Values Based Recruitment

There are two important workforce challenges faced by the health and social care sector:

- To recruit people with the right values and behaviours to undertake important roles in the right way
- To meet the increasing demands of a growing sector.

The key questions that all health and social care employers are asking are: how do we find and attract sufficient applicants for vacant posts, and how are they checked that they are suitable for the work and are likely to stay, develop and progress?

High turnover rates, particularly in the first few weeks following appointment, are often an indication that people have come into care and support roles but do not have the right values to sustain them in those roles. Individuals whose values are aligned with the organisation in which they work, are generally more motivated and engaged, have better performance and are much more likely to stay. High turnover leads to a lack of continuity – a factor that counts highly with people who use health and social care services.  

Definition of Values

4.1 The Oxford dictionary defines a value as,

“…a principle or standard of behaviour, one’s judgement of what is important in life”

Values are important and lasting beliefs or ideals, usually shared by members of a culture about what is good or bad and desirable or undesirable. Values have a major influence on a person’s behaviour and attitude and serve as broad guidelines in all situations. It is an individual’s values that will determine their behaviour in most situations.

4.2 The following are five personal values that characterise the most effective members of high-functioning teams in healthcare, suggested by the Institute of Medicine (https://www.nationalahec.org/pdfs/VSRT-Team-Based-Care-Principles-values.pdf)

- **Honesty:** Team members put a high value on effective communication within the team, including transparency about aims, decisions, uncertainty, and mistakes. Honesty is critical to continued improvement and for maintaining the mutual trust necessary for a high-functioning team.

- **Discipline:** Team members carry out their roles and responsibilities with discipline, even when it seems inconvenient. At the same time, they are disciplined in seeking out and sharing new information to improve individual and team functioning, even when doing so may be uncomfortable. Such discipline allows development and an
ability to stick to their standards and protocols even as new ways are sought to improve.

- **Creativity:** Team members are excited by the possibility of tackling new or emerging problems creatively. They see errors and unanticipated bad outcomes as potential opportunities to learn and improve.

- **Humility:** Team members recognise differences in training but do not believe that one type of training or perspective is uniformly superior to the training of others. They also recognise that they are human and will make mistakes. Hence, a key value of working in a team is that fellow team members can rely on each other to help recognise and avert failures, regardless of where they are in the hierarchy.

- **Curiosity:** Team members are dedicated to reflecting upon the lessons learned in the course of their daily activities and using those insights for continuous improvement of their own work and the functioning of the team.

The following reports on NHS hospitals in the UK are relevant in considering the values required to work in health and social care.

**The Francis Report (Feb 2013)**

The Francis Report was the result of a public inquiry into the events and failings at Mid-Staffordshire Foundation Trust. The inquiry examined how poor care at Mid-Staffordshire was allowed to happen between January 2005 and March 2009, and why none of the organisations responsible for regulating or managing the Trust spotted problems sooner. The report identified that the failures at Mid-Staffordshire was not limited to the organisation specifically:

> ‘Unfortunately, echoes of the cultural issues found in Stafford can be found throughout the NHS system. It is not possible to say that such deficiencies permeate to all organisations all of the time, but aspects of this negative culture has emerged throughout the system.’

According to Francis the NHS should:

> ‘Recruit and train staff to demonstrate the right values and behaviours – and to challenge colleagues who do not – so that we can ensure the quality of care is as important as the quality of treatment.’

The Francis Report identified common features of a negative culture which were in short:

- Lack of openness to criticism, defensiveness
- Lack of consideration for patients
- Looking inwards not outwards
- Secrecy
- Misplaced assumptions about the judgments and actions of others
• Acceptance of poor standards
• Failure to put the patient first in everything that is done

_The Keogh Report (July 2013)_

Sir Bruce Keogh, NHS Medical Director for England, reviewed the quality of care and treatment provided by those NHS Trusts and NHS Foundation Trusts that are persistent outliers on mortality indicators. A total of 14 hospital trusts were investigated as part of his review.

In his report, Sir Bruce Keogh laid out 14 ambitions for a NHS hospital to embrace going forward. Below one ambition is highlighted that can be directly addressed by the implementation of values-based recruitment;

‘All NHS organisations will understand the positive impact that happy and engaged staff has on patient outcomes including mortality rates, and will be making this a key part of their quality improvement strategy.’

_Value Based Recruitment_

“Values drive all behaviour”

9.1 Value based recruitment suggests the best way to recruit is not from candidate’s ability to answer competency based interview questions but to seek out their values and recruit those whose are aligned with the organisation. This would lead to higher engagement levels and staff will be more committed to achieving the aims and objectives of the organisation, above and beyond their contractual requirements. (CIPD 2012 – Talent Management) In terms of nursing and social care staff, clinical knowledge should already be at a desirable level, as candidates will have to meet certain shortlisting criteria an application stage, namely degree level education in the related field.

The National Skills Academy for Social Work (https://www.nsasocialcare.co.uk/values-based-recruitment-toolkit) suggest it is wise to remember although any recruitment method is not 100% guaranteed to select the right person every time as it is merely only a predictor of future behaviour, we must seek to adopt recruitment methods that have the highest chance of predicting the highest potential of future behaviour and performance.
Values in Health and Social Care can mean:

<table>
<thead>
<tr>
<th>Compassion</th>
<th>Courage</th>
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<tr>
<td>Respect</td>
<td>Responsibility</td>
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<td>Empathy</td>
<td>Imagination</td>
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<tr>
<td>Treating people with dignity</td>
<td>Adaptability</td>
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<tr>
<td>Integrity</td>
<td>Responsibility</td>
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These values should ideally underpin all the training, skills and competences that people have. They are the kinds of values that make the difference in the delivery of care and support services. Recruiting people with these values is about having the right people in place from the start, who will not just do the right thing but do it in the right way, so that the Trust can deliver, or obtain, truly person-centred services.

The easiest way to find out about someone’s underlying values is to ask them about how they behave in their everyday lives. People experience others’ values through their behaviours, and a good indicator of how people will behave in the future is how they have behaved in the past.

Some recommendations when recruiting for the right values suggest it is important to:

- Design job application forms in a way that asks candidates to evidence their past behaviours
- Use the kinds of questions at job interviews that ask candidates to give examples of how they’ve behaved in the past

Get candidates to undertake a personality profiling questionnaire, to provide you with some indicators and points to discuss around behaviours at the interview.

**Situational Judgement Tests (SJTs)**

Under the umbrella term of Value Based Recruitment, there are various options that can be used to recruit through values. Situational judgement tests are one such method. They can be completed either online, or by sitting a physical paper-based test in a controlled environment.

Situational judgement tests do not directly measure an applicant’s ability to perform job-relevant tasks but rather rely on self-reports of what the respondent feels he/she would or should do in a series of job-relevant situations. They are measurement methods that present applicants with job related situations and possible responses to these situations. Unlike situational interviews, responses are captured in a multiple choice formant that can be mechanically scored.
Situational judgment tests are designed to assess an applicant's judgment regarding a situation encountered in the workplace by presenting respondents with work-related situations and a list of plausible courses of action. Respondents are asked to evaluate each course of action for either the likelihood that they would perform the action or the effectiveness of the action.

Situational judgement tests are a great method of recruitment and selection. Although it may concern some to recruit solely on a test, it is recommended that SJTs can be used as a shortlisting tool that can reduce numbers that go to interview by creating a pass mark. They can be combined with both clinical and situational judgement questions to get broad feel for the candidate’s clinical knowledge and value base. Once short-listed from the SJT candidates can then be invited to attend a value based, probing interview.

10.2 Constructing the Question for SJTs

While questions will be mainly scenario based in relation to the post being selected the method of response can be varied. This variation will give a deeper insight into the candidate’s way or working and reduce the chance that a candidate may ‘get lucky’ and select the correct response without actually having the appropriate knowledge.

It would be useful to vary this to include:

- **Correct answer**: Choosing one option from a list of options as the answer
- **Most and least likely responses**: which answer is the most likely action and which answer is the least likely action
- **Rating/ Ranking scales** i.e. list a number of responses to the question and ask the candidate to rate in order the appropriateness of each response (1 = least appropriate/ effective – 5= most appropriate/ effective). Research has shown that by using a rating scale assessors can significantly improve the validity of the tests in predicting applicants performance compared to using most and least likely responses, a validity improvement of up to 1.7 times

**Scoring the Answers**

As tests are often constructed to contain no definitive right or wrong answer consideration must be given to how they will be scored. There are three ways of scoring a test as below:

- **Empirical scoring** is when answers given are scored according to any benchmarking that has been completed to ensure answers are consistent with the standards currently in place or expected.
- **Theoretical scoring** is used when the options available reflect the theory, this allows answers to either be scored as correct based on the theory or incorrect based on the theory or lack of or theoretical support
- **Expert based scoring** is when a key is created based on the answers expected by the relevant subject experts. More than one expert should be consulted and an agreement attained as to the suitable answers

It is recommended that expert based scoring is implemented when running situational judgement tests.

Further to this it is recommended that a bank of questions be devised and each test should use approximately sixty questions to be covered within a two hour session. The length of each test can be altered depending on the needs of the service.
In relation to Value-Based Recruitment, situation judgement tests are an option of how to determine an applicant’s value base. If a team of HR professionals and clinical staff are able to create a bank of questions that are designed to assess both the clinical knowledge and values of prospective employees, a marking criteria can be created to rank candidates to either be placed onto a waiting list or shortlisted for interview.

Examples of Situational Judgement tests can be seen in Appendix 1

**Value Based Interviewing (VBI)**

Similar to situational judgment tests, value based interviewing is another option to recruit by values under the umbrella term of Value Based Recruitment.

Value Based Interviewing is a way of helping organisations to recruit the most suitable people to work in health and social care. It helps employers assess the values, motives and attitudes of those who are applying for jobs. It focuses on ‘how’ and ‘why’ an applicant makes choices in work and seeks to explore reasons for their behaviour.

The VBI method builds on good recruitment and safeguarding practice. It is not a substitute for good pre-employment checks or sound general recruitment. It relies on an organisational commitment to high standards of safer recruitment and staff training from the top and a culture where clients and service user’s safety and wellbeing are paramount.

The need to improve training around the selection of candidates to work within health and social care has been highlighted by a number of official reports including the Francis and Bamford Reports, Choosing with Care (Warner, 1992 - an inquiry into the abuse of children in residential homes), and the serious case review into abuse by nursery worker Vanessa George (2009).

**What are the benefits of VBI?**

Managers who use VBI have more in-depth information on which to make decisions about candidates' suitability. It provides managers with a true understanding of, and insight into, candidates' values and behaviours and how they are aligned with those of the organisation.

By appointing people using VBI an organisation is demonstrating its ongoing commitment to the values and behaviours which help create a safer environment for service users. VBI helps select candidates who have positive safeguarding attitudes and values, and who are therefore likely to be more effective in identifying and addressing safeguarding issues at work.
How does a VBI work?

The VBI interviewers will select four to five questions that allow them to use the organisation's values and behaviours to explore a candidate's suitability to work within Health and Social Care. They use active listening skills and a range of questioning and probing techniques to explore a candidate's answers in-depth during the interview, which normally should take 45 to 60 minutes. Interview rooms should be set up in a more relaxing, less formal style for conducting a VBI.

Examples of value based interview questions can be seen in Appendix 2

Conclusion

An individual’s values drive their behaviours. In a work situation, it is the values of a person that will determine what action they take, not what they said or done in an interview. In order to get the right behaviours from staff, an organisation must recruit those that display values which align to that of the organisation. It is extremely difficult to get to know the ‘real’ person from a short 20 minute interview. If there is scope during the interview to ask the candidate ‘why’ and ‘how’ it gives the manger a much broader picture of that person and what they would be like in the working environment. Staff whose values align with their organisation are much more likely to have better performance, higher levels of engagement, and go above and beyond their contractual requirements, as well as much more likely to stay within the organisation. Patient safety, quality and experience will be significantly increased when being looked after by engaged, committed and motivated staff.

Values-based interviews aim to ask candidates about how they behave in their everyday lives. People experience other’s values through their behaviours, and a good indicator of how people will behave in the future is how they behave in the past. This is foundation of value based interviews.

Further Reading

Further reading and information can be found at the follow websites

- NSPCC

- The Health Foundation

- Oxford University Hospitals Delivery Plan
<table>
<thead>
<tr>
<th>Value</th>
<th>Leading Question</th>
<th>Follow-up Questions</th>
<th>Key Criteria</th>
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<tbody>
<tr>
<td>Compassion</td>
<td>Give me an example of a time when you were particularly perceptive regarding a patient’s feelings and needs? We all find ourselves in stressful situations at work when keeping in a positive or compassionate attitude is most useful. Tell me/us about such a time. Tell me about a time when you were under extreme pressure and remained calm, compassionate and focused at work. Tell me about a time when your active listening skills really paid off in regard to a patient’s feelings or needs. Perhaps a situation when others missed a key idea or issue. Some situations with patients require us to express ideas or opinions in a very tactful and careful way. Tell me/us about a time when you were successful with this particular skill. Tell me about a time when you were sensitive or compassionate to a patient in an emotional or tense situation.</td>
<td>Describe what you did What was the impact for you? For the patient? How did it turn out? How has this helped you in your job? What was the result? Would you have done anything differently? What did you do? What was the outcome? How did they react? What steps did you take?</td>
<td>Taking time to listen Observant of non-verbal cues Observant of patients’ needs Going the extra mile to make a difference Linking job duties with patient experience</td>
</tr>
</tbody>
</table>
| Trust | Tell me what steps you personally take to build trust with your supervisor and co-workers?  
What actions would you take if you received feedback to suggest that your own actions were not seen to be trustworthy?  
Describe a situation where you helped motivate someone to improve his or her performance  
Describe a situation in which you forecasted a problem and prepared a strategy for handling it.  
Tell me about a time when you had to make a split second decision. What skills did you use?  
Tell me about a time when you went the extra mile to meet the needs of a patient. | What has been the impact on your working relationship with your supervisor, co-workers?  
What was the outcome?  
How did it turn out?  
How did you manage it?  
What was the issue? | Commitment to ‘walking the talk’  
Awareness of the importance of relationship building  
Recognition that trust works both ways in effective relationships |
|---|---|---|
| Integrity | Can you give an example of a situation when you saw someone at work stretch or bend the rules beyond what you felt was acceptable?  
Tell me about a time when you felt compelled to immediately address a difficult situation with your supervisor when others wouldn’t.  
Tell me about a time when you felt compelled to express an unpopular viewpoint to maintain your integrity.  
Tell me about a time when you had to speak up (be assertive) in | What did you do?  
What lead you to take the action that you did?  
What was the consequence of taking the action you did?  
What happened?  
What did you say and how did you | Willingness to hold others accountable  
Willingness to do the right thing, however difficult  
Willingness and commitment to put patient care and safety first. |
| order to get a point across that was important to you or crucial to your patient/  |
| Tell me about a time in your job when you accommodated the patient even though it was more work for you or went against your instincts. |
| Tell me about a time when you felt it would benefit the situation to disregard structure or formal processes to achieve a better outcome |
| say it? |
| What was the result? |
| What obstacles or barriers did you discover? |
| How did you overcome obstacles and barriers? |
| How did it turn out? |
Appendix 1 – Situational Judgement Tests

In Situational Judgement Tests, the candidate is asked to answer questions from four different scenarios; most and least likely to perform, ranked responses, most and least effective responses and rated responses. For each individual scenario the candidate is provided with a short brief, outlining the situation and is then asked several situational based questions.

Below are a few examples of the questions similar to what a candidate sitting a situation judgement test would experience.

**Most and Least Likely to Perform**
A customer has been browsing in your section for about 10 minutes and is looking increasingly dissatisfied and frustrated. He approaches you and asks whether you have a particular book that he is looking for, and after checking on your computer, you have to inform him that it is currently ‘out of stock’.

Review the following responses A to D and indicate which one you believe to be the response to the situation you would be ‘most likely to make’ and the response to the situation which you would be ‘least likely to make’

<table>
<thead>
<tr>
<th>Response</th>
<th>Most likely to do</th>
<th>Least likely to do</th>
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<tbody>
<tr>
<td>Apologise that the book is unavailable and suggest he try Morethanpens.co.uk or another online retailer</td>
<td></td>
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</tr>
<tr>
<td>Offer to order the book for the customer and let him know how long it will take. Offer to call him when the book arrives</td>
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</tr>
<tr>
<td>Give the customer the ISBN of the book so that he can easily and quickly search it out elsewhere, either online or another bookshop</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suggest he try the Alpston branch of More than Pens (which is the nearest neighbouring town, 40 minutes drive away) or other bookshops in Saldringham</td>
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</table>
**Ranked Responses**

The Princess Aurora has recently been suffering from a high turnover of nursing assistants with many leaving to work at the privately-run Sunnyside Hospital & rehabilitation Clinic on the outskirts of the city. In exit interviews, leavers also mention that the attractions of the private hospital are its scenic location, and its great range of staff facilities, including use of an indoor swimming pool.

You have been asked to design and run a recruitment campaign to attract and appoint 10 new nursing assistants and trainee nursing assistants to the Trust. One of your measures of success will be the ‘staying power’ of the new recruits. You have 4 weeks from now until the date that the interviews for the nursing assistant candidates will run.

Review the following responses A to D and indicate whether you believe the response to be 1 – the most effective response, 2- the second most effective response, 3 – the third most effective response or 4 – the least effective response. You may assign each rating only once.

<table>
<thead>
<tr>
<th>Place and advertisement immediately in all the relevant local media and online. Then spend some time designing a shortlisting process which will identify candidates with the sort of values that will translate into loyalty to the NHS</th>
<th>Most effective</th>
<th>2nd most effective</th>
<th>3rd most effective</th>
<th>4th most effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask your colleague in the HR team what the process was last time the Trust recruited nursing assistants and follow that plan</td>
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<tr>
<td>Work back from the date of the interviews to establish when you might need to advertise the posts. Use the intervening time to use your judgement in drafting an advert to try and attract people whose values mean they are more likely to remain loyal to the NHS</td>
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</table>
Ask local recruitment advertising agencies for advice on drafting an advert to attract the kind of people who are less likely to leave.