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)

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…

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)
The Latest Workforce Trends

Healthcare vs. Manufacturing Employment 1990-2006

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

1990 = 17,695,000
2006 = 14,197,000 (loss of 3,498,000)
2006 = 12,611,000 (gain of 4,400,000)

The Percentage of People Working at Age 65

Trendline
Note the increase from 2000 to 2008

50% 40% 35% 31% 32% 33% 35% 38% 45% 50%

Data from Impending Crisis
Source: BLS Research
“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)
Experience/Tenure
Skill
Talent

Success Profiles Inc. Research, 1992 to 2009
Observation

“In Healthcare, the challenges that organizations face are becoming more difficult at a rate faster than the organizations’ ability to adapt.”

Success Profiles Inc. Research, 1992 to 2009

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.”

Success Profiles Inc. Research, 1992 to 2009
Talent Alignment and Performance
The Leadership Talent vs. Demands of the Role Gap

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.

<table>
<thead>
<tr>
<th>Experience &amp; Tenure Adequate Performance</th>
<th>Leadership Talent &amp; Ability Superior Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower DoD Complexity</td>
<td>Moderate DoD Complexity</td>
</tr>
<tr>
<td>“The good old days”</td>
<td>Today more challenging</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Tenure &amp; Experience</th>
<th>A +</th>
<th>A</th>
<th>A -</th>
<th>B +</th>
<th>B</th>
<th>B -</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superior Performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adequate Performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
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</table>

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, 1992-2009
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”
“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

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**Leading and Lagging Indicators of Performance**
A “Meta-Model” Framework for Healthcare Organizations

**The Recipe For Performance Excellence**

<table>
<thead>
<tr>
<th>Drivers</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Best Business Practices</strong></td>
<td><strong>Best Place To Work &amp; Practice</strong></td>
</tr>
<tr>
<td>Tax Exempt For-Profit</td>
<td>&quot;SPI&quot;, Operational Efficiency &amp; Effectiveness</td>
</tr>
<tr>
<td>Business Model</td>
<td>Process Effectiveness</td>
</tr>
<tr>
<td>Business Practices</td>
<td>Employee, Physician Attitudes</td>
</tr>
<tr>
<td><strong>Employee, Physician Behaviors</strong></td>
<td>Employee, Physician Behaviors</td>
</tr>
<tr>
<td>Engagement Productivity, Retention, Healthy/Fit culture</td>
<td>Patient Experience</td>
</tr>
<tr>
<td><strong>Patient Loyalty Advocacy</strong></td>
<td>Community Stewardship</td>
</tr>
<tr>
<td>Marketplace Image</td>
<td>Patient Loyalty Advocacy</td>
</tr>
</tbody>
</table>

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

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

Think Ownership and Responsibility

How do you quantify it?

Think GPS navigation.

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**“GPS – like” Navigation Measurement**

**Talent Alignment**

1. Staff Perspective of Manager Performance
2. Department or Unit Front-line Manager
3. Executive Perspective of Leadership Talent

**“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

**Comprehensive Dashboards**

Success Profiles Inc. Research, 1992 to 2009
Tool: The Performance Management “Eye Chart”

Creating a more “transparent and objective” culture of performance.

Philosophy: “We make the invisible – visible” by differentiating performance one department at a time

Creating Actionable Knowledge with “Eye Charts”
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

<table>
<thead>
<tr>
<th>Leadership Ability</th>
<th>Performance Effectiveness Description</th>
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<tr>
<td>“A” Level High - Top Performing</td>
<td>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.</td>
</tr>
<tr>
<td>“B” Level Good and Consistent</td>
<td>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.</td>
</tr>
<tr>
<td>“C” Level Struggling &amp; Inconsistent</td>
<td>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.</td>
</tr>
<tr>
<td>“D” Level Failing (takes away value)</td>
<td>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.</td>
</tr>
</tbody>
</table>
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).
Right People, Right Roles

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

High Success Zone = “A” & “B+” Talent
R³ to R¹⁰
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 R
Bad Alignment
Odds 3:1 “Likely to Fail”

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Odds 3:1 “Likely to Fail”
Appointing the right leaders in the right roles
How often are we out of alignment?
Where are we making the most common mistakes?

<table>
<thead>
<tr>
<th>Talent Level of Front-Line Manager</th>
<th>Typical % of all Managers</th>
<th>% in High DoD Departments</th>
<th>% in Medium DoD Departments</th>
<th>% in Low DoD Departments</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;A&quot; Level Leaders</td>
<td>28%</td>
<td>28%</td>
<td>34%</td>
<td>38%</td>
<td>100%</td>
</tr>
<tr>
<td>&quot;B&quot; Level Leaders</td>
<td>52%</td>
<td>35%</td>
<td>32%</td>
<td>33%</td>
<td>100%</td>
</tr>
<tr>
<td>&quot;C&quot; Level Leaders</td>
<td>15%</td>
<td>32%</td>
<td>38%</td>
<td>30%</td>
<td>100%</td>
</tr>
<tr>
<td>&quot;D&quot; Level Leaders</td>
<td>5%</td>
<td>42%</td>
<td>22%</td>
<td>36%</td>
<td>100%</td>
</tr>
</tbody>
</table>

995 = Total # of Managers

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!

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).

What we’ve learned with Performance “Eye Charts”

- 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 (Red to Yellow) could produce between 15% and 22.5% direct and indirect overall economic benefit.
- Moving up three quartiles (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).
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.

Success Profiles Inc. Research, 1992-2009
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.

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”
- Respiratory Therapy
- Emergency Dept
- Med Surgical & OR 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
- IT and IS

Lower “DoD”
- Human Resources
- Housekeeping*
- Food & Nutrition Services*
- Facility Ops./Engineering*
- Maintenance
- Admitting/Patient Reg.
- Finance/Accounting
- Administration
- Volunteers

Calculating Degree of Difficulty

<table>
<thead>
<tr>
<th>Degree of Difficulty Criteria</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the department experience high volume or very fast pace?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>2. Does the department generate high revenue?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>3. Does the work require an advanced education or unique skill set?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>4. Does the department require people who are considered to be scarce in your marketplace?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>5. Does the work create a high amount of emotional stress?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

Subtotal
A “Structured Approach” to Performance and Talent Management

Protocol for Leadership/Departmental performance coaching at each macro level

<table>
<thead>
<tr>
<th>Overall Performance Level</th>
<th>Guideline for Action Plan (see reverse side for details)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Top Quartile</strong></td>
<td><strong>Excelling</strong> at a high level of performance consistently. Culture is very healthy with high performance standards at a best practices level.</td>
</tr>
<tr>
<td><strong>Upper - Mid Quartile</strong></td>
<td><strong>Succeeding</strong> most of the time with most performance outcomes. Culture is healthy with good performance at a consistent level.</td>
</tr>
<tr>
<td><strong>Lower - Mid Quartile</strong></td>
<td><strong>Struggling</strong> most of the time with leadership capability or performance outcomes. Culture is somewhat unhealthy with consistent challenges.</td>
</tr>
<tr>
<td><strong>Bottom Quartile</strong></td>
<td><strong>Failing</strong> most of the time with leadership capability or performance outcomes. Culture is unhealthy to dysfunctional and a time drain for leaders.</td>
</tr>
</tbody>
</table>

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.

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

<table>
<thead>
<tr>
<th>Manager Traits</th>
<th>Alignment</th>
<th>1M + 1M</th>
<th>2M + 2M</th>
<th>6M + 6M</th>
<th>Overall Alignment</th>
<th>Follow up</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Inadequate - Don't promote!</td>
<td>Talent is so limited &amp; obstacles to overcome, leadership role can be implemented.</td>
<td>2. Consider leadership coaching. Use leadership assessment tools to determine hard-wired competencies. Team up with an 'A' manager.</td>
<td>3. Consider moving out of organization, especially if limiting factors are high - possibly, add more value as an employee vs. manager.</td>
<td>1. Consider coaching or leadership development. Use assessment profile to determine top-priority development areas. Develop coaching plan.</td>
<td>Overall Alignment of Talent</td>
<td>1. Allow more time to turnaround performance, especially if new to position. 2. Consider a supervisory role, which will give person a smaller span of control. If moved to another department ensure it has low complexity with few obstacles to overcome.</td>
<td></td>
</tr>
<tr>
<td>2. Overleveraged</td>
<td>Talent is demonstrated so leadership performance &amp; success rate are minimal obstacles to overcome.</td>
<td>Talent and obstacles are taking away from ability can be successful at this level of difficulty.</td>
<td>Must decide if &quot;C&quot; level supervisor is best role for manager's control are causing poor performance, intervention from higher levels of leadership may be required.</td>
<td>Consider staff assignment. Move out of leadership/management position to an area that aligns with their natural ability or unique skill set. Can possibly add more value as an employee vs. a manager.</td>
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<td></td>
<td></td>
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<tr>
<td>3. High</td>
<td>Talent is questionable - inadequate - very low success rates highly likely.</td>
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<td>4. Inadequate - Very low</td>
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### Determining Overall Performance with a Structured Approach

<table>
<thead>
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<th>Talent Alignment</th>
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<th>6M + 6M</th>
<th>Overall Alignment</th>
<th>Follow up</th>
<th>Timeframe</th>
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<tr>
<td>25.6% Managers</td>
<td>64%</td>
<td>65%</td>
<td>45%</td>
<td>20%</td>
<td>Overall Alignment</td>
<td>1. Consider coaching or leadership development. Use assessment profile to determine top-priority development areas. Develop coaching plan.</td>
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### Leadership Decision Tree Roadmap

See Web Enabled Version for Coaching Guidelines

Success Profiles Inc. Research, 1992 to 2009
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 Low degree of difficulty department that is an “A” top level talent that is excelling (GREEN) 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.

Success Profiles Inc. Research, 1992 to 2009

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 (RED) 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.

Success Profiles Inc. Research, 1992 to 2009
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