plans.

It is clear from this project, that there is a lack awareness of the tools available to support talent planning and development, particularly from our CCG contingent, and a communications campaign will be initiated to improve awareness levels of the resources available.

Consideration is also being given to the design and delivery of an aspirant General Managers development programme to address the talent pool challenges for this specific workforce group.

East Midlands Leadership Academy
April 2016







The East Midlands Leadership Academy



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