LITERATURE REVIEW ON TALENT MANAGEMENT EDUCATION IN THE INDIAN HEALTHCARE INDUSTRY

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ABSTRACT
Indian Healthcare industry is far-stretched and is looking forward to creating an additional 4.2 million Nurses by 2024. The demand is rising for tertiary and quaternary care, yet the conditions of the nurses remain poor. Improving the quality of nursing faculty has been the focus in recent years. A way to combat the pressure can be via Competency-based skill testing. Health-care companies work in an ever-changing environment. A competency-based approach can assist develop leadership management after recognizing and targeting health-care trends and issues. The study is structured to examine the evidence for Competency-based Talent Management. This paper consists of a systematic literature review, conducted to research Competence, Competency, Performance, Talent Management and Assessments. There is little understanding and adaptation of Competency-based workforce development. Availability of homegrown Competency Scales suitable to the Indian conditions and idiosyncrasies is not available. Due to colossal Nursing demand and high rates of Nurse iteration, investing in training, development, and using the latest psychological constructs is counterproductive. On the other hand, the Competency-based Talent Management Scale (CTMS) is almost universally used in different domains except for healthcare. Creating one will have far-reaching implications in the areas of learning, education, and development and developing qualitative nursing.
Keywords: Competence, Competency, Performance, Talent Management, Competency Scale, and Assessments.

Introduction

India, with a population of more than 140 billion (Census, 2011), sadly has a healthcare sector which is far-stretched and needs immense improvement to bring up the quantity and quality of the work force in this sector. The World Health Organization (WHO) recommends three nurses for every thousand people, but India has a disproportional ratio of only 1.7. To meet WHO standards, India must hire 4.3 million more nurses by 2024 (WHO, 2021).

The profession of a nurse is highly demanding, and each day comes with new challenges. They are expected to be kind towards patients and their families, be vigilant, attentive, monitor, plan, and coordinate all patient care activities in a complex, rapidly-changing health care environment that requires better technical abilities and rising patient service standards. They are the healthcare system's pillars, working diligently for each patient. They also constitute the majority of the health care personnel. Nurses are frequently misplaced among the broader hierarchy of patient care teams, primarily due to the nursing cadre's lack of leadership skills and abilities and the healthcare industry's organizational frameworks. The nursing profession continues to struggle for attention from mainstream healthcare investors and policymakers to bring about a sustained supply of qualified nurses and an improved work ecosystem (Vora, 2022).

The International Council of Nurses (ICN) issued its statement saying that having a sound healthcare system relies on the soundness of the nursing education in the country (ICN, 1969).

A huge problem associated with the healthcare industry, especially in India, is the gap between what is taught in the books versus what knowledge is handy in the real-life scenario (Chhugani & James, 2017).

Due to a shift in emphasis on service quality and the increasing demand for tertiary and quaternary care, the sector requires specialized and highly qualified personnel, such as physicians, nurses, and other paramedical personnel. Consequently, the demand for a skilled labor force, particularly nurses, will continue to rise every year. Multiple variables influence the availability of excellent nursing education, including the geographical

distribution of quality nursing education institutions. Currently, faculty shortages are severe in quantity and quality, and the curriculum does not reflect the industry's current demands. There is a shortage of emphasis on soft skills such as leadership and communication. Syllabus, outcome-based instruction, special training, standardized tests, licensing processes, and the continual availability of nursing education across the nation must be updated.

Literature Review

A systematic literature review approach provides a good foundation and details about theoretical advancements. Creswell (2009) defined a literature review as "a written explanation of journal articles, books, and other materials that reflects the historical and present condition of knowledge on the subject of the research inquiry." The steps followed in the literature review are to study the contribution of seminal work and important research papers. Based on the synthesis of the selected papers, it is possible to identify significant factors and relationships and conceptualize pre- and post-adoption models. Figure 1 shows the process adopted for the present study's literature review.

The present nursing education has some flows which should be corrected. Lindeman (2000) suggested a few changes that could be made in the nursing curricula. These suggestions included increased emphasis on how things are learnt ("reflective practice"), content should be seen as an example than as a fact, cultivation of social skills for better communication, long projects which delve deep in the topic, and assigning important role to technology.

Global Transformation towards Competency-based HR

Social and health care organizations work in a dynamic environment; thus, it is essential for them to foresee these changes in advance if they are to successfully adapt to them. Current HR management techniques are inadequate, but a competency-based paradigm will provide superior resources. With the cooperation of the Federation of International Hospitals, the Global Consortium towards the Professionalization of Management of Healthcare developed a Competencies' Directory to address this issue. Additionally, the Healthcare Management Institute of Ireland has made amazing accomplishments (Santiago, 2019).

Recently, the Royal Dutch Medical Association's Central College for Medical Specialties (CCMS) released instructions for the upgrading of all post-graduate specialty coaching programs. The recommendations offer a clear idea of broad capability domains for all specialties, which should assist professionals in designing training programs (Bleker, 2004).

In tandem with the transition of the present coaching program into a capability-based one, it is essential to select collateral assessment methodologies for these capabilities. Several old assessment methods can be used for this purpose, but it will be required to establish additional ways for assessing the clinical competency of residents in new competency domains (CanMEDS project, 1996).

Worldwide, nurse competency and its evaluation are ongoing topics in nursing instruction and practices that contribute to safe and qualitative nursing supervision. Assessments are vital for instructors, administrators, and nurses to determine the professional ability of nurses, and therefore their overall gaps in education and development (Hasson & Arnetz, 2008).

A study was conducted on 821 nurses, who were classified into five different levels, as per qualifications and responsibilities. A shift to the competency-based paradigm was tried and tested. The talent management was done as part of macro-management of the situation, wherein the job responsibilities, expertise, qualifications, and training and assessments were taken into consideration. Apart from these, the patients' and nurses' satisfaction were surveyed. It was found that after the implementation of a competency-based paradigm for talent management, the patients and nurses reported greater satisfaction ($p < 0.01$). The study claimed that the competency-based talent management programme gives a clear direction when it comes to career planning of nursing staff (Chang, Yang, & Yuan, 2014)

Lenburg (1999) created the Competency Outcomes and Performance Assessment (COPA) Model based on considerable work with the New York Regents College of Nursing Program (1973-91) and various other organizations, as well as research connected to them. It was a comprehensive yet targeted paradigm that needed the combination of practice-based objectives, correlated learning techniques, and competency implementation evaluation.

By highlighting the results of education, Competency-Based Education provided a substantial, shift in judging the educational program efficacy.

In agreement, Ten and Scheele (2007) say, "One can only realize improvements in global health through the development of an educated workforce to elevate health and care for those with the illness. An increase in the attention on capability-based education will be helpful for the preparation of better health professionals".

The purpose of nursing regulation is to ensure public safeguard and patients' safety. As the rate of technical and scientific progression quickens, gaining, maintaining, and developing professional competence is one of the greatest difficulties for all healthcare practitioners (Sheets, 1999).

Continuous competence is a crucial regulatory concern for nursing boards, according to the National Council of State Boards of Nursing (NCSBN). NCSBN explains that competence means a utilization of knowledge and the interactive, psychomotor, and reasoning abilities expected for the practice position within the framework of public health in order to have terminology relevant to all practitioners at all levels of practice (NCSBN, 1996).

CAC's last resource is a five-step prototype for the respective practitioner, which comprises regular periodical valuation, the formulation of a customized plan, the execution of a personal plan, recording of all processes, as well as the demonstration and evaluation of competence (Vora, 2022).

Analysis of research papers used in Literature review:
With the help of a systematic review and various search criteria, the researcher identified a pool of 207 research papers for literature review. Conceptual papers were not considered for the review and were studied to understand the literature advancements better.

Please refer to Table 1, the researcher, upon arranging the sequence of publishing years, finds that the publishing of 49% of the research work took place during the years 2000 and 2010, and the rest of the 51% from 2011 to 2020 the total pool.
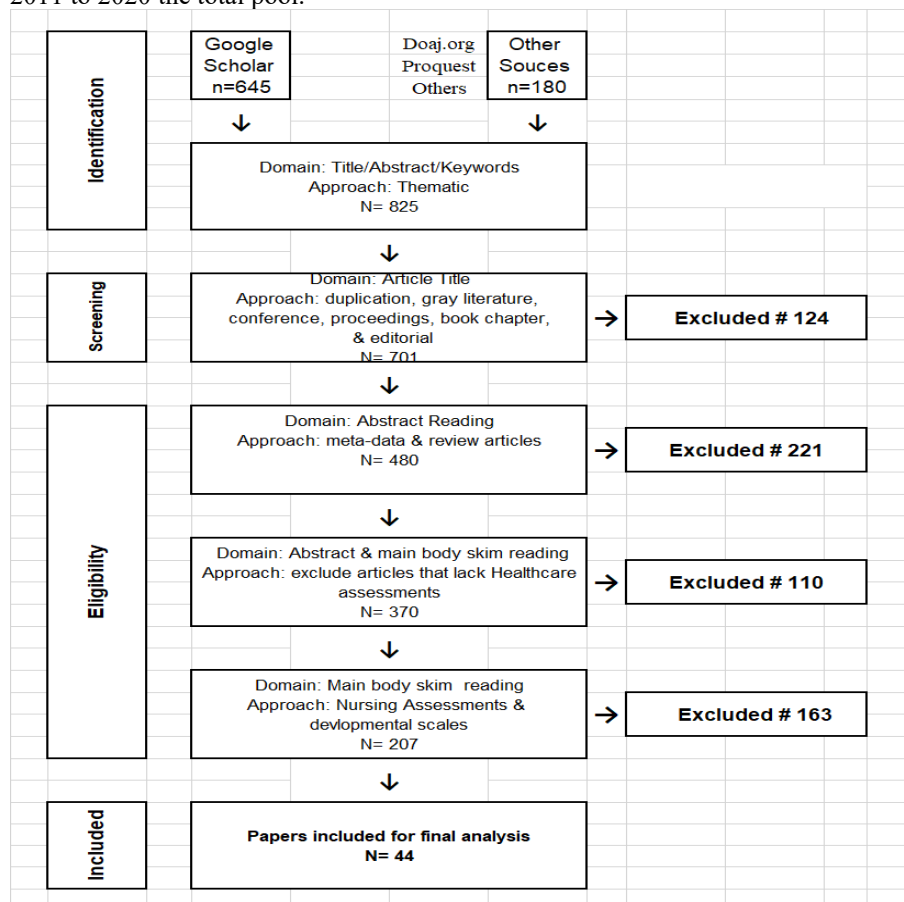

Figure no. 1: Literature Review (Self-generated by the researcher)

#	Categories	# of Literature Reviews	%
1	Competence	131	63
2	Competency Mapping	29	14
3	Talent Management	16	8
4	Competncy Assessment	14	7
5	Developmental Scale	10	5
6	COVID19	7	3
	Total	**207**	**100**

Country	# of Literature Reviews	%
USA	54	26
Australia	20	10
UK	15	7
Canada	11	5
Finland	13	6
Rest of the World	94	45
Total	**207**	**100**

Citations	Across 44
Average	166
Highest	1081
Lowest	16

Type of Data	# of Literature Reviews	%
Primary	132	64
Secondary	75	36
Total	**207**	**100**

Source of Data	# of Literature Reviews	%
College	139	67
University	38	18
College & University	30	14
Total	**207**	**100**

Year of Publication	# of Literature Reviews	%
< 2000	7	3
2001 - 2005	52	25
2006 - 2010	49	24
2011 - 2015	53	26
2016 - 2020	46	22
Total	**207**	**100**

Table no. 1: Classification of Literature Review Data

Of the total research papers, the subject 'Competence" formed 63% of the load, followed by 'Competency Mapping' at 14% and Competency Assessment at 7%. The basis of a foundational building block of creating a developmental scale associated with performance and talent management is 'Competence.' The rest of the categories included Talent Management at 8%, Development Scale at 5%, followed by Covid19 at 3.

From the pool, 26% are USA based, followed by Australia at 10%, the United Kingdom at 7%, Canada at 5%, and Finland at 6%. The rest of the world contributed to the remaining 45% of the papers.

In terms of sample size, 50% of the studies have a sample size range of 100 to 299 respondents, followed by a sample size exceeding 400 respondents (25%).

64% of the data collected is from primary sources, with secondary data at 36%. The research articles have been cited 166 times, with a high of 1081 and a low of 16.

Research projects were conducted independently by colleges, Universities and sometimes combined. The majority at 67% was achieved by colleges, with universities at 18% and combined projects at 14%.

The researcher conducted a critical analysis, collating all significant factors identified as a summary.

Significant factors and relationships identified
Major Factors identified
1. Competence- Competence is a collection of observable traits as well as abilities that boosts and enhances the effectiveness or execution of a task. (White,1959). Some researchers define "competence" as a mix of functional and academic knowledge, cognitive abilities, conduct, and values utilized to improve performance or as the state or quality of being correctly or adequately competent and able to fulfill a particular position. Competency refers to the approach and manner in which an individual completes a particular activity. A person's actions reflect competence. It seeks out the method used to complete a given training or obligation. It infers that the individual's personality and behavioral traits are evaluated to determine his level of competency. Performance, that is, Job performance is a role's postulated conception or requirements in the workplace. There are two forms of work routine: assignment and contextual. Ability to perform on a given assignment depends on cognitive capacity, whereas performance in a given situation depends on personality (Robertson, 2015). The behavioral responsibilities acknowledged in job descriptions, and compensation schemes are reflected in task performance. These are additional jobs that are indirectly tied to institutional success.

Context-specific actions are culture-based and add supplementary communicative functions that are not documented in job descriptions and are compensated.

2. Talent - Individual talent in companies is typically seen as "unique" or "exceptional." According to Thorne and Pellant (2006), a gifted person is: "Someone with a greater skill who accomplish tasks with ease and elegance. A gifted person has a special impression in their abilities that others aspire to match and from which mediocre mortals get motivation". He says that brilliant individuals may execute an activity to the extent that their accomplishments rank them in the top 10 percent of their peers. Competency Assessment is the evaluation of a person's abilities in relation to their work requirements. In a competence model, these requirements are specified. To be useful, competence models should include just the activities and abilities essential to the role's performance, not every activity the employee performs (which comes from a traditional job task analysis). The evaluation is conducted on the indicated activities and abilities for which a rating is chosen based on how the individual performs the task, which defines their degree of competency. In other terms, a competence evaluation evaluates how (behaviors) a person performs a task (task or skill). The individual's chosen proficiency level is then compared to the target level to identify proficiency or skill gaps for each activity and ability. (Meyers, 2013)

3. Scale Development- Although a search of the literature found a number of measures for measuring nursing competence, none have been designed for Indian nursing. The majority of the instruments were created by modifying present tools or based on the investigator's notional study. This approach may have restrictions in that it cannot estimate a phenomenon's fundamental properties. It is not possible to quantify the skills of nurses working in the Indian healthcare and hospital system in relation to their strengths and limitations.

Some of the well-known scales have been researched: -
a. The Nurse Competency Scale (NCS) is a seventy-three-item scale disseminated into 7 categories: assisting role (seven items), tutoring–training (16 items), analysis functions (seven items), managing environments (eight items), therapeutic treatments okay (Ten items), quality assurance (6 items) and job role (Aydin & Hicdurmaz, 2019)
b. The Six-Dimension (6D) Scale consists of Leadership (5 items), critical care (7 items), instructional/collaboration (11 items), planning (seven items), interactive relations (12 items) and professional growth (10 items). All of these are Fifty-Two items grouped into 6 subscales (Schwirian,1978).
c. Competency Inventory for Registered Nurses (CIRN) is the nursing capability context or tool for Chinese registered nurses. Seven categories were recognized. (Liua, 2006).
d. The holistic nursing competence scale (HNCS)- It's a seven-point Likert-type scale that was established by Takase & Teraoka (2011). The first part consists of the 'General Aptitude'. The second Part analyses the ability of a nurse. involves staff training and management, practicing with ethics, nursing care with team and professional growth. It has 36 items in all.
e. Singapore Nursing Board's Core Competencies- The Core Competencies are separated into four categories. Each category is an organized assortment of skills. Each group represents a core function/functional area that a registered nurse must accomplish. Indicators of competency denote sub-functions of a competency standard. Competence category are Professional, Legal, Ethical Nursing Practice, Management of Care, Competence category, Leadership, and Competence category (Singapore Nursing board, 2018).

Significant relationships observed:
Along with the list of constructs mentioned earlier, our literature study found support for various inter-variable relationships. Those relationships, their significance, and empirical validations are discussed further.
1. Competence & Competency- Competence relates to an individual's ability to do a certain activity, whereas competence refers to the technique followed by the individual to complete the task. Competence is evaluated based on a person's abilities and knowledge, whereas competency focuses more on evaluating an individual's behavior. Competence is therefore dependent on skills, whereas competence is based on behaviors. Competence emphasizes skill sets, such as Leadership, time management, communication, and interpersonal skills, among others (Yadav, 2022).
2. Talent Management- ASTD Staff (2007) defines managing talent as "a comprehensive method to enhancing human capital that allows an organization to influence overall results by constructing culture, involvement, abilities, and volume through aligned talent procurement, progress, and deployment processes." Management of talent ensures that a business recruits, keeps, motivates, and develops the individuals it need. According to (Stockley, 2007), skill management is a planned effort to hire and develop individuals with the aptitude and skills to satisfy all demands of a business.

3. Competency Model - A competence model is a collection of essential skills and behaviors for optimal work performance. When competence models are utilized to influence individual work behavior and professional growth, they may be crucial in attaining organizational success (Wuim-Pam, 2014).
4. Global Competencies Analysis - A detailed, in-depth global analysis of competencies related to Nursing in the Healthcare domain revealed several idiosyncrasies. The local governance, challenges, culture, laws, and healthcare practices gave way to a set of competencies that had local relevance; please refer to Table 2. There are many more individual cores, distinct and generic competencies related to different kinds of Nurses. Still, the focus was to research only "generic" Competencies useful for Nurses with more than six months of experience.

Data Point 1	Data Point 3	Data Point 6
Interpersonal understanding	Helping	Knowledge
Commitment	Diagnostic functions	Interpersonal relationships
Informational gathering	Managing situations	Collaborate with other professionals
Thoroughness	Therapeutic interventions	Practice ethically
Persuasiveness	Ensuring quality	Expand Professional Capacity
Compassion	Work role	Ensure and deliver high-quality nursing
Comforting		Understand needs
Critical thinking	Data Point 4	Support decision making
Self-control	Data Collection	
Responsiveness	Leadership	
	Communication	
	Legal & ethical practice	Final Analysis
Data Point 2	Professionalism and implementation	Nursing Care
Clinical judgment	Critical Thinking	Interpersonal Relationship
Interpersonal relationships		Critical Thinking
Planned nursing implementation	Data Point 5	Professsional Development
Evaluation of care	Ethically oriented practice	Compassion
Care coordination	Professional development	Ethical & Legal
Health promotion	Professional Nursing Practice	
Ethical practice	Leadership and Nursing Management	
Professional development	Professional Development	
Continuous learning	Ethical Nursing Practice	
Risk management	Legal Nursing Practice	
Quality improvement		

Table no. 2: Global Competency Analysis Data

The Final Analysis is an attempt to study all possible unique, distinct sets of competencies and identify generic ones useful for any Nurse across India.

Significant Observations from Literature Review:

Two hundred seven (207) research papers were selected based on various parameters. In the next step, significant factors and relationships identified in these studies were studied and discussed. Critical analysis of the entire research work under the study gives us the following clues:

1. The literature study was based on several attributes that build competency-based talent management. The attributes Competence, Competency, Performance, and Talent, are connected and have several overlaps. Some are a combination of a few, and others are an outcome of a single or a few attributes combined.
2. There are several relationships between a few, like Competence and Competency. Talent management is inclusive of both competencies, Talent & performance.
3. A competence model is a compilation of capabilities that define effective performance in a certain work environment. Human resource services such as recruiting and hiring, education and training, and performance management are based on competency models.
4. A "competency framework" is a structure that describes each skillset (such as solving problems or management of people) necessary of employees or members of an organization.
5. Out of 207 papers, 113 or 55% of the research papers were from USA, Australia, UK, Canada & Finland. Compared to other countries, we found a lesser amount of research work done in India; India has six research papers on the topic or less than 3%.
6. Competency-based Talent management as workforce recruitment and development tool has been in existence for a few decades, but its application in the Indian Healthcare domain is not prevalent.
7. The nursing education needs a boost by adoption of a talent-management education strategy.

Focus of Study	Research Papers	Source of Data Collection			
	Number	Primary	Secondary	Primary	Secondary
Competency Mapping	16	Zhang et al,2001)), Kahya & Oral et al,.2018), Hengstberger et al.,2007), Meretoja et al.2002), Govt of Singapore. 2018), Yoder et al. (2003), Tzeng & Ketefian.2007), Deanna 2006), Miwon,2006)), Meretoja & Koponen, 2012), Liou & Yu Cheng,2013), Kahya & Oral, 2018), O'Connor et al, (2001,),	Mowinski et al. 2007), Fukada, 2018), McGrath et al.,2006),	13	3
Competence	15	Sharp et al, (2015), Salonen et al., (2007), Natalija et al., (2011), Crary (2013), Wilson et al., (2012), Gebbie & Qureshi. (2002), Hart et al., (2006), Zhang et al., (2001)	Watson et al. (2002), Cowan et al. (2005), Meretoja et al. (2002), Meretoja & Leino-Kilpi. (2001), Flinkman et al. (2017), Smith et al. (2010)	9	6
Talent Management	6	Karabasevic et al. (2015), Claudia et al. (2006), Makarius & Srinivasan et al. (2017), Zolfani et al. (2018),	Cabellero et al. (2010), Meyers et al. (2018),	4	2
Scale Development	4	Meretoja et al. (2004), Liua et al. (2006), Aydin & Hicdurmaz(2020), Morolong et al.(2005),	NA	4	0
Covid	3	Bradbury-Jones et al. (2020), Schwerdtle et al. (2020),	Morin (2020),	2	1

Table no. 3: Summary of Research Papers reviewed

Framework for Competency-based Talent Management

Since businesses live in a continuous state of change, elasticity, and uncertainty, they cannot depend simply on the job- or task-based tactics for finding and training competent and productive workers. Naturally, such talent management systems entail defining and evaluating a core set of important knowledge, skills, talents, and other traits experimentally connected with efficiently performing critical work functions in a specific position.

The extensive approval of competency-based personnel management stems from its natural connection to the ultimate people management objective: effectively establishing and sustaining competent employees. The significance is that by employing individuals with the suitable competencies (behavioral inclinations and skills), an organization may raise its workforce's total competence and capacity to do the task at hand. The potential to

associate abilities inside individual workers to prove competence on the job is particularly valuable to firms that have historically struggled to measure performance quality.

Competency-based people management may qualify development programs in service businesses. Such an approach to talent management may aid firms in identifying and recognizing high performers while recalling those who require improvement. By approving a shared competency model, an organization may offer possibilities for learning and growth that are not governed by the narrow focus of task-based practices. Competency-based screening and development can support a longer-term employee-company fit by enhancing the possibility that individuals possess more of the qualities and behavioral "tools" required for success in various organizational jobs.
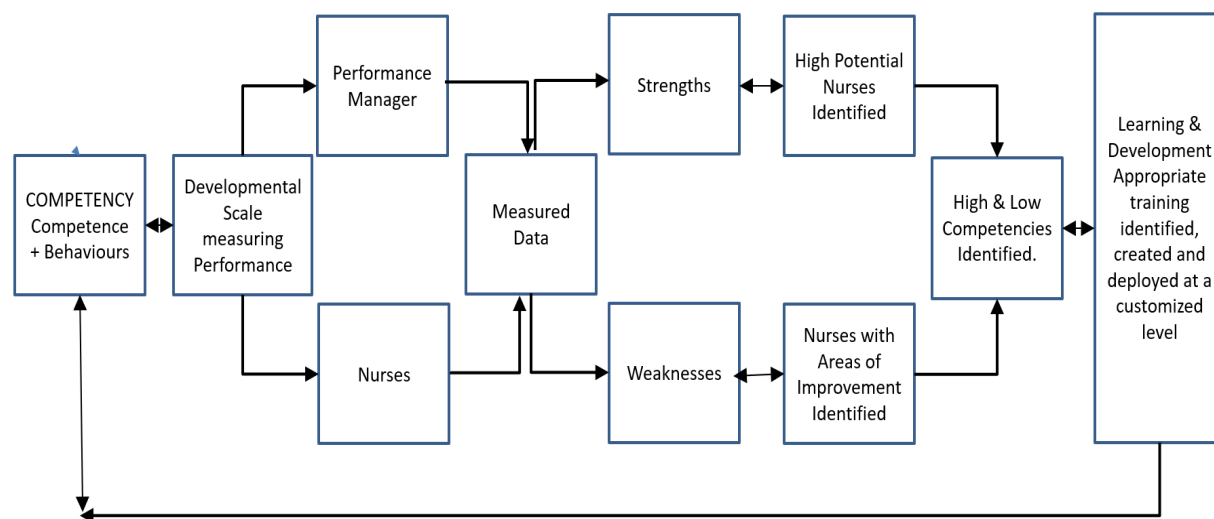

Figure no. 2: Competency-based Performance Management (Self-generated by the researcher)

Conclusion

New processes and tools must be investigated in order to develop new solutions to present issues, therefore enhancing organizations via the promotion of management and transformation abilities; leading to the selection of a mechanism to assist implementation of the process, efficiency of the organization, management of resources, planning, and other functions. To make this feasible, it is necessary to construct high-performance, dedicated teams to include teamwork and cooperation across companies and personnel through the cultivation of relational competences.

The research was aimed at studying competency-based talent management transformation across the globe and its adaptation in India. For review, about 207 research papers related to

the selection of Competency Scale development-related characteristics and characteristics was based on their contributions to the base of knowledge and reference counts. In conclusion, 44 research publications added to the corpus of relevant information.

Major factors were identified on the basis of which the scale was developed. The most important amongst them are Competence, Competency, Performance, Talent, & Competency Assessment. Significant relationships across and amongst the attributes were observed. Along with the list of constructs mentioned earlier, our literature study found support for various inter-variable relationships. Those relationships, their significance, and empirical validations are discussed further.

Competence & Competency- Competence is therefore dependent on skills, whereas competence is based on behaviors. Competence emphasizes skill sets, such as Leadership, management of time, communicating, and interpersonal skills, among others.

Management of talent guarantees that a business attracts, keeps, inspires, and develops the necessary individuals. Both Competence and Competence are essential components of Talent.

Global Competencies Analysis: - A detailed, in-depth global analysis of competencies related to Nursing in the Healthcare domain revealed several idiosyncrasies. It was apparent that India, due to its diversity, culture, vastness and being a third-world country, had competency needs quite different from the rest of the world.

COVID-19: The safety & hygiene of Nurses became important. In nations throughout the world, nurses are faced with the incredible challenge of responding to an unprecedented, extremely unpredictable, and ever-changing scenario. As prominent nurse researchers and clinicians, Nurses concentrate on crucial components of the pandemic reaction, going from population to systems to individuals and encompassing both therapeutic and compassionate concerns.

A survey of the literature discovered a number of measures for measuring nursing competence, but none have been designed for Indian nursing. The majority of the instruments were created by modifying existing measures. This approach cannot quantity a phenomenon's fundamental properties. It is impossible to determine the strengths and shortcomings of nurses working in the Indian healthcare and hospital system in order to assess their competence.

Qualitative & Quantitative Scale Development suggested a Delphi Method designed to gather information from a group of experts for decision-making purposes. It has been stated that Delphi is an approach that is qualitative, quantitative, and mixed method. The anonymous collecting of narrative group viewpoints, carefully organized nature of the procedure, and statistically documented results make it impossible to categorize the technique as a particular method.

Limitations & Further Scope

This research is a synthesis of the current body of information pertaining to talent management based on the competence scale. It provides no empirical input. Therefore, the researcher would want to test and evaluate the suggested models in hospitals across India in order to comprehend Talent and Competency gaps. Insight into Competencies & learning and growth outcomes, particularly in the Indian context, may be gained through testing the suggested models on a broad and demographically varied sample.

It is imperative that novel methods and resources be investigated in order to provide innovative answers to pressing issues. As a result, it will boost the value of businesses by encouraging to develop, manage and transform skills, which leads to the selection of management mechanisms that improve the efficiency and effectiveness of process implementation, resource management, strategic planning, and other related activities. To achieve this goal, it is essential to construct high-functioning, fully-committed teams to include collaboration and cooperation across companies and personnel through the cultivation of relational competences.

The researcher finally identified major factors which were the basis of developing the scale—the most important amongst them being Competence, Competency, Performance, Talent, & Competency Assessment. The researcher observed significant relationships across and amongst the attributes. Along with the list of constructs mentioned earlier, our literature study found support for various inter-variable relationships. Find the discussion of those relationships, their significance, and empirical validations further.

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