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MSc in Health Care Management

MASTER THESIS

**Innovative diverse talent management pools in the field of
physiotherapists: a qualitative study in public value driven healthcare
sector of Greece**

by

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This work is dedicated to my beloved mother. She used to say to me: “whenever you feel discouraged, just remember, you are the center of my universe, your efforts will be rewarded in the right time if you are patient and methodical”.

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ABSTRACT

As Physiotherapists we can change people's lives in a positive way, but it is certain that our personalities are unique, our way of thinking is different and we tend to be potential talented in a diverse way.

Purpose: Bibliography focuses mainly on talent management pools without focusing on healthcare sector and without trying to connect them between the triptych: talented personality-diversity-innovation, this void we are going to attempt to cover in this task.

Talent management (TM) and organizational talent pools in general, is used as an umbrella term to refer to the current and future people resourcing needs of an organization. Over the years, the healthcare sector of Greece seems it cannot manage and channel the chances of creation of talent pools in Physiotherapy, in order to multiply innovation, expertise and new ideas.

Design: This qualitative study was conducted in two phases. Phase one involved semi-structured interviews with five Physiotherapists from two Greek Hospitals and two organizations from primary health care. Phase two involved thematically data analysis.

Findings: Talent management pools in Physical therapy in Greece is something essential, even though it is not broadly known in the employees. It is important to communicate the term and engine the creation of such innovative system. Employees are ready, working ground is ready the only thing that it is a prerequisite is designing a properly structured system.

Originality/Value: The research tends to reinforce the thinking of creation of talent pools throughout the whole healthcare system of Greece for the profession of Physical Therapy.

KEYWORDS

Talent management pools, cooperative innovation, strategic innovation, diversity, competitive advantage.

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1. INTRODUCTION

1.1 Why this Research?

Throughout my own career as a physiotherapist I have engaged with the careers of different people and I have observed a huge disconnect between organizational talent and innovational diversity. Keen to understand more about our profession and people within it, I started to read some of the academic literature. This was the confirmation about my sense that little has been written about talent pools and innovational diversity in our field, especially in Greek hospitals. As I continued my study about the topic of talent management, I was lead to the recent article of Judith van den Brock et. al. (2018) which feed my inspiration for further investigation.

Addressing important gaps in talent management pools from the HR departments in Greek hospitals and public primary health care, this study will try to develop a best practice model of talent pools in talent management throughout the opinions of **five** Physiotherapists from **two** hospitals and **two** Physical Therapy organizations of primary health care in Greece, as talented health care practitioners and it aims to address this gap in the current literature.

In the years of difficult economic conditions, Greek hospitals, the structures of primary healthcare -and talent management in particular- are facing major challenges such as the ageing employees, the continuously aging population, governments' financial cuts and rising healthcare costs (Groves, 2011; Hendriks, Ligthart & Schouteten, 2016; Ramamonjiarivelo et al., 2015). Hospitals also face many barriers in innovation such as institutional pressures-budgetary constraints and requirements related to quality and safety by Ministry of Health (Goes & Ho Park, S. 2010). Undoubtedly the dominant issue in the Greek health care system and especially in the field of Physiotherapy is the lack of specialized staff, the lack of expertise in different fields of Physiotherapy such as pediatrics, orthopedic problems and neurological issues and the lack of the appropriate equipment.

These challenges could not leave the profession of Physiotherapy uninvolved. We will study the talent management pools of two hospitals and two organizations of the primary health care sector in Greece as a typical example of collaborative diverse innovation between partners which are facing scarce recourses but also have a respect

to human recourses. The focus of our study will be the perceptions and the talent practices used in cooperative innovation of five Physiotherapists.

Despite some blurry lines around the term, talent is a seductive word especially in the profession of Physiotherapists. “Talent” is the sum of a person’s abilities, all the intrinsic gifts, skills, knowledge, experience, intelligence, judgment, attitude, character, emotional intelligence and drive (Michaels, 1997). It is important to focus on theoretical basis, as talent management pools and diverse innovation has been criticized for its lack of focus (Lewis, R. E., Heckman, R. J. 2006) on healthcare and for being just another management approach that does not offer added value above and beyond the well-established literature (Iles, P. et. al. 2010).

Knowledge and talent transfer among cooperating health care organizations is expected to enhance innovation (Tsai, 2001), and this is the reason we are going to find a thin red line that can compare talent and diverse innovative originality throughout the Greek healthcare sector in the Physiotherapy profession in comparison with the possibility of creation of talent management pools.

1.2 Research Summary

Talent management is important in healthcare and especially in the field of Physiotherapy, due to transformational changes needed to meet increasing demands and integration of services (Vroom, V. H. 1990). Literature study has shown that limited research in TM for Physiotherapists has led the profession in reduction of cognitive abilities. Reviews on talent management within the professions of nursing and medicine have been occurred but this has yet to be undertaken in the field of Physical therapy (McGowan, E. & Stokes, E. K. 2015). There are bright examples of Physiotherapists working successfully in new roles according to their talent, using innovational TM, but there is need for more (Gallardo-Gallardo, E., et. al. 2013) and there is a great need for highly qualified Physical therapists, which may be regarded as talents and have the ability and the strength to emphasize this evident in healthcare sector in Greece (Ingram, T. & Glod, W. 2016).

There is clear evidence of the link between TM and a range of important outcomes within health services, including patient satisfaction, organizational-financial performance, staff well-being, engagement, overall quality of care and organizational learning (Kravariti, F. 2016).

Although robust research evidence supports the many benefits of maintaining a strong commitment to talent management practices, many health care organizations compound the problem by workforce reductions and limiting or eliminating investments in talent management (Groves, 2011).

Developing TM pools capacity needs a strong will, strong focus and excellent design to meet current health care needs. There is no single method that is most effective for talent management and especially for the structure of effective talent pools (Hewlett, S. A. et. al., 2013 & Sims, S. et.al. 2015).

Speaking about innovation, it could be defined as “the intentional introduction within a role, group or organization, of ideas, processes, new to the relevant unit of adoption, designed to significantly benefit the individual, the group, or wider the society”(Lämsäsaari et. al., 2006). Therefore innovation within the Physical therapy profession might be stimulated by the introduction of competition, such as talent pools and potentially this could force the hospitals to change their routines and norms (Sørensen & Torfing, 2011). Most hospital managers accept that innovation can be driven by a diverse workforce, but the implications can be hard to prove, especially when we have to prove how diversity affects a hospital to innovate and create talent management pools. New research provides compelling evidence that diversity and talent management unlocks innovation by creating an environment where “outside the box” ideas are heard (Hewlett, S. A. et. al., 2013).

“It’s the talent, stupid!” vociferate Buckingham and Vosburgh (2001). Indeed, although a large number of healthcare practitioners around the world have reported that they believe talent management is the most important challenge for health care organizations and despite over a decade of debate about the ‘war for talent’ (Michaels, E., Handfield-Jones, H., Axelrod, B. 2001), there has been little theory development- not to mention the lack of empirical and qualitative evidence.

All the above are leading us to the crucial questions: how do organizational actors perceive cooperative innovation and management of talent pools within competitive hospitals? How do Physiotherapists understand and support the possibility of existence of talent pools? How does this will affect the innovation process within the organizations and how will this change bring about an improvement in talent?

1.3 Summary of Methodology

This report documents the current thinking on TM and especially talent management within the Physiotherapy profession. It is based on my academic reading and on key reviews and literature, enriched with personal stories from current practitioners specialized in specific fields of physiotherapy. There is very limited and specific literature on talent management within the Physiotherapy profession, making it 'not currently possible to perform a systematic review of this topic' (McGowan, E., Stokes, E. K. 2015). To provide more information for this report interviews were taken from **five** Physiotherapists from **two** different public hospitals and **two** organizations from public primary health care of Greece, in the region of Thessaloniki.

The data collection for this study has a number of different elements: talented and divert participants, scalable structure of discussions and an update of the research progress. The Physiotherapists were chosen according to their clinical, academic, personal talent managing roles and professionalism.

Participants were chosen and approached from within my existing network. The network included a small range of two public hospitals and two organizations from the public primary health care of Greece. The initial intention was to interview approximately five Physiotherapists. The majority of the interviews took place in the interviewees working environment face-to-face. The interviews lasted approximately between 45-90 minutes.

I performed in-depth interviews focusing on the talent management pools (Yin, 2008), because this enables a detailed exploration of a real-life phenomenon and its' context, which suits the research question under study (Broek, J. et. al. 2018). Therefore I conducted semi-structured interviews with five stakeholders from the four participating hospitals and organizations. There were recorded, de-coded in a word text and data analysis followed by the creation of a set of themes which derived from my literature review reading. The interviews were broken into chunks of data using mostly sentences and words. This sentences and words were allocated with a close code from my list of themes. The closed codes were brought together in order to be researched for new ideas within my themes, compared how each theme and sub-theme relate together and how emerging new ideas complements the literature.

We hope and expect that all of our data analysis will form the basis for a short engagement for hospitals and Physiotherapists of the creation of talent management

pools that will rational use all their sources and strength in order to create innovation and improvement of the provided services, although interviewees expressed a concern that clinical talent management and talent pools is not being used effectively in the healthcare sector of Greek hospitals re-design.

1.4 Contribution of the Thesis

As a Master Thesis this work intended to make an original contribution. The findings presented here can be considered to support in general some previous findings, to extend some previous research and to challenge for some more in depths research. This research tries to sheds light on a glaring gap in what everyone agrees is one of the most important competencies in health care: the ability to built talent and potential big talent pools in the rising profession of Physical therapy.

Talent management in Greek healthcare organizations focus on formal talent processes and it is potentially limiting in terms of supporting individual career development, innovational thinking and diverse talent, in order to meet organizational needs for improvement of the quality given.

The data in this study suggests that more attention in talent management and potentially in the creation of talent pools in the profession of Physical therapy could give support in individuals to take greater career accountability, self-management and clarify the 'career deal' (Herriot, P. & Pemberton, C. 1996).

The findings in this study indicate that there is a wide variety of studies upon talent management pools but little has been written about the profession of Physical therapy. For us the literature review surfaced the following macro themes: there tends to be a disconnection between organizational talent management (TM), innovation through out of learning and the possibility of creation of talent pools throughout individual career development in Greek health care system in general.

Our main themes rounded up the following questions:

- Current working roles and knowledge of talent management in general and (TM) pools more specifically.
- The importance of team working and team learning in an organization.
- Carrere development through a talent management pool.

- Current opinions in including diverse Physiotherapists in innovational talent pools.
- Leadership and encouragement of different ideas and out-of-the-box thinking.
- New ideas and challenges in talent management in healthcare in general and particular in the profession of Physical therapy.
- Ideas about development and changes in organizational performance systems of reinforcing innovation and talent.
- Beliefs about broad diversity as a fundamental boundary for organizational future success and development.
- Ideas about how talent and talent management pools can create and add value in a health care organization.

2. Talent Management Literature Review

2.1 Introduction

There has been a particular growing interest in talent management (TM) over the past decade, from both academics and practitioners as it remains an underdeveloped, growing but immature field of study (Dries, N. 2013). The field has been dominated by research of case studies and practice based research. Many writers pointed out the lack of empirical research especially in the health care sector (Collings, D. G. & Mellahi, K. 2009 ; Lewis, R. E. & Heckman, R. J. 2006 ; Thunnissen, M. et. al. 2013). But the solid structure of talent management was seated up in 1998 after the establishment of Ed Michael's masterpiece "The War for Talent". This has settled the fundamental belief of the importance of talent management in organizational excellence.

Talent management is now investigating its use in specific business sectors such as healthcare and it is trying to show evidence that "context is everything" (Festing, M., Schäfer, L., Scullion, H. 2013 ; Sparrow, P. R., Hird, M., Cooper, C. I. 2015). It is also of great importance to understand the fact that talent management is drawing ideas

within HRM, marketing, the resource-based view and capability theories, in order to be able to understand the complexity of the field (Sparrow, P. R., Makram, H. 2015). In order to understand which elements of talent management are the most valuable for organizational performance and effectiveness we need to ask “how does a talent management architecture generate value for the organization?” (Meyers, M. C., van Woerkom, M. 2014). A talent management architecture is the combination of systems, processes and practices developed by an organization to ensure that the talent management is carried out effectively (Sparrow, P. S., Makram, H. 2015). Through this, valuable and rare talent enables an organization to create the appropriate strategies in order to achieve sustained competitive advantage. Talented employees, especially in the healthcare sector are both an organization strategic asset and a manipulable resource that has the potential to contribute in value creation and innovation (Schiemann, W. A. 2014). Organizational value creation, value capture and value protection give as the chance to develop isolating mechanisms to protect our talents from being lost to other competitors, and the opportunity to create talent rotational pools (Sparrow, P. R., et. al. 2014).

All the above, combined with the new relative research reviews, creates a number of challenges for the academic researchers, especially in the healthcare sector. To set an example: until now, there is no agreed definition of the term talent management, little has been written about the role of the individual-employee- and there is an identified gap in research on talent management pools in the healthcare sector.

This study will try to know when talent investments have been optimized, who can we prolong the talent lifecycle in order to maximize our talent pools specifically in the Physical therapy profession and how can we connect the triptych: **talent optimization-diverse innovation-quality (profitable advantage)**.

Given all the above, the current literature review will try to identify what talent management really ‘is’ and what is the difference between talent management in general, talent management in the healthcare sector and what is unique about talent management in the Physical therapy profession.

Several authors emphasize the fact that there is a greater need for innovative managerial practices and talent management for organizations and healthcare organizations in particular in order to attract, develop and retain motivated highly qualified employees (Mihail, D. M. & Kloutsiniotis P. V. 2016; Rye, C. B. & Kimberly, J. R. 2007; Walston, S. L. et.al 2001). As no currently available theory has

enough scope to capture its deferent elements and no methodical approach is considered superior to others, talent management fits all the criteria of a 'phenomenon' (Hambrick, D. C. 2007).

2.2 What is 'talent' in the profession of Physical therapy?

Talent management is a positive revolution, is a central concept that can motivate and retain healthcare workers. When people think about talent, they think, it is about something that you are good at it. Talent is not about the activity, it is about what the talent does with you. Talent is about how you are managing your abilities, talent is what you can do totally at ease, that satisfies you, that makes time fly, that reloads your batteries. One thing that it is difficult about talent, it is the path you have to follow in order to discover it.

People in healthcare is our future competitive landscape (Lawler, E. E. 2008), our greatest asset (Vroom, V. H. 1990) and our new source of competitive advantage (Becker, B. E., Huselid, M. A., Beatty, R. W. 2009), it is our responsibility to optimize talent attraction, retention and performance as through this we can achieve good raising of talent, an obvious critical innovation and motivated employees who want to be knowledge workers (Lawler, E. E. 2008).



Talent management (TM), remains underdeveloped, especially in the healthcare sector in Greece and although the high level of interest in the field over the past decades, it is

paradoxical poorly defined and in lack of theoretical background. Let us say is in its infancy and it is a great need of theoretical advancement and qualitative research (Collings, D. G., Mellahi, K. 2009).

Talent management (TM), is difficult to be identified precisely because of the variety of definitions and terms being given. Terms as ‘talent management’, ‘talent strategy’, ‘human resource’ ‘planning’ and ‘talent pools’, are often used interchangeably (Lewis, R. E., Heckman, R. J. 2006). An increasingly number of authors, Garrow, V. & Hirsh, (2008), Reilly, P. (2008) and Tansley, et. al. (2007), attribute the ambiguity between talent management and the underlying construct of talent and innovation (Gallardo-Gallardo, E., Dries, N., González-Cruz, T., 2013).

Keep in mind, for instance the following statements in talent management:

“Ensure the right person is in the right job at the right time” (Jackson, S. E., Schuler, R. S. 1990).

“Managing the supply, demand and talent flow through the human capital engine can bring innovation and long term knowledge” (Pascal, C. 2004).

The term ‘talent’ is everywhere around us. A single Google search can reveal almost eight hundred hits. We can infer that the original meaning of the term ‘talent’ refers to personal characteristics. It is also understood as above-average ability of a specific range of functions (Tansley, C. 2011). The most commonly mentioned distinctions in the literature refer to so-called ‘high-potentials’ and ‘high-performers’ or some combination of both (Blass, E. 2007; Tansley, C. 2011). High-performing employees are those who have already shown the ability, engagement and aspiration to become future talented leaders or innovational co-workers in an organization (Wang-Cowham, C., Kamoche, K., Tansley, C., Iles, P. 2012). Talented high-performing people rise out and above the rest of their age peers in the specific area of their talent (Gagné, F. 2000). That is the importance of the separation and the alignment of the context between healthcare talent management and individual career development in an organization.

It is interesting though, that the literature on the war for talent is quite specific as to ‘why’ talent management in healthcare matters but it is less specific on what talent management ‘is’ exactly (Huang, J., Tansley, C. 2012).

Table 1**Definitions of talent management in the HRM literature:**

| Reference | Definition of talent management |
|------------------------------|---|
| 2003 Sloan, Hazucha & Katwyk | “Managing talent strategically, to put the right person in the right place at the right time” |
| 2004 Pascal | “Talent management encompasses managing the supply, demand and flow of talent through the human capital engaging” |
| 2005 Duttagupta | “Talent management is the strategic management of the flow of talent through an organization. It is important to assure that the supply of talent is available to align the right people with the right jobs at the right time based on strategic business objectives” |
| 2006 Warren | “In its broadest sense, the term can be seen as the identification, development, engagement, retention and deployment of talent, although it is often used more narrowly to describe the short and longer term resourcing of senior executives and high performers” |
| 2007 Jerusalem & Hausdorf | “High potential identification and development (also known as talent management) refers to the process by which an organization identifies and develops employees who are potentially able to move into leadership roles sometime in the future” |
| 2008 Cappelli | “As its heart, talent management is simply a matter of anticipating the need for human capital and setting out a plan to meet it” |
| 2009 Collings & Mellahi | “We define strategic talent management as activities and processes that involve the systematic identification of key positions which differentially contribute to the organization’s sustainable competitive advantage, the development of a talent pool of high potentials and high performing incumbents to fill these roles, and the development of a differentiated human resource architecture to ensure commitment to the organization” |
| 2010 Silzer & Dowell | “Talent management is an integrated set of processes, programs, and cultural roles in an organization designed and implemented to attract, develop, deploy and retain talent to achieve strategic objectives and meet future |

| | |
|--------------------------|---|
| 2012 Wang-Cowham et. al. | business needs” “High performing employees are those who have already have shown these kind of attitudes, skills and behaviors” |
| 2014 Schiemann | “Talent management is a unique function that integrates all of the activities and responsibilities associated with the management of the talent lifecycle- from attracting and acquiring talent- to developing and retaining it” |

But, it is important to quote the term ‘talent’ from all the connected perspectives that are connected with health care and especially with Physical therapy as a unique profession.

Table 2
Summary of relevant theoretical perspectives on talent

| Literature stream | Operationalization of talent | Main contribution |
|------------------------|------------------------------------|--|
| HRM | Talent as capital | Links individual talent to organizational context. |
| Psychology | Talent as individual difference | Long research tradition in personnel selection, promotion systems and performance appraisal. |
| Educational psychology | Talent as giftedness | Strong theoretical frameworks especially in specific excellence. |
| Positive psychology | Talent as strength | Treats positive outliers as research subjects of choice |
| Social psychology | Talent as the perception of talent | Brings in elements of social perception, talent that is not acknowledged does not ‘exist’. |

And continue by quoting relevant questions about talent and organizational thinking.

Table 3

Metadata in the literature about talent

| Key point of discussion | Practical talent management issues |
|---|---|
| What or who is talent ? | What should talent management, manage? |
| How prevalent is talent in the population? | By which principle should organizations allocate their resources? |
| Can talent be taught and learned? | How can organizations tackle labor market scarcities? |
| Is talent more about ability or motivation? | What should organizations select for? |
| Is talent conditional on its environment? | Should organizations recruit externally or internally? |

Talent management theories have been driven by the assumption that maximizing the talent of an organizations employees, is a source of sustained competitive advantage (Scullion, H., et. al. 2010). Early studies on managing people indicate that healthcare organizations need to pay greater attention on internal talent management and especially on talent pools (Ariss, A. A., Cascio, W. F., Paauwe, J. 2014). It is also believed that organizations are failing to “capitalize on the opportunity for strategic success that a talent management team can bring”. Organizations need to ensure that talent management practices communicate the right message to the right target group and that the target group perceives these ‘signals’ as intended (Joyce, W. F., Slocum, J. W. 2012).

In the profession of Physical therapy, we often meet “talent as a natural ability, a unique mix of innate intelligence of brain power, which makes people effective in their bond with their superiors and subordinates” (Hinrichs, J. R. 1966). Physical therapists are the so called “busy bees” talented employees. They are people that they have to do a lot during the day and they feel happy about this! Their talent is that they enjoy activities that they are useful and have sense.

Ericsson, Prietula and Cokely (2007), conclude that talent -which they explain as expert performance- is nearly always made, not born and according to Pfeffer and Sutton (2006), talent is always a mode of experience and effort.

Prius (2011), approaches talent throughout commitment to one's work, motivation, interest and passion, characteristics that we often meet at Physiotherapists (Weiss, A., Mackay, N. 2009).

In Physical therapy, it is also believed that every employee has his or her own special strengths and can potentially create great value for his or hers organization (Buckingham, M., Vosburgh, R. M. 2001).

Healthcare organizations should try to help all of their employees fulfill their fullest potential (Yost, P. R., Chang, G. 2009) and try to understand talent as an elite individual that can make difference on organizational performance and diverse innovation (Tansley, C. et. al. 2006).

Physiotherapists are high performers: "the best of class" (Smart, B. D. 2005). According to Smart (2005), high performers, as Physiotherapists are the most important organizational drive as they "innovate more, work smarter, are trustworthy, have articulate passionate vision, implement diversity and change more effectively, demonstrate resourcefulness and find ways to get the job done in less time and less cost" (Snyder, N. T., Duarte, D. L. 2003).

In today's healthcare organizations, considerable efforts are undertaken to identify employees with high performance, high potential and talent. Performance appraisal is one of the most widely applied for Physiotherapists in human resource practices (HR) within hospitals (Guest, D., Conway, N., Dewe, P. 2004).

A different approach sees talent as a giftedness, a strength, as competencies, as high potential and high performance (Meyers, M. C., Van Woerkom, M., Dries, N. 2013).

Out of those five approaches, only the latter four are specifically related to the working context of Physiotherapists.

Giftedness mainly deals with individuals who achieve outstanding performance in sports, music, mathematics, physics and it is assumed to be rare (Vinkhuyzen, A. A. E., Van der Sluis, S., et. al. 2009).

Strengths have been defined as "potentials for excellence" (Biswas-Diener, R., et. al. 2011). Talent as strength allows people to perform well at their personal best (Wood, A. M., et. al. 2011). Such persons are possessed by creativity, kindness, prudence, gratitude and justice. Due to these positive effects, those strengths are studied in diverse contexts such as schools, healthcare, rehabilitation and therapeutic institutions (Peterson, C., Seligman, M. E. P. 2004).

Competencies are referred as behavioral demonstrations of talent and they are commonly appreciated in leadership, promotion decisions and sequence of planning (Boyatzis, R. E. 2008). It is suggested that knowledge and skills can be developed, while abilities and personal characteristics are rather stable (Meyers, M. C. et. al. 2013), this could lead as to the conclusion that competencies can facilitate individual learning, adaptability, innovation and personal development, and maintain their merit even in drastic environmental-organizational changes (Lo Presti, A. 2009). Competent people typically show general intelligence and emotional intelligence (Golemen, D. 2006). Physical therapists have both of these two characteristics (Dries, N. 2013 ; Desveaux, L., Verrier, M. G. 2012).

Talent as high potential denotes “the possibility that individuals can become something more than what they currently are” and healthcare organizations are in great need of people doing the best that they can (Silzer, R., Church, A. H. 2010). Potential is consider a scarce individual feature: only a small percentage of the workforce gets identified as having high potential (Ulrich, D., Smallwood, N. 2012).

It is proven that even with the same amount of training, some people will outperform others, as learning agility has been defined as an individual’s “willingness and ability to learn new competencies in order to perform under first time tough in different conditions (Lombardo, M. M., Eichinger, R. W. 2000).

Academic research has proven that deliberate practice and thousands of practicing hours is a very important predictor of performance and excellence (Day, D. V. 2010). Physical therapists have a very difficult academic road and must specialize during their career in order to be competitive and have a learning advantage (Canadian Inst. for Health Information 2014). We can say that talent evolves from early experience and as an early ability alone, is not a proof of innate talent, as almost everyone can become a ‘prodigy’ (Ericsson, K. A. et. al. 2007 ; Yost, P. R., Chang, G. 2009).

It is important to notice also the fact that the identification of people as talented is believed to produce the Pygmalion Effect. This positive affirmation being assigned as ‘talented’ can produce self-confidence and role-commitment that could potentially lead to performance increases and innovation. The above suggestion can lead as to the conclusion that healthcare organizations should invest as much as possible into as many employees as possible rather make exclusive selection procedures (Buckingham, M., Vosburgh, R. M. 2001). But it is also the dark side of the moon that indicates ‘tell a person that he or she is talented and he or she will stop trying’. Stark contrast of

Pygmalion Effect is the “crown prince” syndrome, which describes the phenomenon when people who believe that will certainly have a spot in the organization, lose their motivation for work (Dries, N. 2013).

Finally an assumption communicates the fact that it is better not to talk about talent management policies of an organization as this could lead to frustration among employees not identified as talented (Bothner, et. al. 2011).

Rappaport, Baucroft and Okum (2003), suggested that major talent shortages in healthcare organizations can force them to apply more creative talent recruitment strategies. At the same time, as talent is understood as a resource that can be refined through training and applied in different domains, we can observe that many para-medical professions tend to wish to study Physical therapy as a second field of knowledge (Walker, J. W., LaRocco, J. M. 2002). This could potentially lead to limited talent pools in general paramedical professions but it could help the future building of Physical therapy talent pools within public hospitals in Greece. All the above are guiding as to the conclusion that it is important to identify talent, to train it and develop it, to make succession planning and potentially retention management for it (Stahl, G. K., et. al. 2012).

According to Yost and Chang (2009), it is advisable to include all employees in talent management motivation and initiatives. This can be achieved by making use of mentoring, coaching, self-development, networking, feedback and reflection. Potentially this could lead to teach employees to develop themselves and create value and great innovation for the organization. Considering the whole workforce talented as suggested by Yost and Ghang (2009), is leading us back to the literature review of the Pygmalion effect and its positive outcomes in terms of successful learning (Rosenthal, R. 2002).

2.3 What are the talent management pools in healthcare?

A talent pool is the database of potential candidates that could end up working at an organization, down the line. In large hospitals it is important to define a set of number roles that talent pools should acquire (Ingram, T., Glod, W. 2016).

Organizations in healthcare sector commonly pursue competitive advantage via a ‘promote from within’ talent pool strategy. This implies linking selection and development interventions across talent pools (Lewis, R. E., Heckman, R. J. 2006).

Hospitals worldwide tend to cooperate in order to create the talent management pools, but might then compete to utilize the talent pool for their own gain in order to remain competitive and in action. This tactic could potentially jeopardize the effectiveness of the pool as managers might become reluctant to allow their employees to participate in it (van den Broek, J., Boselie, P., Paauwe, J. 2018). Grounding talent management in a strategic decision framework that clearly shows talent decisions illustrates multi-pool impacts of talent choices and develops reliable-meaningful-theoretical validity, and it can improve the quality of talent conversations in healthcare organizations (Steward, D. W. 2012). The development of a talent pool which is combined from high-performers and high-potentials incumbents can fill in the roles that differentially contribute to an organization's sustainable competitive advantage (Collings, D. G., Mellahi, K. 2009).

Getting investment in talent pooling in the health care sector is often tricky and difficult. Even within selected talent pools there can be very small elite -“star talent”- who truly have significant and important value for a healthcare organization (Aguinis, H., O' Boyle, E. 2014). “Star” talents, economically perceive themselves as value creators of their organization. In practice, “star” talent is only likely to add value in an organization when the level of flux is low (Linden, G., Teece, D. J. 2014).

If the talent pool has been selected correctly, the time to fill a role should be greatly improved compared to the traditional hiring process. The recruitment of talented employees can be talent transfer among organizations. Research on talent transfer has shown that talent in one domain –especially in healthcare sector- can be transferred to other domains in a short amount of time with limited efforts (Bullock, N. et. al. 2009). A growth environment requires raising the bar. Telling people where they stand creates a stretch environment. Talent pooling could easily set high goals for the organization without pressing and stretching it's talents , create a healthy working environment and let employees ‘think out of the box’.

Recently it was reported that CEO Marissa Mayer suggested that all Yahoo employees should not work in their office cubicles. Young individuals and para-medical employees don't react well to ‘you-must’ imperatives. They are used to work odd hours which often stimulate creativity and innovative productivity (Miller, C. C., Rampell, C. 2013).

Chan, et. al. (2015), in an online survey of Canadian Physical Therapists found that the key difference between talented and non-talented professionals was that talented were

significantly more likely to wish rotational participation in talent management pools. Those people were gifted with empathy, exquisite intellection, harmony of mind, connectedness, communication, professionalism, credibility, personal growth and development.

Talent pools are a great way to group candidates together in order to help your team filter, search and innovate in a diverse way.

Every time a new role is open in a hospital, we must think of it as a fishing expedition. Some of the existence employees will continue with their routine and some of them will go to the organizations potential talent pool for future innovative jobs. Every hire that it is made, it adds more and more people in the hospitals talent pools.

The best way to develop a sourcing strategy for a talent pool is to engage all the personnel in a more personal and genuine level of communication, to measure your talent pipeline over time and step in the talent pooling in line with the hospitals internal and external needs.

Beyond traditional job posting today there are many easy and hand fool ways to fill in the hospitals talent pools such as: inner rotation, Twitter, Instagram, Facebook and of course LinkedIn (Graen, G. B. 2013).

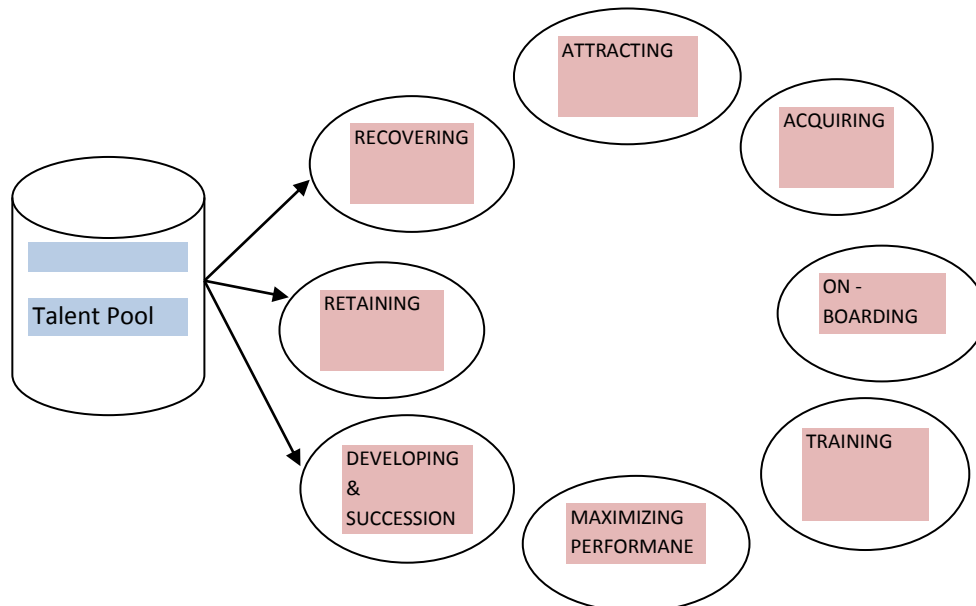
Talent pools should not include everyone in the market. If a talent pool is too large and not pre-screened, talent acquisition will not meet marketing demands and the talent pool will not be ‘warm’ (Meister, J. C., Willyerd, K. 2010).

Let as talk about “warm” talent pools:

- In order to work on small projects you have to bring in people from your talent pools. This can give you the opportunity of innovative, diverse, ‘out of the box’ thinking’ and potentially a good quality raise of your provided health care services.
- It is important for senior pipelines to run events that are relevance to people in the talent pool.
- ‘Warm’ talent pools tent to update knowledge and innovation in the company.
- Develop internal networks – asking who should be in the talent pools.
- Engage with employees let them know that their work in the pool is important and unique.

Table 4

Talent Lifecycle



2.4 Barriers and challenges concerning effective talent pooling in healthcare

Creating diverse and innovative talent pools especially in healthcare sector is unpredictably tricky and difficult. It is also difficult to keep talent pools ‘warm’ without overloading them with communication and it is known that there is no sufficient and conductible communication among health care givers (Honglund, M. 2012). Among all the difficulties it is also the fact that it is difficult to ensure that talent pools are comprised of ‘top talent’ and all employees can work together sufficiently.

Talent pooling is one of many tools to understand healthcare recruitment box of tricks in order to understand key organizational drivers and provide an effective solution, diverse innovation and talented personalities.

2.5 Structuring the talent pools and pipelines

One way to build sufficient talent pools is to segment them into Lakes, Ponds and Puddles (Schiemann, W. A., Seibert, J., H., Morgan, B. S. 2013). This splits the talent into three separate platforms and determines the level of engagement in each group. In a nutshell, Lakes are a broad grouping of general skills. Ponds focus more specifically on experience and seniority and Puddles are smaller groups of hand-picked individuals from Ponds, who are spoken a hypothetical top positioning opportunity in a hospital. Understandably, recruitment does not want to be seen as poaches ‘stealing’ talent from well performing health care teams and hospitals managers. It must be seen as an opportunity to cooperate, learn and drive innovation out of scarce sources.

Segmentation of talent pools:

- Stage one: Lakes

It is important to identify everyone with the general skills required for the job. These employees must not be informed that they are about to be in the potential Lake.

- Stage two: Ponds

These are specific groups of candidates that they are about to receive a little more engagement in the organization.

- Stage three: Puddles

These are small groups of talented employees that they are hypothetically spoken to be engaged in the organization with a possibility of a promotion.

In order for talent pooling and pipelining in health care services to be effective, it has to be meaningful and the talent lifecycle to be long (Table 4). The talent lifecycle is the way which most employees interact with the organization. On the contrary talent management is the way in which the talent lifecycle is managed (Ingram, T., Glod, W. 2016). During talent pooling activities we must ensure that we have clear set of expectations and that we haven't over promise in order to attract and retain talented employees. High employee productivity, high quality, strong operational performance and high retention of employees mean that talent management has achieved talent optimization and extension of talent lifecycle (Schiemann, W. A. 2014 ; Wirtenberg, J. et. al. 2007 ; Wirtenberg, J., Lipsky, D., et. al. 2007).

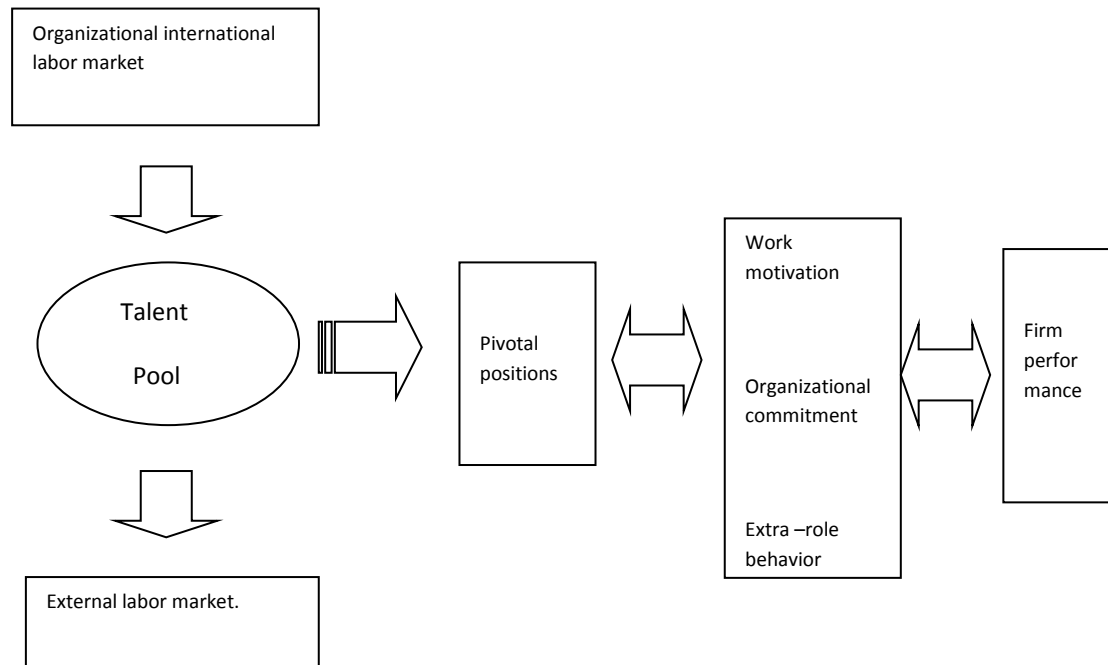
Talent pooling should be on constant flux and the organizations must continuously evolve and be flexible in order to meet markets needs. Engagement and essential marketing is possible to give as capable numbers in talent pooling and technology should fit purpose properly with a clear end-goal and via continuous assessment.

Boudrean and Ramstad (2007) call for the importance of talent segmentation and focus on pivotal talent pools where a great percentage in quality or availability would have a great impact on organizational success. Most healthcare organizations invest too much in talent pools which are important but not pivotal, while fail to invest sufficiently in pivotal talent pools. Having identified the organizations pivotal talent positions, the key for strategic talent management of a talent pool is to fill these pivotal positions in order to create all the right conditions for diverse innovation (Collings, D. G., Mellahi, K. 2009).

Table 5

D. G. Collings, K. Mellahi / *Human Resource Management Review* 19 (2009)

Talent pools



3. Methodology

3.1 Introduction

We will examine whether diversity and innovational thinking of individuals will and can contribute to the development of health care innovation and potentially to the creation of talent management pools.

The culture of Greek hospitals in this study can be characterized by two aspects that hinder the possibility-likelihood of wishing participation in talent management pools.

First, the organizational culture of Greek hospitals can be characterized by weak internal focus on managerial tactics for talent pools.

Second, the medical care in hospitals is day-to-day organized, often with a high degree of urgency, unpredictability and high intensity of employee involvement in the case of patients (Van de Broek, J., Boselie, P., Paauwe, J. 2018).

A talent management pool of a hospital has a strategic intention, uses long term perspective and innovational thinking in order to achieve strategic impact.

Findings indicate that during the establishment phase, it is particularly significant to ensure segmentation of the pool and limitation of the bias in the selection process (Yarnall, J. 2013).

The maintenance of a successful talent management pool is a major challenge from both an individual and organizational perspective. Factors of success: changing business needs, provide development and opportunities, define success measures, balance work and life, take into consideration the psychological contract of talented employees. Emphasis should be put on building the motivation commitment and development to those in the talent pool. It is important to shift from a short-term psychological contract to a more long-term relational contract.

Future researchers and practitioners are advised to see diversity talent as something to be appreciated and natured and not something to be “fixed” (Boudreau, J. W. 2013).

With this research, we hope to join an extremely expanding group of talent management scholars pushing to make the transition from a growing into a mature field of study, characterized by widely accepted theoretical frameworks and research designs (Silzer, R., Church, A. H. 2010).

Key recommendations:

- Define talent broadly. Organizations face the challenge to capture the breadth of talent in ways that will allow them both understand and manage it.
- Think about talent optimization rather than talent management.
- Think about the full talent lifecycle that has to be managed (Schiemann, W. A. 2014).

Researchers must understand talent management as a relational construct, for that it is required to take into account relationships among individual, organizational and

institutional contexts that shape the management of talent (Al Ariss A., Cascio, W. F., Paauwe, J. 2014).

Qualitative in depth interviews, can contribute details that enable the evolution of more solid theory. Innovations in technology, like LinkedIn, can significantly improve the ability for organizations to find talent quickly and to match talent supply with demand more effectively (Al Ariss, A., Cascio, W. F., Paauwe, J. 2014).

In the future workers will increasingly be in control of their own talent. Talent can come from anywhere in the world. Workers are not necessarily part of the organization, but knowledge is. More freedom is needed in managing one's career.

The definition of 'talent' will shift to the talent an organization needs at a specific time and place.

Taking into account the increased diversity of people and employment relationships, it will be very important to create unity within diversity by emphasizing on organizational values, providing the opportunity to create innovation (Van Rooij, S. 2012).

Once we shift attention to the management of talent and not just talent management, there is a considerable life for the field. It is also important to understand that organizational value creation is not just driven by the individual creating of star talent (Sparrow, P. R., Makram, H. 2015).

The collected interviews and document data was analyzed using ATLAS.ti.8 , following thematic analysis (Braun, V., Clarke, V. 2008).

3.2 Phase one: Data collection, research questions and study design

Data collection for our study, had a number of different and divert elements: talented, specialized and divert participants how were more than willing to participate in something so innovational, involved Physical therapists who at first didn't know at all the definition of the term 'talent management' and particular the term 'talent management pools', scalable structure of discussions which were enriched with personal stories and finally an update of the research progress. The five Physiotherapists were chosen according to their clinical, academic, personal talent managing roles and professionalism.

Also they were chosen according to their credibility, dependability, transferability and confirmability and they were approached from within my existing health care network. The network included a small range of two public hospitals and two organizations from the public primary health care of Greece, in the region of Thessaloniki.

The majority of the interviews took place face-to-face, in the interviewees working environment, helping the participant to feel relaxed and calm in order to extract the information required to complete the puzzle of the bibliographic review. The interviews lasted approximately between 45-90 minutes.

Interviewees were asked to answer a range of nine open questions, without the presence of another person, in order to feel free to answer without pressure and fear.

The questionnaire was written after methodical study of all the related articles and bibliography in order to cover all the range of talent management, talent management pools and especially (TM) pools in health care.

Our major purpose was to extract different point of views, new knowledge, understand and point the problem, understand why the problem is so important for the evolution of health care in Greece and to fill in the gap of the literature review in talent management pools, especially in the profession of Physical therapy.

So that the quote of our research is valid and reputable, we quote below the interview **questions** and emerging **themes** of our study.

Interview Questions

1. Tell me about your current work roles. Is the term talent management pools familiar to you?
2. Is it important for you, to be able to work in a team learning environment? Why?
3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?
4. What is your current opinion about including diverse people (Physiotherapists), in an innovational talent pool system?
5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?
6. What do you see as a challenge of talent management in health care now?

7. According to your opinion, is your organization performance system, reinforce innovation and talent? Is there anything you can think, that needs change or develop? Why? How can this be accomplished?
8. Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?
9. Do you believe that talent can create value and can allow everyone to contribute to their fullest potential for your organization?

A scalable and open questioner always implies the fact that many of our questions were expanded in a permissible way in order not to affect the structure of the interview, but also enable as to get all the necessary information for our research.

During the bibliographic research review and the completion of our interviews, a number of questions have arisen which have been the main backbone of our main themes. Once the main themes were fully analyzed, we continue with a thorough analysis and comparison between the issues that had been raised and the possible relationship between them.

The most important and notable **themes** that raised from our research were: whether the health care system of Greece can support the creation of a talent management pool system for the profession of Physical therapists and if a (TM) pool can create innovational thinking in that field. The possibility of inclusion of diverse talented people in a talent pool and if this pool can create competitive advantage for the health care system in general. The possibility that a (TM) pool can create new ideas and improve innovational thinking within the health care system of Greece and particular in the field of Physical therapy in order to meet profitable organizational needs. If diversity in a (TM) pool can boost innovation and how is this diversity and innovational thinking is promoted by the managers of the health care system of Greece.

Interview Themes

1. Can talent management pools support the creation of a similar model in Greece for Physical therapists?
2. Can a talent management pool create new ideas and improve innovational thinking for Physical therapists in order to meet profitable organizational needs in Greek hospitals and the Primary health care?

3. Can a talent management pool include diverse people (Physical therapists)?
4. Is diversity in a talent management pool system can boost innovation?
5. Does a innovational talent management pool system can create competitive advantage for public health care sector in Greece?
6. How does Physical therapy supervisors-leaders could promote diverse-innovational thinking throughout the creation of a talent management pool system?

3.3 Phase two: Data analysis

In the field of the current roles of our participants and the knowledge of the term talent management pools in Physical therapy our research showed, that the professional level and the training level of the responded Physiotherapists interviewees, did not have particular variations.

All five of our participants are fully trained and accredited in their professional field. Four of them have at least one post graduate study in the field of Physical therapy, while the other one has specialization in a particular field of Physical therapy.

Participants came from within my existing network, which includes a small range of two public hospitals and two organizations from the public primary health care from the region of Thessaloniki. The two participating hospitals are: Papanikolaou General Hospital of Thessaloniki and Genymatas General Hospital of Thessaloniki. The two organizations of the primary healthcare are: 1st Physiotherapeutic Health Center of 25^{ης} Martiou of Thessaloniki and 2nd Physiotherapeutic Health Center of Thessaloniki. Three of the five participants were aware of the term talent management and specifically talent management pools in Health care, although not in strict sense of the term. One of them, was “aware of the term without being fully aware of its applicability in hers working environment”. Another participant, said that “it is something that I hear for the first time!”.

The above observation leads us to the conclusion that the implementation of such a plan, for talent management pools in health care, and particular in the profession of Physical therapy in Greece, has not been communicated yet to the employees of the Ministry of Health in Greece and in particular to the profession of Physical therapy, both in the structures of the general hospitals as much as in the organizations of primary health care.

As already have been said, there is no single method that it is most effective and efficient for the structure of an innovative talent management pool, but surely one first step is the right communication to its' employees.

Although robust research evidence shows the contributonal benefits of the creation of talent management pools, interviews for this research clearly showed the fact, that all participants have the basic knowledge of this particular term, but they will hardly enter the process of participating in it.

“It’s the talent, stupid!” (Buckingham, M., Vosburgh, R. M. 2001), literature insists. Yes, it is! But it is the very limited literature on talent management and especially in (TM) pools in Physical therapy profession which makes it “not currently possible to perform a systematic review in this topic” (McGoman, E., Stokes, E. K., 2015).

Truly, all participants find it very difficult, firstly to understand and secondly to answer the questions of our interviews.

All organizations, both hospitals as well as the primary health care, failed in communicating the term talent management pools in their employees.

It is rather blurry and difficult to convince employees who have not been informed about this new idea and it is absolutely understandable the fact that Physiotherapists did not show signs of willingness to participate in talent management pools.

Three of our interviewees are positive in the idea of the possibility of participating in a talent management pool system common for all the health care organizations in Greece, although they believe strongly that such a plan is very difficult, as the management of the Ministry of Health is very “strict and pre-defined”. The other two interviewees have a negative opinion for a possible implementation in such an innovational plan as talent management pools. Additionally, they are certain that “such a system, is not implied nowhere in the Greek public health care sector”, so it is difficult to be implied specifically in the structures of hospitals as well as in the primary health care.

Though there is miraculous and particular growing interest in talent management over the past decade, it remains underdeveloped and perhaps underestimated in the field of Physical therapy profession (Dries, N. 2013).

The talent management architecture within health care could not only ensure that valuable and rare talent could be promoted and used properly, but also generate, and over the wears achieve, sustained and profitable competitive advantage (Schiemann, W. A. 2014)&(Sparrow, P. S., Makram, H. 2015).

But is it possible to connect the difficult triptych: talent optimization – diverse innovation and quality (profitable advantage), through talent management pools in a team learning environment, especially in a cumbersome and complex health care system like the one in Greece?

All participants in our interviews consider team working and team learning, not only important but essential for their development, not only as professionals but also as evolving human beings in a productive process of continuous learning.

“Team learning and team working requires cooperation, mutual understanding....innovational models”.

“Physiotherapists are highly trained, perform over the limit and cooperate in a unique way”, said one of our interviewees.

It is obviously understandable the fact that team working and through it, team learning enables Physical therapists to evolve and combine harmoniously personal and professional life.

But, how important is it to be able to feel free to communicate your different or innovative ideas? It seems, that for Physical therapists it is of great importance, in order to be able to communicate “productive discussions”, “promote knowledge” and “evolve knowledge in order to deliver it as a team”.

Our participants also believe that team learning is of great importance contributory factor, for more comprehensive physical treatments for their patients. It seems that team learning enables everyone -Physical therapists and patients- to gain the best results, in a long and short term, time table. For patients, better results mean rational treatment with better physical rehabilitation, while for the Physical therapists mean financial and psychological benefits, which may contribute to a more profitable health care system in Greece. It is also believed by the interviewees, the fact that the Ministry of Health, wishes and plans to “increase productivity, without considering, quality”.

Diversity and difference is one of the main features of Physical therapists. They differ because of their intense training, due to the unique way they treat each patient and because they can deeply understand the feelings and the wishes of their patients.

They are “busy bees”, without time and desire for personal rest, without nagging about the fact that they handle serious incidents (patients), but with great desire and anticipation for further knowledge and creation of innovative and diverse ideas.

Derivative of this divert thinking and special distinction, was the creation of the “Bobath” (Neuro-Developmental Treatment) system by Berta and Karel Bobath in

1943, which manages patients with neurological kinesiology problems (<http://bobath.org.uk/>).

In a connection with the above, our interviewees' answers were sensible and logical to converge all, towards a positive view. Shoking though was the fact that everyone agreed with the view that diversity cannot only be used in health care services but could and should be extended to other organizations, such as educational programs in schools and in the management of health care.

“Diversity...is very important...enhances exchange of knowledge, experiences and opinions in order to lead improvement and development”..... “but can also lead to disagreement and no common targets for tackling all the problems that arise”, said one of our interviewees.

Apparently, diversity can become a “positive conduit for the rational and fullest use of all the abilities of the Physical therapists in our countries health care system”, through a “flexible and reliable competence assessment system from the ministry of Health”.

Another interviewee pointed out the fact that “diversity is a prerequisite...can make the talent management pool richer...and provide the health care system with a different force of knowledge”.

This makes us wonder: can diversity become a good conduit of exploratory and continuing knowledge? And if this is possible, how could this diversity be incorporated into one talent management pool, without causing splitting and misalignment?

An interviewee opinion was that “diversity...contributes constructively” and in combination with the view that “talent managements job is to make employees bring out their best abilities and potentials”, makes us understand the fact, that the key for an efficient and proper organized talent management pool is mutual understanding and tolerance. According to our literature review this can be achieved by mentoring, coaching, self-development, continuous feedback and reflection (Yost, P. R., Chang, G. 2009).

It is fascinating for us to understand that our literature review and the views of our interviewees are so close, intertwined and reflect to each other.

As Schiemann (2014) has pointed out: “talent management is a unique function that integrates all activities and responsibilities associated with the management of the talent lifecycle - from attracting and acquiring talent - to developing and retaining it”.

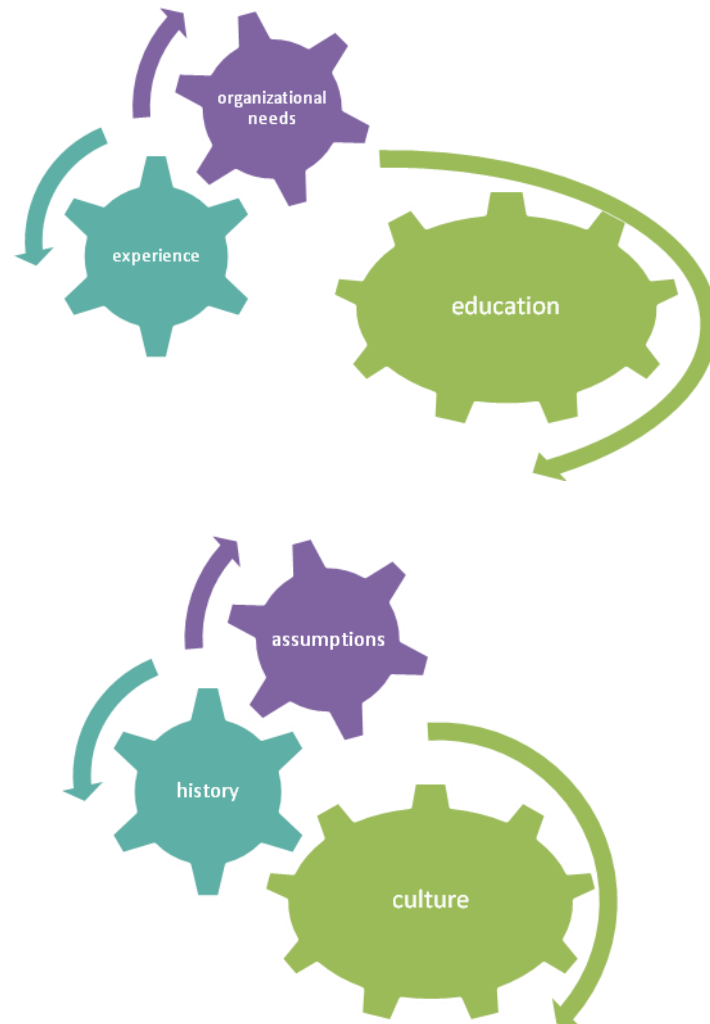
So the question is: how can leaders climb and lead out of the box? It is a meaning that has become a cliché among health care managers. In its' simplest form, it is a metaphor for thinking beyond your norms, in an unconventional, unorthodox, uncommon or unpredictable way. It is equivalent to looking for solutions outside the usual thinking patterns. Typically, when we think of good leaders in health care, we think about visionary, communicative, strategic, empowering, empathetic and decisive persons, who can inspire burn out employees and make them continue despite any difficulties.

“Thinking out side of the box” contains a timeless truth that leaders must understand, if they wish to be effective, in a strict and narrow minded business such as health care in Greece. They must learn to combine unrelated ideas and to be able to communicate them in their employees. Steve Jobs said: “creativity and innovation is simple connecting things”. It is easy to fall into a pattern, especially if you are limited by strict laws and rules. One leader may simply think “I know an effective and acceptable way to do my job, why fix something that is broken?”.

Thinking out side of the box doesn't mean making things more complicated. It means making things in a different way that will lead the whole organization into innovational thinking and potential ideas. All the above is a simple patchwork of acquired educational level, organizational needs, personal and organizational experiences, assumptions, organizational culture and history.

Table 6

Talent pooling patchwork



Experience can give you the potential to be open to new ideas. History gives you the opportunity to learn from the past and form the future without hesitation and in a new pattern. Assumptions on the other hand shape our world and the way we see it. Culture, opens up the possibility to learn new things from new and different people but can also be a thinking barrier. Learning from other cultures can help an organization grow and find new ways of success and learning, such as talent pooling. Innovational leaders tend to look at patterns in history and discover new ways of solving problems.

Health care leaders in Greece are trained to think and act in a certain way by the educational system. Many times we face leaders without the appropriate level of knowledge and without the empathy to understand the major problems of the system.

In health care organizations, both in hospital as well as in primary health care, boundaries are set and structured by the Ministry of Health. Those boundaries are capable of limiting the thinking of leaders and makes it difficult to consider new ways of doing business and reconstruct the organizational goal lines. People in senior positions in health care sector tend to use the phrase “based on my experience”. It is a dangerous phrase, as the context of their experience may not be applicable in today’s situations and ‘their’ experience will probably limit their focus and prevent them from accepting new ideas.

Three out of five of our interviewees have negative beliefs about “out of the box thinking leaders” and the stimulation of innovative ideas, while the other two interviewees have a strong belief that their leaders have and can encourage innovational talent among their employees.

“Innovation...is unfortunately not used...because of the cumbersome and outdated human resource assessment system” said one of our interviewees from primary health care. We can clearly distinguish the belief that leaders are not willing to reinforce innovative ideas and different directions of thoughts from their employees. In this case the implication of the belief “based on my experience” surely meets the case that the context of the experience is not applicable in today’s situation, as medicine and Physical therapy in particular, moves rapidly to meet the needs of the future.

“My leaders do not have the chance to think out of the box...they are limited by rules and norms of the past”. This view comes to meet the previous point of view for a

cumbersome and outdated HR assessment system in the health care sector of Greece. The general belief is that there are many innovative ideas that cannot be expressed in the right way, as they are repressed in lethargy from the strict legal delimitation of the Ministry of Health. In this way it is permissible the ‘escape’ of employee’s qualifications and potential talents, which could improve the health care system. So far the Ministry of Health, hospitals and the primary health care, has failed in maintaining and expanding the talent lifecycle. From attracting talents with the wrong way of

choosing employees, as well as with the irrational internal movement of the employees, not for health care necessities but in a basis of personal interest.

Rational talent pooling could be a base for improvement of cognitive abilities of all the employees and an opportunity of maintaining knowledge at high levels.

On the other side of the moon, there are the two different opinions that show us “our leaders are open minded, flexible and sophisticated” and “our supervisor is a proponent of lifelong learning and training...aiming at employees development...but he is close minded in different opinions than his”.

Clearly, opinions tend too close to the fact, that out-of-the-box thinking it's a long way road for both management of the Greek hospitals as much as for the leadership of the primary health care. For some luminous exceptions (of leaders), our survey showed that are unable to express their ideas freely.

The use of technology and innovation continuous to be the top challenge for all health executives, according to a survey conducted in October 2017 at the 29th Annual Health Care Forum (HCEG in Nashville, USA).

Sometimes the directness of foreign scholars makes us wonder about the reasons why in our country no one speaks openly about the level of health services. We must not have the impression that only in our country we face problems with health care services, pharmaceutical spending, Physical therapy, rehabilitation and online prescribing. It is more than obvious that strong interests do not want health care to evolve using new methods and new technology. As Clayton, M. C, et. al. (2000) clearly state, innovation in health care and in Physical therapy in particular, can reduce costs, upgrade the offered services, and increase the number of patients who have access to health care services. It is the way the health system is structured which does not allow the development and adoption of new technologies that will improve patients' lives. The rapid aging population and the wider access to health care in emerging markets, create opportunities for improving life of patients through innovation.

Our interviewees see as a challenge the continual up gradation of its human resources and the continuous participation in seminars and post graduate programs. On the side

of the moon, managers tend not to allow employees to participate in training programs, seminars and specific scientific training.

“The challenge...is that there is no talent management system in health care in Greece” said one of our participants, “such a system could provide the Greek health care system with a different innovational knowledge force”. It is clearly understood, that the use of each employees talents can provide a boost to the health care system.

The surpassing of employees personal boundaries and full potentials, for the health care system, is according to our interviewees the hardest task. Exploiting employees specialized knowledge could possibly enable them to deliver this acquired knowledge back to their organization in order to raise the bar and the barriers of provided health care services.

Health care capacity for innovational talent is shaped by many factors, including access to finance, competitive environmental growth and integrated management. However, its ability to innovate ultimately depends on having people with the right skills, attitudes, behaviors and talents in the right places. In addition, in the health care industry, individuals need to have “innovational talented skills” in order to contribute successfully to corporate innovation performance.

Health care’s system innovational talent is a combination of its employee’s innovation skills, culture and managerial structures and processes. Talent can be nurtured. Managers can play a key role in enhancing employees’ innovation skills and talents through training and development, leadership that faces towards all the directions, rewards and recognition programs. Also by policies and programs that attract and promote innovative thinking. There is no “one size fits all” recipe for strengthening innovational talent.

According to our interviewees opinions, the use and the exploitation of the health care sector has started in Greece in a rather timid manner, but its implementation is still far from the required standards. The response of the employees to change and potentially to talent pooling, is still minimal and the evaluation system is inadequate. Under normal circumstances, employee evaluation should be carried out by means of automatic search engines, proportionate to the needs of each organization.

Only one of our interviewees has a positive opinion about reinforced innovation and talent pooling, and she has a strong belief that there is progress, that both the competent ministry and the health care workers need and can promote innovation as all health care organizations are as there are living and evolving creatures.

The other four interviewees tend to have a fixed negative opinion about reinforced innovation and distributed talent among all health care organizations.

“Priority is placed on the quantitative framework rather than the qualitative framework”. The viewpoint of our respondents Physical therapists is that there is stagnation in the health care sector, but it is also obvious that this stagnation has led Physical therapists into specialization. The view of all of our interviewees is that there must be motivation and reward for specialization in Physical therapy, with moral and material gains.

It is obvious that instead of working in order to preserve the existing “un-talented” system, health care regulators, need to find a way how they can enable talented innovators Physical therapist to emerge and become the future and the success of the system.

It is also true that diversity and talent pooling in health care, is growing faster than we can address its concomitant issues. The multidimensional view of diversity in Physical therapy assumes that co-workers differ -not only from one another- but also in many number of dimensions that could produce a more culturally competent workforce and could improve the access to high quality care for the medical underserved. This could also increase the breadth and depth of Greece health related research agenda and that could expand the talent pool of medical trained executives.

There are a lot of benefits that can emerge from diversity in Physical therapy, such as generating fresh and new innovative ideas, improving organizations growth and emerge, and of course enhance future success and meet a future profitable advantage.

Four of our five participants have a positive view of whether diversity is a cornerstone for future success of the health care sector in Greece.

“People are our future! Physical therapists are busy bees...”. It is easily understood that this specific profession has a potential growth as its people tend to be excellent co-workers and life-long learners. The experience and the desire of Physiotherapists for

life-long learning can push Greece's health system to better serve patients and greater economic benefits.

“Undoubtedly, broad diversity...contributes decisively to efficient operation...can enrich a productive and constructive talent pool”. Let's face it, peoples' knowledge, talent and different capabilities can bring innovation in the creation of potential talent management pools in Physical therapy. It is also a fact that diversity can promote dialogue; it can make professionals exchange views, ideas and experiences. “But it can also lead to controversies and gaps...”.

At the other side, stands a negative opinion which believes that the majority of the health care managers must have the same way of thinking in order to avoid problems of cooperation and coordination. Indeed, understanding mechanisms that promote and maintain cooperative behavior in the health care sector is recognized as a major problem, as the intricacy increases with the complexity of the participating individuals. This should not become an obstacle in the creation of talent management pools, as the benefits can and must overcome the obstacles.

It is obvious that getting the best Physical therapists into talent management pools will not happen by chance; it requires a discipline look at if health care organizations really want to create greater value and how top talented employees can contribute. It is important for the health care leaders to understand that reallocating talent to the highest value initiatives is as important as reallocating capital. This should be a never ending, high priority discipline in order to achieve the goal of creation of talent management pools in the profession of Physical therapy.

All of our participants have a positive point of view about the creation of value through talent management pools in Physical therapy and its contribution to the fullest potential of the employees through the organizational change.

“It is essential...for maximum performances”. One of our respondents have also a positive point of view putting instead more emphasis on the fairly positive behavior towards the patients. “Specialized knowledge...only positive results can bring in the health care system”.

3.4 Study features and findings

We will examine whether diversity and innovational thinking of individuals will and can contribute drastically to the development of health care innovation and potentially to the creation of talent management pools for Physical therapists in Greek public hospitals as well as in public primary health care sector.

The culture of Greek hospitals in this study can be characterized by two aspects that hinder the possibility-likelihood of wishing participation in talent management pools.

First, the organizational culture of Greek hospitals can be characterized by week internal focus on managerial tactics for talent pools in general and particularly in the profession of Physical therapy. As for the primary health care, we can indicate the full absence of management planning in general. Although, primary health care is characterized by its importance for a liableness health care system, little has been done over the past wears for the full exploitation of staff and technical capabilities.

Second, the medical care in hospitals and primary health care, is day-to-day organized, often with a high degree of urgency, unpredictability and high intensity of employee involvement in the case of patients (Van de Broek, J., Boselie, P., Paauwe, J. 2018).

A talent management pool of a health care system has a strategic intention and uses long term perspective and innovational thinking in order to achieve strategic impact.

Findings indicate that during the establishment phase, it is particularly significant to ensure segmentation of the pool and limitation of the bias in the selection process in order to gain profitable advantage (Yarnall, J. 2013). Hospitals whose employees are encouraged to use their innovation skills, see innovational gains, greater productivity and efficiencies, improved employee recruitment, more employee engagement and higher rates of employee retention. Hospitals with strong pools of innovation talent abroad, use training and development programs to strengthen their employees' innovational skills, in order to improve their capacity of talent. But it is not enough to train employees to become or be innovative. Health care must also create an environmental working place that nurtures and encourages innovation and leave freedom to its employees to express their opinions and ideas. Our research shows the fact that all the above are far away from the Greek health care reality. Managers seem to be unwilling to 'share' their employees and employees are unwilling to participate in

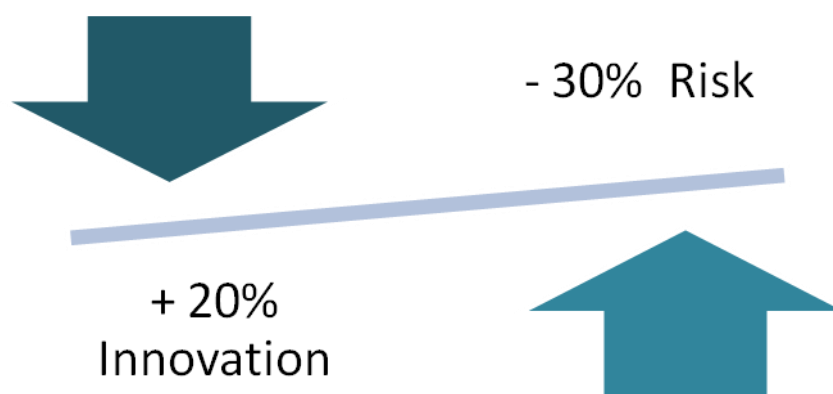
talent management pools. It is idealistic to say that workplace culture, reinforced by management behaviors, determines attitudes towards innovation, where employees feel free and comfortable volunteering new ideas and taking risks.

To optimize the capacity for innovation and the willingness to participate in talent management pools, health care in Greece needs to pay as much attention to attracting, retaining and recognizing their innovation talent as they do to creating and developing it. Tangible goals make ambitions real. The key is to look for employees with a broad knowledge base and experiences that demonstrate a passion for learning new things. Our research shows the fact that Physical therapists are willing to broad their knowledge but unwilling to share this knowledge with others.

A very diverse working force of Physical therapists, a very diverse working environment and a very inclusive culture can get health care through the tough times of crisis in Greece. Diversity and talent pooling generates better strategy, better risk and talent management, better innovative debates and in the future better outcomes.

Figure 7

The value of diversity of thinking (Bourke, J., 2016)



The maintenance of a successful talent management pool is a major challenge from both an individual and organizational perspective. Factors of success: changing business needs, provide development and opportunities, define success measures, balance work and life and take into consideration the psychological contract of talented employees. Emphasis should be put on building the motivation commitment and development to those in the talent pool. It is important to shift from a short-term psychological contract to a more long-term relational contract in order to give your employees the opportunity to embrace the change and understand what are the possible prerequisites for their participation in a health care management talent pool system.

Future researchers and practitioners are advised to see diversity talent and talent pool systems in Physical therapy as something to be appreciated and natured and not something to be “fixed” (Boudreau, J. W. 2013).

With this research, we hope to join an extremely expanding group of talent management scholars pushing to make the transition from a growing into a mature field of study, characterized by widely accepted theoretical frameworks and research designs (Silzer, R., Church, A. H. 2010).

Key recommendations:

- Define talent broadly. Organizations and especially hospitals in Greece face the challenge to capture the breadth of talent in ways that will allow them both understand and manage it.
- Think about talent optimization rather than talent management.
- Think about the full talent lifecycle that has to be managed (Schiemann, W. A. 2014).

Researchers must understand talent management as a relational construct, for that it is required to take into account relationships among individual, organizational and institutional contexts that shape the management of talent (Al Ariss A., Cascio, W. F., Paauwe, J. 2014).

Qualitative in depth interviews, can contribute details that enable the evolution of more solid theory. Innovations in technology, like LinkedIn, can significantly improve the ability for hospitals and primary health care to find talent quickly and to match talent supply with demand more effectively (Al Ariss, A., Cascio, W. F., Paauwe, J. 2014).

In the future health care workers will increasingly be in control of their own talent. Talent can come from anywhere in the world. Workers are not necessarily part of the organization, but knowledge is. More freedom is needed in managing one's career.

The definition of 'talent' will shift to the talent pools that an organization needs at a specific time and place.

Taking into account the increased diversity of people and employment relationships in the health care sector in Greece during the years of economical crisis, it will be very important to create unity within diversity by emphasizing on organizational values, providing the opportunity to create innovational thinking and acting (Van Rooij, S. 2012).

Once we shift attention to the management of talent and not just talent management, there is a considerable life for the field. It is also important to understand that organizational value creation is not just driven by the individual creating of star talent (Sparrow, P. R., Makram, H. 2015).

The collected interviews and document data was analyzed using ATLAS.ti.8 , following thematic in depth analysis (Braun, V., Clarke, V. 2008).

3.5 Study limitations and discussion

The aim of this study was to enhance our understanding of knowledge and perceptions of Physical therapists about the possible use of talent management pools, throughout innovational thinking in public Greek hospitals and in the primary health care system.

The central research idea of the study was: how does talent optimization and accepted innovational thinking in the profession of Physical therapists can affect the quality of the provided rehabilitation care in hospitals and primary health care in Greece and potentially allow the creation of talent management pools.

As it was discussed in the beginning of our thesis, there are a number of limitations with our study. There are limitations, as a result of the small sample, the methods and the analysis which are obviously under the umbrella of the master thesis which indicate as to be in a minimum of written words and pages for our research. However, the limitations due to my "positionality", are important and must be revisit under the flash lights of the findings. My previous academic experience and professional beliefs have inevitably shaped and influence the findings. Indeed, I have been surprised by the

extended 'bracketed' thinking of our participants and the fact that research showed that innovational thinking could potentially provide as with a different working environment and workforce. Also, research showed that many of our participants were engaged in initiatives in order to increase awareness for talent management pools but few had consider how to use talent management as a vehicle for the creation of talent management pools.

However, not all our findings have confirmed my previous assumptions and futuristic views. I was surprised by the lack of interest; understanding and appreciation for the possibilities that talent management could bring in our profession, furthermore the fact that managers tend to be negative and reluctant to be open-minded in a different view of "sharing knowledge" of their employees. The final but bigger surprise was the fact that little things appear to have change throughout the years of crisis in the health care sector in Greece in spite the attempts that have been made for the restructure of the system.

The findings show in general that managers are reluctant to allow employees to participate in talent management pools and that our participants are generally unaware of the term and show hesitation in a potential participation in such a project.

Hospitals are urged to economize in order to remain viable and primary health care system in Greece is still under ruinous reconstruction. HR professionals and the headquarters of primary health care referred to the talent management pools as a challenge too difficult, as they are "fishing in the same pool" with the other hospitals! The lack of well trained staff and the financial crisis leads the leadership of Health Care Ministry not to consider the creation of talent management pools updated in the organizational agenda.

3.6 Conclusions

Health care may be the most entrenched change-averse industry in Greece. The rapid increase of elderly people and the decline of birth rate have led health care with increasing needs both for care and rehabilitation. In the years of financial crisis, many attempts have been made to restructure the health care system without much success as all attempts were based on a combination of complex models.

Throughout the whole process we understand the fact that innovation and the talent in the Physical therapy profession that will eventually turn health care around are almost

ready. In some cases –such as the profession of Physical therapists- this innovational breakthrough is almost ready but it cannot find backers!

Completing this master thesis has been an exciting and enjoyable learning journey. I have learnt a lot about the research process and where is the point that I must start again and think things differently. The whole experience has fulfilled my passionate desire for structured learning and for developing an in-depth knowledge searching of one particular topic.

However, I am certain that I have not yet reached my final adventurous learning destination. My next adventure, I hope that will take me into more detail on a contextual map to encourage more in depth academic innovational thinking.

Talent management pooling in Physical therapy is essential and it can make a brake through in innovation and financial gains for the Health Care System of Greece. Let us dream that this thesis could be the beginning for a hopeful journey of learning and gaining throughout academic research.

4. References

Aguinis, H., O' Boyle, E. (2014). Star performers in the twenty-first century. *Personnel Psychology*, 67, 313-350.

Ariss, A. A., Cascio, W. F., Paauwe, J. (2014). Talent management: Current theories and future research directions. *Journal of World Business*, 49, 173-179.

Becker, B. E., Huselid, M. A., Beatty, R. W. (2009). *The Differentiated Workforce: Transforming Talent into Strategic Impact*. Boston, Massachusetts: Harvard Business Press.

Biswas-Diener, R., Kashdan, T. B., Minhas, G. (2011). A dynamic approach to psychological strength development and intervention. *The Journal of Positive Psychology*, 6, 106-118.

Blass, E. (2007). *Talent management: Maximizing talent for future performance*. London, UK: Chartered Management Institute.

<http://bobath.org.uk/>

Bothner, M., Podolny, J. M., Smith, E. (2011). Organizing contests for status: The Matthew effect versus the Mark effect. *Management Science*, 57, 439-457.

Boudreau, J. W. (2013). Appreciating and 'retooling' diversity in talent management conceptual models: A commentary on "The psychology of talent management : A review and research agenda". *Human Resource Management Review*, 23, 286-289.

Boudreau, J. W., Ramstad, P. M. (2007). *Beyond HR: The new science of human capital*. MA: Harvard Business School Press.

Bourke, J. (2014). *Which Two Heads Are Better Than One? How Diverse Teams Create Breakthrough Ideas and Make Smarter Decisions*. Australia : Australian Institute of Company Directors.

Boyatzis, R. E. (2008). Competencies in the 21ST century. *The Journal of Management Development*, 27, 5-12.

- Braun, V., Clarke, V. (2008). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- Broek, J., Boselie P., Paauwe, J. (2018). Cooperative innovation through a talent management pool: A qualitative study on coopetition in healthcare. *European Management Journal*, 36, 135-144.
- Buckingham, M., Vosburgh, R. M. (2001). The 21st century human resources function: It's the talent, stupid! *Human Resource Planning*, 24, 17-23.
- Bullock, N., Gulbin, J. P., Martin, D. T., Ross, A., Holland, T., Marino, F. (2009). Talent identification and deliberate programming in skeleton: Ice novice to Winter Olympian in 14 months. *Journal of Sports Science*, 27, 397-404.
- Canadian Institute for Health Information. (2014). *Physiotherapist work-force*. Ottawa: The Institute.
- Chan, Z., Bruxer, A., Lee, J., Sims, K., Wainwright, M., Brooks, D., et. al. (2015). What makes a leader: Identifying the strengths of Canadian Physical Therapists. *Physiotherapy Canada*, 67, 341-348.
- Collings, D. G., Mellahi, K. (2009). Strategic talent management: A review and research agenda. *Human Resource Management Review*, 19, 304-313.
- Day, D. V. (2010). The difficulties of learning from experience and the need for deliberate practice. *Industrial and Organizational Psychology: Perspectives on Science and Practice*, 3, 41-44.
- Desveaux, L., Verrier, M. G. (2014). Physical therapists' perceptions across the healthcare.
- Dries, N. (2013). The psychology of talent management: A review and research agenda. *Human Resource Management*, 23, 272-285.
- Ericsson, K. A. (2007). The making of an expert. *Harvard Business Review*, 85, 114-121.
- Ericsson, K. A., Prietula, M. J., Cokely, E. T. (2007). The making of an expert. *Harvard Business Review*, 85, 121-131.

- Festing, M., Schäfer, L., Scullion, H. (2013). Talent management in medium-sized German companies: An explorative study and agenda for future research. *The International Journal of Human Resource Management*, 24, 1872-1893.
- Gagné, F. (2000). Understanding the complex choreography of talent development through DMGT-Based analysis. *International handbook of giftedness and talent*. Oxford: Elsevier.
- Gallardo-Gallardo, E., Dries, N., Gonzalez-Cruz, T. F. (2013). What is the meaning of 'talent' in the world of work? *Human Resource Management Review*, 23, 290-300.
- Garrow, V., Hirsh, W. (2008). Talent management: Issues of focus and fit. *Public Personnel Management*, 37,389-402.
- Golemen, D. (2006). *Emotional Intelligence*. New York: Random House.
- Goes, J. B., & Ho Park, S. (2010). Inter organizational links and innovation: The case of hospital services. *The Academy of Management Journal*, 40, 673-696.
- Graen, G. B. (2013). *The missing link in network dynamics*. In Rumsey, M. G. (Ed.). *The Oxford handbook of leadership* (pp. 359-375). London, UK: Oxford University Press.
- Groves, K. S. (2011). Talent management best practices: How exemplary health care organizations create value in a down economy. *Health Care Management Reviews*, 36, 227-240.
- Guest, D., Conway, N., Dewe, P. (2004). Using sequential tree analysis to search for 'bundles' of HR practices. *Human Resource Management Journal*, 14, 79-96.
- Hambrick, D. C. (2007). The field of management's devotion to theory: Too much of a good thing? *Academy of Management Journal*, 50, 1346-1352.
- Hendriks, P. H. J., Ligthart, P. E. M., & Schouteten, R. L. J. (2016). Knowledge management, health information technology and nurses work engagement. *Health Care Management Review*, 41 , 256-266.
- Herriot, P., Pemberton, C. (1996). Contracting careers. *Human Relations*, 49, 757-790.

- Hewlett, S. A., Marshall, M., Sherbin, L. (2013). How diversity can drive innovation. *Harvard Business Review*, 33, 290-300.
- Hinrichs, J. R. (1966). *High-talent personnel: Managing a critical resource*. Vermont: American Management Association.
- Honglund, M. (2012). Quid pro quo? Examining talent management through the lens of psychological contracts. *Personnel Review*, 41, 126-142.
- Huang, J., Tansley, C. (2012). Sneaking through the minefield of talent management: The notion of rhetorical obfuscation. *International Journal of Human Resource Management*, 23, 3673-3691.
- Ingram, T., Glod, W. (2016). Talent management in healthcare organizations – qualitative research results. *Procedia Economics and Finance*, 39, 339-346.
- Iles, P., Preece, D., Chuai, X. (2010). Talent management as a management fashion in HRD: Towards a research agenda. *Human Resource Development International*, 13, 125-145.
- Jackson, S. E., Schuler, R. S. (1990). Human resource planning: Challenges for industrial/organizational psychologists. *American Psychologist*, 45, 223-239.
- Joyce, W. F., Slocum, J. W. (2012). Top management talent, strategic capabilities and firm performance. *Organizational Dynamics*, 41, 183-193.
- Kravariti, F. (2016). National and organizational cultural impact on talent management's implementation: case studies from Greece. *University of Manchester*.
- Länsisalmi, H., Kivimäki, M., Aalto, P., & Ruoranan, R. (2006). Innovation in the healthcare: A systematic review of recent research. *Nursing Science Quarterly*, 19, 66-72.
- Lawler, E. E. (2008). *Talent: Making People your Competitive Advantage*. San Francisco: Willey
- Lewis, R. E., Heckman, R. J. (2006). Talent management: A critical review. *Human Resource Management Review*, 16, 139-154.

- Lo Presti, A. (2009). Snakes and ladders: Stressing the role of meta-competencies for post-modern careers. *International Journal of Education and Vocational Guidance*, 9, 125-134.
- Lombardo, M. M., Eichinger, R. W. (2000). High potentials as high learners. *Human Resource Management*, 39, 321-329.
- Meister, J. C., Willyerd, K. (2010). *The 2020 workplace: How innovative companies attract, develop and keep tomorrow's employees today*. New York, NY: Harper Collins.
- Meyers, M. C., van Woerkom, M. (2014). The influence of underlying philosophies on talent management: Theory, implications for practice, and research agenda. *Journal of World Business*, 49, 192-203.
- Meyers, M. C., Van Woerkom, M., Dries, N. (2013). Talent – Innate or acquired? Theoretical considerations and their implications for talent management. *Human Resource Management Review*, 23, 305-321.
- Michaels, E., Handfield-Jones, H., Axelrod, B. (2001). *The War For Talent*. Boston: Harvard Business School Press.
- Michail, D. M., Kloutsiniotis, P. V. (2016). The effects of high-performance work systems on hospital employees' work-related well-being: Evidence from Greece. *European Journal of Management*, 34, 424-438.
- Miller, C. C., Rampell, C. (2013). Yahoo orders home workers back to the office. *The New York Times*, A1.
- McGowan, E., Stokes, E. K.(2015). Leadership in the profession of physical therapy. *Physical Therapy Reviews*, 20, 122-131.
- Pascal, C. (2004). *Talent management systems: Best practices in technology solutions for recruitment, retention and workforce planning*. Canada: Wiley.
- Peterson, C., Seligman, M. E. P. (2004). *Character Strengths and Virtues: A handbook and classification*. New York: Oxford University Press.

- Pfeffer, J., & Sutton, R. I. (2006). *Hard facts, dangerous half-truths, and total nonsense: Profiting from evidence-based management*. Boston: Harvard Business School Press.
- Prius, E. (2011). The five key principles for talent development. *Industrial and Commercial Training*, 43, 206-216.
- Raine, S., Meadows, Lynch- Ellerington, M. (2009). *Bobath Concept: Theory and Clinical Practice in Neurological Rehabilitation*. Wiley-Blackwell.
- Ramamonjiarivelo, Z., Weech-Maldonado, R., Hearld, L., Menachemi, N., Epane, J. P., O' Connor, S. (2015). Public hospitals in financial distress: Is privatization a strategic choice? *Health Care Management Review*, 40, 337-347.
- Rappaport, A., Baucroft, E., Okum, L. (2003). The aging workforce raises new talent management issues for employers. *Journal of Organizational Excellence*, 23, 55-66.
- Reilly, P., (2008). Identifying the right course for talent management. *Public Personnel Management*, 37, 381-388.
- Rosenthal, R. (2002). The Pygmalion effect and its mediating mechanisms. In J. Aronson (Ed.), *Improving academic achievement: Impact of psychological factors on education* (pp. 25-36). San Diego, CA: Academic Press.
- Rye, C. B., Kimberly, J. R. (2007). The adoption of innovations, by provider organizations in health and market performance. *British Journal of Management*, 23, 307-324.
- Schiemann, W. A. (2014). From talent management to talent optimization. *Journal of World Business*, 49, 281-288.
- Schiemann, W. A., Seibert, J. H., Morgan, B. S. (2013). *Hidden drivers of success: Leveraging employee insights for strategic advantage*. Alexandria, VA: Society for Human Resource Management.
- Scullion, H., Collings, D. G., Caligiuri, D. (2010). Global talent management. *Journal of World Business*, 45, 105-108.

- Silzer, R., Church, A. H. (2010). *Identifying and assessing high-potential talent: Current organizational practices*. San Francisco: Jossey-Bass.
- Sims, S., Hewitt, G., Harris, R. (2015). Evidence of a shared purpose, critical reflection, innovation and leadership in interprofessional healthcare teams: a realist synthesis. *Journal of Interprofessional Care*, 29, 209-215.
- Smart, B. D. (2005). *Top grading: How leading companies win by hiring, coaching and keeping the best people*. New York: Portfolio (Penguin Group).
- Snyder, N. T., Duarte, D. L. (2003). *Strategic Innovation: Embedding Innovation as a Core Competency in your Organization*.
- Sørensen, E., & Torfing, J. (2011). Enhancing collaborative innovation in the public sector. *Administration and Society*, 43, 842-868.
- Sparrow, P. R., Makram, H. (2015). What is the value of talent management? Building value-driven processes within a talent management architecture. *Human Resource Management Review*, 25, 249-263.
- Sparrow, P. R., Scullion, H., Tarique, I. (2014). *Strategic talent management: Contemporary issues in international context (pp35-70)*. Cambridge: University Press.
- Stahl, G. K., Björkman, I., Farndale, E., Morris, S. S., Panwe, J., Stiles, P. (2012). Six principles of effective global talent management. *MIT Sloan Management Review*, 53, 25-32.
- Steward, D. W. (2012). Leaders, managers and employee care. *Health Care Management*, 31, 94-101.
- Tansley, C., Turner, P., Carley, F., Harris, L., Sempik, A., Stewart, J., et. al. (2008). *Talent: Strategy, management, measurement*. London: Chartered Institute of Personnel and Development.
- Tansley, C. (2011). What do we mean by the term “talent” in talent management? *Industrial and Commercial Training*, 43, 266-274.
- Tansley, C., Harris, L., Stewart, J., Turner, P. (2006). *Talent management: Understanding the dimensions*. London: Chartered Institute of Personnel and Development. Change Agenda.

- Thunnissen, M., Boselie, P., Fruytier, B. (2013a.). A review of talent management: 'Infancy or adolescence?'. *The International Journal of Human Resource Management*, 24, 1744-1761.
- Tsai, W. (2001). Knowledge transfer in intra organizational networks: Effects of network position and absorptive capacity on business unit innovation and performance. *Academy of Management Journal*, 44, 996-1004.
- Ulrich, D., Smallwood, N. (2012). What is talent? *Leader to Leader*, 12, 55-61.
- Van Rooij, S. (2012). Training older workers: Lessons learned, unlearned, and relearned from the field of instructional design. *Human Resource Management*, 51, 281-298.
- Vinkhuyzen, A. A. E., Van der Sluis, S., Posthuma, D., Boomsma, D. I. (2009). The heritability of aptitude and exceptional talent across different domains in adolescents and young adults. *Behavior Genetics*, 39, 380-392.
- Vroom, V. H. (1990). *Manage People not Personnel: Motivation and Performance Appraisal*. UK: Oxford Business Review.
- Vroom, V. H. (1990). *Manage People not Personnel: Motivation and Performance Appraisal*. UK: Oxford Business Review.
- Walker, J. W., LaRocco, J. M. (2002). Talent pools: The best and the rest. *Human Resource Planning*, 25, 12-14.
- Waltson, S. L., Kimberly, J. R., Burns, L. R. (2001). Institutional and economic influences on the adoption and extensiveness of managerial innovation in hospitals: The case of reengineering. *Medical Care Research and Review*, 58, 194-228.
- Wang-Cowham, C., Kamoche, K., Tansley, C., Iles, P. (2012). Talent management and knowledge management: Toward a critique and theoretical integration. *Paper presented at OLKC conference in Valencia*.
- Weiss, A., Mackay, N. (2009). *The talent advantage: How to attract and retain the best and the brightest*. New Jersey: John Wiley & Sons, Inc.
- Wirtenberg, J., Harmon, J., Russell, W. G., Fairfield, K. D. (2007). HR's role in building a sustainable enterprise: Insights from some of the world's best companies. *Human Resource Planning*, 30, 10-20.
- Wirtenberg, J., Lipsky, D., Abrams, L., Conway, M., Slepian, J. (2007). The future of organization development: Enabling sustainable business performance through people. *Organization Development Journal*, 25, 11-22.
- Wood, A. M., Linley, P. A., Maltby, J., Kashdan, T. B., Hurling, R. (2011). Using personal and psychological strengths leads to increases in well-being over time: A

longitudinal study and the development of strengths use questionnaire. *Personality and Individual Differences*, 50, 15-19.

Yarnall, J. (2013). Maximising the effectiveness of talent pools: A review of case study literature. *Leadership and Organizational Development Journal*, 32, 510-526.

Yin, R. K. (2008). *Case study research, design and methods (4 th ed.)*. Thousand Oaks, CA: Sage Publications.

Yost, P. R., Chang, G. (2009). Everyone is equal, but some are more equal than others. *Industrial and Organizational Psychology*, 2, 442-445.

5. Appendix

Semi-Structured Interviews

A. *INTERVIEW TERZOPOULOU THEANO*

ATEIΘ of Thessaloniki-Greece in Physical Therapy and Rehabilitation

Specialization in Shoulder and Arm Rehabilitation

1. Tell me about your current work roles. Is the term talent pools familiar to you?

My job has to do with the treatment of all orthopedic and neurological problems requiring physical treatment by applying physical therapy devices that provide analgesia, neurological stimulation and kinisiotherapy. I also make home visits to mobilize and rehabilitate people who are unable to move and serve themselves.

I am not familiar with the term talent management pools in health care services in Greece. It is something that I hear for the first time.

2. Is it important for you, to be able to work in a team learning environment? Why?

Yes, it is very important, as it allows productive discussion and promotes knowledge. It also contributes to the best and most comprehensive treatment of our patients.

3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?

My working place and the way we exercise our duties makes it difficult to promote such a working model. We are under the strict supervision, not only of our direct chiefs, but also of the Ministry of Health. The Ministry is responsible for all of the design of our work in order to increase productivity, without considering quality.

4. What is your current opinion about including diverse people (physiotherapists), in an innovational talent pool system?

I believe that diversity, in regard to a different way of thinking, behavior and dealing differently with situations, from people who deviate from the usual and projected context, contributes constructively to the formulation of a proper and effective talent management pool system.

5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?

I believe that our leaders are open minded, flexible and sophisticated regarding the proper functioning of our service and the development of benefits, when these, can be realized through a different outside of the norms innovative model. This, provided that they are given all the means to make their visions come true.

6. What do you see as a challenge of talent management in health care now?

I consider as challenge in the health care sector in Greece the targeted use of the specialized knowledge that it is acquired by the employees throughout postgraduate degrees, seminars, researches and work assignments. Particularly in the field of Physical therapy this knowledge could take place through by periodical or regular meetings which will include the presentation of some patients-cases and the particular approach of each Physical therapist, according to his or hers particular cognitive field.

Do you understand that all your previous description is assembling a primary stage of a potential talent pool?

Yes, I believe that I must have capture in my mind a primary idea of talent management pools... but I didn't realize it until you have inform about it!

7. According to your opinion, is your organization performance system reinforce innovation and talent? Is there anything that you can think that needs change or development? Why? How can this be accomplished?

In my opinion, the primary Public Health care where I am working the past 18 years does not support this innovative performance model. This is because the priority is placed on the quantitative framework of services rather than the qualitative framework. It is also true that employees opinion is never been heard in any way and for any reason. My working place needs renovation which will significantly improve both the aesthetic and the dynamic value of the space. All the above can outcome with positive results both in financial outcomes and patients satisfaction.

8. Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?

Undoubtedly, broad diversity of human resources that surrounds our working place contributes decisively to the efficient operation of our services. I believe that the diversity of each employee, which may be related to his or hers socio-economic and

educational level and the specificities of his or hers character, behavior and co-operation with other people, can positively enrich a productive and constructive talent pool for the proper function of our organization.

9. Do you believe that talent management can create value and can allow everyone to contribute to his or hers fullest potential for your organization?

The exploitation of talent, of skills and knowledge of the employees can certainly transform dramatically and enhance the function of an organization in all and in many levels. A friendly and behavioral healthy environment among employees, in addition with the constant exchange of knowledge and experience in the development of patient care will maximize the chances of almost complete rehabilitation.

Maintaining a relationship of respect and appreciation with our leaders, can promote and facilitate training processes through seminars and conferences that will make a decisive contribution in creating value in our difficult and demanding professional arena.

B. INTERVIEW AIKATERINI MASTROGIANNI

ATEIΘ of Thessaloniki-Greece in Physical Therapy and Rehabilitation

ΠΑΜΑΚ of Thessaloniki in Organization and Business Administration MBA Executive

MSc in Neurorehabilitation by Brunel University of London

1. Tell me about your current work roles. Is the term talent pools familiar to you?

My job, as a physiotherapist, is to execute rehabilitation programs for patients, providing them, by this way, some comfort and relief to their problems and their pain. The term talent management pools, is quite familiar to me as my second undergraduate title has to do with business administration and organization.

2. Is it important for you, to be able to work in a team learning environment? Why?

Yes, this would be ideal. It could enable me to evolve as a health care professional and give me the ability to reconcile professional and personal life harmoniously.

- 3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?**

Unfortunately, I believe that this would be futuristic! I work in the public sector of Greece, doing a specific job, without any possibility of alteration or promotion. In addition, I have the impression that a system, such as the talent management pool, is not implied nowhere in the Greek public sector.

- 4. What is your current opinion about including diverse people (physiotherapists), in an innovational talent pool system?**

I think that diversity is a prerequisite when it comes for an innovational talent pool system, because diverse people have different skills and that fact makes the pool richer and more capable to respond to the challenges of a corporation or an organization. They could provide the health care system with a different force of knowledge.

- 5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?**

Due to the fact that my job is strictly defined and there is not much room to do something in a different way, my leaders have not the possibility to think out-of-the-box and support different ideas. They are limited by rules and norms from the past and it is something that holds them back.

- 6. What do you see as a challenge for talent management in health care now?**

In my opinion, the challenge of talent management in healthcare is that there is not a talent management system, until now, and that such a system should be applied the soonest possible. I believe that such a system could provide the Greek health care system with a different innovational knowledge force.

7. **According to your opinion, is your organization performance system reinforce innovation and talent? Is there anything that you can think that needs change or development? Why? How can this be accomplished?**

The organization I work for does not reinforce innovation and talent, because our task is very specific and there is not much room to do something different. I think that there is not much thing that can change, as my job is concerned.

8. **Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?**

No, on the contrary I believe that in my job, the majority of the managers and the employees must have the same way of thinking. Otherwise, it is possible to emerge and face problems of coordination and cooperation.

9. **Do you believe that talent management can create value and can allow everyone to contribute to his or hers fullest potential for your organization?**

Unambiguously, talent can create value in general. As my organization is concerned, I think that the knowledge of the physiotherapy protocols and the nice behavior against patients can make the difference, rather than talent. The reason is that, as I have already mentioned, our job is very specific and we do not have much possibility to work in a different way.

C.INTERVIEW LIA GAKI

ATEIΘ of Thessaloniki in Physical Therapy and Rehabilitation

Specialization in Manual Therapy

1. **Tell me about your current work roles. Is the term talent pools familiar to you?**

My role in the primary healthcare system, is the treatment of patients that are they in the need of motional rehabilitation, as well as in residential therapies on patients that they are unable to move and help themselves. The term talent management pools in healthcare is familiar to me without being aware of its applicability in my current working environment.

2. Is it important for you, to be able to work in a team learning environment? Why?

Teamwork is of special and great importance for me, as it requires cooperation, mutual understanding and complexity of innovational models in our job. Physical therapists highly trained to perform over the limits and cooperate in a unique way.

3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?

My past experience, specialization and the prospect for farther development makes the possibility for participation in a talent pool system, were all my skills could be useful, very important. As the management of the healthcare system in Greece is very strict and pre-defined, I believe that such a system would be held under the administration and the 'umbrella' of the competent YIIE where our clinic belongs.

4. What is your current opinion about including diverse people (physiotherapists), in an innovational talent pool system?

Any colleague physiotherapist, could use his skills to the fullest after evaluation and correct use of his knowledge. This can only be done through a flexible and reliable competence assessment system.

5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?

Innovation in ideas and technical knowledge is unfortunately not used properly because of the cumbersome and outdated human resource assessment system. For example: In our service we are fortunate to have one of the most qualified physical therapists in the central nervous system of children, but we cannot use her in our service due to poor spatial planning.

6. What do you see as a challenge of talent management in health care now?

A challenge to the health system would be to be able to continually upgrade its human resources and benefits, depending on the needs of each service and the performance of each employee.

On the contrary, the Greek public health system prevents its employees from any participation in specialization seminars, postgraduate programs and generally in any inserts in the routine.

7. According to your opinion, is your organization performance system reinforce innovation and talent? Is there anything that you can think that needs change or development? Why? How can this be accomplished?

The implementation of pioneering health programs has evolved in recent years with the imposition of health programs based on external health models, but unfortunately it has a slow application in a slow and cumbersome health system and with a scarce response from employees. The evaluation system and the allocation of employees to posts according to their talents is inadequate.

You need a new plan to assess employee capabilities through an automatic talent search engine (Linkdin, Facebook etc.) and not through the standards of the public sector.

8. Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?

Of course! People are our future! Physical therapists are busy bees ... we cannot work without learning and we cannot develop without co-working!

9. Do you believe that talent management can create value and can allow everyone to contribute to his or hers fullest potential for your organization?

It is essential to be given the scope and evolution of a talent, for the purpose of maximum performance of the service.....

D.INTERVIEW MARIA SARANTARY

ATEIΘ of Thessaloniki in Physical Therapy and Rehabilitation

Specialization in Physical Therapy in the Burning Department and the Respiratory-Insufficiency Department of Papanicolaou Hospital.

1. Tell me about your current work roles. Is the term talent pools familiar to you?

My working role includes physiotherapy acts and therapeutic programs in patients who are hospitalized in the Respiratory clinic as well as in the Respiratory Insufficiency Unit. More specifically, I perform respiratory physiotherapy, I apply the appropriate machines to achieve the physiotherapeutic objectives (such as electrotherapy and cough assist). No, I'm not familiar with the term talent management pools.

2. Is it important for you, to be able to work in a team learning environment? Why?

Yes, it is very important for me to work and participate in a working environment whose employees are constantly being educated and evolving into knowledge concerning both their scientific training and the new logistical infrastructures.

3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?

Yes, I could participate in such a system as, without knowing this condition, I have acquired specialized knowledge of respiratory techniques and machines used in respiratory physiotherapy of patients with cystic fibrosis, which require a different approach, from a patient with any other respiratory disease. I acquired the specialized knowledge of respiratory physiotherapy with my participation in special seminars and my training for a week in a special Cystic fibrosis center in England as well as with my ten years of experience working on patients with Fibrocystic disease.

4. What is your current opinion about including diverse people (physiotherapists), in an innovational talent pool system?

Diversity in a health system is very important because there is an exchange of knowledge, experience and opinions. All this along with the diversity of the characters, can lead to improvement and development in a workplace. We should not forget however, that diversity can lead to disagreements which may cause the fact that there are no common targets for tackling the problems at hand.

5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?

Our supervisor is a proponent of lifelong learning, training and scientific training for employees, aiming at their development. Unfortunately, he does not support a different opinion and does not accept opinions and ideas that do not agree with his beliefs.

6. What do you see as a challenge for talent management in health care now?

The greatest challenge in the health sector is to be able and able to exploit employees with specialized knowledge by placing them in the appropriate positions in order to enable them in turn to deliver the acquired knowledge back to the health system.

7. According to your opinion, is your organization performance system reinforce innovation and talent? Is there anything that you can think that needs change or development? Why? How can this be accomplished?

In my workplace there was a circular movement of physiotherapists in the various clinics of the Papanikolaou hospital, which now ceased to exist. In the last decade each physiotherapist remains in a specific clinic, without transportation. This resulted in an incentive for the colleagues to enrich their knowledge of the specific subject of the clinic where they worked. Thus acquired specializations aimed at increasing the efficiency of the health system. Therefore, specialization was not acquired by stimulating the health system but resulted from permanence in the respective clinics. What might have to change is motivating employees to seek out specializations and reward them, whether moral or material.

8. Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?

As has been said, diversity may promote dialogue and exchange of views, ideas and experiences. But it can lead to controversies and gaps because of different ways of thinking and a different view of things.

9. Do you believe that talent management can create value and can allow everyone to contribute to his or hers fullest potential for your organization?

It is understood that specialized knowledge and additional scientific training of employees only positive results can bring about in the health system, as employees due to specialization are scientifically trained, more efficient and effective!

E.INTERVIEW POLITIMI PAGONI

ATEIΘ of Thessaloniki in Physical Therapy and Rehabilitation

ATEIΘ of Thessaloniki in Nursing

ΣΕΛΕΤΕ

ΤΕΦΑΑ of Aristotelian University of Thessaloniki, MSc in Human Performance and Health

1. Tell me about your current work roles. Is the term talent pools familiar to you?

My role in my working place has two different faces and concerns both the administration-management of the medical department and the scientific part concerning the restoration of the health of the patients of the department of the Physical therapy. The term talent management pools is familiar to me, but I have not really deepened, as it is not used by the management of the hospital where I work.

2. Is it important for you, to be able to work in a team learning environment? Why?

I consider it very important to work in a team learning environment for the proper functioning of the entire department. Team learning can give us the ability to evolve our knowledge and deliver it as a team for the best of our patients.

3. Thinking about your career development up until now, would you consider it possible to participate in a talent pool system? Why? And if it was possible, how it could be organized?

I think I could be involved in such a process because my experience and knowledge so far can be useful in various areas of the hospital. In the hospital's services such a procedure is determined and organized by the administration of the foundation according to the needs that arise.

4. What is your current opinion about including diverse people (physiotherapists), in an innovational talent pool system?

All employees have special skills and talents that can be used in a service. Our job is to make them bring out their best abilities and potentials.

5. Based on your own experience, are your leaders' out-of-the-box thinkers who encourage innovational talent and support different ideas?

Unfortunately, no, there is close commitment to the legal frameworks which govern health services, which often leaves untapped qualifications -of some employees- that could be very useful.

6. What do you see as a challenge for talent management in health care now?

The fact that one -employee- could perform its full potential and also perhaps surpass its personal boundaries. For me this is the hardest task, how I could bring out and take advantage of the full potential of a talented Physical therapists of my department.

7. According to your opinion, is your organization performance system reinforce innovation and talent? Is there anything that you can think that needs change or development? Why? How can this be accomplished?

I think that at the moment, we have a progressive administration in relation to previous years, and the Ministry of Health is increasingly adopting innovative programs that require implementation. Change and adaptation definitely need systems automation procedures, for both the physiotherapists and the other specialties of the hospital. The hospital organization is a living organism that evolves and is perfected through the people who serve it.

8. Do you believe that broad diversity of your organizations people and their ideas is the fundamental boundary for future success?

Yes, people are our future success. Their knowledge, their capabilities and their talent is the only way to bring innovation and to the ground change to health care organizations.

9. Do you believe that talent management can create value and can allow everyone to contribute to his or hers fullest potential for your organization?

Definitely!! A physiotherapist can and should create added value for the organization for which it works, as our profession is one of the cornerstones of health!!