

## MINUTES OF THE CHLNET ANNUAL MEETING

FAIRMONT LE CHATEAU MONTEBELLO, QUEBEC  
12 SEPTEMBER 2008

The CHLNet Annual General meeting was held Friday September 12, 2008. Dr. Don Philippon, CHLNet Co-Chair provided details about CHLNet's work to date and offered participants an opportunity to share verbal highlights of their involvement in health leadership development in their organizations. Dr. Philippon indicated that his Co-Chair, Elma Heidemann was unable to attend the meeting for family reasons.

Dr. Philippon also pointed out that because CHLNet was not yet a formal organization, the meeting could not be considered an official annual general meeting. The meeting would focus on providing a progress report on activities, a report on the formalization of the CHLNet structure and a roundtable of membership activities. Dr. Philippon introduced the members of the Steering Committee that were in attendance.

CHLNet's activity is currently focused on three key areas:

1. Encouraging research in the area of leadership.
2. Developing leadership tools.
3. Creating a dialogue around leadership and raising the profile of leadership.

### 1. Research:

- All CHLNet's research efforts are in synch with the Pan Canadian Capabilities Framework.
- Five Action Research Projects are being established as well as an inventory of research relating to health leadership.
- Work will soon be underway with Royal Roads University pending the approval of the MOU between RRU and CHLNet.

## **2. Leadership Inventory and Tools:**

- Financial support has been provided by Associated Medical Services Inc. (AMS) to prepare an inventory on leadership development programs within and beyond the university sector and for a fellowships and awards program.
- It is likely that a Health Canada Grant (\$100,000) will be approved to support the inventory of leadership development programs.
- CHLNet is working with Royal Roads University to develop an inventory of leadership tools.

## **3. Creating Dialogue**

- CCHSE Executive Forum – Niagara on the Lake
- NHLC 2007-08
- International Society for Quality in Healthcare Symposium 2008
- Plans are underway for a CHLNet Internet Portal which can be used by members to access information about leadership initiatives and practices across Canada.
- CHLNet has also participated in meetings and symposiums such as the CCHSE Executive Forum and the Symposium of the International Society for Quality in Healthcare.

## **4. Operations**

- CHLNet operations would not be possible without the support of its national members whose financial contributions have ensured a solid resource base for the network.
- The Canadian Medical Association has generously provided secretariat support.

## **5. Incorporation**

- CHLNet has been advised that it is not ready for incorporation and is looking at examples of how similar networks function within a host organization.
- It is expected that a framework agreement will be established with the major national associations to form a governing board for CHLNet.

## **6. Strategic Planning**

- A strategic planning process has been initiated which will examine ways that CHLNet can meet its goals within the parameters of the CHLNet's three pillars.

## **7. CHLNet Structure**

- CHLNet has sought legal opinion regarding its structure and have been advised that incorporation is not the most appropriate alternative for the

organization. Instead, CHLNet is pursuing the concept of a framework agreement.

- CHLNet does not want to compete with other organizations that have a direct membership base. One possible model is for the members of major organizations to automatically include their members in CHLNet.
- Participants advised Dr. Philippon to keep the CHLNet structure as simple as possible so that CHLNet can remain nimble and responsive to its membership. It was also suggested that an advisory board be created from memberships that could change annually or every two years.
- The creation of a Portal will help to enhance communications by establishing an electronic community across the country.
- It was pointed out that the structure that emerges for CHLNet will influence its ability to attract and be accountable for funding. Funders will want to see the value in CHLNet and their perception will trickle down to other levels and funders.
- It was suggested that CHLNet broaden its scope to include patients and young executives as well as the private sector.

### **Preliminary Health Leadership Round-up: September 2008**

One of CHLNet's key functions is to highlight ongoing leadership development initiatives taking place across Canada. In preparation for the symposium, CHLNet developed a preliminary inventory of current leadership offerings.

The organizations that were showcased in the inventory were provided an opportunity to draw attention to the information contained in the inventory. In addition, organizations present at the symposium but not showcased in the inventory also provided a brief report about their current leadership activities:

- **Ontario Ministry of Health and Long-term Care**

Like many provinces, Ontario is also losing senior leadership because of changing demographics. The Ontario Ministry of Health and Long-term Care has invested in developing senior leadership through the Rotman School of Management and an initiative with the Schulich School of Business to provide all senior management with training in the stewardship model. Healthforce Ontario also is implementing a broader HR strategy which is attempting to increase the supply of nurses, physicians and others in the health system and develop future leaders and talent.

- **Royal Roads University**

Royal Roads University in British Columbia has initiated the Leaders for Life Program, a comprehensive program designed to build capacity throughout the system and create a shift in leadership culture. This program is hosted through the Health Care Leaders Association of B.C. Royal Roads has also launched Twelve for Twelve a 12-month

senior level program attended by 12 individuals from health authorities, senior levels of government, the BC Medical Association, the College of Nurses, etc.

Royal Roads' Centre for Health Leadership and Research is partnering with the Centre for Healthcare Management to pull together a consort of universities who will engage in an ambitious research program to build organizations and leadership capacity.

A patient safety series is underway to work with boards and CEOs in managing safety and quality including a one-week program for patient safety officers. It is hoped that this program will expand nationally.

- **Canadian College of Health Service Executives (CCHSE)**

The College is currently in discussion with young leaders about how to recognize and promote their development needs. Mentorship is clearly important to this group.

- **Canadian Society of Physician Executives (CSPE)**

The CSPE is a small organization focused on physician leadership. Recent activities have included working with the CMA's Physician Leadership Courses.

- **Canadian Healthcare Association (CHA)**

Among other activities, the CHA is working on a national conference on health leadership.

- **Academy of Canadian Executive Nurses (ACEN)**

The ACEN has been partnering with other national organizations on patient safety and health leadership. A conference is planned for February 2009 in partnership with the Canadian Nurses Association. The ACEN is using a case-study method to highlight interdisciplinary innovations in health care re-design across Canada.

- **Emerging Health Leaders (EHL)**

EHL is a new network of young health professionals across Canada. With five nodes and over 300 members across the country, EHL seeks to create opportunities for young leaders to engage in social networking, share workplace experiences and engage in formal learning. EHL members have also underscored the importance of creating networking opportunities not only between each other, but with senior health system leaders as well.