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TALENT MANAGEMENT PRACTICES – EMPIRICAL EVIDENCE FROM POLISH HEALTHCARE ENTITIES

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Background: In the Polish healthcare system, there is a high demand for highly qualified medical staff who can be considered talents. Therefore, the use of appropriate talent management practices by managers of healthcare entities is becoming increasingly important.

Purpose: This study examines the respondents' perception of the current use of selected talent management practices in healthcare entities in Poland. It was also important to investigate the relationship between talent management practices and employee retention and check whether the assessments of individual talent management practices differ depending on the type of healthcare entity and the education of managers. Because the spectrum of talent management processes is wide, in this article, we pay attention to talent acquisition and identification, competence development and employee appraisal.

Design/methodology/approach: A questionnaire for managers of Polish healthcare entities was used to collect the data. 120 respondents took part in the research. A five-point Likert scale was adopted to assess individual talent management practices. In order to examine the properties of the measurement scale and the items that make it up, a reliability analysis was performed. Data were then analyzed using descriptive statistics, Spearman's rho correlation analysis, Kruskal-Wallis, and Mann-Whitney U tests.

Findings: The study showed that the talent management level in Poland's public healthcare entities is not sufficiently advanced. The study's results also revealed the positive impact of talent management practices on employee retention. The analysis shows that the type of medical entity differentiates the level of development of employees' professional competencies and evaluation. No differences in talent management level were observed depending on the managers' education.

Originality/value: In practice, this study highlights problematic areas of talent management practices in healthcare entities. The study contributes to the new knowledge on the perception of managers of healthcare entities regarding the use of talent management practices in the Polish health sector.

Keywords: talent management, healthcare entities, talent acquisition and identification, employee appraisal, development of professional competencies.

Category of the paper: Research paper.

1. Introduction

The healthcare system in Poland and the world is currently facing many challenges, such as low availability of medical personnel and intense cross-country migration of highly qualified health professionals (Shaffer et al., 2016). According to recent studies, labour shortages in the healthcare sector are likely to exceed soon 15 million workers (Liu et al., 2017).

The above problems reinforce the need to adopt strategies regarding talent management practices in healthcare providers. The literature emphasizes that implementing such practices can improve employee retention and organizational efficiency, reduce medical costs and reduce patient health risks (King, 2015; Trebble et al., 2014; Williamson, 2011).

Talent management (TM) is defined in the literature as the process of attracting, selecting, developing and retaining working people with enhanced abilities, skills and knowledge (Budhwar, Mellahi, 2007; Wood, 2008). These activities should concentrate on the best employees in the most strategic roles (roles necessary to achieve the organisation's strategic priorities) (Vaiman et al., 2012). In contrast, talent management in healthcare has been defined as "attracting and integrating highly skilled workers and developing and retaining existing workers (Powell et al., 2013). Talent management aims to help engage and retain the company's most important asset, human capital.

Talent management consists of a series of separate but interrelated practices tailored to achieve a range of organizational or individual goals. They refer to attracting, recruiting, developing, evaluating and retaining those individuals whose professional or operational expertise contributes to positive outcomes for patients or society and creates value for stakeholders (Sopiah et al., 2020; Turner, 2018b).

The literature in healthcare management emphasizes that the most important practices in the field of talent management include attracting and integrating highly qualified employees and developing and rewarding the best-appraised healthcare workers (Turner, 2018b). This study focuses on three core talent management practices: Acquisition and Identification, developing and appraising talents.

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Talent acquisition and identification practices concern recruitment activities relating to acquiring talent from the external labour market and identifying the internal talent pool. The literature emphasizes (Bibi, 2019b) that there are many ways to attract talented people, but one of the key aspects is recruitment and selection. It is considered an important task for an organization to recruit a talent pool and select a potential person from that pool who will ultimately contribute to the organization's success (Rabbi et al., 2015). Attracting talent through recruitment is an essential phase in talent management to determine which employees can serve the organization effectively. It may involve, for example, recruiting specialists such as radiologists based on a set of talent competencies, including commitment, skills and expertise (Nojedeh, 2015). Recruitment is the process of discovering talented personnel for current or expected vacancies, while selection is selecting the right person for a given position (Oaya et al., 2017). Identifying talents regards determining what kind of people with what competencies - abilities, knowledge, skills and experience are considered organizational talents in a specific organizational context (Taha et al., 2015). Talent identification practices should be targeted both at detecting talent "already manifest in a given organizational environment" and at those employees who have the potential to excel in various future roles (activities) (Nijs et al., 2014).

Talent development includes activities that help the best employees acquire valuable information, skills and talents that support the success and development of the organization (Garavan et al., 2021). This practice also includes activities supporting the professional advancement of talents, i.e., strengthening, training, mentoring and coaching of high-potential medical employees. The literature emphasizes that the development of medical talents is the basic measure of talent management (Aljunaibi, 2014). The introduction of a talent management system in a healthcare entity requires the launch of additional processes to improve qualifications, which strengthens the staff and raises the level of competence, as well as the prestige of the medical unit (Blair, 2008). Developing a talented employee has become the basis for the organization's success. Therefore, this TM practice is essential for employees to upskill the needs of an ever-changing environment (Rabbi et al., 2015).

Talent appraisal is a process of evaluating people in an organization to identify highpotential employees. The organization should have a fair and acceptable appraisal system so that employees can evaluate their work regularly, which can motivate employees to put in the effort and behave appropriately in the workplace. This can create a pleasant working atmosphere in which employees are encouraged to achieve the organisation's goals (Ismail et al., 2021). The result of this assessment helps in succession planning (Dzimbiri, Molefakgotla, 2021). The essential element of the appraisal system is rewarding, which is about recognizing high-performing staff, and effectively rewarding them is critical to retaining them (Naim, Lenka, 2017). Evaluation of employees is an inseparable element of the organisation's personnel policy, including the medical unit. Regular assessments allow for verifying the accuracy of the personnel selection mechanisms used, as well as the effectiveness of the implemented training programs. Evaluation of work results gives employees feedback on their work and behaviour, thanks to which they can, for example, take corrective actions or plan professional development. Such an assessment allows for the rational use of human capital potential and contributes to the better functioning of the organization as a whole (Bibi, 2019a; Kautsch, 2015).

In many organizations, assessments are made during recruitment to determine whether an employee is competent for the job and after the employee is hired and dismissed. A positive evaluation of an employee may be the basis for granting him a higher salary, bonus, award or promotion. A negative assessment may contribute to his dismissal. The organization must define the goals, conditions and criteria of evaluation in a clear, understandable and legible way so that employees accept them. Those carrying out the assessment require training in the selection and use of assessment techniques, the ability to draw conclusions and use the evaluation results. The effectiveness and efficiency of the system require a strong commitment from management and the support of employee representatives (Kautsch, 2015). The most important thing is to provide feedback based on correct employee attitudes skillfully.

Human capital is the most important resource in the workplace, and it isn't easy to replace it. In the event of medical staff shortages, retaining medical staff is particularly important in talent management. Retention is defined as the extent to which an employer can retain employees in the organization. It can be expressed as a percentage of employees with a certain length of service as a percentage of the total number of employees (Turner, 2018a). In the healthcare sector, turnover is a significant issue that can threaten patient safety, increase healthcare costs and affect staff morale (West, Dawson, 2012). Organizations are now prioritizing talent retention strategies to avoid the costs associated with employee turnover. Some commonly used retention strategies include performance-based pay, bonuses, incentives, training and development activities (Whysall et al., 2019).

Employee retention is important in all healthcare professions. Research to date has shown that retaining experienced nurses would help mitigate the scarcity, facilitate knowledge transfer and provide high-quality patient care (Lartey et al., 2014), while not retaining nurses could have a detrimental impact on medical services (O'Brien, Ackroyd, 2012). Successful detention was also seen as a way to address the shortage of rehabilitation specialists, which was considered a global problem and address the unequal distribution of physicians between rural and urban areas (Pagaiya et al., 2015). Retention is especially challenging in large metropolitan areas, where competition for talented healthcare professionals can be fierce, and in rural and sparsely populated areas, where it is a persistent problem (Carson et al., 2015).

In countries such as Poland, the retention of healthcare workers should be the primary objective of talent management due to the massive outflow of qualified people. Research has shown many reasons for leaving, including failure to recognize and capitalize on an employee's passion; inability to challenge the intellect; not developing skills and not giving the employee a voice (Turner, Kalman, 2014). Therefore, the question arises whether, through appropriate talent management, it is possible to influence employee retention and whether there is a relationship between individual talent management practices and retention.

For these reasons, this study examines the perception of selected talent management practices by the management of healthcare entities and investigates the relationship between talent management practices and employee retention. We wanted to analyze the processes and procedures of talent management in organizations operating in the Polish healthcare environment, focusing on the dimensions of talent acquisition and identification, talent development and talent appraisal. This study also provides an understanding of the role of the type of healthcare entity and the education of management practices as factors influencing employee retention can contribute to improving the quality of work of medical staff in Polish healthcare entities.

Research to date has shown that the use of talent management practices has been perceived differently across countries, with most research on talent management conducted in Western organizational contexts (Crowley-Henry et al., 2019; Schreuder, Noorman, 2019; Sinclair-Maragh et al., 2017). Therefore, it is necessary to assess the current use of talent management practices in the context of Poland, especially by managers in the healthcare sector. So far, such studies have been conducted mainly among medical personnel.

The rest of the article is organized as follows: In addition to this introduction, the next section will discuss the research method and the study results. A discussion of the research results will follow this. The article ends with conclusions and recommendations for further research.

2. Methods

A questionnaire for managers of Polish healthcare entities was used to collect the data. 120 respondents took part in the research. The study used a questionnaire containing 13 items to assess the perception of managers of healthcare entities on three talent management practices. These items were grouped into the following three dimensions: talent acquisition and identification (4 items), talent development (4 items), and talent appraisal (5 items). Each answer was rated on a 5-point Likert scale, from 1 (strongly disagree) to 5 (strongly agree). The survey was conducted in 2021. Participation in the study was voluntary, and confidentiality

and anonymity were ensured. The collected data were analysed with the SPSS 17 software. In order to examine the properties of the measurement scale and the items that make it up, a reliability analysis was performed. Data were then analyzed using descriptive statistics, Spearman's rho correlation analysis, Kruskal-Wallis, and Mann-Whitney U tests. In all tests, p-values less than 0.05 were interpreted as statistically significant.

3. Results

3.1. Assessment of talent management practices

In order to investigate the properties of the measurement scale and the items constituting it in the survey questionnaire for managers of healthcare entities, a reliability analysis was conducted. The exact values obtained from this analysis are shown in Table 1.

Table 11.

Analysis of the reliability of the dimensions included in the survey questionnaire addressed to managers of healthcare entities

Construct		Variables		
	I1	The organisation undertakes long-term human resource planning		
Talant acquisition	I2	The healthcare entity can attract and recruit the necessary staff		
Talent acquisition and identification	I3	The facility's reputation attracts talented medical professionals	0.76	
and identification	14	High-potential employees are identified in the context of our		
	I4	organisation's strategic priorities		
	D1	The healthcare entity allocates funds for staff development		
Professional	D2	Managers organise internal training		
competence	D3	The healthcare entity has learning and development programmes	0.78	
development	D3	to develop talent		
	D4	The facility offers opportunities for professional advancement		
	A1 The organisation has a transparent and objective way of			
	AI	appraising staff		
	A2	Surveys to assess the performance of medical staff are conducted		
	Π2	on a cyclical basis		
Employee appraisal		The evaluation takes place in the form of a discussion; the	0.84	
	A3	reasons for the employee's wrong but also good performance are	0.04	
		addressed		
	A4	Managers provide feedback to the employee on the employee		
	74	appraisal		
	A5	Employees who perform well are rewarded		

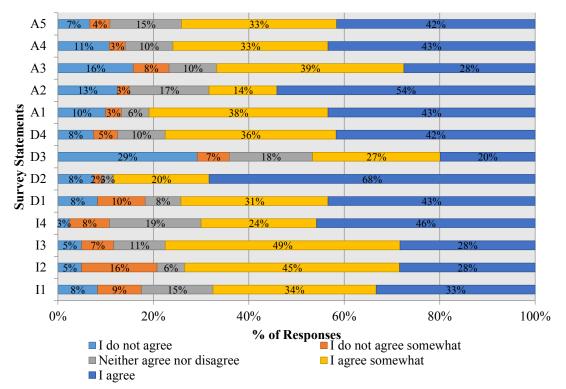
Cronbach's alpha values, more remarkable than 0.70, indicate the scale's high-reliability level. Facility managers, when assessing their commitment to identifying (I1-I4), developing (D1-D4) and appraising (A1-A5) talented employees, took extreme positions (1 ± 5) . Among the healthcare entities surveyed, there were both those with no activities focused on medical talent management and those that rated their performance in this area highly (table 2 and figure 1).

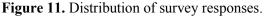
Variable	Mean	Std. Deviation	Variance	Skewness	Kurtosis
I1	3.75	1.245	1.550	-0.867	-0.215
I2	3.76	1.174	1.378	-0.879	-0.228
13	3.89	1.052	1.106	-1.191	1.126
I4	4.03	1.104	1.218	-0.889	-0.131
D1	3.91	1.290	1.664	-1.069	-0.030
D2	4.40	1.141	1.301	-2.151	3.670
D3	3.02	1.523	2.319	-0.188	-1.452
D4	3.99	1.185	1.403	-1.279	0.866
A1	4.01	1.240	1.538	-1.414	1.054
A2	3.95	1.395	1.947	-1.098	-0.106
A3	3.55	1.383	1.913	-0.793	-0.653
A4	3.94	1.285	1.652	-1.242	0.501
A5	3.98	1.159	1.344	-1.184	0.744

Table 2.

Descriptive statistics of survey variables

Note. I - talent identification, D - development of professional competencies, A - employee appraisal.





The talent acquisition and identification practice involve several methods and ways of assessing candidates' essential skills, capabilities and attributes. In order to validate this process in healthcare, managers of healthcare entities were asked to indicate how medical talent is identified in their facilities. The study found that only a proportion of the healthcare entities surveyed did long-term human resource planning (I1: M = 3.75; SD = 1.245) – 33.3% of respondents partially and 34.2% ultimately confirmed that activities had been carried out in this regard. The effectiveness of recruiting the necessary staff in all surveyed entities is rated similarly. Another finding concerned the reputation of the healthcare entity (I2: M = 3.76; SD = 1.174). The survey found that 11,7% of the managers of healthcare entities realised that

the opinions about their entities were not very favourable (I3: M = 3.89; SD = 1.052). In this dimension, all the units scored best in identifying the high-potential staff in the context of organisational priorities (I4: M = 4.03, SD = 1.104). This statement was entirely or partially agreed with by 70% of the respondents. If the values of this variable were to be assessed separately from the other variables of the surveyed dimension, the result would be optimistic and demonstrate the effectiveness in attracting talent tailored to the organisational needs of the studied units. Unfortunately, the result for the whole construct on talent identification is not satisfactory, as it reveals that healthcare entities only undertake effective recruitment activities after pressing staff shortages have emerged.

The second dimension discussed was the development of talent competencies in healthcare organisations. Managers of healthcare entities were asked to determine whether: they allocate financial resources for staff development, organise internal training, have an education and talent development programme and offer opportunities for career advancement. Based on the survey, it should be stated that obtaining professional promotion (D4) is certain in 41.7% of the surveyed facilities (M = 3.99; SD = 1.185). This statement was strongly disagreed with by 7.5% of the respondents. The most diverse responses were observed for the statement about having learning and talent development programmes (D3: M = 3.02; SD = 1.523). The creation of development paths for talent was confirmed by 46.6% of the respondents (of which 26.7% only partially).

On the other hand, 29.2% of the respondents completely disagreed with this statement. Since the activities of healthcare managers should be aimed at the continuous development of talented employees, healthcare managers were asked about the allocation of financial resources for this purpose (D1: M = 3.91; SD = 1.290). A group of 18.3% of managers stated that their facilities do not have a pool of funds that they spend exclusively on improving the competencies of medical staff or rarely fund employee development. Respondents confirmed that in-house training is organised in the healthcare facilities they manage (D2: M = 4.40; SD = 1.141). Such activity is organised in 68.3% (or rather conducted in 20%) of the surveyed entities. Healthcare entities are more willing to join talent development programmes if it does not require additional financial outlays on their part. Therefore, they most often develop the competencies of medical staff by organising internal training.

Another dimension discussed was employee appraisal in healthcare organisations. Managers of healthcare entities were asked to determine whether there was a transparent and objective way of appraising employees in their facilities (A1: M = 4.01; SD = 1.185). 43.4% of the managers strongly agreed with this statement. On the other hand, 10% of the managers strongly disagreed. The majority of managers of public facilities (54.1%) confirmed that employee appraisal in their facility is done on a cyclical basis (A2: M = 3.95; SD = 1.395). The negation of the cyclical nature of medical talent appraisal by 12.5% of the managers surveyed indicates that it is not a long-term process in these facilities. The respondents also referred to the formula for employee appraisal in their facilities (A3: M = 3.55; SD = 1.383) –

15.8% of healthcare managers said that employee appraisal in their organisations does not consist of a discussion in which the reasons for the bad and good sides of an employee's performance are addressed. Such information is not encouraging, as the evaluation of medical staff performance should take an open form and not be limited to presenting the rationale of one side. During the appraisal, the positive and negative behaviour of the medical staff should be discussed. Only 43.4% of the managers of the medical entities surveyed confirm providing feedback to the employee from the employee appraisal, while 32.5% of the managers provide partial feedback (A4: M = 3.94; SD = 1.285). The last variable of this dimension relates to the reward of high-performing staff (A5: M = 3.98; SD = 1.159). Awards are given to medical talents from 41.6% of the facilities surveyed. Based on the survey, it can be concluded that, despite relatively well-developed procedures, employee appraisal is not used to draw conclusions and take concrete actions afterwards.

As a result of analysing the individual components of talent management at the surveyed facilities, it is possible to identify the following degrees of advancement: 5 - advanced degree, 4 - intermediate degree and 3 - beginner degree.

The average figures for the different dimensions of talent management in the surveyed healthcare entities in the management group are as follows:

- M = 3.86 for identifying and attracting talent,
- M = 3.83 for developing employees' professional competencies,
- M = 3.86 for employee appraisal.

When interpreting the data, it is essential to note that none of the dimensions of talent management, as assessed by the managers of the healthcare entities, were even classified as intermediate.

3.2. Relationship between retention rates and the talent management practices

Managers were also asked to provide a retention rate in percentage terms, an indication of what proportion of medical staff working in January 2020 are still working in the organisation (table 3).

Table 3.

The retention	rate in	the surveyed	healthcare	entities
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Retention rate	do 60%	61-80%	81-100%	Total
% of responses	8.4%	15.8%	75.8%	100.0%

It was then decided to test whether there was a relationship between retention rates and the talent management dimensions studied. Spearman's *rho* correlation analyses were used for this purpose. Table 4 shows the results of the correlation analyses.

Table 4.

Correlations between talent management practices and retention rates in the healthcare entity

Correlations	Retention rate			
Correlations	Spearman's rho	Statistical significance		
Talent acquisition and identification	0.25	0.006		
Professional competence development	0.34	<0.001		
Employee appraisal	0.26	0.005		

The results of the analysis showed that retention rates are correlated with dimensions of talent management. The correlations are positive and both weak (identification and attraction of talent, employee appraisal) and moderate (development of employees' professional competencies). This means that there is a positive relationship between the level of talent management practices and the retention rates of medical staff.

3.3. Factors differentiating the talent management practices

Next, it was examined whether ratings of individual talent management practices differed according to selected characteristics of the healthcare entity and the characteristics of the managers. Initially, Kruskal-Wallis tests were performed to test whether the educational background of the person at the helm of the healthcare entity differentiated talent management practices (table 5).

Table 5.

	Education of the manager								<u> </u>
	Medical		Economic,		Other			р	η²
Construct	(<i>n</i> = 66)		managerial		(<i>n</i> = 18)		Н		
Construct			(<i>n</i> = 36)						
	Mean	Me	Mean	Me	Mean	Me			
	rank		rank		rank				
Talent acquisition and	62.64	16.50	62.10	17.00	49.44	15.00	2.18	0.337	0.02
identification									
Professional competence	58.60	15.50	68.83	17.00	50.81	16.00	3.70	0.157	0.03
development									
Employee appraisal	61.49	20.00	65.78	21.50	46.31	19.00	3.91	0.141	0.03

Comparison of dimensions of talent management according to the education of the manager

Note. Me - median, H - Kruskal-Wallis H test; η^2 - eta square, a measure of the strength of the association; p - an estimate of the probability that the observed difference between groups is random. The result of the analysis is statistically significant if the *p*-value is less than the assumed alpha threshold, which is 0.05.

The results of this test are not statistically significant. This means that no differences were observed in the dimensions of talent management according to the educational background of the managers.

It was then examined whether talent management practices differed according to the type of healthcare entity. Again, the Kruskal-Wallis test was performed. The results of the analyses are shown in table 6.

Table 6.

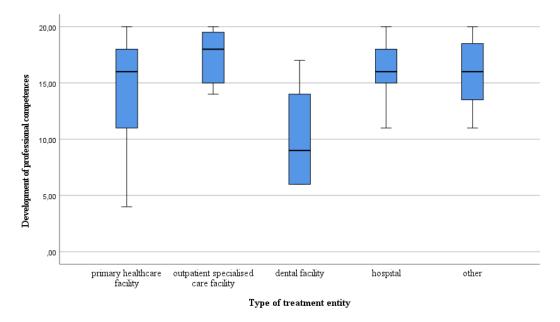
Construct	Type of treatment entity	Mean rank	Me	Н	D	n ²
	primary healthcare facility $(n = 30)$	61.22	17.00	7.94	0.094	0.07
Talent	outpatient specialised care facility $(n = 19)$	75.34	18.00			
acquisition	dental facility $(n = 6)$	33.83	14.00			
and identification	hospital $(n = 46)$	56.21	15.00			
Identification	other $(n = 19)$	63.34	16.00			
	primary healthcare facility $(n = 30)$	53.98	16.00	13.29	0.010	0.11
Professional	outpatient specialised care facility $(n = 19)$	78.74	18.00			
competence	dental facility $(n = 6)$	23.50	9.00			
development	hospital $(n = 46)$	61.89	16.00			
	other $(n = 19)$	60.87	16.00			
	primary healthcare facility $(n = 30)$	57.20	19.50	13.54	0.009	0.11
Employee	outpatient specialised care facility $(n = 19)$	75.68	21.00			
Employee appraisal	dental facility $(n = 6)$	22.17	12.50			
appraisai	hospital $(n = 46)$	56.98	21.00	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	other $(n = 19)$	71.16	22.00			

Differences in talent management practices by type of treatment entity

Note. The following were included as other types of healthcare entities: a treatment care facility, a nursing care facility, a treatment rehabilitation entity, and a hospice.

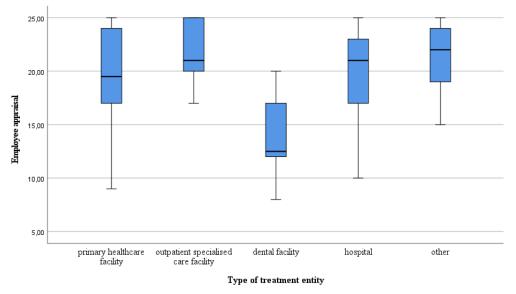
Me - median, H - Kruskal-Wallis H test; η^2 - eta square, a measure of the strength of the association; p - an estimate of the probability that the observed difference between groups is random. The result of the analysis is statistically significant if the *p*-value is less than the assumed alpha threshold, which is 0.05.

The value of $\eta 2$ (eta square) indicates the percentage of the dependent variable variation explained by the independent variable. The higher its value, the greater the variation is (more substantial effect). It is assumed that: around $\eta 2 < 0.06$, there is a weak effect; between $0.06 < \eta 2 < 0.14$, there is a moderate effect and $\eta 2 > 0.14$, there is a strong effect. The talent management practices that differ by type of healthcare entity (for which p < 0.05) are the development of employees' professional competencies and employee appraisal. Figures 2 and 3 illustrate the relationship between these dimensions of talent management and types of treatment entities.



Note. The following were included as other types of healthcare entities: a treatment care facility, a nursing care facility, a treatment rehabilitation entity, and a hospice.

Figure 2. Differences in terms of the development of professional competencies of talented employees according to the type of a healthcare entity.



Note. The following were included as other types of healthcare entities: a treatment care facility, a nursing care facility, a treatment rehabilitation entity, and a hospice.

Figure 3. Differences in terms of employee appraisal by type of a healthcare entity.

The analyses show that the type of healthcare entity differentiates the level of development of staff professional competencies and employee appraisal (moderate effects). In order to investigate the exact differences, post hoc tests with Bonferroni correction were performed, the results of which are presented in Table 7.

Table 7.

The significance value of pairwise comparisons with Bonferroni correction for the development of professional competencies and employee appraisal by type of a healthcare entity

Construct	Type of treatment entity	1	2	3	4
Development of professional	1. primary healthcare facility	-			
competences	2. outpatient specialised care facility	0.146	-		
	3. dental facility	0.488	0.006	-	
	4. hospital	1.000	0.741	0.106	-
	5. other	1.000	1.000	0.210	1.000
Employee appraisal	1. primary healthcare facility	-			
	2. outpatient specialised care facility	0.688	-		
	3. dental facility	0.237	0.010	-	
	4. hospital	1.000	0.477	0.206	-
	5. other	1.000	1.000	0.025	1.000

Note. The following were included as other types of healthcare entities: a treatment care facility, a nursing care facility, a treatment rehabilitation entity, and a hospice.

The talent management dimension relating to the development of employees' professional competencies was at a higher level in outpatient specialised care facilities than in dental facilities. Other comparisons are not statistically significant. In the last section, pairwise comparisons were made for employee appraisal. They show that talent management in terms of employee appraisal occurs at a higher level in outpatient specialised care facilities as well as treatment care facilities, nursing care facilities, treatment rehabilitation entities and hospices than in dental facilities. Other comparisons were found to be statistically insignificant.

4. Discussion

The study results showed that talent management practices are currently poorly assessed by managers of healthcare entities. This may be due to the fact that medical entities in Poland implement various identification and acquisition, development and appraisal strategies for talented medical employees to a small extent. The poor level of talent management practices in health care has also been identified in various third-world countries, where additional efforts have been made to identify the specific reasons for this situation. For example, the majority of medical staff in public hospitals in Malawi rated the use of talent management practices as poor due to a lack of resources to invest in developing talent management, a lack of qualified talent managers to run talent management systems, and a lack of strategic focus (Dzimbiri, Molefakgotla, 2021). The listed factors influencing the proper implementation of talent management practices coincide with other studies. A Botswana study on talent management practices found that poor performance is due to a lack of resources necessary to invest in talent development (Wahba, 2015).

All practices studied in our research have been scored similarly. On the other hand, in other studies conducted in this area, it turned out that talent development practice is rated the best. For example, some researchers (Mahfoozi et al., 2018) have identified talent development and good relationships as crucial talent management strategies in public sector organizations. Yener, Gurbuz, and Pinar (Yener et al., 2017) also concluded that vocational training is one of the top-rated talent management practices. This practice is very well perceived when employees' individual aspirations coincide with the organisation's needs (Kadam et al., 2016). A high level of this practice was also recorded in public hospitals in Malaysia, which contributed to the success of the entire healthcare system. Talent management focuses on training through a cognitive approach that emphasizes competency-based development (Subramaniam et al., 2015). The benefits of doing so have also been identified in a study of UK NHS trusts which concluded that more emphasis should be placed on training to improve skills (Veronesi et al., 2013).

In other studies where talent acquisition and identification turned out to be the best practice, it was found that recruitment can be successful if it is based on multiple interventions. A recent Talent Identification Study in Europe looked at several recruitment campaigns, including recruiting young people into healthcare in Austria and Belgium, attracting general practitioners in 'underserved areas' and nurses in Finland and the Czech Republic (Kroezen et al., 2015). It turned out that good practice in talent search is sensitivity to the context, which largely depends on the economic or political situation. It was also important to have packages of activities in the recruitment process (not only remuneration factors but also rewards plus continuous professional development and additional benefits). Finally, the recruitment process was more likely to succeed if it had solid organisational management support.

The literature emphasizes that a high level of talent management practices is achieved when they focus on a specific group of healthcare professionals in the face of a particular phenomenon (usually a shortage of specialists), e.g. professional development of doctors in China (Yi et al., 2014), recruitment process, that combines nursing talent with organizational culture and individual values (Thompson, Ahrens, 2015).

This study's results revealed a statistically significant positive correlation between talent management practices and medical staff retention. All three dimensions of talent management had a significant relationship with retention rates. The results of this study are also consistent with other conducted studies (Brightman, 2007; Goestjahjanti et al., 2020; Iacono, 2008; Khairina et al., 2022; Noopur, Dhar, 2020; Poorhosseinzadeh, Subramaniam, 2013) which showed that talent management practices are positively related to employee retention and engagement. This may be because talent management practices focusing on talent identification, recruitment, reward, talent development, and career advancement will improve healthcare staff satisfaction and encourage them to stay in the workplace (Anlesinya et al., 2019; Helaly, El-Sayed, 2022). From the same point of view, it has been found that the ability to retain employees in an organization depends on fully developing, understanding and managing their

talents (Kravariti et al., 2021). Talent management can therefore be particularly helpful in retaining talented employees and motivating them to stay in the organization, thus reducing staff turnover (Festing, Schäfer, 2014). For example, how nurses view talent management practices in their organizations has been proven to determine their intention to stay or leave the organization (Mousa, Ayoubi, 2019).

According to some researchers, the key to retaining talent is primarily the development opportunities and career paths (Curson, Parnell, 2010; Rodwell, Ellershaw, 2016). Retention is directly related to talent management through development and career advancement because when organizations want to retain their employees, it is important to pay attention to employee learning. Allowing people to do more and learn more about what they are good at will encourage them to stay in the organization (Govaerts et al., 2011). For example, a study in Indonesia found that nurses in hospitals that focus on their future career development and opportunities rated talent management as optimizing their best skills. For this reason, nurses do not want to change jobs; they are satisfied with their current workplace and feel treated fairly, and their aspirations are listened to and considered. This has a positive impact on employee retention (Aljunaibi, 2014). Providing career and development opportunities is, therefore a key practice if talent is to be retained. Employees are more likely to stay with an organization that offers learning and development opportunities. They want to work with managers who provide excellent coaching, mentoring and guidance (Ismail et al., 2021). The scope of this practice should cover activities throughout the employee's life cycle, starting from training in the induction or onboarding phase, through coaching and mentoring at key moments, to training or development programs in the field of knowledge and skills. The argument for taking action for the development of health professionals is better knowledge and skills, which in turn leads to greater motivation and involvement of employees who have a better chance of staying in the organization (Turner, 2018a). Healthcare organizations facing talent retention challenges should strive to make their career opportunities attractive enough to convince talented professionals to stay with the organization (Harris et al., 2015).

In previous studies, employee retention was also associated with practices related to the appraisal and remuneration system. Employees are more likely to stay in the workplace when they receive constructive evaluations and additional incentives or bonuses based on them (Odubanjo, 2015). This is crucial and has a significant impact on increasing employee engagement and retention. Organizations that regularly adopt and offer a transparent performance feedback system recognize employees with some recognition and reward system that gives employees an advantage that they become attractive to employees (Pandita, Ray, 2018). Besides, employees will stay in an organization with an environment of encouragement and motivation where the reward for positive job evaluation is seen as sufficient to meet needs and aspirations (Pandita, Ray, 2018).

Besides, employees will stay in an organization with an environment of encouragement and motivation where the reward for positive job evaluation is seen as sufficient to meet needs and aspirations (Al-Emadi et al., 2015).

In the next step, it was decided to examine whether there are differences in the perception by managers of healthcare entities of the use of talent management practices based on demographic factors (education) and the type of healthcare entity. Our results did not confirm the relationship between the assessment of talent management practices and the education of managers. In turn, previous studies have shown differences in the perception of the effectiveness of talent management not only by education but also by other demographic factors, such as gender, age, marital status, position and professional experience (Barkhuizen et al., 2014; Dzimbiri, Molefakgotla, 2021; Tyskbo, 2019). In addition, it was also shown that talent management practices were more effectively applied to employees in senior positions in the organization and employees with postgraduate qualifications (Barkhuizen, 2014). In turn, our analysis has shown that the way managers of medical entities perceive the use of talent management practices varies depending on the type of organization. It confirmed the study results regarding talent management practices in the Slovak healthcare sector (Mousa, Ayoubi, 2019)that showed that the type and size of the organization influenced the use of talent management practices.

In order to retain the best of the best high-potential employees in the organization, the manager must apply talent management practices. Talent management helps the organization and its employees by enabling them to develop and move to more challenging positions while developing them through continuous learning for the benefit of the (Pandita, Bedarkar, 2015) organization (Pandita, Ray, 2018).

The study's limitation is that it focused on only one perspective (Polish healthcare entities). This issue did not consider opinions from other countries. The second limitation concerned the respondents, as the research focused only on managers of healthcare entities. This deprived the possibility of obtaining different opinions from other health professionals, such as doctors, nurses, clinicians and dentists. Further research into health professionals' perceptions of the current use of talent management practices is suggested.

Finally, we didn't consider various factors affecting TM practices. For example, other studies have shown that the decision to stay in a particular organization is influenced by many factors, including job satisfaction, external rewards, commitment to the organization, the prestige of the organization, and flexible work (Atkinson, Hall, 2011). Therefore, it is worth considering these factors in future studies.

In the future, researchers need to focus on several issues, such as examining the impact of other talent management practices on the retention of medical workers. Moreover, further research is expected to allow a comparison of the level of talent management according to other criteria, e.g. status of the medical entity.

The study had theoretical and practical contributions. To our knowledge, this is the first study that examined the level of talent management practices in Poland and their impact on employee retention in Poland. So far, this type of research has been conducted among medical workers in other countries. The study contributes to new knowledge on the perception of health care managers' practices related to talent management in the Polish health care sector and shows the relationship of these practices with employee retention. This study has huge societal implications as the results will form the basis of best practices for healthcare providers, thereby improving the well-being of patients and the general public.

5. Summary

This study aimed to examine the managers' perception of the current application of selected talent management practices in healthcare entities in Poland. This study assessed talent management practices, particularly talent acquisition and identification, talent development and talent appraisal. The study showed that talent management practices are poorly applied in healthcare entities in Poland. It has also been shown that the way managers of these entities perceive the use of talent management practices varies depending on the type of organization. Studying the impact of talent management practices on employee retention was also important. This study confirms that TM practices have a significant effect on increasing healthcare staff retention. Healthcare organizations should improve talent management strategies and practices to accommodate better change by attracting, developing, evaluating and retaining talent to meet current and future organizational demands. In today's world of hyper-change, proper talent management is a must. It is undoubtedly one of the most important elements ensuring the long-term retention of representatives in any organization. Employees are always looking for ways to be motivated, recognized and appreciated at work. They crave opportunities for personal and professional growth and constructive criticism to feel appreciated.

References

- Al-Emadi, A.A.Q., Schwabenland, C., Wei, Q. (2015). The Vital Role of Employee Retention in Human Resource Management: A Literature Review. *IUP Journal of Organizational Behavior*, 14(3), 7-32. https://www.proquest.com/docview/1703567195? pq-origsite=gscholar&fromopenview=true.
- 2. Aljunaibi, M.M. (2014). *Talent Management and Employee Engagement*. The British University in Dubai (BUiD). https://bspace.buid.ac.ae/handle/1234/704.

- Anlesinya, A., Amponsah-Tawiah, K., Dartey-Baah, K. (2019). Talent management research in Africa: towards multilevel model and research agenda. *African Journal of Economic and Management Studies*, 10(4), 440-457. https://doi.org/10.1108/AJEMS-12-2018-0371/FULL/PDF.
- 4. Atkinson, C., Hall, L. (2011). Flexible working and happiness in the NHS. *Employee Relations*, 33(2), 88-105. https://doi.org/10.1108/01425451111096659/FULL/PDF.
- Barkhuizen, N. (2014). How Relevant is talent management in South African local government institutions? *Mediterranean Journal of Social Sciences*, 5(20), 2223-2230. https://doi.org/10.5901/MJSS.2014.V5N20P2223.
- Barkhuizen, N., Mogwere, P., Schutte, N. (2014). Talent management, work engagement and service quality orientation of support staff in a higher education institution. *Mediterranean Journal of Social Sciences*, 5(4), 69-77. https://doi.org/10.5901/ MJSS.2014.V5N4P69.
- Bibi, M. (2019a). Impact of Talent Management Practices on Employee Performance: An Empirical Study Among Healthcare Employees. *SEISENSE Journal of Management*, 2(1), 22-32. https://doi.org/10.33215/SJOM.V2I1.83.
- Bibi, M. (2019b). Impact of Talent Management Practices on Employee Performance: An Empirical Study Among Healthcare Employees. *SEISENSE Journal of Management*, 2(1), 22-32. https://doi.org/10.33215/SJOM.V2I1.83.
- 9. Blair, T. (2008). Zarządzanie talentami.
- Brightman, B. (2007). Medical talent management: A model for physician deployment. *Leadership in Health Services*, 20(1), 27-32. https://doi.org/10.1108/17511870710721462/ FULL/PDF.
- Budhwar, P., Mellahi, K. (2007). Introduction: human resource management in the Middle East. *Https://Doi.Org/10.1080/09585190601068227*, *18*(1), 2-10. https://doi.org/10.1080/ 09585190601068227.
- 12. Carson, D.B., Schoo, A., Berggren, P. (2015). The 'rural pipeline' and retention of rural health professionals in Europe's northern peripheries. *Health Policy*, *119*(12), 1550-1556. https://doi.org/10.1016/J.HEALTHPOL.2015.08.001.
- Crowley-Henry, M., Benson, E.T., Al Ariss, A. (2019). Linking Talent Management to Traditional and Boundaryless Career Orientations: Research Propositions and Future Directions. *European Management Review*, 16(1), 5-19. https://doi.org/10.1111/ EMRE.12304.
- Curson, J., Parnell, H. (2010). Leading through uncertain times dance in the rain: The experience of the NHS workforce-review team. *Human Resource Management International Digest*, 18(7), 6-8. https://doi.org/10.1108/09670731011083725/FULL/PDF.
- Dzimbiri, G.L., Molefakgotla, A.M. (2021). Talent management practices: perception of registered nurses in Malawian public hospitals. *African Journal of Economic and Management Studies*, 12(3), 423-438. https://doi.org/10.1108/AJEMS-11-2020-

0570/FULL/PDF.

- 16. Festing, M., & Schäfer, L. (2014). Generational challenges to talent management: A framework for talent retention based on the psychological-contract perspective. *Journal of World Business*, 49(2), 262-271. https://doi.org/10.1016/J.JWB.2013.11.010.
- Garavan, T., Matthews-Smith, G., Gill, A.M., O'Brien, F. (2021). Strategic Talent Management in the Hospitality Industry. *Talent Management Innovations in the International Hospitality Industry*, 9-30. https://doi.org/10.1108/978-1-80071-306-220211002.
- Goestjahjanti, S.F., Novitasari, D., Hutagalung, D., Asbari, M., Supono, J. (2020). Impact of talent managament, authentic leadership and empoyee engagament on job satisfaction: evidence from South East Asian industries. *Journal of Critical Reviews*, 7(19). https://www.researchgate.net/profile/Masduki-Asbari/publication/342975537_ IMPACT_OF_TALENT_MANAGEMENT_AUTHENTIC_LEADERSHIP_AND_EMP LOYEE_ENGAGEMENT_ON_JOB_SATISFACTION_EVIDENCE_FROM_SOUTH_ EAST_ASIAN_INDUSTRIES/links/60136c5645851517ef2262ea/IMPACT-OF-TALEN.
- 19. Govaerts, N., Kyndt, E., Dochy, F., Baert, H. (2011). Influence of learning and working climate on the retention of talented employees. *Journal of Workplace Learning*, 23(1), 35-55. https://doi.org/10.1108/13665621111097245/FULL/PDF.
- Harris, C.M., Pattie, M.W., Mcmahan, G.C. (2015). Advancement along a career path: the influence of human capital and performance. *Human Resource Management Journal*, 25(1), 102-115. https://doi.org/10.1111/1748-8583.12047.
- 21. Helaly, S.H., El-Sayed, R.S. (2022). Talent Management Practices as Drivers of Organizational Entrepreneurship and Nurses' Creativity at Oncology Center Mansoura University. *Assiut Scientific Nursing Journal*, 10(33), 20-32. https://doi.org/10.21608/ ASNJ.2022.170077.1445.
- 22. Iacono, M.V. (2008). Showcasing Nursing Talent: Nursing Grand Rounds. *Journal of Perianesthesia Nursing*, 23(5), 349-354. https://doi.org/10.1016/j.jopan.2008.07.007.
- Ismail, F., Ka, H.K., Fern, N.W., Imran, M. (2021). Talent management practices, employee engagement, employee retention; empirical evidence from Malaysian SMEs. *Estudios de Economia Aplicada*, 39(10). https://doi.org/10.25115/eea.v39i10.5572.
- 24. Kadam, S., Nallala, S., Zodpey, S., Pati, S., Hussain, M.A., Chauhan, A.S., Das, S., Martineau, T. (2016). A study of organizational versus individual needs related to recruitment, deployment and promotion of doctors working in the government health system in Odisha state, India. *Human Resources for Health*, 14(1), 1-11. https://doi.org/10.1186/S12960-016-0103-1/TABLES/2.
- 25. Kautsch, M. (2015). Zarządzanie w opiece zdrowotnej. Nowe Wyzwania. Wolters Kluwers.
- 26. Khairina, F., Games, D., Yulihasri (2022). The Influence of Talent Management Practices on Employee Performance : The Mediating Role of Employee Engagement and Employee Job Satisfaction (Case Study at PT Bank Negara Indonesia (Persero) Tbk Regional Office

02). Enrichment: Journal of Management, 12(4), 2879-2892. https://doi.org/10.35335/ ENRICHMENT.V12I4.748.

- 27. King, K.A. (2015). Global talent management: Introducing a strategic framework and multiple-actors model. *Journal of Global Mobility*, *3*(3), 273-288. https://doi.org/10.1108/JGM-02-2015-0002/FULL/PDF.
- 28. Kravariti, F., Oruh, E.S., Dibia, C., Tasoulis, K., Scullion, H., Mamman, A. (2021). Weathering the storm: talent management in internationally oriented Greek small and medium-sized enterprises. *Journal of Organizational Effectiveness*, 8(4), 444-463. https://doi.org/10.1108/JOEPP-01-2021-0022/FULL/PDF.
- Kroezen, M., Dussault, G., Craveiro, I., Dieleman, M., Jansen, C., Buchan, J., Barriball, L., Rafferty, A.M., Bremner, J., Sermeus, W. (2015). Recruitment and retention of health professionals across Europe: A literature review and multiple case study research. *Health Policy*, *119*(12), 1517-1528. https://doi.org/10.1016/J.HEALTHPOL.2015.08.003.
- Lartey, S., Cummings, G., Profetto-Mcgrath, J. (2014). Interventions that promote retention of experienced registered nurses in health care settings: a systematic review. *Journal of Nursing Management*, 22(8), 1027-1041. https://doi.org/10.1111/JONM.12105.
- 31. Liu, J.X., Goryakin, Y., Maeda, A., Bruckner, T., Scheffler, R. (2017). Global Health Workforce Labor Market Projections for 2030. *Human Resources for Health*, 15(1), 1-12. https://doi.org/10.1186/S12960-017-0187-2/FIGURES/2.
- 32. Mahfoozi, A., Salajegheh, S., Ghorbani, M., Sheikhi, A. (2018). Developing a talent management model using government evidence from a large-sized city, Iran. http://www.Editorialmanager.Com/Cogentbusiness, 5(1), 1449290. https://doi.org/ 10.1080/23311975.2018.1449290.
- 33. Malik, A., Boyle, B., Mitchell, R. (2017). Contextual ambidexterity and innovation in healthcare in India: the role of HRM. *Personnel Review*, 46(7), 1358-1380. https://doi.org/10.1108/PR-06-2017-0194/FULL/PDF.
- Mousa, M., Ayoubi, R.M. (2019). Talent management practices: perceptions of academics in Egyptian public business schools. *Journal of Management Development*, 38(10), 833-846. https://doi.org/10.1108/JMD-01-2019-0030/FULL/PDF.
- 35. Naim, M.F., Lenka, U. (2017). Talent management: a burgeoning strategic focus in Indian IT industry. *Industrial and Commercial Training*, 49(4), 183-188. https://doi.org/ 10.1108/ICT-12-2016-0084/FULL/PDF.
- 36. Nijs, S., Gallardo-Gallardo, E., Dries, N., Sels, L. (2014). A multidisciplinary review into the definition, operationalization, and measurement of talent. *Journal of World Business*, *49*(2), 180-191. https://doi.org/10.1016/J.JWB.2013.11.002.
- 37. Nojedeh, S. (2015). Identifying and Prioritizing the Indicators of Talent Management in Recruiting Radiology Technicians. *International Journal of Organizational Leadership*, *4*. https://papers.ssrn.com/abstract=3331815.
- 38. Noopur, N., Dhar, R.L. (2020). Knowledge-based HRM practices as an antecedent to

service innovative behavior: A multilevel study. *Benchmarking*, 27(1), 41-58. https://doi.org/10.1108/BIJ-10-2018-0329/FULL/PDF.

- 39. O'Brien, T., Ackroyd, S. (2012). Understanding the recruitment and retention of overseas nurses: realist case study research in National Health Service Hospitals in the UK. *Nursing Inquiry*, 19(1), 39-50. https://doi.org/10.1111/J.1440-1800.2011.00572.X.
- 40. Oaya, Z.C.T., Ogbu, J., Remilekun, G. (2017). Impact of Recruitment and Selection Strategy on Employees Performance: A Study of Three Selected Manufacturing Companies in Nigeria. *International Journal of Innovation and Economic Development*, 3(3), 32-42. https://doi.org/10.18775/IJIED.1849-7551-7020.2015.33.2003.
- Odubanjo, D. (2015). Employee retention strategies in Gauff Consultants (Nigeria) Limited. A case study on Gauff Consultants Nigerial Limited. https://esource.dbs.ie/handle/ 10788/2488.
- 42. Pagaiya, N., Kongkam, L., Sriratana, S. (2015). Rural retention of doctors graduating from the rural medical education project to increase rural doctors in Thailand: A cohort study. *Human Resources for Health*, 13(1), 1-8. https://doi.org/10.1186/S12960-015-0001-Y/FIGURES/3.
- Pandita, D., Bedarkar, M. (2015). Factors Affecting Employee Performance: A Conceptual Study on the Drivers of Employee Engagement. *Prabandhan: Indian Journal of Management*, 8(7), 29-40. https://doi.org/10.17010/PIJOM/2015/V8I7/72347.
- Pandita, D., Ray, S. (2018). Talent management and employee engagement a metaanalysis of their impact on talent retention. *Industrial and Commercial Training*, 50(4), 185-199. https://doi.org/10.1108/ICT-09-2017-0073/FULL/PDF.
- 45. Poorhosseinzadeh, M., Subramaniam, D. (2013). Talent management literature review. Australian Journal of Basic and Applied Sciences, 7(6), 330-338. https://www.researchgate.net/profile/I-D-Subramaniam/publication/250306503_Talent_Management_Literature_Review/links/5699e24d08aea14769438058/Talent-Management-Literature-Review.pdf.
- 46. Powell, M., Duberley, J., Exworthy, M., Macfarlane, F., Moss, P. (2013). Has the British National Health Service (NHS) got talent? A process evaluation of the NHS talent management strategy? *Http://Dx.Doi.Org/10.1080/01442872.2013.798533*, *34*(3), 291-309. https://doi.org/10.1080/01442872.2013.798533.
- 47. Rabbi, F., Ahad, N., Kousar, T., Ali, T. (2015). Talent Management as a Source of Competitive Advantage. *Journal of Asian Business Strategy*, 5(9), 208-214. https://doi.org/10.18488/JOURNAL.1006/2015.5.9/1006.9.208.214.
- Rodwell, J., Ellershaw, J. (2016). Fulfill Promises and Avoid Breaches to Retain Satisfied, Committed Nurses. *Journal of Nursing Scholarship*, 48(4), 406-413. https://doi.org/10.1111/JNU.12215.
- 49. Schreuder, R., Noorman, S. (2019). Strategic talent management: creating strategic value by placing top talents in key positions. *Development and Learning in Organizations*, *33*(1),

1-4. https://doi.org/10.1108/DLO-09-2018-0120/FULL/PDF.

- 50. Shaffer, F.A., Bakhshi, M., Dutka, J.T., Phillips, J. (2016). Code for ethical international recruitment practices: The CGFNS alliance case study. *Human Resources for Health*, *14*(1), 113-119. https://doi.org/10.1186/S12960-016-0127-6/FIGURES/4.
- 51. Sinclair-Maragh, G., Jacobs-Gray, N., Brown-Roomes, N. (2017). A case of talent management practices in motivating fast food service employees. *Emerald Emerging Markets Case Studies*, 7(3), 1-16. https://doi.org/10.1108/EEMCS-07-2016-0153/FULL/XML.
- 52. Sopiah, S., Kurniawan, D.T., Nora, E., Narmaditya, B.S. (2020). Does Talent Management Affect Employee Performance?: The Moderating Role of Work Engagement. *The Journal* of Asian Finance, Economics and Business, 7(7), 335-341. https://doi.org/10.13106/ JAFEB.2020.VOL7.NO7.335.
- 53. Subramaniam, A., Silong, A.D., Uli, J., Ismail, I.A. (2015). Effects of coaching supervision, mentoring supervision and abusive supervision on talent development among trainee doctors in public hospitals: Moderating role of clinical learning environment. *BMC Medical Education*, 15(1), 1–9. https://doi.org/10.1186/S12909-015-0407-1/FIGURES/1.
- 54. Taha, V.A., Gajdzik, T., Zaid, J.A. (2015). Analytical insight into selected talent management practices in Slovak health sector. *European Scientific Journal*. http://exclusiveejournal.sk/files/files/46/99/81/98b4e9ad666e429ab811cf2e0430f904/98b4 e9ad666e429ab811cf2e0430f904.pdf.
- 55. Thompson, H., Ahrens, L. (2015). Identifying Talent in Your Selection Decisions. *Nurse Leader*, *13*(4), 48-51. https://doi.org/10.1016/J.MNL.2015.05.011.
- 56. Trebble, T.M., Heyworth, N., Clarke, N., Powell, T., Hockey, P.M. (2014). Managing hospital doctors and their practice: What can we learn about human resource management from non-healthcare organisations? *BMC Health Services Research*, 14(1), 1-11. https://doi.org/10.1186/S12913-014-0566-5/FIGURES/1.
- 57. Turner, P. (2018a). Retaining Talent in Health Sector Organisations. *Talent Management in Healthcare*, 285-313. https://doi.org/10.1007/978-3-319-57888-0_11.
- 58. Turner, P. (2018b). The Boundaries of Talent Management. *Talent Management in Healthcare*, 65-95. https://doi.org/10.1007/978-3-319-57888-0_4.
- 59. Turner, P., Kalman, D. (2014). Make Your People Before You Make Your Products. In: Make Your People Before You Make Your Products. Wiley. https://doi.org/10.1002/9781119208068.
- 60. Tyskbo, D. (2019). Talent management in a Swedish public hospital. *Personnel Review*, 48(6), 1611-1633. https://doi.org/10.1108/PR-05-2018-0158/FULL/PDF.
- Vaiman, V., Scullion, H., Collings, D. (2012). Talent management decision making. Management Decision, 50(5), 925-941. https://doi.org/10.1108/00251741211227663/ FULL/PDF.
- 62. Veronesi, G., Kirkpatrick, I., Vallascas, F. (2013). Clinicians on the board: What difference

does it make? *Social Science & Medicine*, 77(1), 147-155. https://doi.org/10.1016/ J.SOCSCIMED.2012.11.019.

- 63. Wahba, M. (2015). Talent Management Practices Effect on Employee Engagement Applied in the Logistics Sector in Egypt. *World Review of Business Research*, *6*(2), 28-45.
- 64. West, M.A., Dawson, J.F. (2012). Employee engagement and NHS performance.
- Whysall, Z., Owtram, M., Brittain, S. (2019). The new talent management challenges of Industry 4.0. *Journal of Management Development*, 38(2), 118-129. https://doi.org/10.1108/JMD-06-2018-0181/FULL/PDF.
- 66. Williamson, D. (2011). Talent management in the new business world: How organizations can create the future and not be consumed by it. *Human Resource Management International Digest*, 19(6), 33-36. https://doi.org/10.1108/09670731111163518/FULL/PDF.
- 67. Wood, P. (2008). Continuing professional development in higher education : a qualitative study of engagement in the field of nursing and midwfiery. *Journal for the Enhancement of Learning and Teaching*. http://uhra.herts.ac.uk/handle/2299/6145.
- 68. Yener, M.İ., Gurbuz, F.G., Acar, P. (2017). Development and validation of a talent management measurement instrument. *Journal of Business Economics and Finance*, 6(3), 233-245. https://doi.org/10.17261/PRESSACADEMIA.2017.683.
- 69. Yi, L., Wei, L., Hao, A., Hu, M., Xu, X. (2014). Exploration on Construction of Hospital "Talent Tree" Project. *Cell Biochemistry and Biophysics 2014* 72:1, 72(1), 67-71. https://doi.org/10.1007/S12013-014-0405-7.