The role of the leader in Personal Development Planning

Training and development of staff is a key function of any leader and a cornerstone of this process is Personal Development Planning (PDP). Development is vital for staff retention and motivation (Herzberg, 1968), so this paper discusses personal and professional development planning and explores some of the benefits to the team and organisation from the leader's perspective.

When embedded within the appraisal process, Personal Development Planning (PDP) enables employees to reflect on their learning needs and performance alongside their manager developing a plan for personal and professional development for the forthcoming year.

The process of PDP should take into account:
▸ The individual's goals for development
▸ What activities they currently perform
▸ What others say about what they do and their potential
▸ The gap between what they want to achieve and what they do
▸ How the gap between their goals and reality might be addressed
▸ The various elements of the PDP
▸ How others could help achieve goals and give feedback
▸ Achievement of outcomes using measurable criteria
▸ The need for further any development.

PDP is all about enabling individual staff members to achieve their potential. It is often supported by managers who have gone through the process themselves in order to develop into and reach their current position (Chartered Institute of Personnel and Development, 2015).

SETTING GOALS

The personal aims, objectives and goals contained within the plan provide the basis upon which the employee's development is based and, as such, require some thought. Staff are often unsure about the way forward, what they could and could not achieve, as well as about the developmental

opportunities available to them. The use of frameworks, such as the Knowledge and Skills Framework (NHS Employers, 2010), can help guide any discussion, and provide focus and strategic direction for the discussion between the manager and the staff member.

What remains important in any goal-setting within the PDP process is that the manager and the individual consider three beneficiaries whatever the development activity:
▸ The organisation needs to see some benefit relating to what it does (perhaps linked to the business plan)
▸ The team need to see benefit relating to what they do on a day-to-day basis
▸ The individuals needs to understand how the objective will benefit them.

In many respects, this triumvirate needs to underpin what individual staff members want to achieve from their working life. The focus for the manager might therefore be about demonstrating to the individual how the progression of the aims and objectives of the team through the development of the individual might link to personal development, growth and promotion.

Any PDP has to take account of the continued development of areas of strength (e.g. communication), as well as improving upon areas of weakness (e.g. managing conflict or learning to delegate effectively).

WHAT IS THE STARTING POINT FOR THE INDIVIDUAL?

It is not possible to build a strategy to develop members of staff unless what they do now and how well they do it is understood. There are two rules for

PETER ELLIS
Nursing Director,
Hospice in the Weald,
Pembury, Tunbridge Wells

360-degree feedback typically includes direct feedback from an employee's subordinates, peers (colleagues), and supervisor(s), as well as a self-evaluation

building on current abilities and being realistic about what can be achieved. To start, managers need to have a good grasp on what staff members are capable of at this stage, because:

▶ They may under-report what they do
▶ They may over-report what they do
▶ They may report what they actually do.

Next, it is imperative that managers have understood the developmental and training needs of the individual staff member; relying on self-report alone is probably not the right answer. One method of getting a better understanding of an individual's developmental needs is to undertake a 360° role analysis (Chartered Institute of Personnel and Development, 2015). Gaining 360° feedback for a staff member requires some effort on the part of the manager and staff member, as feedback needs to come from people of a higher grade, people of a lower grade and people of the same grade — but the benefits of understanding other perspectives regarding the staff member's need for development can be huge.

HOW DO WE SET AND ACHIEVE GOALS?

Identifying areas for development is simply a matter of taking the goals for achievement identified earlier, and taking away from these the reality of what the individual is currently achieving. This will leave goals that are yet to be achieved. In this way, the PDP process acts like a training-needs analysis.

These goals are usually quite crude. They are essentially aspirations for achievements that address a perceived deficit between where the person is now and where he or she want to be.

In order to make the process more objective and produce tangible results, something more concrete needs to be introduced; the SMART acronym (specific, measurable, achievable [sometimes attainable or agreed], realistic, time-bound) is helpful to achieve this:

▶ **Specific** goals are well-defined and unambiguous; for example, to take on the role of named nurse for tissue viability on the ward is more specific than 'taking on more responsibility'

▶ **Measurable** requires that the goal is quantifiable; so perhaps taking on the role of tissue viability nurse attending the Trust's tissue viability network and acting as a resource to other staff might be a useful goal.

▶ **Achievable** requires that the goal is something that might possibly be attainable and which has not already been done. A novice entering the role of tissue viability lead cannot expect to be a resource immediately, therefore, it may be more achievable if they were to develop into the role of resource to other staff

▶ **Realistic** requires that it is a reasonable goal for the individual to achieve, which is within their capability. Continuing our example, the question may need to be asked: 'does the novice nurse have the skills necessary to develop into this role?' If not, the goal might better be expressed in terms of taking on the role of associate tissue viability nurse

▶ **Time-bound** is an important element of the target, as this helps focus development and allows the manager something to measure success against. Allowing five years to grow into the role of the associate tissue viability nurse would seem like an extraordinary amount of time — while a year might be too short.

Time scales for the elements of the PDP need some thought, with some goals requiring longer to achieve — for example, becoming a resource to other nurses — while other goals — for example, attending the tissue viability network meetings — are achievable in the very short term.

The achievement of goals within the PDP will almost always require some commitment of resource.

In this case resource does not always mean money, as might be the case when sending someone of a course of study; it might simply mean time. For example, ensuring staff members can attend the tissue viability network meetings means ensuring they are rostered on to the rota to be in work when the meeting occur and that they can be released from other duties in order to attend. The commitment to a PDP has consequences for the team.

MONITORING PROGRESS

There is little point having a plan with time frames if these are not monitored and adhered to. Returning to the PDP only at the end of the year is perhaps a recipe for failure. PDPs require regular monitoring, in one-to-one interviews with staff and more formally quarterly of half-year reviews. Waiting for year-end will mean that goals that have slipped are even further off-target before the manager commits resource to correcting this.

Monitoring, like undertaking PDPs, is time consuming and managers need to think about how they will achieve this both in a fair and sustainable manner. It is worth remembering that a manager needs to develop into the role, so allowing, or indeed encouraging, aspiring leaders to undertake PDPs

with staff of the next grade down (or even peers!) is a great way to use time wisely and demonstrate trust through delegation.

Of course if a 360° has been used in goal-setting, then using 360° feedback to monitor progress makes a lot of sense. 360° feedback can, and arguably should, include patients' feedback, and as such, this commentary links strongly to the Nursing & Midwifery Council's focus on feedback in the revalidation process, which requires the nurse to reflect on feedback from a variety of sources (Ellis, 2015).

CONCLUSION

The use of PDPs for staff development is a central tenet of the role of the manager. PDP is not a one-off, nor a once a year only event. As such, undertaking PDPs requires the manager to make time to observe staff and gather feedback before the event, sit with the staff member to agree the substance of the PDP and/or monitor progress both by personal observation and via feedback from the wider team.

The best managers will recognise that time spent on undertaking PDPs is time well spent for the individual, the team and the wider organisation   **Wuk**

REFERENCES

Chartered Institute of Personnel and Development (2015) *Factsheet: Feedback - 360 Degree.* http://www.cipd.co.uk/hr-resources/factsheets/360-degree-feedback.aspx (accessed 06.03.2016)

Ellis P (2015) Ensuing your team is ready for revalidation. *Wounds UK* 11(4): 50–1

Herzberg F (1968) One more time: how do you motivate employees? *Harvard Business Review* 46(1): 53–62

NHS Employers (2010) *Simplified Knowledge and Skills Framework (KSF)* http://www.nhsemployers.org/SimplifiedKSF (accessed 06.03.2016)

Wounds UK
2016 Events
www.wounds-uk.com

Scottish Wound Care Conference
8th September 2016,
The Glasgow City Hotel
(formerly Thistle), Glasgow

Wounds UK Annual Conference
14th-16th November 2016,
Harrogate International Centre

FDUK Annual Conference
15th November 2016,
Harrogate International Centre

The Annual Conference of the Diabetic Foot Journal
6th October 2016,
IBIS Hotel, London

Eliminating Avoidable Pressure Ulcers (South)
20th October 2016,
Bournemouth International Centre