#IDHEKSS
Staff Recruitment & Retention Coaching Program

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Research informing this project:

Health Education England has undertaken research into the current workforce trends in our sector. Here are some of the key headlines:

❖ 40% of qualified staff retiring in the next 10 years.
❖ A predicted rise of the general population by 4% including the number of people with Intellectual Disabilities.
❖ Education provision of not being able to meet the current requirements from employers leaving a gap of skilled staff.
❖ Statistics for staff turnover in LD/ID Nursing and Care showing an average turnover as high as 35% (Skills for Care, 2015).
❖ An estimated cost of £30,000 (Oxford Economics, 2014) to replace just one employee.

This program is designed to help providers attract and retain staff in LD/ID Nursing & Care. The reason for this program can be summed up in one word – freedom. This training course gives colleagues in the sector the ability to attract, recruit – and retain staff regardless of their budget, size or location.
Why Health Education England is proud to support this programme:

“Health Education England (HEE) works across England to deliver high quality education and training for a better health and healthcare workforce.

The Kent, Surrey and Sussex (KSS) local office has put in place a programme concerning workforce development for people with intellectual disabilities. The overall project aim is to create a sustainable and secure workforce supply, for people that have intellectual disabilities, who require support from and/or access to services across Kent, Surrey and Sussex.

As part of this, HEE KSS has been able to support a number of unique projects within the region, and this is one of them.

If you would like to stay up to date with this work as it moves forward, please contact the programme manager, Rhona Westrip — rwestrip@kss.hee.nhs.uk and ask to be put on the stakeholder mailing list. You can also follow the hashtag #IDHEKSS on twitter.”

Rhona Westrip
Programme Manager
Project aims and goals:

➢ Reduction of staff turnover and agency usage
➢ Supporting providers in achieving their STP goals
➢ Strengthening relationships with internal –and external stakeholders
➢ Achieving consistent standards of care delivery within services
➢ Building leadership systems across boundaries of hierarchy
➢ Modelling and sharing best practice
➢ Supporting workforce development goals on a local and national level through engagement with providers in the public, charity and private sector
The Coaching Nurse story

My name is Heike Guilford and I am the Managing Director of The Coaching Nurse. I feel fortunate to have been part of changing futures for people with Intellectual Disabilities for 20 years and counting.

In 2015 I was nominated for a Nursing Times Leaders Award by Daniel Marsden (Practice Development Nurse). He had the following to say about me:

"During the past two years Heike has faced significant challenges not only with personal health issues, but also with her decision to take the isolating action of whistleblowing on an employer regarding resourcing and staffing issues at her practice that impacted on the effectiveness of the care provided to people with severe learning disabilities, autism, and behaviours that challenge.

"These issues culminated in Heike being made redundant, an experience that caused her to reflect on her toolbox of personal qualities that she was then able to call upon to take a stand for herself and the people she worked with and advocated for. She chose to invest her time and resources into a Neuro-linguistic Programming and Coaching courses and set herself up in business to support other nurses to develop their own toolboxes to achieve the things that they desire for their nursing careers. The result was the launch of ‘The Coaching Nurse’ at the end of 2014.

In May 2015, Heike hosted a Learning Disability Leadership conference, to which local, regional, and national nursing leaders were invited to speak. The conference was peppered with workshop activities to encourage participants to consider what they might dream of for their careers and those of the people they manage and influence.

Heike has received a number of invitations to speak at regional and national conferences, authored on her subject, and hosted Twitter chats to help nurses develop their tool boxes of resources to develop resilience and leadership."
Project scope:

This project consisted of a coaching program incorporating the following elements:
- Pre-coaching questionnaire with Likert Scale
- 6 group coaching workshops delivered across Surrey, Sussex and Kent
- Follow Up coaching calls to participants to measure progress

Methodology:

Marketing campaign:

1st of March – 8th of June
This program started with the roll – out of a strategic marketing campaign targeting Healthcare – and HR professionals in the private, charity and public sector.
The online campaign consisted of direct e-mail marketing, Social Media direct messaging and repeat circulation of flyer, a series of short videos sent out to participants already booked on the course as well as blog subscribers, regular postings in industry specific Facebook groups, Linkedin and Twitter. (60% success rate)

The offline campaign consisted of sending flyer post cards directly to HR managers and Clinical Service Managers. (40% success rate)
Challenges identified through Pre-Coaching Questionnaires:

All participants booked on the various workshops completed a pre-coaching questionnaire before the workshops incorporating a Likert Scale and questions about their service.

The following statements were put forward with participants asked to rate it between 1 (Strongly disagree) to 5 (Strongly Agree):

- I believe in my service and can promote it with confidence
- I trust in my ability to influence staff recruitment and retention
- I know how to involve existing staff in promoting the service to internal—and external stakeholders
- I am motivated to find new ways to attract and retain staff
- There is a good system in place to retain and share good practice
- I know what personal qualities, skills and knowledge I am looking for in future employees
- I would be happy asking existing staff for a testimonial/recommendation
- I believe that it is possible to attract and recruit more staff without the use of agency
- I believe that I am able to influence the choice of applicants at an early stage in the recruitment process
- I have a system in place to contact/stay in touch with future employees

The following questions were also part of the assessment:

- What strengths are you bringing to this program?
- What do you see as the key challenges to staff recruitment and retention within your service?
- What qualities are you most proud of within your service?
- How will you know the coaching process is working for you? How will you measure progress?
Attendance rates:

Total number of bookings received: 50
Total number of participants attending: 26
Total number of participants cancelling their booked workshops with 48 hours or less notice: 8

Key findings prior to the workshops:

- Out of 50 participants completing the form prior to the workshops commencing, 48 rated all questions between 4 (agree) –and 5 (strongly agree).
- The most common challenges identified on the questionnaires: retention of staff, reduction of turnover, high competition in the market, inability to match salary offered by other competitors.
Common themes and challenges identified in the workshops:

-Only 3 participants involved existing staff and clients in their recruitment activities.
-Only 3 services had a strategy to engage their existing workforce in marketing—and sales activities to fill vacancies.
-None of the professionals attending the workshop had ever asked any of their existing staff for a recommendation or testimonial.
-None of the services taking part had a sound staff retention strategy in place incorporating plans to capture knowledge and plan for people leaving.
-Only 2 services had close links between the HR Department and clinical staff.
-Whilst staff retention was seen as the major challenge, there was no strategic thinking about the link between quality recruitment—and staff retention.
-Only 2 participants reported that their organisation belongs to wider networks, such as ‘Community of Practice’ groups.
-10 participants reported that their HR department is split into recruitment (advertising, vetting of CV’s, organising recruitment days) and retention (organising supervisions, appraisal, training days, performance management). The two work streams are treated as separate entities.
-When asked about the challenges their current and future workforce is currently facing, the majority of participants (approximately 70%) responded by citing financial difficulties.
-No surveys were done in any of the organisations to capture why people stay, what they perceive to be the strengths of the service or how they could be more involved in recruitment—and retention activities.
-There was a general opinion that staff on the ground would see it as additional work, which they would be likely to turn down.
-None of the participants had a sound content marketing strategy in place to attract candidates in more cost—effective ways.
-A large majority of participants believed that filling care vacancies is not so much of an issue; it is qualified nurse positions that are difficult to fill. However, when
asked about turnover in the training, almost everyone agreed that this is a huge problem, stating that the average length of stay for a Support Worker is 6-12 months.

**Response to findings:**

After finding that there was a huge discrepancy between the information staff shared on the pre-coaching questionnaires and the realities reported in training, I examined the feedback from the training and evaluation forms and found:

- Professionals were reluctant to share their own recruitment strategies openly in the course as they viewed other participants as direct competitors.
- Recruitment – and retention strategies could be strengthened with the involvement of clinical staff.
- Professionals were looking for a clear recruitment model taking them through the recruitment process, which would enable them to attract and retain quality candidates.
- While participants recognised that recruitment as well as retention centered around marketing – and sales skills, none of them had any formal sales or marketing training.
Changes to plan:

-The course content was modelled into a case study entitled ‘How To Fill 50 Jobs In 90 Days’
- The case study covered the process from the identified need to fill vacancies, strategic target marketing, cost –effective promotions, public speaking and presentation skills, planning of recruitment days, interview techniques followed by exploring staff retention issues. This part of the training covered:
- What motivates staff to take a position and stay?
- How can you capture this in your own service?
- What is the link between recruitment –and retention?
- How can clinical staff be involved in recruitment activities to influence staff retention?
- How can you plan for staff retention and turnover in a strategic way through training, personal growth and leadership from the very beginning?
Results:

Case study 1

Miranda Noakes, HR Assistant at County Care, Private LD Community Service based in Surrey, West Sussex and Lincolnshire

Identified challenges in the training:

- Inability to compete on salary.
- High number of applicants with a low barrier to recruitment resulting in an average length of stay of 6 months -1 year.
- Lack of engagement of clinical staff in recruitment activities.

Post training actions and results:

- Miranda is working with her line manager on a strategy to actively involve care staff in recruitment days and interviews.
- Miranda is liasing with colleagues in marketing and care to create a content –based marketing strategy using the existing website blog.
- There has been increased involvement from care staff in their Social Media presence.
- All of these activities have resulted in a noticeable increase of applications from quality candidates.

Video testimonial just after the training course:
https://www.youtube.com/watch?v=AAyMBZvN1cE
**Case study 2**

Sophie Scott Harmann, HR Manager, NHS Community Team Brighton & Hove

Identified challenges in the training:

- Perceived belief that recruitment of good staff is nearly impossible due to the high competition in the area.

**Post training actions and results:**

- Sophie is working with her team to set up a blog and engage more with ID/LD networks
- Sophie has successfully filled 2 open care vacancies she had since the training.

**Case study 3**

Jo Morris, Corporate HR Manager, Dolphin Care, 12 private ID/LD residential homes based in Hampshire, Surrey and Sussex

**Identified challenges in training:**

- No clear staff retention strategy and high turnover
- Complete separation between recruitment and retention
- Non-involvement of clinical staff

**Post training actions and results:**

- Involvement of clinical staff in recruitment days and interviews
- Liaison with colleagues on all levels to build a staff retention strategy
- Re-design of interviews and recruitment days
- Noticeable difference in the quality of applicants
- Positive feedback from clinical staff
Case study 4:

Paul Buckwell, Clinical Service Manager for Surrey Council, ID/LD day centre care

Identified challenges in training:

- High percentage of agency use
- No control over the website and advertising
- Isolation from other services, lack of engagement with other networks

Post training actions and results:

- Paul reported he made the decision to completely block the use of agency staff.
- Paul and his team developed a strategy to build more links with the local community. He identified volunteer opportunities for his clients. The staff there offered to volunteer in his service. This led to two volunteers now visiting the service twice weekly.
- The staff team have all signed up to Twitter and Facebook. They regularly post stories and photos of their days out. This has led to an increase in applications.
- Paul succeeded in filling all of his vacancies within 8 weeks of the training taking place, resulting in an estimated cost saving of £30,000 over 12 months.
- Paul and his team developed a good relationship with local contractors doing work in the service. This led to the contractors offering to do paint work free of charge for the service.
- Paul is looking to sign up to more LD networks to keep in contact with colleagues outside of local area.
Case study 5:

Aislinn O’Connor, HR Manager, Grace Eyre Foundation, Charity, Residential LD/ID services in Sussex and London

Identified challenges in training:

- Lack of funding for recruitment.
- Salary not competitive enough compared to other providers in the market.
- Non-engagement of clinical staff in recruitment activities.
- Lack of networks with local universities.

Post training actions and results:

- Development of value-based marketing activities including the set-up of recruitment clinics for potential candidates interested in applying.
- Facilitating a direct marketing campaign directed at ex-Bhs staff as well as staff just about to be made redundant in service based industries.
- Talks and presentations at the local university
- Overhaul of recruitment days with involvement from clients and care staff.
- Increase in applications and noticeable improvement in the quality of applicants.
Current communication – and staff engagement plans:

- Sending helpful articles on ID workforce developments; particularly around STP’s and changes to apprenticeships/introduction of apprenticeship levy from April 2017
- Sending e-mails with YouTube clips with helpful tips
- Encouragement to sign up to wider professional networks and/or follow dedicated #IDHEKSS Twitter hashtag/Facebook groups
- A copy of my bestselling book ‘How To Fill 50 Jobs In 90 Days’ has been sent to all participants of the courses as their feedback has been fundamental in shaping the content of the book.

Book reviews from former participants & colleagues:

“Thank you so much for the book; I’m really enjoying it so far.”
from Jo Morris, HR Manager

“A very useful read for healthcare providers. Heike is an expert in her field and her unique book will prove invaluable to healthcare providers needing to build strong teams.”
from Hayley Goleniowska, Downs Side Up

“This is a very useful and practical tool to guide you in employing the people you need. Well done Heike for thus very important work.”
Jim Blair, Consultant Nurse for Learning Disabilities

“The book is packed with some excellent tips, these include how to engage a future workforce, how to locate people, how to assess you candidate, creating an ultimate plan for action.”
Dave Bateman, Management & Safety Consultant
Key risks identified & recommendations to address risks:

Non-attendance and commitment

-50% Non-attendance of training on the day.

-A total of 15 participants accepted the coaching call on the end of the training. Out of those, 8 participants had developed a SMART goal plan and followed through with help from their team in the service.

-5 participants completing the whole program reported significant financial savings and quality improvements as a direct result from the training course.

-The remaining three participants reported that they were organizing meetings with colleagues to explore their options in more detail.

-Some participants have been unable to take my coaching call at the agreed time and date. I offered to re-schedule and there was no further response or communication.

-High discrepancy between candidate ratings on the Likert form and direct feedback in the workshops

- Outstanding presentation of the project at a conference identified by Health Education England working across Kent, Surrey and Sussex
Recommended actions to address these risks in future:

➢ To introduce a cancellation charge (maybe £99) if participants do not attend/cancel on short notice.

➢ To offer the training online through a e-learning video home study course with downloadable workbook and reference material.

➢ To ask participants in the training for written feedback of their plans if they are unable to participate in the coaching call.

➢ To measure results by exploring the impact of the training in terms of: What changed as a direct result of the training? What actions have been taken to support the workforce planning/financial and quality goals of STP’s?

➢ To break down the individual elements of recruitment and retention and ask participants to score each narrative for their service.

➢ To present the project at an event identified by Health Education this year

➢ To make the course accessible online
Online Recruitment Course:

The training program is now available as a certificated online video course. More information can be found here: https://the-coaching-nurse.thinkific.com/courses/how-to-plan-your-workforce

Project summary:

The workshops have proven to be an effective tool to support services in achieving their workforce development goals as well as strengthening networks. Participants actively incorporating the tools from the training have experienced clear financial benefits as well as improvement in staff engagement levels. One candidate alone saved an estimated £30,000 in recruitment costs by replacing all of his agency staff with regular staff using the tools from the course.

The extensive marketing campaign across Kent, Surrey and Sussex attracted 50 bookings from HR professionals, Corporate HR Managers of larger care groups and Clinical Services Managers.

It was observed that although there are hundreds of services registered, many belong to large private, charity or NHS healthcare providers with only one or two people in charge of recruitment.

The positive results and feedback have inspired me to capture the course content and lesson plans to make it available to a wider audience. I have done so by writing ‘How To Fill 50 Jobs In 90 Days’. Since its publication, the book has become a bestseller on Amazon sales ranks.
Recommendations and final thoughts:

After contacting professionals attending the training to see if they would be interested to attend the revised and improved version of the course, I got 10 e-mails back from individuals stating that they have left their position. I contacted their colleagues to gage interest. Unfortunately, there was an overall lack of response.

It is clear from the results achieved by participants committed to their goals and action plan that the training program works.

The success of coaching and training always depends on the commitment of professionals to their goals and most importantly on their willingness to follow through. The high turnover of HR professionals observed would compromise the benefits of any further training courses within the area. It is for this reason that I can not recommend the roll-out of further training workshops within Kent, Surrey and Sussex at this stage.

The roll-out of further workshops to be re-considered if the geographical remit changes to give organizations outside Kent, Surrey and Sussex the opportunity to benefit from the training.
References:

Skills for Care statistics accessed on 23.12.15 [https://www.nmds-sc-online.org.uk/reportengine/guestdashboard.aspx?type=TurnoverRate&keystat=true](https://www.nmds-sc-online.org.uk/reportengine/guestdashboard.aspx?type=TurnoverRate&keystat=true)

HRReview Tuesday, 25th of February 2014 “It costs over £30k to replace a staff member”
