

## Employability Skills: essential requirements in health manager vacancy advertisements

D Messum, L Wilkes and D Jackson

### Abstract

**Background:** Common understandings of what constitutes employability skills (ES), for graduate entry level jobs in health services management, are not well articulated. The Australian Department of Science and Training (DEST) provides a generic profile only which changes over time. In health, this is compounded by endemic reform. What is agreed is that a degree is not enough. Recruitment and personnel policies/practices have been found inconsistent, and wish lists for ES unreliable. In addition, different levels of managers in an organisation require different attributes for the same position. Higher education shows interest in generic skills because of pressure from employers.

**Method:** As public documents, job advertisements provide accessible data on employer skill requirements listed as essential requirements. Using predefined search criteria, 100 consecutive advertisements for health managers in New South Wales were collected from two major Australian newspapers and two internet sites, mid-September to December 2009.

**Results:** A total of 35 different essential requirements were identified. Communication skills were the most frequently listed followed by prior experience, tertiary

qualifications and knowledge of the healthcare system. Findings were consistent with the DEST top three ES. Comparative analysis with competency requirements of the Australasian College of Health Service Management and overseas organisations is discussed.

**Conclusions:** Although ES are stated in vacancy advertisements for health management, understanding of some terms needs to be agreed and sufficient detail provided to help identify suitable applicants. Key ES are consistent with generic listings but there are also health profession specific requirements. Higher education providers can use these findings to inform curriculum development and improve graduate employment outcomes.

**Abbreviations:** ACHSM – Australasian College of Health Service Management; DEST – Department of Education Science and Training; ES – Employability Skills; HE – Higher Education; NFP – Not-For-Profit; NGO – Non-Government Organisations.

**Key words:** employability skills; job vacancies; health managers; higher education.

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## Introduction

For students the strongest motivation for entering higher education (HE) is the desire to improve labour market prospects. [1] However, in the United Kingdom, Tomlinson [2] found final year students did not think a degree was enough: they needed to add value. In Australia, Scott [3] saw a degree as a threshold requirement and noted that formal credentials, specialised knowledge and expert skills were not a reliable guide to employment success; rather personal qualities were more important. Wells [4] found that intellectual, interpersonal and communication skills were a reliable guide to employment success and job specific skills were necessary but not sufficient for effective professional performance.

In Australia, 80% of employers regarded qualifications as a signal of potential for future learning and skills acquisition, not as a signal of immediate competence, and experience was more important than qualifications. [5] Also, they were having trouble locating the right graduates: [6] 42.5% indicated they would recruit more graduates if available. This could have several explanations, including that there are not enough students graduating from the required fields or with the required qualifications. Alternatively graduates may not apply because of poor job search skills, or advertisements may not attract applicants.

The skills that are required by employers are defined by DEST as Employability Skills (ES) [7]:

...skills required not only to gain employment, but also to progress within an enterprise so as to achieve one's potential and contribute successfully to enterprise strategic directions. Employability skills are also sometimes referred to as generic skills, capabilities or key competencies.

What ES employers want is stated in the same report as the top ten selection criteria. The most commonly required were interpersonal and communication skills (written and oral), academic qualifications, work experience, leadership, passion/knowledge of industry/drive/commitment/attitude and team work. The Allen Consulting Group [8] cited Curtis (2004) that these skills are similar to those of Canada, the United Kingdom, New Zealand, France, Germany and the United States. Furthermore, they applied over a variety of jobs and contexts.

Even if universality of the skills list is acknowledged, anecdotal evidence would suggest that health managers require context-specific skills. The healthcare system is complex. It is also argued that skill requirements change over time as the nature of work changes and vary with the

way the sector is organised. At the time of this study New South Wales was organised into large area health services responsible for operational management with centralised administration responsible for corporate management taking the leadership role. In health, Pruitt and Epping-Jordan [9] noted the shift from acute to chronic care has changed required competencies of the health workforce. Liang et al [10] found skills in planning, evaluation and decision-making have endured but new skill requirements have emerged namely leadership, managing and leading change, mentoring others, financial management and personal qualities. The adoption of private sector management practices in the public health sector and ongoing reforms have changed skill requirements. This has implications for HE. Universities are under pressure to produce employable graduates [5] and employment outcomes are a performance indicator for the sector. Curriculum development can be informed and kept up-to-date by identifying required ES in graduate positions. The purpose of this research is to specify health services management ES based on advertised essential skill requirements for graduate entry positions.

Surveying employers seems the logical way to identify ES requirements. However, Teichler [11] reported employer's responses were often inconsistent with actual recruitment and personnel policies and practices. [9] Harvey et al [12] showed that sets of desired attributes varied within organisations by level eg, line managers, recruiters and strategic managers had different priorities. York and Knight also noted that employer wish lists for ES should not be seen as objective information. [13] Given these limitations, an alternative source of information was sought. The research method of analysing job advertisements came from a recent study by Orme, [14] based on earlier work by Cullen [15] who claimed that job advertisements 'lay certain sectors and professions open to scrutiny' because they are public documents. This also means that ethics approval is not required for research purposes.

## Method

A target of 100 advertisements was set, the sample size as used by Orme, [14] Cullen [15] and Communal and Senior, [16] commencing mid-September 2009. A census of all consecutive job vacancies for New South Wales positions occurred using the classified advertisement sections of major newspapers, the *Sydney Morning Herald* and *The Australian* and from the internet sources Seek and MyCareer. Pre-defined search criteria included:

- General health and medical field excluding nursing and other allied health.

- Job title eg, manager, administrator, team leader, project officer, manager or co-ordinator.
- Graduate positions.
- Sector: private and public.
- New South Wales only.
- Advertisement included essential requirements defined as ES.
- Work type: full or part time, contract, casual and temporary.
- Salary ceiling \$65,000 for new graduates defined as having completed their undergraduate studies within the last three years.

Some vacancies appeared in several sources or over several weeks but were only included once in this study. It took three months to collect the required number. Content analysis included job title, employer and location, essential requirements and job status. Findings were coded onto Excel spread sheets. Preliminary analysis revealed that the cost of advertising space in major newspapers limited content and few (6%) made use of links to information on web sites. Most (81%) provided a contact name/telephone number for further information eg, position statement and information pack, and 13% only provided a post office box address with no contact or web site option. Enumeration included the number of different ES, mean ES per advertisement, and frequency ranking. These were compared with the DEST list

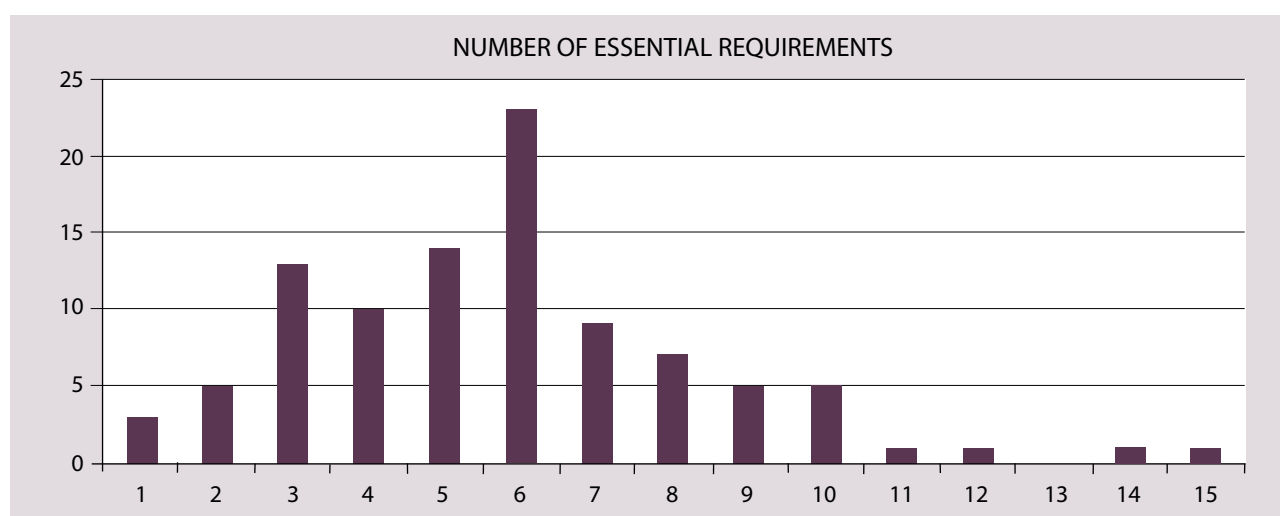
as well as with competency requirements from the health management colleges of Australia, America, Canada and the United Kingdom.

## Results

In the 100 advertised vacancies, the most common position title was manager (45%), followed in rank order by co-ordinator (26%), project officer (12%), research officer (4%), team leader and executive officer 3% each and in one percent no position title was given. The miscellaneous category (6%) included consultant, people and capability officer, liaison officer (2), administrator, community and research development officer. Nearly two thirds of vacancies (64%) were permanent, eleven of which were part-time. Ten positions were temporary, six contract positions and three casual vacancies. For the balance (17%), employment status was not stated. The greatest number of vacancies (37%) were found in organisations that identified themselves as not-for-profit (NFP) in the advertisements, followed by private (20%), and public sector (18%), non-government organisations (NGOs) 17%, and only 6% for Divisions of General Practice. For two advertisements placed by an agency, sector was not stated.

The number of ES listed totalled 514, (mean 5.14), and the number of ES listed per advertisement is shown in Figure 1. Nearly a quarter of advertisements listed six ES, while three listed one or two only. At the other end of the spectrum, four advertisements listed eleven or more ES.

**Figure 1: Frequency of ES in 100 consecutive New South Wales health management vacancies**



**Table 1: Top ten essential requirements in New South Wales advertised vacancies**

RANK	REQUIREMENT	%	DEST RANK
1	Communication skills	78	1
2	Experience	75	3
3	Tertiary qualifications	48	2
4	Knowledge of the healthcare system or a health field	26	NS
5	Teamwork	25	6
6	Conceptual /analytical skills	21	7
7	Computer skills	20	NS
8	Networking	17	NS
8	Organisational skills	17	NS
9	Financial management skills	15	NS
10	Leadership	12	4

A total of 35 different ES was obtained. The top ten appear in the Table 1, which shows that communication skills (written and/or oral) was the most frequent ES, appearing in 78% of vacancies. This compares with 57.5% in the DEST study. It was closely followed by experience (75%) nominated by 27.6% of DEST employers. Tertiary qualifications ranked third and were required in almost half the positions, compared with just over one third in the DEST study. Knowledge of the healthcare system, a particular field of healthcare/health management, ranked fourth. More vacancies required teamwork skills in this study (25%) than in the DEST study (16.6%).

The top three ES were similar to the DEST findings if in different order. Rankings 5 and 6 of this study matched 6 and 7 in the DEST study. Computer skills, networking and financial management skills were not in the DEST top ten. Leadership only achieved rank 10 in this study required by 12% compared to DEST rank 4, required by 18.1% of employers.

Comparison was also made with health management college requirements from Australian, American, Canadian and United Kingdom colleges as shown in Table 2. Variation by country is apparent with only three competencies in common: communication skills, leadership and knowledge of the healthcare system/environment, all of which appeared in the top ten from this study.

Other ES found in this study included a current drivers licence (12%), ability to work independently and/or in a team, (11%), project management skills (11%), research skills (9%), customer focus/caring approach (8%), management skills unspecified (8%), policy and planning skills (7%), time management (6%), staff management, change management, EEO and OHS skills (5% each), and professional development skills (3%).

A raft of personal qualities or characteristics also emerged as ES including being creative, energetic, having a fresh positive approach, 'can do' attitude, and enthusiastic (6%); attention to detail (4%); commitment to social justice principles, community language; reliable, trustworthy, hard working and being flexible (at 3% each).

The top three ES in this study were examined in more detail, beginning with communication skills. Of the 78 listings, 25 stated communication skills only, 24 defined this as written and oral skills, another 20 included interpersonal skills. Specific requirements were report writing skills, press releases and public speaking.

The second most commonly requested ES was prior experience, and 75% of employers asked for one or more types of experience, 23% did not mention any, and 2% stated it was not required. Where experience was essential, 122 specific experiences were listed, or 1.66 per vacancy. A

**Table 2: Comparison of ES in the NSW advertisement study with four health management college requirements**

NSW STUDY	AUST ACHSE [17]	US ACHE [18]	CANADA CHE [19]	UK SFH [20]
Communication skills	Cultural skills	Communication and relationship management	Leadership	Communication
Experience	Team work	Leadership	Communication	Personal and people development
Tertiary qualifications	Taking ownership eg, planning and organisational skills	Professionalism	Life-long learning	Information and knowledge
Knowledge of the healthcare system or a health field	Leadership and management	Knowledge of healthcare environment	Consumer and community responsiveness	Service improvement
Teamwork	Project management		Public relations	Quality
Conceptual/analytical skills	Communication		Political awareness	Equality & diversity
Computer skills	Analytical thinking, problem solving		Conceptual skills	
Networking Organisational skills	Client engagement		Results oriented	
Financial management Leadership			Resources management	

health background was required by 60%, and/or specific skill sets 45% and/or a general health background 3%. Time in a similar field appeared in four advertisements ranging from two to five years. Required health backgrounds included working with Aboriginal and Torres Strait Islander people, culturally and linguistically diverse communities, aged care, domestic violence, mental health, child and family, homeless, community care, working with disadvantaged, and health promotion. The list for specific skills was more

varied and included financial management skills and budget, research skills, government reporting, project management, accreditation, staff supervision and development, compensation, office management, partnering with stakeholders, fund raising and risk management.

Sector differences in experience requirements are presented in Table 3 which shows that experience was not listed as an ES in 25% of vacancies, including two which stated experience

**Table 3: Frequency of advertised experience requirements by sector**

SECTOR	VACANCIES ADVERTISED	EXPERIENCE REQUIRED		
		NOT LISTED	ESSENTIAL N %	NUMBER OF REQUIREMENTS
NFP	37	6	31 84	48
Private	20	8	12 60	17
Public	18	4	14 78	21
NGO	17	3	14 82	20
Division of GP	6	4	2 33	4
Not stated	2	0	2 100	5
<b>TOTAL</b>	<b>100</b>	<b>25</b>	<b>75 75</b>	<b>108</b>

was not required. A quarter of vacancies requiring experience listed one type but most required several. Experience was less likely to be required in the private sector and Divisions of General Practice than elsewhere.

The public sector was the most likely to require knowledge of the health sector (half of the vacancies) followed by NGOs (41.6%) and NFP (24.3%). In total, knowledge appeared in 26 vacancies as essential and included 50 different requirements. Some 46% listed specific skills eg, legislation, policies and procedures, strategic planning, reporting requirements, research and business processes. Another 26% required general knowledge of the health sector and 28% asked for specific fields of knowledge similar to the clinical experience list.

## Discussion

Communication skills were the top ranking ES requirement for health sector managers which confirms its importance as a HE graduate attribute. This skill is also more important to health employers than other employers as indicated by the lesser frequency with which it was mentioned in the DEST study. [7] Experience in the health field was a very close second and three times more important in health than for other employment. Understanding of the complexity of the healthcare system might explain this finding but this result is stronger than that reported by Riddout et al. [5] Sector variation was also apparent eg, experience is less likely to be required in the private sector. In the public sector, four in five vacancies listed experience as essential with even fewer opportunities in NGOs and NFP for inexperienced applicants.

Tertiary qualifications were advertised for in half the vacancies but clearly are not enough alone to secure employment in health, confirming the conclusions of Wells, [4] Tomlinson [2] and Scott. [3] Knowledge of the field was required in a quarter of jobs, something not found in the DEST study. Not surprisingly, team work skills appeared frequently for health positions, reflecting the way work is organised into multi-disciplinary teams. Conceptual and analytical skills also were important but to a much greater extent than DEST reported.

What was unexpected was the importance of computer skills which failed to rank in the DEST top ten. Another finding specific to health was networking. Organisational skills were often an employer requirement but are implicitly learnt at University, juggling studies and employment. It is also apparent that health graduates need to develop financial skills. Lastly leadership appeared to be more important in

the generic DEST study than in the health sector for new graduates. Such skills may be for development rather than expected of new workforce entrants.

Graduates may need help in identifying their skills and experience that relate to employer needs as expressed in position advertisements. Specifically, experience for example gained in placements and knowledge of the health system should be highlighted. Even if advertisements do not specify ES identified in this study, where possible they should be included in written applications to at least get a job interview. It is also important for applicants to follow up information made available eg, position statements and application packages. This is recommended because some advertisements contained so little information. Positions advertised without contact details or links to web sites may explain why employers cannot find enough graduates.

It may be unrealistic to compare graduate entry job requirements with competencies from professional bodies, a potential limitation of this study. However, competencies give a starting point and suggest skills for future development eg, leadership. Most health manager advertisements were quite specific about experience and knowledge requirements but leadership, organisational skills 'on the job' and even communication skills were less clearly defined. In future research, employers should be asked to define what ES mean to them and more importantly how these are identified in applicants. A further limitation is that this study analysed NSW vacancies, which limits generalisability of the findings.

What is now known is what essential skills health managers advertise as required in new graduates. Health management skills are not exactly the same as skills required by managers in other fields but include profession specific skills. Those essential skills necessary to achieve employment are clear, but sufficiency ie, how ES are measured and which skills lead to greater long term success in employment, however this is defined, has yet to be ascertained.

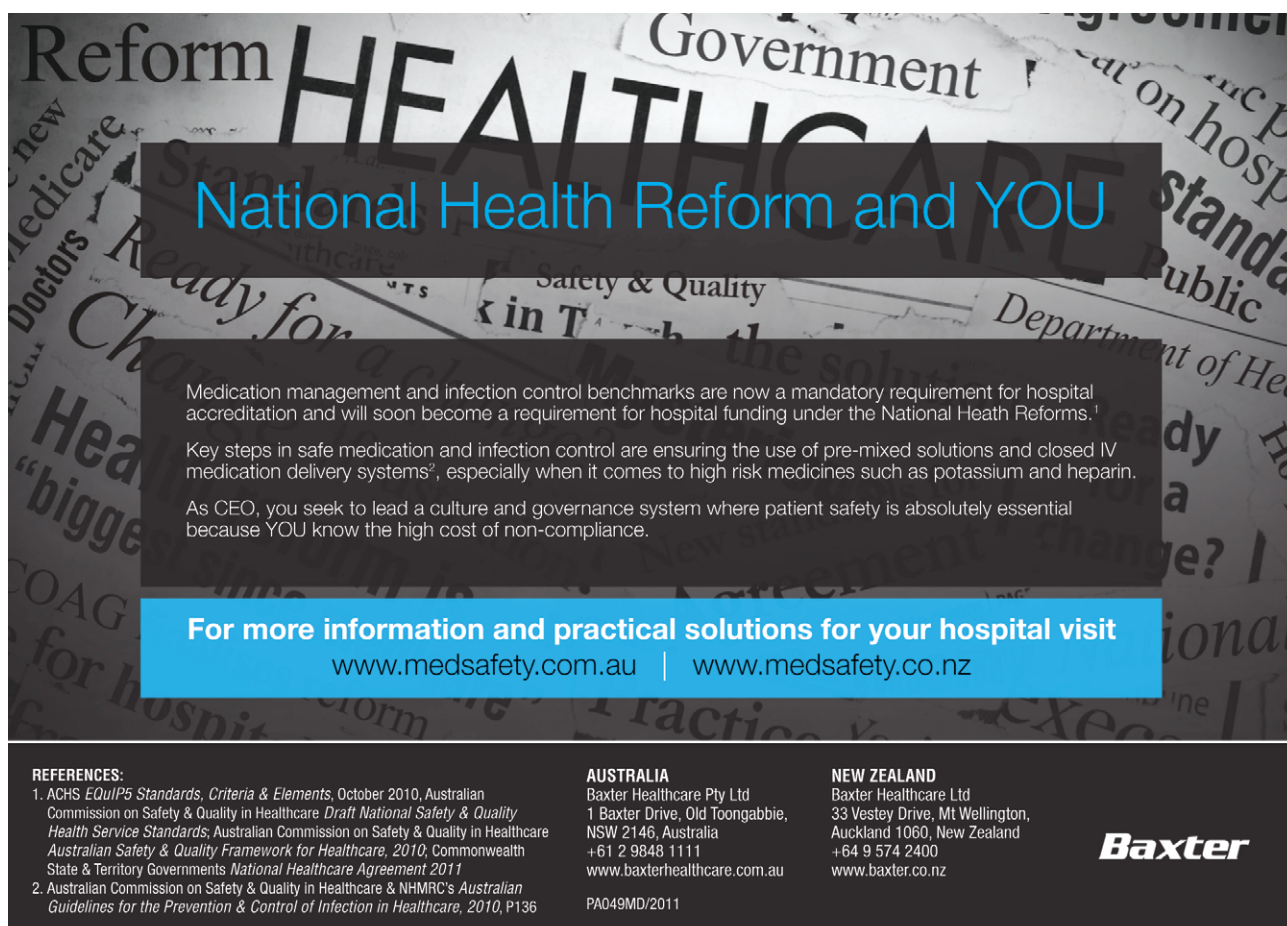
## Competing Interests

The authors declare that they have no competing interests.



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The poster features a collage of text related to healthcare reform, including words like 'Reform', 'HEALTHCARE', 'Government', 'Standards', 'Safety & Quality', 'Department of Health', 'Medication', 'Infection control', 'Hospital accreditation', 'Patient safety', 'Culture and governance', 'Non-compliance', 'Pre-mixed solutions', 'Closed IV medication delivery systems', 'High risk medicines', 'Potassium', 'Heparin', 'CEO', 'Patient safety is absolutely essential', 'YOU know the high cost of non-compliance', 'For more information and practical solutions for your hospital visit', 'www.medsafety.com.au', 'www.medsafety.co.nz', 'REFERENCES', 'ACHS EQUIPS Standards, Criteria & Elements, October 2010', 'Australian Commission on Safety & Quality in Healthcare Draft National Safety & Quality Health Service Standards', 'Australian Commission on Safety & Quality in Healthcare Australian Safety & Quality Framework for Healthcare, 2010', 'Commonwealth State & Territory Governments National Healthcare Agreement 2011', 'Australian Commission on Safety & Quality in Healthcare & NHMRC's Australian Guidelines for the Prevention & Control of Infection in Healthcare, 2010', 'P136', 'AUSTRALIA', 'Baxter Healthcare Pty Ltd', '1 Baxter Drive, Old Toongabbie, NSW 2146, Australia', '+61 2 9848 1111', 'www.baxterhealthcare.com.au', 'PA049MD/2011', 'NEW ZEALAND', 'Baxter Healthcare Ltd', '33 Vestey Drive, Mt Wellington, Auckland 1060, New Zealand', '+64 9 574 2400', 'www.baxter.co.nz', and the 'Baxter' logo.

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2. Australian Commission on Safety & Quality in Healthcare & NHMRC's *Australian Guidelines for the Prevention & Control of Infection in Healthcare, 2010*, P136

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