Improving The Health of Healthcare One Organization at a Time

What we have learned…

Right **People**, Right **Roles** (RPR²) – How Leadership Alignment can Make or Break Performance

Tom Olivo
Success Profiles, Inc. &
Healthcare Performance Solutions (HPS)

Right People, Right Roles
RPR²

Increase Your Odds of Success with Leadership Alignment

My presentations and coaching sessions are designed to be…

- Part Informative (the business case)
- Part Developmental (your leadership role)
- Part Inspirational (create sense of urgency)

- Today we will review information and trends, content, data and evidence, case studies, best practices, measurement/assessment tools, literature.

Who we are…

Measurement

Professional Development

Leadership Performance

healthcare performance solutions

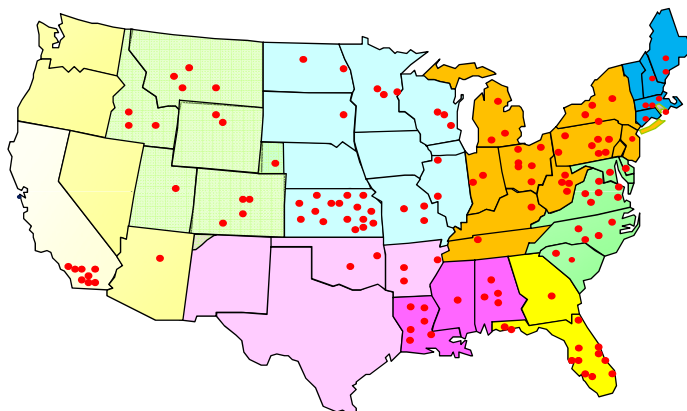Productivity Solutions

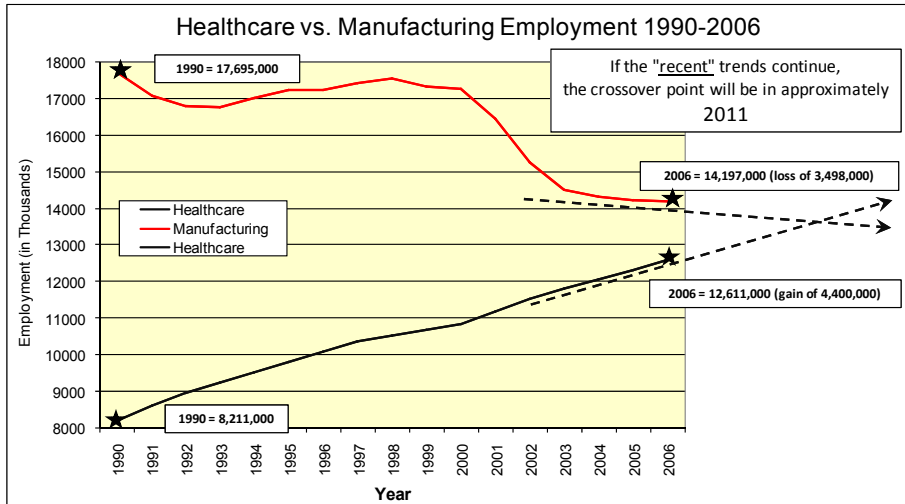Workforce Optimization

The Performance Excellence Journey
7 Years of Focused Research (1,000,000+ air miles)
> 100 Healthcare Systems, 215+ individual Hospitals
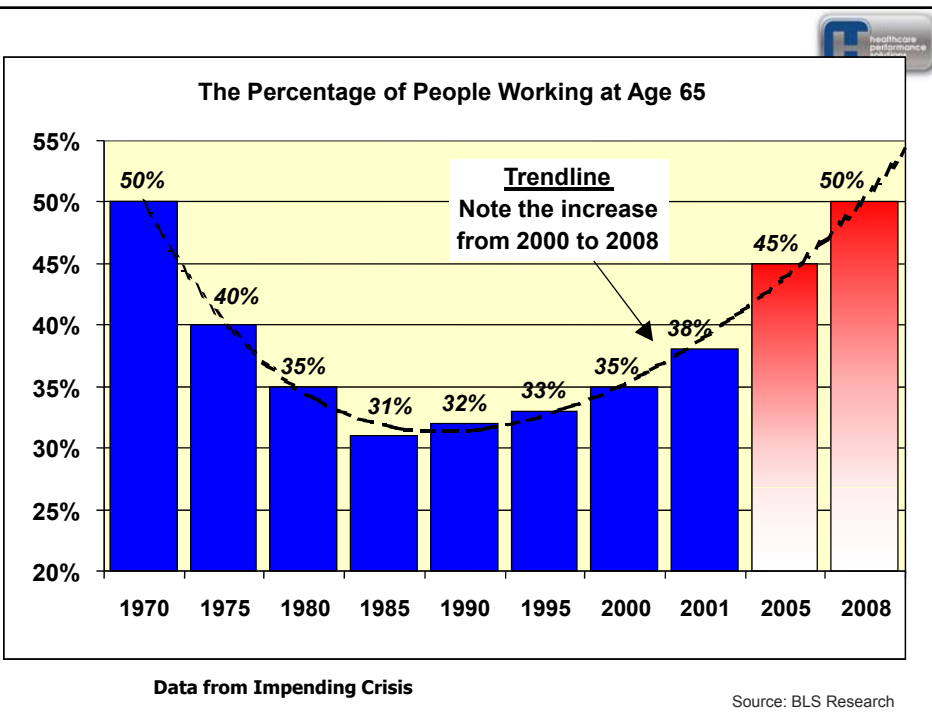Many of which are "Rural" HC organizations

Challenges are more similar than different (with exception of "Headwind" effect)

Success Profiles Inc. Research, 1992-2009

The Latest Workforce Trends

Healthcare vs. Manufacturing Employment 1990-2006

1990 = 17,695,000

If the "recent" trends continue, the crossover point will be in approximately 2011

2006 = 14,197,000 (loss of 3,498,000)

2006 = 12,611,000 (gain of 4,400,000)

1990 = 8,211,000

- Healthcare
- Manufacturing
- Healthcare

Employment (in Thousands)

Year

Success Profiles Inc. Research, 1992 to 2009

The Percentage of People Working at Age 65

50%

40%

35%

31%

32%

33%

35%

38%

45%

50%

Trendline
Note the increase from 2000 to 2008

1970 · 1975 · 1980 · 1985 · 1990 · 1995 · 2000 · 2001 · 2005 · 2008

Data from Impending Crisis

Source: BLS Research

Healthcare: The ultimate People Intense Business

"If success in a capital-intensive business comes from primarily making the right investment decisions, success in a people-intensive business comes from hiring the right people and putting them in the right roles that make them most productive."

The Surprising Economics of a People Business
Harvard Business Review, June 2005

Observation

When Hiring, Appointing and Promoting, We Tend to Confuse the Following...

Knowledge
Competency
Education
IQ (Intelligence)
#1 *Experience/Tenure*
Skill
Talent

Observation

"In Healthcare, the challenges that organizations face are becoming more difficult at a rate faster than the organizations' ability to adapt."
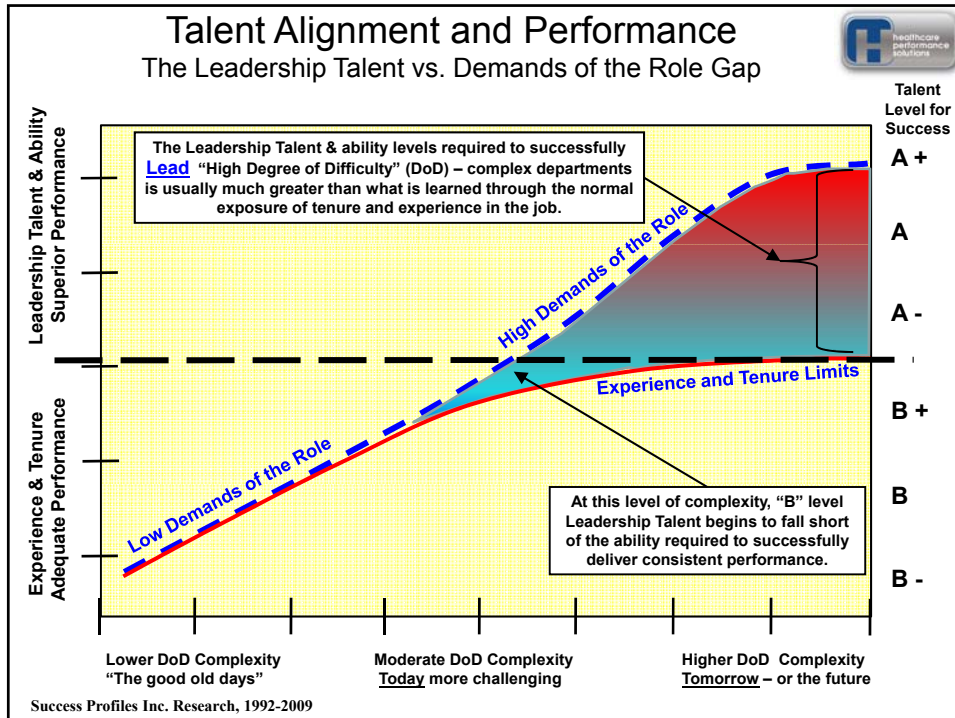
Observation

"The Talent and Skill requirements of the Front-Line leadership positions are beginning to exceed the current performance levels that Experience and Tenure creates."

Talent Alignment and Performance
The Leadership Talent vs. Demands of the Role Gap

Talent Level for Success

A +

A

A -

B +

B

B -

Leadership Talent & Ability
Superior Performance

Experience & Tenure
Adequate Performance

The Leadership Talent & ability levels required to successfully **Lead** "High Degree of Difficulty" (DoD) – complex departments is usually much greater than what is learned through the normal exposure of tenure and experience in the job.

High Demands of the Role

Low Demands of the Role

Experience and Tenure Limits

At this level of complexity, "B" level Leadership Talent begins to fall short of the ability required to successfully deliver consistent performance.

Lower DoD Complexity
"The good old days"

Moderate DoD Complexity
Today more challenging

Higher DoD Complexity
Tomorrow – or the future

Success Profiles Inc. Research, 1992-2009

The Most Effective Protocols

"Evidence based medicine is the discipline of providing consistent protocols of care that are most appropriate for the specific ailments/symptoms and medical conditions that people experience."

"Evidence based business practices is the discipline of providing consistent leadership decisions and improvement interventions based upon objective performance criteria and demonstrated results."

Success Profiles Inc. Research, 1992 to 2009

If we have a standard protocol of care when patients are sick, hurt or ill, can't we have a standard protocol of improvement when leaders/managers are struggling to failing?

Yes!

For this to occur... We first need Mature and Sophisticated Measurement Practices.

"Creating Business Intelligence"

Slide 1

> *"What's easy to measure*
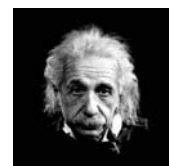> *usually doesn't count."*
> *(Employee Turnover, FTE's, Labor costs etc.)*
>
> *And*
>
> *"What really counts*
> *isn't easily measured."*
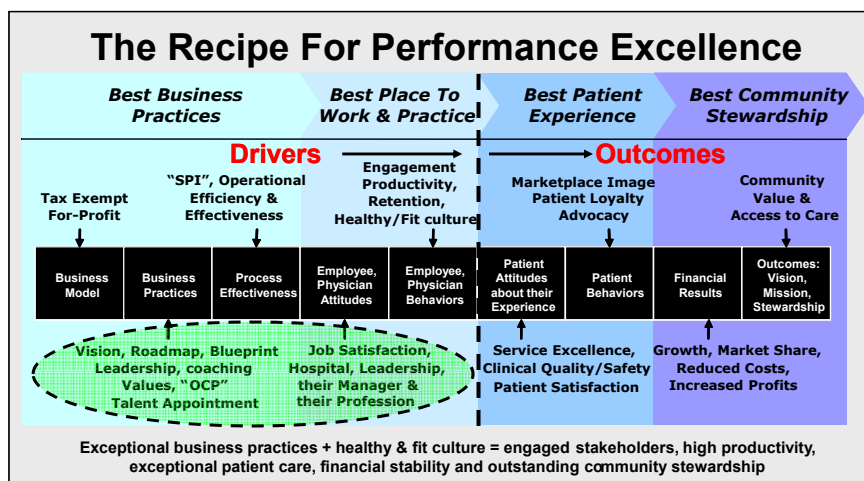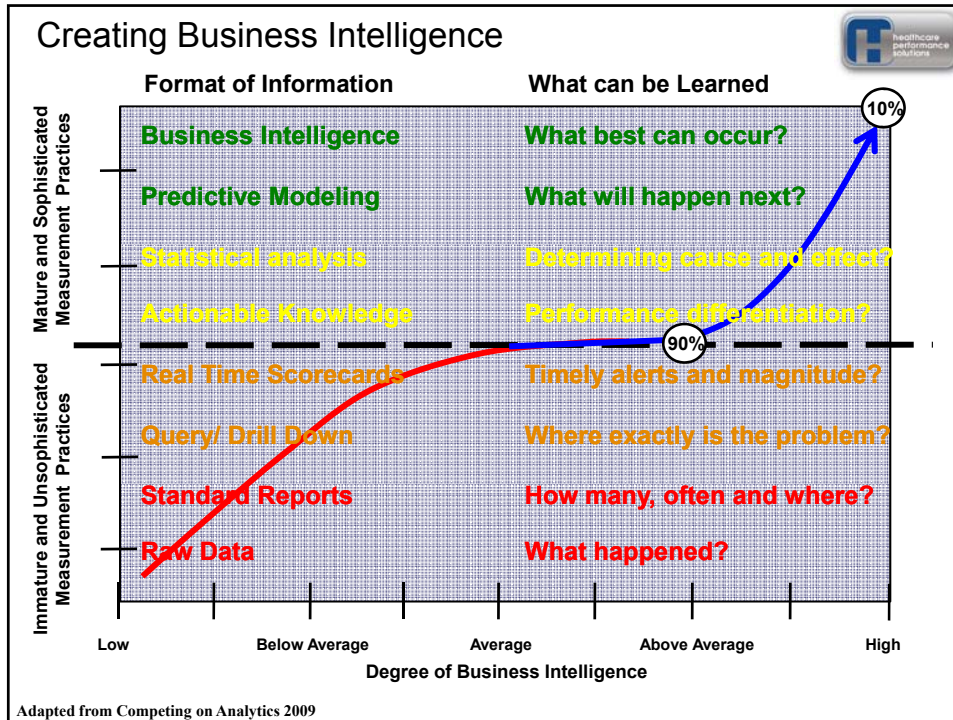> *(Leadership, Engagement, Productivity)*
>
> *Albert Einstein*

Slide 2

Leading and Lagging Indicators of Performance
A "Meta-Model" Framework for Healthcare Organizations

The Recipe For Performance Excellence

Best Business Practices	*Best Place To Work & Practice*	*Best Patient Experience*	*Best Community Stewardship*

Drivers → **Outcomes**

Tax Exempt For-Profit	"SPI", Operational Efficiency & Effectiveness	Engagement Productivity, Retention, Healthy/Fit culture	Marketplace Image Patient Loyalty Advocacy	Community Value & Access to Care

Business Model	Business Practices	Process Effectiveness	Employee, Physician Attitudes	Employee, Physician Behaviors	Patient Attitudes about their Experience	Patient Behaviors	Financial Results	Outcomes: Vision, Mission, Stewardship

Vision, Roadmap, Blueprint Leadership, coaching Values, "OCP" Talent Appointment	Job Satisfaction, Hospital, Leadership, their Manager & their Profession	Service Excellence, Clinical Quality/Safety Patient Satisfaction	Growth, Market Share, Reduced Costs, Increased Profits

Exceptional business practices + healthy & fit culture = engaged stakeholders, high productivity, exceptional patient care, financial stability and outstanding community stewardship

Creating Business Intelligence

Format of Information | What can be Learned

Mature and Sophisticated Measurement Practices

- Business Intelligence — What best can occur?
- Predictive Modeling — What will happen next?
- Statistical analysis — Determining cause and effect?
- Actionable Knowledge — Performance differentiation?

Immature and Unsophisticated Measurement Practices

- Real Time Scorecards — Timely alerts and magnitude?
- Query/ Drill Down — Where exactly is the problem?
- Standard Reports — How many, often and where?
- Raw Data — What happened?

10%
90%

Low Below Average Average Above Average High

Degree of Business Intelligence

Adapted from Competing on Analytics 2009

There are Three forms of Benchmarking…

- Internal (How you perform relative to your org.)
- Competitive (How you perform relative to your industry peers)
- Functional (How you perform relative to "best practices" regardless of industry)

Our performance measurement tools illustrate information in all formats

Success Profiles Inc. Research, 1992 to 2009

What does a **Transparent** and **Objective** culture of performance measurement look like?

Think Ownership and Responsibility

How do you quantify it?

Think GPS navigation.

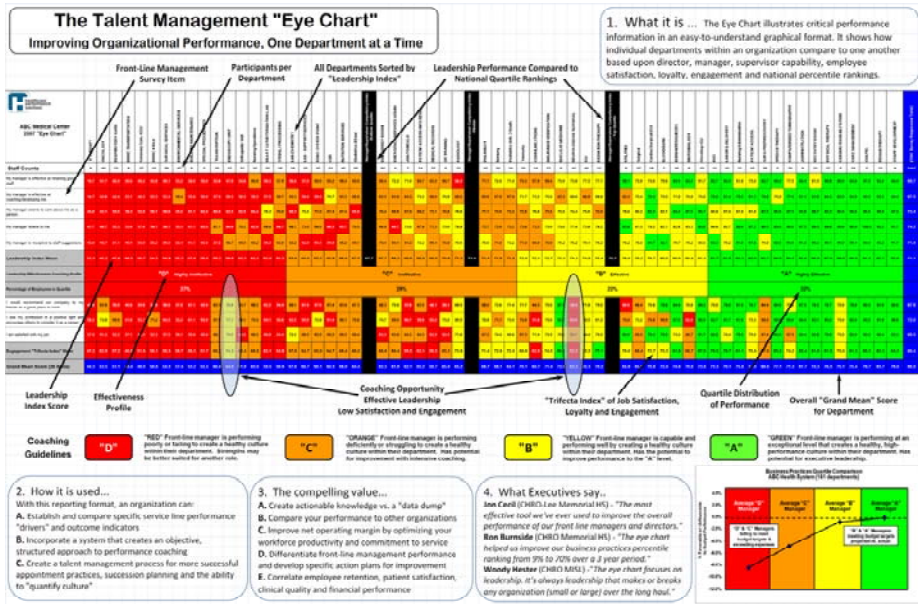Success Profiles Inc. Research, 1992 to 2009

"GPS – like" Navigation Measurement

Talent Alignment

Executive Perspective of Leadership Talent

Talent Mgt. "Eye Chart"

"Hard" Performance Metrics
• Financial Results $$$
• Productivity of FTE's
• Quality and safety
• Labor costs
• Cycle times/through-put

"Soft" Performance Metrics
• Staff satisfaction & loyalty
• Culture and engagement
• Employee Turnover
• Performance review scores
• Patient Satisfaction

Department or Unit
Front-line Manager

Comprehensive Dashboards

Staff Perspective of Manager Performance

Performance Mgt. "Eye Chart"

Tool: The Performance Management "Eye Chart"

Creating a more "transparent and objective" culture of performance.

<u>Philosophy</u>: "We make the invisible – visible" by differentiating performance one department at a time

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Creating Actionable Knowledge with "Eye Charts"

The Talent Management "Eye Chart"
Improving Organizational Performance, One Department at a Time

Tool: The Talent Management "Eye Chart"

Taking inventory and ranking the leadership talent within your organization and determining people's odds of success.

Philosophy: Getting the right people in the right roles

Talent Management
Defining the Demonstrated Leadership Ability of Every Leader in the Organization

Leadership Ability   **Performance Effectiveness Description**

"A" Level High - Top Performing

Leader/manager is a high achieving and talented performer that consistently exceeds expectations, brings out the best performance in others, is respected as a true champion with a contagious – positive attitude and a change agent that drives results. The culture that they influence both within and outside their span of control is both healthy and fit. **"A"** level leadership ability usually represents approximately **25%** of the total # of leaders.

"B" Level Good and Consistent

Leader/manager is a good and consistent performer that consistently meets expectations, brings out a good performance in others, is viewed as a true supporter with an optimistic – positive attitude and a change agent that achieves good results. The culture that they create within their span of control is both healthy and fit. **"B"** level leadership ability usually represents approximately **50%** of the total # of leaders.
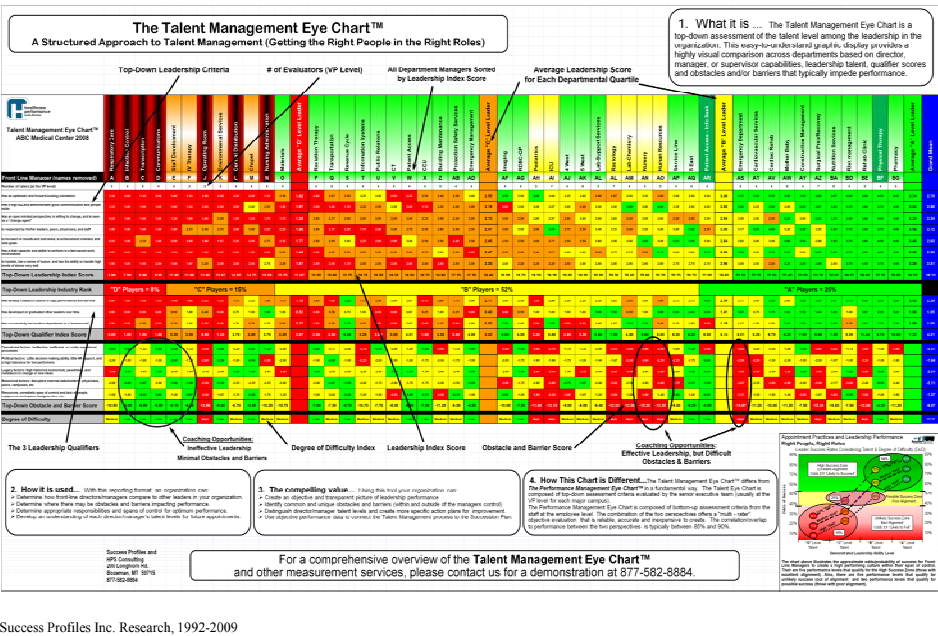
"C" Level Struggling & Inconsistent

Leader/manager is a an inconsistent performer that sometimes meets expectations, struggles to bring out a good performance in others, is often negative or pessimistic and usually requires high maintenance coaching or assistance to achieve desired results. The culture that they create within their span of control is usually unhealthy or poor. **"C"** level leadership ability usually represents approximately **15%** of the total # of leaders.

"D" Level Failing (takes away value)

Leader/manager rarely meets expectations, fails to bring out a good performance in others, is consistently negative or pessimistic and usually requires high maintenance coaching or "partnering" assistance (becoming a resource drain) to achieve desired results. The culture that they create within their span of control is usually unhealthy to dysfunctional. **"D"** level leadership ability usually represents approximately **5%** of the total # of leaders.
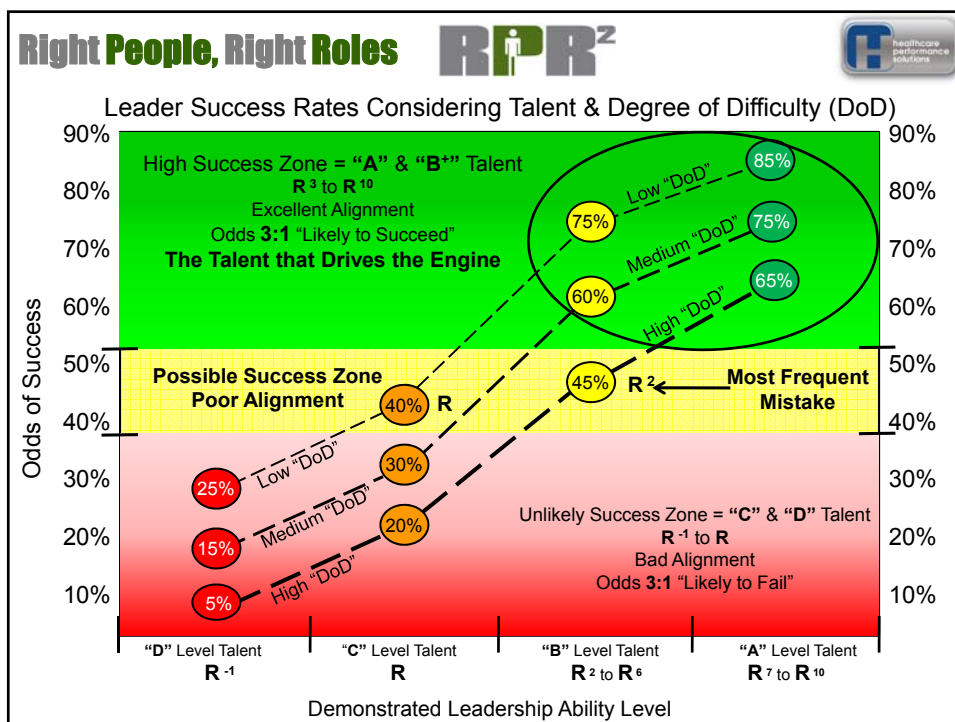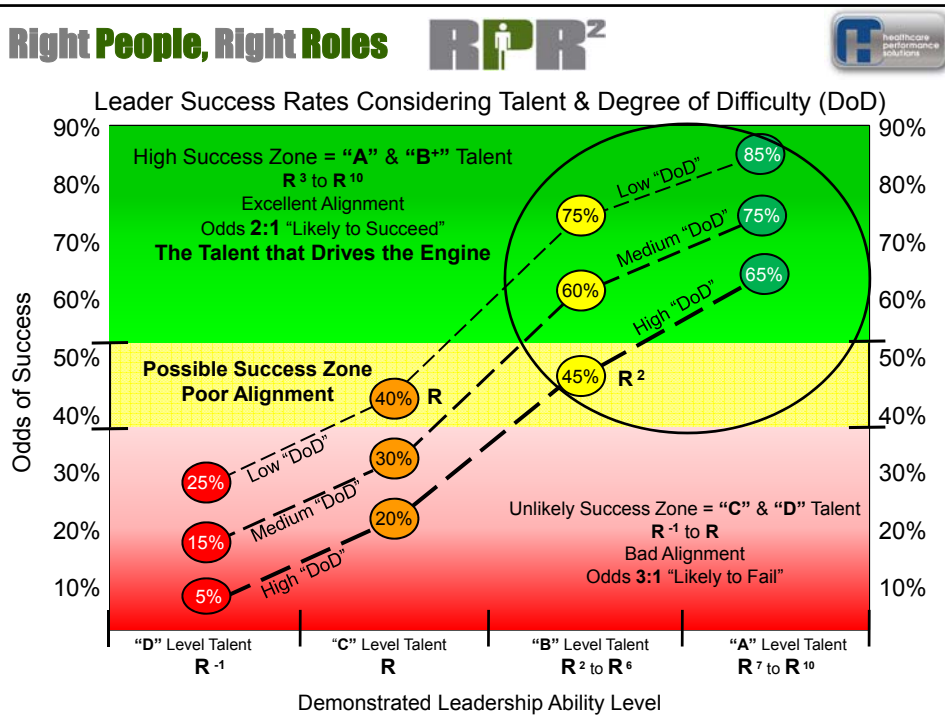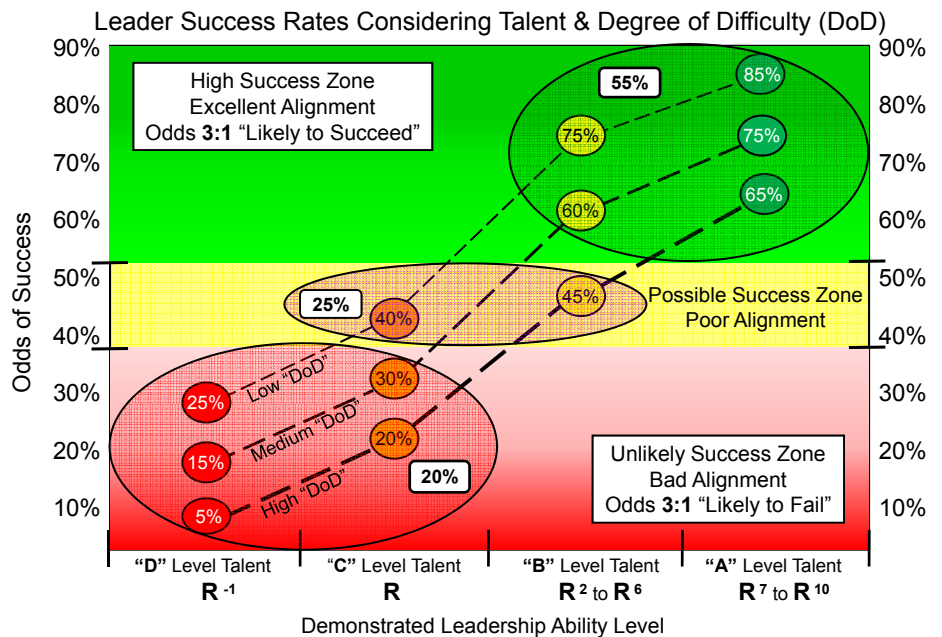
The Talent Management "Eye Chart"

Making all business decisions with Reasonable Probability of success.

(aka considering the business case and staking the odds in your favor).

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Leader Success Rates Considering Talent & Degree of Difficulty (DoD)

High Success Zone = "A" & "B⁺" Talent
R^3 to R^{10}
Excellent Alignment
Odds 2:1 "Likely to Succeed"
The Talent that Drives the Engine

Possible Success Zone
Poor Alignment

Unlikely Success Zone = "C" & "D" Talent
R^{-1} to R
Bad Alignment
Odds 3:1 "Likely to Fail"

Low "DoD" — Medium "DoD" — High "DoD"

85% — 75% — 75% — 65% — 60% — 45% R^2 — 40% R — 30% — 25% — 20% — 15% — 5%

Odds of Success

"D" Level Talent R^{-1} — "C" Level Talent R — "B" Level Talent R^2 to R^6 — "A" Level Talent R^7 to R^{10}

Demonstrated Leadership Ability Level

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R^3 to R^{10}
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Possible Success Zone
Poor Alignment

Most Frequent Mistake

Unlikely Success Zone = "C" & "D" Talent
R^{-1} to R
Bad Alignment
Odds 3:1 "Likely to Fail"

Low "DoD" — Medium "DoD" — High "DoD"

85% — 75% — 75% — 65% — 60% — 45% R^2 — 40% R — 30% — 25% — 20% — 15% — 5%

Odds of Success

"D" Level Talent R^{-1} — "C" Level Talent R — "B" Level Talent R^2 to R^6 — "A" Level Talent R^7 to R^{10}

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Odds of Success

Low "DoD"
Medium "DoD"
High "DoD"

"D" Level Talent R^{-1}
"C" Level Talent R
"B" Level Talent R^2 to R^6
"A" Level Talent R^7 to R^{10}

Demonstrated Leadership Ability Level

Appointing the right leaders in the right roles
How often are we out of alignment?
Where are we making the most common mistakes?

Talent Level of Front-Line Manager	Typical % of all Managers	% in High DoD Deptartments	% in Medium DoD Deptartments	% in Low DoD Deptartments	Totals
"A" Level Leaders	28%	28%	34%	38%	100%
"B" Level Leaders	52%	35%	32%	33%	100%
"C" Level Leaders	15%	32%	38%	30%	100%
"D" Level Leaders	5%	42%	22%	36%	100%
995 = Total # of Managers	100%				

Success Profiles Inc. Research, 1992 to 2009

Conclusion

*"Keep in mind that it's not that a **"C"** or **"D"** level leaders can't be successful, it's just that its so unlikely that you shouldn't make that bet."*

*In fact, our evidence reveals that the odds are stacked **3:1 against!***

Success Profiles Inc. Research, 1992 to 2009

The Predictable Solutions

With "D" Level performance ≤ 33% of the time you can "coach" your way to improved performance by working with the manager and/or removing the other business practices obstacles.

≥ 66% of the time you will need to replace the front line manager/director to move performance just one quartile.

With "C" Level performance 50% of the time you can "coach" your way to improved performance by working with the manager and/or removing the other business practices obstacles (with customized action planning and follow up).

50% of the time you will need to replace the front line manager/director.

With "B" and "A" Level performance you can "coach" and develop your future leaders with talent management/succession planning.

"The most effective results are achieved by doing a combination all three approaches"

What we've learned with Performance "Eye Charts"

- **Red departments** can dominate leaders (executives) time per week/month (requiring up to **75%** of their time)
- **Red and Orange** departments tend to be "more difficult" functions to manage (Higher degree of Difficulty)
- **Red and Orange** departments tend to have more employees (larger departments with greater spans of control)
- **Red and Orange** departments usually represent a higher Revenue Generating ratio (departments that bill for revenue vs. those that are an internal overhead expense).
- **Red and Orange** departments usually have leaders (front line managers) that are less talented than the leaders (managers) in the top ½ of the chart (this fact is obvious)
- **Bottom Quartile (Red)** departments typically have **300%** greater voluntary turnover than top quartile (Green)
- **Bottom Quartile (Red)** departments typically have **28%** tile lower patient satisfaction than top quartile (Green)
- **Bottom Quartile (Red)** departments typically miss budget projections by **≥ 8%** compared to top quartile (Green)
- Improvement within the original quartile zone = likely **50%** odds (one in two chance).
- Improvement of one quartile (Red to Orange) = somewhat unlikely **33%** odds (one in three chance).
- Improvement of two quartiles (Red to Yellow or Orange to Green) = unlikely **10%** odds (one in ten chance).
- Improvement of three quartiles (Red to Green) = very unlikely **< 5%** odds (one in twenty chance).

Success Profiles Inc. Research, 1992-2009

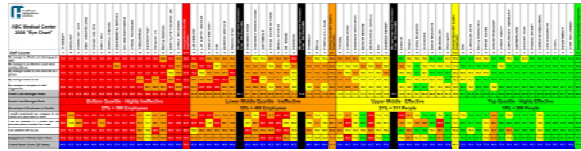# What we've learned with Performance "Eye Charts"

"D"	"C"	"B"	"A"
Bottom Quartile	Lower Mid Quartile	Upper Mid Quartile	Top Quartile
-30% -22.5% -15%	-7.5% 0.0%	+7.5% +15%	+22.5% +30%

- Given the complexity of calculating the overall value and economic benefit of improving human capital performance, we feel that the most practical and applied method of building the business case is to incorporate a workforce productivity improvement estimate that ranges between **7.5% to 15%** per quartile improved. The model has proven to be very consistent across healthcare organizations of all size. **Therefore…**
- Moving up just one quartile (from Red to Orange) could produce between **7.5% and 15%** direct and indirect overall economic benefit.
- Moving up two quartiles (from Red to Yellow) could produce between **15% and 22.5%** direct and indirect overall economic benefit.
- Moving up three quartiles (from Red to Green) could produce between **22.5% and 30%** direct and indirect overall economic benefit.
- It's possible for some departments to improve their direct and indirect overall economic benefit by over **50%.**
- We have also found that the benefits of an entire organization moving the equivalent of three quartiles of performance **(from the 25th percentile to the 75th percentile) essentially adds 4.0%** net operating margin. A significant overall economic benefit to consider (when just considering the finances).

Success Profiles Inc. Research, 1992-2009

Direct and indirect benefits of improved leadership alignment and cultural engagement

Restoring Healthcare back to the Rewarding Calling to "Make a Difference."

The Patient Experience
- Better quality outcomes
- Improved patient safety
- Greater Patient satisfaction and loyalty

Financial Results
- Lower costs for services (Productivity)
- More services per unit of time (Efficiency)
- Top line revenue growth (market share)
- Lower labor costs (including premium pay)

Workplace Benefits
- Less employee absenteeism
- Lower employee turnover (replacement costs)
- Less overtime
- Lower recruiting costs (being a "Destination of Choice")
- Less emotional stress (quality of life – work balance)

Tool: The Leadership Decision Tree Roadmap (coaching guide)

A structured approach to performance diagnosis, coaching and action planning prescription for overall improvement.

Philosophy: Maximizing performance through talent alignment, coaching and obstacle removal.

Determining Overall Performance with a Structured Approach
Guidelines for Diagnosing Leadership and Departmental Performance
The Three Factors that form the basis for a customized action plan

1. The "Talent" level of the front line manager/director
2. The department Degree of Difficulty (DoD)-complexity
3. The Overall Performance by all objective measures

We now can better diagnose, measure and compare what is contributing to high performance or low performance.

Therefore, we can more accurately and consistently prescribe performance improvement interventions that are designed one leader at a time – one department at a time.

Success Profiles Inc. Research, 1992-2009

Defining Department "Degree of Difficulty"
Examples of Levels (Lower, Medium, and High DoD Departments)
Low < 9 pts., Medium = 10 to 14 pts., High = 15-20 pts.

High "DoD"	Medium "DoD"	Lower "DoD"
Respiratory Therapy	*Neonatal*	*Human Resources*
Emergency Dept	*Anesthesia*	*Housekeeping**
Med Surgical & OR Units	*Recovery room*	*Food & Nutrition Services**
Labor & Delivery/OB	*Oncology*	*Facility Ops./Engineering**
Pharmacy	*Orthopedics*	*Maintenance*
CCU/ICU	*Physical/Occ. Therapy*	*Admitting/Patient Reg.*
Radiology	*Lab*	*Finance/Accounting*
Cardiology/Cardiac Serv.	*Behavioral Health*	*Administration*
Pediatrics	*Medical Records/coding*	*Volunteers*
	IT and IS	

Calculating Degree of Difficulty

Please use this scale when answering the questions	Never	Rarely	Sometimes	Often	Always
	0	1	2	3	4
	0%	25%	50%	75%	100%

Degree of Difficulty Criteria

	0	1	2	3	4
1. Does the department experience high volume or very fast pace?	O	O	O	O	O
2. Does the department generate high revenue?	O	O	O	O	O
3. Does the work require an advanced education or unique skill set?	O	O	O	O	O
4. Does the department require people who are considered to be scarce in your marketplace?	O	O	O	O	O
5. Does the work create a high amount of emotional stress?	O	O	O	O	O

Subtotal [ ]

A "Structured Approach" to Performance and Talent Management
Protocol for Leadership/Departmental performance coaching at each macro level

Overall Performance Level　　　　**Guideline for Action Plan (see reverse side for details)**

Coaching is relatively EASY

Top Quartile Excelling

- Leader/manager/department is **Excelling** at a high level of performance consistently. Culture is very healthy with high performance standards at a best practices level.
- Keep leader/manager in Role. Possibly move to higher degree of difficulty department. Move or expand responsibilities to high impact strategic areas (consider promoting)

Upper - Mid Quartile Succeeding

- Leader/manager/department is **Succeeding** most of the time with most performance outcomes. Culture is healthy with good performance at a consistent level.
- Keep in function. Be careful not to place in areas that are too difficult or with too many obstacles/barriers . Provide professional development and coaching to build capability.

Coaching is relatively HARD

Lower - Mid Quartile Struggling

- Leader/manager/department is **Struggling** most of the time with leadership capability or performance outcomes. Culture in somewhat unhealthy with consistent challenges.
- If leader is kept in management role, consider obstacles and Degree of Difficulty or consider a smaller department, low complexity area with minimal obstacles to overcome .

Bottom Quartile Failing

- Leader/manager/department is **Failing** most of the time with leadership capability or performance outcomes. Culture is unhealthy to dysfunctional and a time drain for leaders.
- Move out of leadership/management role possibly to an area that aligns natural ability or unique skill set to add more value (staff position, if mature enough to handle the demotion).

Ultimately, a decision must be made whether or not leaders and managers are achieving the desired performance results or falling short. This can be done with a balanced set of performance metrics or a simple assessment based upon valid evidence that the manager is either excelling, succeeding, struggling or failing.

Success Profiles Inc. Research, 1992-2009

Focus on Leadership Performance

The Ultimate Goal is to achieve the best alignment and probability of high performance by matching the most effective leadership talent available with the demands of the department or position.

Leadership Decision Tree Roadmap
See Web Enabled Version for Coaching Guidelines

Leadership Decision - Tree Roadmap

Begin Here – Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9

Service Line Information — Manager Name:, Department/Unit:, # of people:, Time in position:, Director Name:, VP Name:, Performance Review Score:, Performance to Budget:, Turnover Gross:, Vacancy Rate:, Span of Control:, Possible Mentor/Coach:, Other Info:

Low: A 85%, B 75%, C 40%, D 25%
Medium: A 70%, B 60%, C 30%, D 15%
High: A 65%, B 45%, C 20%, D < 5%

Step 8 — Follow up Coaching; Step 9 — Timetable

Consider Obstacles or Barriers — Select all that may apply:
1. Operational factors
2. Legacy factors
3. Political factors
4. Behavioral factors
5. Resource factors
6. Other factors

Degree of Difficulty Criteria — Rated on a scale from 0 to 4
1. Does the department experience high volume or very fast pace?
2. Does the department generate high revenue $$$?
3. Does the work require an advanced education or unique market skills?
4. Does the department require people who are considered to be scarce in your marketplace?
5. Does the work create a high amount of emotional stress?

Defining Relative "Degree of Difficulty"
Examples of Levels (Lower, Medium, and High DoD Departments)
Lower < 10 pts., Medium = 11 to 15 pts., High = 16-20 pts.

High "DoD": Respiratory Therapy, Emergency Dept, Med Surgical & Crit Units, Labor & Delivery/OB, Pharmacy, CCU/ICU, Radiology, Cardiology/Cardiac Serv, Pediatrics

Medium "DoD": Neonatal, Anesthesia, Recovery room, Oncology, Orthopedics, Physical/Occ Therapy, Lab, Behavioral Health, Medical Records/coding

Lower "DoD": IT and IS, Housekeeping, Food & Nutrition Services/, Facility Ops./Engineering/, Human Resources, Admitting/Patient Reg, Finance/Accounting, Administration, Volunteers

Defining "Talent"
Leadership and Management Attributes of "A" Players
The "7" Attributes of Proven/Demonstrated Leadership Ability

	Never	Rarely	Sometimes	Often	Always
1. Is optimistic with a "forward looking" orientation	0	1	2	3	4
2. Demonstrates a positive attitude (high EQ, communication skills, people skills, teamwork)	0	1	2	3	4
3. Is open minded (willing to change or a "change agent")	0	1	2	3	4
4. Is respected by leaders, peers, physicians and staff	0	1	2	3	4
5. Is results/outcomes focused (achievement oriented, sets goals)	0	1	2	3	4
6. Has a high "bandwidth" capacity for a fast paced environment	0	1	2	3	4
7. Is humble, have a sense of humor (handle stress very well)	0	1	2	3	4

Demonstrated Ability Ratings
Rated on a scale from 0 to 4
"A" Player = 21 to 28 points
"B" Player = 15 to 20 points
"C" Player = 10 to 15 points
"D" Player = ≤ to 10 points

Success Profiles Inc. Research, 1992 to 2009

Determining Overall Performance with a Structured Approach

High — 34 Managers — 25.6%

				HAR	Talent is demonstrated so question obstacles that are taking away from leadership performance	HAO
A	65%	6 Managers 17.6%	0 Managers 0.0%	1. Allow more time to turnaround performance, especially if new to position. Manager possibly going through initial resistance to changes that were implemented. 2. Consider major disruptive obstacles to remove. If circumstances beyond manager's control are causing poor performance, intervention from higher levels of leadership may be required. 3. Consider leadership coaching. Use leadership assessment profile to determine hard-wired leadership competencies. Team up with an 'A' managers for mentoring.	2 Managers 33.3%	1. Allow more time to turnaround performance, especially if new to position. Manager possibly going through initial resistance to changes that were implemented. 2. Consider major disruptive obstacles to remove. If circumstances beyond manager's control are causing poor performance, intervention from higher levels of leadership may be required. 3. Consider leadership coaching. Use leadership assessment profile to determine hard-wired leadership competencies. Team up with an 'A' managers for mentoring.

| B | 45% | 25 Managers 73.5% | HBR — 20 Managers 80.0% — Talent and obstacles could sub-optimize performance Do not to overpromote! | HBO — 1 Managers 4.0% — Talent is questionable - Must decide if "B" level ability can be successful at this level of difficulty |

| C | 20% | 2 Managers 5.9% | HCR — 2 Managers 100.0% — Talent is usually Inadequate - Don't confuse tenure & experience with leadership ability | HCO — 0 Managers 0.0% — Talent is questionable - Must decide if "C" level leadership can maintain a high level of performance |

| D | < 5% | 1 Manager 2.9% | HDR — 1 Manager 100.0% — Talent is most likely Inadequate - Very low success rate | HDO — 0 Managers 0.0% — Talent is most likely inadequate - Very low success rate |

133 Managers — Talent Alignment 64%
Overall Alignment of Talent — 7 Managers Overleveraged — 6 Managers Overleveraged

Determining Overall Performance with a Structured Approach
Guidelines for Leadership and Departmental Performance at each macro level

How to Manage People that are Succeeding and/or Excelling

Example #1 = **"LAG"** represents a leader in a **L**ow degree of difficulty department that is an "**A**" top level talent that is excelling (**G**REEN) or **LAG.**

With "Underleveraged Leaders" (those that are succeeding to excelling) the general prescription choices are…

1. Leave in current position (they are already creating high performance with outcomes, work environment and healthy culture) Continue with normal coaching and professional development and provide assistance with obstacles and barriers.

2. Consider increasing span of control (aka more responsibility). In the form of projects, increased complexity of departments to lead (DoD) and/or other departmental responsibilities.

3. Consider promoting to higher levels of leadership or responsibility by title or position. If excelling, recognize for promotional opportunities and invest in their development.

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How to Manage People that are Struggling to Failing

Example #2 = **"HBR"** represents a leader in a High degree of difficulty department that is a **"B"** lower middle quartile talent that is struggling (**R**ED) or **HBR**

With "Overleveraged Leaders" (those that are struggling to failing) the general prescription choices are…

Level I: Consider coaching for leadership effectiveness style or professional development for skill

Level II: Consider Obstacle and Barrier removal with challenges within or outside the managers control

Level III: Consider a less complex assignment or department (lower DoD or reduced span of control)

Level IV: Consider a lower/reduced position of responsibility/leadership (moving from manager to supervisor or staff level) Note… Even consider moving out of a management position to a pure technical assignment for alignment with their unique clinical or technical ability because they cannot lead other people as effectively as they can perform as an individual player.

Level V: Consider moving out of the organization entirely because they are not a fit with the values (serious behavioral challenges) or there is not a role where they can effectively add value at this time.

As you can expect, 95%+ of the decisions are most likely to occur before you will reach Level V.

How difficult is it for people to change their hardwired behaviors?

"People don't change because they are told that they should, people only change when they themselves feel that they must."

Thomas L. Friedman

"As people grow older, they tend to become more of who they already are rather than someone they are not."

Marcus Buckingham