NSW Health



NSW Health Talent Strategy 2022-2032



NSW Ministry of Health 1 Reserve Road St Leonards NSW 2065 Tel. (02) 9391 9000 Fax. (02) 9391 9101 TTY. (02) 9391 9900

www.health.nsw.gov.au

Produced by: NSW Ministry of Health

This work is copyright. It may be reproduced in whole or in part for study or training purposes subject to the inclusion of an acknowledgement of the source. It may not be reproduced for commercial usage or sale. Reproduction for purposes other than those indicated above requires written permission from the NSW Ministry of Health.

© NSW Ministry of Health 2022

SHPN (WPTD) 220600 ISBN 978-1-76023-270-2

July 2022

Contents

Introduction	
Background	3
Our vision and scope	4
The case for change	6
Links to other strategies	11
Principles	
System principles	13
People principles	14

Making it Happen

Overview	16
Roles and responsibilities	17
Talent Strategy initiatives summary	18
Outcome 1: Executive talent is identified in a standardised way across the system	19
Outcome 2: Staff are nurtured to reach their potential	21
Outcome 3: Talent is visible across the system with staff progressed accordingly	23
Outcome 4: Policies, processes, technology and structures effectively support talent management	25

Introduction

Background

NSW Health is the largest public health system in Australia, with 228 public hospitals across 17 local health districts and specialty health networks. World class healthcare is delivered by over 130,000 full time equivalent staff, with the workforce growing by 28% over the past ten years.

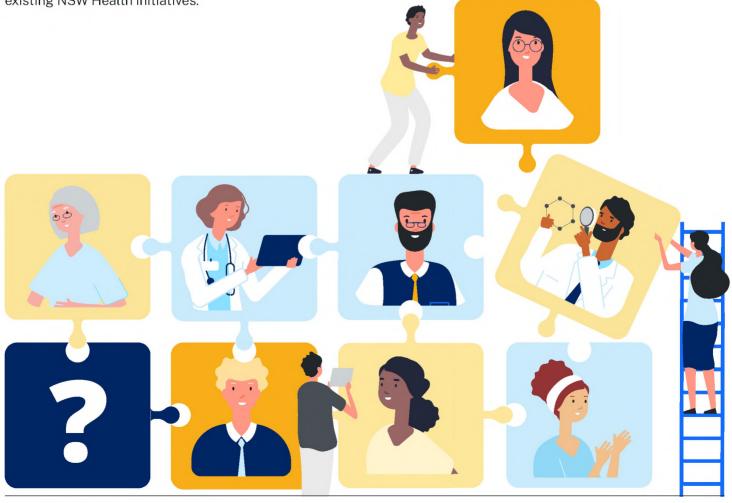
Our people are our most valued asset and most critical resource. The state has faced deep challenges in recent times, ranging from COVID-19 to drought, floods and bushfires – all of which have required an unprecedented response from our workforce.

To deliver a sustainable and high performing health system that meets the needs of the NSW community, we must support our staff and enable them to succeed. Talent management contributes to this by attracting and retaining the best quality people, providing them with learning and development opportunities, offering clear career pathways, ensuring a positive working culture, embracing diversity at all levels and growing high-quality leadership.

The NSW Health Talent Strategy 2022-2032 outlines our approach to improving talent management over the next 10 years. The Strategy has been informed by wide-scale staff consultation, a global literature review of talent trends and best practice and a current state review of existing NSW Health initiatives.



Our people are our most valued asset and most critical resource.



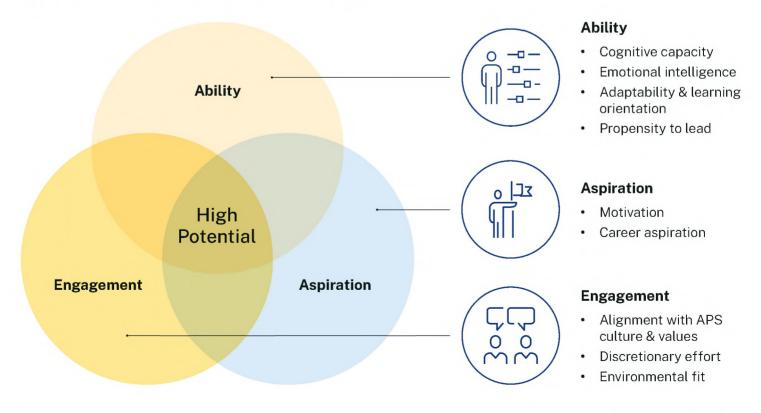
Our vision and scope

Our vision for talent is as follows:

"We will identify, nurture and progress talent to develop our people and the next generation of leaders to deliver for the NSW community."

Talent means different things to different people. The NSW Public Service Commission states that talent is "a broad term used to describe all individuals who contribute to an organisation's success" and defines talent management as "an organisation's practices to identify, develop, support, and mobilise individuals to meet strategic business needs". Common characteristics of talented people are that they are resilient, collaborative, open and inclusive; they are strategic and visionary thinkers who can see the bigger picture; they challenge the status quo; they focus on outcomes that matter to patients and the community; and they harness the skills and abilities of colleagues from all corners of our system. Talented people are often referred to as being both 'high performing' and 'high potential'. The Australian Public Service Framework for High Potential (2015) defines high potential as "the capacity to move into roles of greater complexity, ambiguity and scale and is demonstrated where all three qualities (ability, engagement, aspiration) overlap, when consistent high performance is already taken into account".

Figure 1: Australian Public Service - High Potential Model



The pandemic has highlighted just how much talent there is within our existing workforce, with staff taking on new roles and responsibilities at incredibly short notice and many moving into leadership positions such as running vaccination centres and new Covid wards. It also showed how well the health system can come together and act as 'one workforce', with staff moving within and across Health Agencies based on the requirements of the day. The Talent Strategy wants to build on this evolving culture, providing a whole of system commitment to growing talent whilst attracting exceptional external talent who are motivated by doing purposeful work.

The Strategy defines how we will identify this talent, how we will nurture our people to help reach their potential and how we will progress talent. It looks at individual, team and organisational approaches that cover the full employee lifecycle, from attraction and recruitment to career development, reward and recognition and retention. It covers all organisations in NSW Health, including Local Health Districts and Specialty Networks, State-wide Health Services, Shared Services, Pillars and the Ministry.

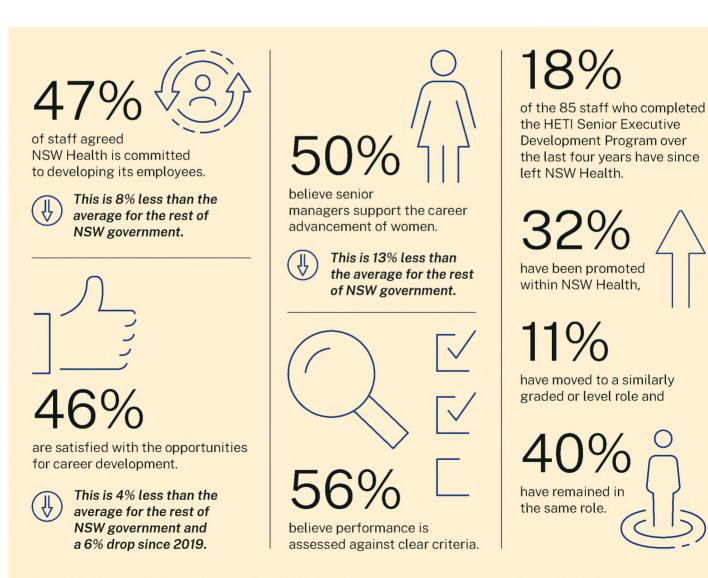
The Strategy defines how we will identify this talent, how we will nurture our people to help reach their potential and how we will progress talent.



The case for change

With a highly competitive labour market and shifting expectations of how healthcare is delivered, we need to ensure we are upskilling, reskilling and investing in our staff and are an attractive employer to current and future employees.

A large number of organisational talent initiatives are already in place within individual Health Agencies in NSW Health, including use of the NSW Public Service Commission (PSC) Capability Framework, leadership development programs, targeted skills development, secondments, mentoring and coaching. NSW Health has also invested in state-wide Human Capital Management software, including the new Recruitment and Onboarding System (ROB) and Performance and Talent System (PAT). While good progress has been made in many areas, the focus is now on taking a system-wide approach to maturing our methods and processes, resulting in an established rhythm that consistently identifies, nurtures and progresses talent. Being the equivalent size to many major international companies, the opportunities to support the internal mobility of talent are substantial, whilst the brand identity and association with purposeful work that comes with working for NSW Heath has never been higher.



Source: 2021 NSW Health People Matters Employee Survey (PMES) results

NSW Health Talent Strategy 2022-2032

Source: 2021, HETI

Shifting workforce demographics and expectations

Within our workforce, many of our senior leaders are expected to retire in the next five years. As healthcare systems continue to deal with the global COVID-19 pandemic, there will be shifts in the demand for and supply of our workforce and talent management will become increasingly critical to attracting and retaining skilled workers. There is also an expectation from staff, particularly for those in non-clinical roles, that much of the flexibility offered during the pandemic regarding work location and hours will continue.



Workforce wellbeing

Supporting the wellbeing of our staff must be a key priority to mitigate against talented staff leaving, while talent management approaches themselves can enhance wellbeing as staff feel more valued. It is even more vital to lead and manage well in Health as it is often a very lengthy process to train new clinical staff and we are competing with the private and not for profit sectors for graduates and experienced talent.

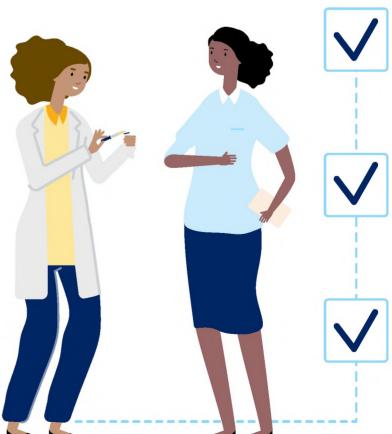


of staff rated their sense of wellbeing as favourable.



This is 2% less than the rest of NSW government and a 5% drop since 2019.

Source: 2021 NSW Health PMES results



Diversity and inclusion

While NSW has a highly diverse population, this diversity is not yet represented in our employee base or in our leadership roles. A commitment to diversity can attract a broader talent pool in a competitive labour market, as well as contribute towards improved problem solving, better decision making and higher levels of community engagement and trust in the healthcare sector.

of senior leadership roles in NSW Health are held by women (2020/2021). This is tracking above the NSW Premier's Priority to have 50% by 2025. Source: Ministry of Health The number of Aboriginal people in senior 2.6%Priority to increase the number of Aboriginal people in senior leadership of senior leadership roles in NSW Health are roles by 2025. NSW Health has set a held by people with a disability (2020/2021). senior leadership roles by 2025. This is tracking below the NSW Premier's Priority to have 5.6% by 2025. Source: Ministry of Health Source: Ministry of Health

39



of all employees within NSW Health are from a racial, ethnic or ethno-religious minority group, but only 7% of senior leaders are.



This is lower than the 8.8% average for the NSW public sector.

Source: 2021 NSW Government Workforce Profile Collection

The National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031 has set a target for Aboriginal and Torres Strait Islander people to represent 3.43% of the national health workforce by 2031. The NSW Public Sector Aboriginal Employment Strategy also states enabling Aboriginal employees to represent 3% of all staff in non-executive salary classes. In NSW Health in 2020/21 it is 2.91%.

Source: Ministry of Health

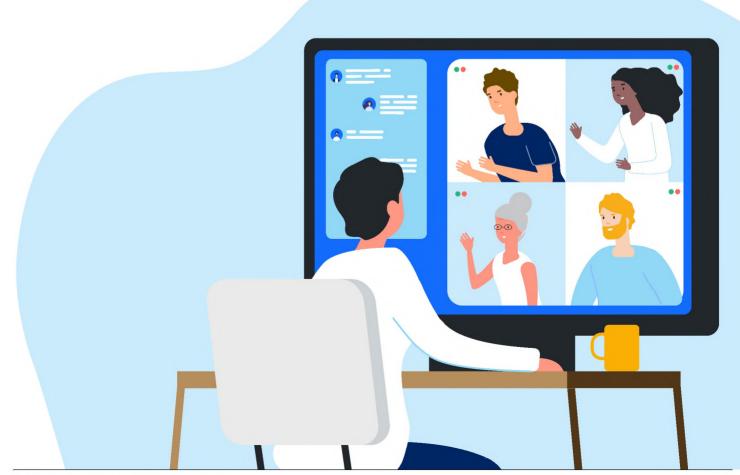
leadership roles in NSW Health increased from 8 in 2018/19 to 12 in 2020/21. This is tracking in line with the NSW Premier's stretch target of 16 Aboriginal people in

Other workforce challenges

A large number of our staff are successfully hired from within NSW Health. However, it can be hard to fill critical roles, particularly in rural and regional areas, and better succession planning has been identified as a key area for improvement. At the moment, individual Health Agencies may find themselves competing with each other for the same talent, or 'talent hoarding' to keep what talent they have. Cost of living pressures, particularly rising house prices and lack of available housing, can also make it harder to attract talent, and our industrial award structures limit flexibility in compensation packages and recognition rewards for new and existing hires.



With this combination of an ageing executive, greater competition for talent both at home and abroad and employees seeking greater flexibility, we need to act fast to be an employer of choice. A strategic approach to talent management is central to this and will deliver benefits for employees, managers, system leaders and patients.



NSW Health Talent Strategy 2022-2032

Benefits of a strategic talent management approach

For employees



- Clearer view of role expectations and what success looks like
- Improved visibility of career pathways and available learning and development opportunities
- Improved job motivation and satisfaction
- Improved engagement and wellbeing





- Easier to identify, assess and support talent
- Quicker to fill roles
- Clear, independent criteria to support decision making
- More engaged and satisfied staff
- Improved manager/ staff relationships

For system leaders

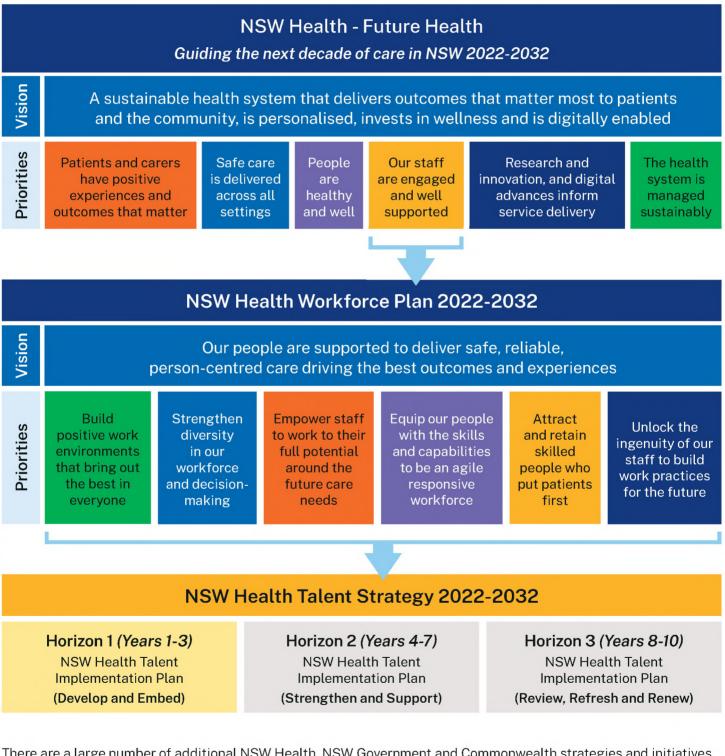
- Creates a robust
 leadership pipeline
- Improved talent mobility across the NSW Health system
- Easier to attract and retain high quality talent
- Improved employee engagement
- Improved workforce diversity
- Reduced duplication of effort
- Reinforces culture change



- Greater satisfaction when interacting with the NSW Health system
- Access to a world-class health system delivered by the most talented staff, resulting in improved health outcomes
- Supports our vision of delivering a sustainable, high performing, personalised and digitally-enabled health system for the people of NSW

Links to other strategies

The Talent Strategy contributes to delivering Strategic Outcome 4 in the *Future Health Strategy 2022-2032* ('our staff are engaged and well supported') and to all six of the outcomes identified in the *NSW Health Workforce Plan 2022-2032*. The Talent Strategy covers the same ten-year period as the *Future Health Strategy*, the *Health Workforce Plan 2022-2032* and the three horizons identified in the *Health Workforce Plan*. The Strategy will be reviewed and refreshed at the end of each horizon, and an Implementation Plan created for each horizon.



There are a large number of additional NSW Health, NSW Government and Commonwealth strategies and initiatives that contribute towards talent management, in areas such as workforce management, workforce planning and staff wellbeing. For further information, refer to the NSW Health Workforce Plan, the NSW Health website and relevant Commonwealth websites.

Principles

The following principles have been identified as central to the Talent Strategy and its implementation:

System Principles



People Principles

1. Person-centred	0	We recognise that all individuals are unique and each has their own development needs, capabilities and ambitions. These may change over time, depending on an individual's circumstances, career stage and readiness to move, so we will continually monitor our approach to assessing talent. An enabling environment will support staff and their managers in working together to help meet an individual's career goals.
2. Inclusive and diverse		We will identify, nurture and progress talent from all backgrounds, in all of our occupations and at all levels. We are committed to increasing diversity across the breadth and depth of our system, particularly in areas that are currently underrepresented in leadership roles.
3. Performance 0 and potential 0 based //	河	Talent identification and development will be based on valid, reliable and objective assessments of people's capabilities, performance and potential, not length of service or location.
4. Connected		We will provide a sense of belonging and connection for staff at the team, health agency and broader NSW Health system level and an environment that nurtures and values our staff across all these levels.



Making it happen



Overview

The Strategy consists of four main outcomes that NSW Health aims to achieve within the next ten years. The first three link directly to the vision, while the fourth underpins all of the other outcomes.

NSW Health Talent Strategy 2022-2032

Outcome 1: Executive talent is identified in a standardised way across the system

Outcome 2: Staff are nurtured to reach their potential

Outcome 3:

Talent is visible across the system with staff progressed accordingly

Outcome 4:

Policies, processes, technology and structures effectively support talent management

Each outcome contains a number of initiatives and information on when they will be delivered. The initial focus in Horizon 1 is on getting new state-wide processes and resources established to build talent capability and succession planning across the system, with a particular focus on executive talent, and for this to then expand and mature throughout Horizon 2 and 3. Further information on who is leading the Horizon 1 initiatives and key tasks to deliver the initiative, as well as monitoring and evaluation activities and governance arrangements, is available in the *NSW Health Talent Implementation Plan (Horizon 1)*. Numerous other state-wide initiatives are also underway in areas such as workforce planning, staff wellbeing and culture and diversity which, while not listed in the Talent Strategy, contribute to achieving its vision.



Roles and responsibilities

All staff

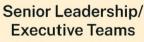
have a role in preparing and participating in talent management activities and as a minimum, engaging in regular review and career conversations.

Managers

are responsible for advocating talent management approaches, ensuring they are equipped to hold effective review and career conversations with their staff and participating in coaching, talent review and succession planning activities as appropriate.

Workforce, HR and organisational development (OD) teams

within Health Agencies are responsible for developing and supporting talent management interventions for their organisations and championing state-wide talent initiatives at the local level.



within Health Agencies are responsible for overseeing effective talent management approaches in their organisation and supporting the principles and approaches outlined in the Talent Strategy.

Executive accountability for talent management rests with the **NSW Ministry of Health**. It is the Ministry's responsibility to:

- Ensure that the NSW Health Talent Strategy and its associated plans are implemented effectively
- Develop, implement and champion state-wide talent initiatives, with support from partners such as the NSW Health Education and Training Institute (HETI) and eHealth NSW
- Provide oversight and assurance on the quality and impact of talent management across NSW Health.

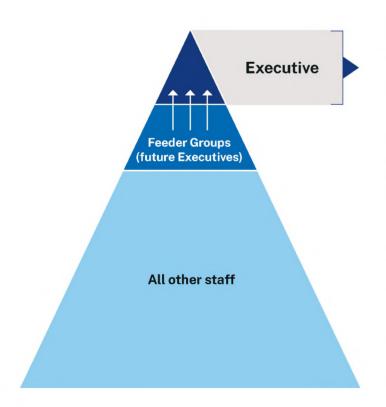
Talent Strategy initiatives summary

Outcome	Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
Outcome 1:	1.1 Develop and publish Leader Success Profiles for Executive roles	•		
Executive talent is identified in a standardised way across the system	1.2 Roll out state-wide Talent Review Committees based on a standardised talent identification methodology and matrix	•	•	•
ሰበሳ	2.1 Implement improvements to existing state-wide leadership and development programs and roll out new programs	•	•	•
Outcome 2: Staff are nurtured	2.2 Establish new mentoring, shadowing, coaching and secondment opportunities to help develop staff	•	•	•
to reach their potential	2.3 Develop and publish career pathways guidance and case studies	•	•	•
$\leftarrow \bigcirc 7$ $\leftarrow \bigcirc \rightarrow$	3.1 Improve the effectiveness of the performance and development review process, including greater standardisation across NSW Health	•	•	
Outcome 3:	3.2 Develop succession plans for key roles	•	•	•
Talent is visible across the system with	3.3 Enable staff to build online talent and skills profiles	•	•	
staff progressed accordingly	3.4 Improve data collection for key talent metrics and establish a talent dashboard	•	•	
n é n	4.1 Establish a new centralised Talent Team to deliver system-wide activities and support Health Agencies	•		
Outcome 4:	4.2 Develop an online 'Talent Hub' for sharing information	•		
Policies, processes, technology	4.3 Apply the PSC Capabilities Framework consistently across Health Agencies and develop new occupational specific capability sets	•	•	•
and structures effectively	4.4 Modernise employee attraction, recruitment, recognition and retention policies and approaches	•	•	•
support talent management	4.5 Upskill People and Culture Teams talent management capabilities within Health Agencies	•	•	•

Outcome 1:

Executive talent is **identified** in a standardised way across the system

Senior Executives play a critical role in driving health system outcomes. A system-wide approach will provide clearer visibility of current and future talent, enhance internal mobility opportunities and enable more diversity. It will also support these staff with structured development pathways, which in turn assists with attraction and retention of new staff. Focusing on executive talent first has the potential to uplift leadership quality across the system. Senior Executives will become advocates for talent management within their own organisations, supporting the Talent Strategy implementation. The feeder groups into this Executive group also play an important role as they provide the pipeline of future Executive leaders, which cascades further to talent residing in middle and lower level roles. A more structured and system wide approach to talent identification will help build capability in our leaders to recognise talent (including previously 'hidden' talent), as well as support development planning for all staff.



'Executive talent'

For the purposes of this Strategy it is defined as those who are high performance and high potential in the following roles:

- Nurse Manager NM8 and 9
- Health Professional HP8 and above
- Health Manager HM5 and 6
- Medical Staff Specialist with managerial allowances, Senior Chief Medical Officers (CMO) and Directors of Medical Services (DMS)
- Public Service Senior Executive (PSSE)/Health Service Senior Executive (HSSE)
- Scientific and Technical Director Medical Physics Specialist and Principal Scientific Officer Year 7 and above
- Ambulance Superintendents and Operation Centre Managers
- Oral Health Directors and Senior Dental Specialists.

Outcome 1: Initiatives						Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
1.1 Develop and publish Leader Success Profiles (LSPs) for Executive roles LSPs define the leadership elements required to be an outstanding leader, including the desired capabilities and behaviours. They are aspirational and while they do not replace position descriptions, they provide a strong foundation for the recruitment process and expected criteria to meet during the role. They provide useful guidance to existing and aspirational leaders on how to recognise what 'talent' looks like and the different types of humanistic strengths that support this. Several LSPs have already been developed during 2021, and this initiative will focus on producing further LSPs for remaining key roles, supported by the PAT system. LSPs will also be evaluated to see where improvements can be made.						•		
 1.2 Roll out state-wide Tall standardised talent identification and effective succession and development planning, a state-wide definition, process and methodology for assessing 'high performance' and 'high potential' will be developed. This will include a standardised talent identification matrix (often known as a 'nine-box grid' - see example) and be supported by the PAT system. The methodology will be piloted via a 'Talent role (e.g., General Manager) Because the process of ass is collaborative, managers at that a more objective assess can be made and previously a more systematic and rigo ongoing basis. The intent is to identify whe develop appropriate develop appropriate develop appropriate develop appropriate develop appropriate develop approprise develop approprise develop approprise develop appropriate develop approprise diversite their career pathway. The Listeps will	Revie bertformance Revie bertformance revie conserve cons	High Pay Mon - word -	Example: Specialists and/or subject experts Key contributors Perforning below expectations Low Committee' for mployees to rom hearing f employees' talent idention proach to idention iduals sit witt athways and les discussion ployees, not tter supported uccess Profil ethodology at aduces confir med from the st, the PAT tal ISW, feedbad	Nine-box gr Future leaders Vinrealised potential Med Potential or a selected different pa the opinions 'progress an fied. It also p ntifying tale thin the nine- succession on around the t succession on around the succession ar	rid Future leaders Future leaders Unrealised potential High d Executive rts of the grid of others, so id potential potential potential box grid and plans based e strengths dentified as nd learn in nform this. tate-wide and stry of ment pilot NHS (UK)			
identification and review. Further Talent Review Com feeder roles into the Execut established methodology a	mitte tive v	ees will	for additiona then be rolle	al Executive i	roles and			

Outcome 2:

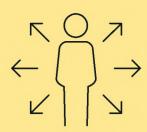
Staff are nurtured to reach their potential

It is important that all staff have access to learning and development opportunities so they can reach their potential, particularly for those identified as high performing. This may be through hands on job experience, learning through others or formal professional development opportunities (this is often known as the '70-20-10' model, based on how much each area contributes towards learning).

Outcome 2: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
2.1 Implement improvements to existing state-wide leadership and development programs and roll out new programs			
Existing NSW Health and PSC leadership and development programs will be reviewed and improvements implemented, such as:			
 Linking the process of who is nominated to attend these courses to those assessed as 'high performing and high potential' 			
 Identifying what additional post-course development activities and support structures can be provided so that staff can action the knowledge they have learned from the course, including future coaching and skills placements 			
 Having targeted places for current and aspiring Aboriginal leaders in leadership and management programs 			
• How those who live in rural and remote areas can be better supported to attend.	•	•	•
Several new programs will also be designed and implemented, such as the General Managers Program and the Nursing/Midwifery Unit Manager Leadership Program.			
A state-wide Learning Needs Analysis will help identify what new programs are required to meet current and future skills gaps. This will include programs aimed at developing clinical and educational experts.			
Assessment tools such as 360-degree feedback, Hogan assessments, strengths-based assessments and Studer learning are also often purchased individually by Health Agencies. There is scope for greater economies of scale, as well as providing advice to Health Agencies on what tools are recommended for what task and the cultural considerations of using these psychometric tools.			

Outcome 2: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
2.2 Establish new mentoring, shadowing, coaching and secondment opportunities to help develop staff			
A variety of opportunities will be designed, trialled and rolled out to help grow talent across all levels and encourage greater internal mobility between pillar and support agencies and LHDs, including:			
 Improving the existing NSW Health process for advertising and backfilling secondments, including how staff are made aware of them, our remote working policy and staff exchange opportunities 			
• Working with key external stakeholder groups to identify stretch projects and secondments that staff could undertake to develop themselves further e.g., within other NSW government agencies or private sector organisations			
 Cross Health Agency virtual mentoring programs, particularly to support those in/from rural and regional roles, Aboriginal and diverse backgrounds, women in leadership and small and critical workforce groups 			
• A Cultural Mentoring program, pairing a member of the Aboriginal health workforce with an Aboriginal mentor, to increase the levels of cultural safety experienced by the Aboriginal health workforce and provide opportunities for professional development and career planning	•	•	•
• A career coach program for high potential future executive leaders (particularly those from Aboriginal and diverse backgrounds), offering free sessions with an external career coach to support them in considering their career goals, updating their CV and interview skills. If successful, this initiative could be rolled out to further staff groups			
• Reviewing where roles could be seconded or provide virtual assistance from metropolitan to rural/regional sites at key points (e.g., the start of the new clinical year) to support less experienced staff build expertise and confidence (such as for new graduates and overseas trained staff)			
• An Internal NSW Health Jobs Board ('Talent Marketplace') that allows staff access to short internal projects or secondments, supported by the HCM system.			
2.3 Develop and publish career pathways guidance and case studies			
This will involve providing guidance on development pathways for clinical and non-clinical roles, from graduates all the way to Executive level. It will include expected capabilities and behaviours (aligned to the PSC Capability Framework), training/education requirements and useful case studies. People from Aboriginal, women in leadership and diverse backgrounds will be encouraged to share their stories and lived experiences to promote understanding of barriers and celebrate achievements.	•	•	•

Outcome 3:



Talent is visible across the system with staff **progressed** accordingly

As performance assessment feeds into who is considered 'talent' and development plans contribute towards progression, it is very important to do this process well. Currently there are large differences in how the performance and development process operates across our Health Agencies, and it can be seen as a once a year 'compliance' exercise rather than an ongoing dialogue between a staff member and their manager. The PAT system is provided as a tool to record these conversations (which should be occurring on a frequent basis), not to be the performance and development process itself. Once talented staff have been identified and provided with appropriate learning and development opportunities, they should be aligned to anticipated role opportunities across the system to encourage internal mobility and retention. Succession planning is an important part of this, ensuring we have identified highly capable staff ready to take the place of those who may be retiring, leaving or changing roles. Improved data reporting will also assist.

Outcome 3: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
3.1 Improve the effectiveness of the performance and development review process, including greater standardisation across the State			
Improvements include:			
 Developing state-wide guidance for managers and staff (such as a charter of expectations) on the performance and development review process e.g., frequency of performance conversations 			
 Running manager training sessions in how to give feedback effectively and how to build consistency in how they run performance and development discussions and apply performance ratings 			
 Identifying additional areas where state-wide standardisation would assist (e.g., alignment of dates and standardised performance review template) 	•	•	
• Developing a moderation process for annual performance and development reviews, looking at the bell curve of ratings across staff and organisations and where there may be inconsistencies in ratings, supported by the PAT system and the PSC Capability Framework			
 Developing a Performance Goals Library in PAT to assist staff in their performance and development planning 			
 Enhancing the usability of the PAT system to make it easier for staff and their managers to record and track performance and development discussions. 			

Outcome 3: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
3.2 Develop succession plans for key roles			
Rolling state-wide reviews of business critical and other leadership roles will be undertaken, covering those where the role is high risk if the person leaves (including those roles where the post holder is due to retire in the next five years). Succession plans will be developed for the roles, supported by the PAT system and linked to development pathways. Where there are predicted talent pipeline issues in key roles across the State, work will be undertaken with the medical colleges and other training bodies to help build the pipeline.	•	•	•
Health Agencies will also be supported to develop their own succession plans using the PAT succession planning functionality, with guidance and templates provided.			
3.3 Enable staff to build online talent and skills profiles			
New HCM Cloud functionality will facilitate individuals to articulate their 'whole self' professionally, including their talent and skills profile, industry connections and career opportunities. This will allow People and Culture Teams and managers to have greater visibility of existing talent and mobility capabilities and preferences.	•	•	
3.4 Improve data collection for key talent metrics and establish a talent dashboard			
Data will be collected and dashboards developed to assist managers in monitoring and tracking talent metrics and to drive improvements. Data will be drawn from all available IT systems and consolidated into user friendly dashboards for Ministry and relevant Health Agency staff, with graphs, filters, trend data and drill down functionality (e.g., by location or by group). This will include Aboriginal and diversity metrics. New HCM system dashboards will also be developed. Opportunities for linked data will be explored to provide insights on workforce and health delivery interactions.	•	•	
Other new qualitative data will be gathered and analysed, such as exit interview data at the local and system levels to identify patterns/trends in why staff are leaving. This will inform what we need to do to help staff stay.			



Outcome 4:

Policies, processes, technology and structures effectively **support** talent management

We have identified barriers that hinder an effective state-wide approach to talent management. Unlocking these will facilitate change and support delivery of the other initiatives outlined in the previous three outcomes.

Outcome 4: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)
4.1 Establish a new centralised Talent Team to deliver system-wide activities and support Health Agencies			
A new team will be established within the Ministry of Health to oversee the system-wide talent management activities outlined in this Strategy, monitor its progress and provide support to Health Agencies in their talent work.	•		
4.2 Develop an online 'Talent Hub' for sharing information			
A new online 'Talent Hub' will be developed to provide a central source of talent management information for staff. It will include listings of the learning and development opportunities available to NSW Health staff and share best practice from within NSW Health/other organisations. There will be information on career pathways, career case studies/ profiles and research findings and articles. It will be an access point to the Talent Dashboard (data and metrics) and other Talent initiatives when available (e.g., mentoring opportunities).	•		
An online Community of Practice will also be established for those interested in talent management, to share knowledge across Health Agencies.			

Outcome 4: Initiatives	Horizon 1 (Y1-3)	Horizon 2 (Y4-7)	Horizon 3 (Y8-10)	
4.3 Apply the PSC Capabilities Framework consistently across Health Agencies and develop new occupational specific capability sets				
While the PSC Capabilities Framework is already in use by some Health Agencies in NSW Health, it will now be progressively implemented across the State for recruitment and development. There will be state-wide guidance on how it should be applied to build consistency.				
New occupational specific capability sets and possible model profiles for NSW Health will also be developed, to encourage consistency in Position Descriptions and development approaches for the same roles across NSW Health. Cultural capabilities for leaders will be developed via a new <i>Respecting the Difference: Lead the Difference</i> leadership training module.	•	• •	• •	•
The capabilities library will be expanded in PAT to include occupational specific capability sets and allow manager and employer self-assessment.				
4.4 Modernise employee attraction, recruitment, recognition and retention policies and approaches				
Our existing industrial awards, Policy Directives (such as the <i>Recruitment and Selection of Staff to the NSW Health Service</i> <u>PD2017_040</u>), attraction approaches, recruitment channels and recognition systems should be reviewed and modernised where possible. This includes designing and developing guiding principles for contemporary employment arrangements. Recruitment processes will be made more efficient and flexible to allow us to viably compete for talent in a competitive landscape. An Employee Value Proposition (EVP) for NSW Health will be developed.	•	•	•	
E-lists and talent pools within Health Agencies will also be reviewed to identify how they can be better used/run cross District and better supported by technology (ROB and PAT), and new talent pools for Aboriginal staffing and leadership roles established. The expression of interest process will also be reviewed to improve the internal secondment process.				
4.5 Upskill People and Culture Teams talent management capabilities within Health Agencies				
The Ministry will work with Health Agencies to build capability within their People and Culture teams so that talent management becomes an embedded part of their work, in line with the expected 'talent management' capabilities outlined in the <u>PSC Human Resources</u> <u>Professional Capability Set</u> . This will include ways in which the system can support rural/regional areas in their talent management approaches.	•	• •	•	
A standard framework for what Aboriginal workforce representatives should be in place across all Health Agencies within NSW Health will also be established. This will include roles, staffing numbers, reporting lines, scope of practice and system alignment.				

NSW Ministry of Health 1 Reserve Road St Leonards NSW 2065

T: (02) 9391 9000 **W:** www.health.nsw.gov.au

