

## ***LEADerShip at a Glance:***

### **AN ENVIRONMENTAL SCAN OF LEADS DRIVEN HEALTH LEADERSHIP INITIATIVES ACROSS CANADA AND ABROAD**

#### **Introduction**

This paper provides an overview of the scope, depth and breadth of the interest in, and use of the *LEADS in a Caring Environment* framework by health leaders in Canada and internationally. Its formalization as a statement of effective health leadership was initiated by the **leadersforlife** program in BC (under the stewardship of the Health Care Leaders Association of BC). *LEADS in a Caring Environment* has subsequently been endorsed by member agencies of the Canadian Health Leadership Network (CHLNet) and the Canadian College of Health Leaders (CCHL), and **leadersforlife** has continued to invest significantly in its rollout across Canada. Consequently, interest in, and use of the *LEADS in a Caring Environment* capabilities framework has grown exponentially. It is being colloquially referred to as the “rocketship of leadership.” Health CEOs are asking: “How is it that LEADS has gone viral so quickly?”

Efforts associated with this rapidly expanding interest reflect both the face validity of the framework (that is, defining the essence of effective health leadership in a manner that resonates with practicing health leaders) and, of course, of its intellectual validity (i.e. foundations in valid research and the emerging discipline of leadership broadly speaking). This paper presents a synopsis of the known efforts to increase awareness of and the take-up of the *LEADS in a Caring Environment* as a framework and as a change management tool.

It is the intent of CHLNet to sustain this scan over time (initially on a biannual basis) by reaching out to both organizational Network Partners and individuals (*Friends of CHLNet*) to contribute to and expand the scope of this environmental scan. Please forward your examples of LEADS driven leadership development initiatives to either [gdickson@royalroads.ca](mailto:g dickson@royalroads.ca) or [btholl@chl.net.ca](mailto:btholl@chl.net.ca).

#### **International**

There were a number of international opportunities to profile the *LEADS in a Caring Environment* framework in the past six months. They include:

***1. Hong Kong: Royal Australasian College of Medication Administrators (in Association with the Hong Kong Branch) Annual Conference on Medical Leadership.***

Dr. Graham Dickson presented on Health Reform in Canada (one of six national reports from Australia, Canada, the UK, Italy, Indonesia, and New Zealand). He highlighted the challenges face by Canadian health leaders, the efforts of CHLNet, the Canadian College of Health Leaders and **leadersforlife** to support leadership development in Canada’s decentralized health system, and the acceptance of the *LEADS in a Caring Environment* framework as a common, unifying foundation for leadership development. Graham also attended an inaugural meeting of a nascent International Network of Medical Leaders. Dr. Gaetan Tardif, representing the Canadian Society of Physician Executives, along with Graham, is part of the working group established to investigate the potential of this Network. A great deal of interest in the process to gain support for LEADS was expressed, as most international representatives were struggling with the use of many frameworks in multiple jurisdictions.

## **2. Paris: International Society for Quality in Health Care Annual Conference, October 2010**

Elma Heidemann, Co-Director for CHLNet, presented a session entitled, *Leaders Leading for Quality; Canada's National Approach* at the ISQua Conference. Her presentation addressed three primary topics: Challenges facing health leaders re quality improvement in Canada; the efforts of CHLNet to address leadership development needs (in partnership with other entities such as CCHL and **leadersforlife**), and the centrality of the *LEADS in a Caring Environment* capabilities framework to those efforts.

## **3. Boston: Twelfth Annual Meeting of the International Leadership Association (ILA) National Conference, October 2010.**

Bill Tholl, Executive Director of CHLNet, delivered an hour long session at the ILA conference held in Boston. The session explained CHLNet's and **leadersforlife**'s efforts to effect sweeping systemic changes in leadership development within the Canadian health sector, using the *LEADS in a Caring Environment* capabilities framework as the foundation for development. Organizers of the Boston Conference were taken with the presentation, and are exploring with Bill the opportunity to set up a 'health leadership' subgroup or stream at next year's conference in London (UK). There has also been follow-up in terms of how to approach setting up "a CHLNet-like" entity in Australia. A PDF copy of the PPT is posted on the CHLNet website.

## **4. Chicago: Radiologist Society of North America (Chicago, Nov. 27, 2010).**

Bill Tholl was asked as CHLNet Executive Director to provide a "Bringing LEADS to Life" one hour session at the Radiologist Society's meeting in Chicago. It focused on LEADS as a change management tool in the Canadian context (i.e. "from corner stores to conglomerates" and in the context of system reforms across the country). It also provided an overview of the **leadersforlife** tool box (Diagnose; Identify; Assess; and Develop). RSNA is the largest annual health conference in the world. This pre-RSNA Education Day was hosted by Medbuy, one of Canada's largest Group Purchasing Organizations or 'GPOs'. The conference theme was *Transforming Healthcare: Silos to Systems*. A PDF copy of Bill's power point presentation is posted on the CHLNet website.

## **5. Special Issue of Emerald Journal on Leadership in Health Services**

Dr. Don Philippon and Dr. Graham Dickson are co-editing a special edition of the *Leadership in Health Services*, an international journal dedicated to profiling research on leadership in health services. This special edition is profiling large scale leadership development initiatives in a number of countries around the world, including Canada, Australia, New Zealand, Scotland, Portugal, India and Pakistan. The articles are now in the stage of being reviewed by Emerald peer reviewers and is scheduled to be published later in 2011.

## **National**

### **1. Canadian College of Health Leaders (CCHL)**

The College has recently adopted a new name (formerly the Canadian College of Health Service Executive) and has made a significant effort to profile and support Chapters in understanding and using the *LEADS in a Caring Environment* framework as the 'new' framework guiding both credentialing and developing leaders. It has developed a roll-out strategy to support individual CCHL Chapters that includes:

- Event Planning
- Expanding the capacity to teach on *LEADS in a Caring Environment*
- Putting resources on the College website

- Realigning the CHE and Fellowship Programs with *LEADS in a Caring Environment*
- Developing a Chapter resource kit based on *LEADS*
- Intending to negotiate a licencing agreement with **leadersforlife** for access to leadership development tools on a discounted basis

**a. CCHL-CCLS National Office and the Eastern Ontario Chapter Videoconference – February 2010.**

The Canadian College of Health Service Executives National Office and the Eastern Ontario Chapter presented a session on: *LEADS in a Caring Environment – A New Leadership Competency Framework* on February 25, 2010 in Ottawa, ON and across the country via videoconference. Dr. Graham Dickson, Professor Emeritus at Royal Roads University and former director of the Centre for Health Leadership and Research was the guest speaker for this unique event.

**b. Joint presentation to Eastern Ontario Chapter – September 2010**

Bill Tholl and Linda O'Rourke participated in a two hour, interactive session with the local Board. The session profiled how *LEADS in a Caring Environment* has evolved and the special relationship that exists between the College and CHLNet. Of particular interest to the Chapter were the preferred pricing of **leadersforlife's** *For Health, By Health* products and services and the resource allocator for leadership development programs available on CHLNet.ca to network partners.

**c. CCHL-CCLS National Office – November 2010**

College CEO Ray Racette and Dr. Graham Dickson conducted a national webinar to outline how the CCHL was going to support Chapters in using LEADS, and also to introduce the value of LEADS as a model for conceptualizing and implementing change.

**d. CCHL-CCLS Quebec Chapter – November 2010**

The CCHL-CCLS Quebec Chapter hosted their AGM on November 19, 2010. Most of the speakers spoke to the LEADS framework in French; however, the program included a presentation regarding *LEADS in a Caring Environment* by College CEO and President, Ray Racette.

**e. CCHL-CCLS Hamilton & Area Chapter - November 2010**

The CCHL-CCLS Hamilton & Area Chapter hosted a webcast session entitled *What Will it Take to Lead Healthcare Into the Future? Breathing Life into LEADS in a Caring Environment* on Wednesday, November 10, 2010. Geoff Rowlands, Chief Executive of the Health Care Leaders Association of British Columbia was the speaker for this session.

**f. CCHL-Lower Mainland of BC Chapter – October 13, 2010**

On October 13 the Lower Mainland Chapter of CCHL hosted an evening session prior to the HCLABC conference on the LEADS framework, and how it is being used within BC and across the country.

- g. CCHL-CCLS Manitoba Chapter - Provincial Health Leadership Forum – October 2010.**  
During the first breakout session at the PHLF, Bill Tholl, Dr. Graham Dickson, and Geoff Rowlands presented a session on: Bringing LEADS to Life. The workshop took each of the five LEADS domains and applied them to compelling, contemporary and unresolved policy challenges facing leaders working in the Manitoba health and health care system.

## **2. Emerging Health Leaders**

On May 19, Emerging Health Leaders gathered at the University of Ottawa to join Ray Racette, President and CEO of the Canadian College of Health Services Executives (CCHSE) in a discussion of LEADS in a Caring Environment, a new leadership competency framework being rolled out across the country. This framework comprises five competencies – leading self; engaging others, achieving results, developing coalitions; and systems transformation.

The focus of the discussion was on leading oneself, a concept relevant to leaders at any stage of their careers. The session was informal and interactive with many opportunities for those in attendance to actively participate in the exploration of the knowledge, skills and attitudes needed to become a successful leader in health. Following the formal portion of the agenda, EHL members had an opportunity to chat with each other about current issues and career plans.

## **3. The Academy of Canadian Executive Nurses LEADS Webinar – September, 2010**

The Academy of Canadian Executive Nurses (ACEN) represents the voice of nursing leadership in Canada. Founded over thirty years ago, ACEN was created as a network of chief nursing officers of major teaching hospitals and deans and directors of Schools of nursing. On September 17, 2010, ACEN conducted a national webinar (given by Bill Tholl and Graham Dickson) to introduce the LEADS framework to its members. Over 40 ACEN members from across Canada participated in the webinar. ACEN has long provided a forum for discussion of mutual challenges and a source of support to nurse executives in dealing with unique challenges, and has shown significant interest in the LEADS framework.

## **4. The Health Care Leaders Association of British Columbia**

### **a. HCLABC's Bi-Annual Awards**

For the first time, at the HealthCare Leaders' Association of BC's annual conference in October of 2010, the Health Care Leaders Awards were handed out based on the *LEADS in a Caring Environment* capabilities framework. These awards are made following formal submissions that are judged by a panel of peers and recognized leaders. The awards are made biennially by the HealthCare Leaders' Association of BC to recognize and celebrate leaders who have made a significant contribution based on specific criteria. These awards are for people who truly stand out from the crowd; who are innovators; and who have significant outstanding abilities with demonstrable outcomes.

### **b. HCLABC's Provincial Conference**

At the **leadersforlife** special breakfast devoted to profiling the efforts of **leadersforlife** and of course the LEADS in a Caring Environment framework, Dr. Paul Mohapel gave a fascinating address in which he outlined the neuroscience research foundations that underpin the Lead Self domain of *LEADS in a Caring Environment*. Paul is a medical researcher and wrote the

Lead Self booklet, and teaches both for the Canadian Medical Assn's Physician Management Institute and Royal Roads University. Bill Tholl was invited to give a luncheon address that focused on the genesis of *LEADS in a Caring Environment* and the reasons why the framework seemed to be gathering so much momentum in BC and across Canada. Bill was also asked to provide a synopsis of key takeaways from his recently released book (*Top Tips on How to Survive and Prosper in the Association World*).

**c. *LEADS in a Caring Environment Certification***

On November 7-9 over 30 individuals from across Canada—facilitators, pre-certified executive coaches and representatives from various health authorities that have endorsed the *LEADS in a Caring Environment* framework within their jurisdiction, came to Victoria to attend a two and a half day session that prepared them to be 'certified' as knowledgeable re LEADS, and possessed of the skills to facilitate or coach others re the framework. The session was hosted by **leadersforlife** in partnership with the Centre for Applied Leadership and Management (CALM) at RRU. Bill Tholl, from CHLNet participated as a member of faculty to describe/demonstrate CHLNet's commitment to the framework.

**d. *Discussions with Henry Mintzberg at McGill University***

On behalf of Henry Mintzberg, Phil Lenir, CEO of Coaching Ourselves, a department within the Faculty of Business at McGill University, contacted Geoff Rowlands of **leadersforlife** to initiate a discussion on LEADS. Their interest was to link the LEADS capabilities framework to Mintzberg's five mindset model that he uses to organize the curriculum of the International MA in Health Management. Geoff, Graham and Bill subsequently met with Dr. Mintzberg and Mr. Lenir to discuss that linkage, and also how a product they use—called Coaching Ourselves—might be mapped to the LEADS framework. Discussions are ongoing.

**5. Accreditation Canada:**

Dr Graham Dickson was asked to review and assess current leadership and governance guidelines against the *LEADS in a Caring Environment* framework. An ad hoc working group has been struck and has met once to undertake significant revisions to the leadership guidelines using the *LEADS in a Caring Environment* framework as one reference (Graham Dickson, Bill Tholl and Ray Racette are members of the working group...

**6. Canadian Medical Association: Competency Framework for PMI.**

The CMA has its own unique physician competency framework. It was one of the first national organizations to adjust and adapt its leadership competency framework to align it with what was initially the 5 C framework endorsed by CHLNet. Ms. Emily Gruenwoldt is currently stewarding the Leadership & Professional Development department given recent restructuring at the CMA.

**7. The RR/CHLNet Partnership in Health Systems Improvement Project: Leadership of Health Systems Redesign**

On March 31 the Centre for Health Leadership at RRU, in partnership with CHLNet, were recipients of a \$450,000 grant from the Canadian Institutes of Health Research to fund an applied research project entitled Leadership of Health Systems Redesign. This applied research project is comprised of a series of regional node investigations into leadership for health system change,

and will be used to refresh the LEADS framework. A steering group of 20 senior researchers and decision makers from across Canada are guiding this project. On December 16 the steering group is meeting in Toronto to review potential case studies drawn from the five regions: BC, the Prairies (Alberta, Saskatchewan and Manitoba), Ontario, Quebec, and the Atlantic provinces (PEI, Newfoundland and Labrador, Nova Scotia and New Brunswick). Proposed cases deal with issues of prime importance to decision makers in each of these jurisdictions.

## **8. Provincial Jurisdictions**

A number of health authorities or health organizations in various provincial jurisdictions have endorsed the *LEADS in a Caring Environment* framework and are using it to develop their leadership talent. A cross-Canada checkup, starting in Newfoundland and heading west, is outlined below.

### **a. Eastern Region of Newfoundland**

The Eastern Region of Newfoundland Health Authority (EHR) has taken three major steps to ensure that the *LEADS in a Caring Environment* framework is the foundation for leadership development in their region. First, it has mapped its former management competency framework to LEADS and made additions and adjustments to it to bring it into compliance with LEADS. Second, on December 6 EHR hosted, a half-day workshop to introduce the LEADS framework to their senior management team. Bill Tholl, Gail Boone and Graham Dickson prepared and facilitated this leadership forum. And finally, EHR has taken steps to propose a case study for the CHLNet-RRU Leadership in Health Systems Redesign applied research project approved by the Canadian Institute of Health Research (CIHR).

### **b. Nova Scotia**

Bill Tholl and Graham Dickson met with representatives of the Nova Scotia Health Association (representing all Health Authorities) and with other senior executives from the Capital Health Region to discuss the potential of using the for *LEADS in a Caring Environment* framework for leadership development within Nova Scotia. Subsequently, two representatives came to BC to participate in the LEADS Certification event. Although a formal decision to adopt LEADS has not yet been forthcoming, it is anticipated that the LEADS framework will be endorsed within Nova Scotia. Capital Health is also proposing a case study for the CHLNet-RRU Leadership in Health Systems Redesign applied research project. It should also be mentioned that the Pictou Nova Scotia Health Region has constructed a performance review process around LEADS. Bill and Graham also met with David Persaud (Atlantic node of the CIHR co-applicants group) to clarify the process of identifying and assessing possible case studies from across Atlantic Canada.

### **c. Prince Edward Island**

Health PEI officially adopted *LEADS in a Caring Environment* as their leadership framework. Bill Tholl and Graham Dickson met with the senior executive team of Health PEI in September to clarify various elements of the LEADS framework. Subsequent to that meeting, Health PEI officially joined CHLNet and has decided to use the *LEADS in a Caring Environment* framework as the foundation for a comprehensive leadership development strategy within Health PEI. Subsequently Bill Tholl and Shauna Fenwick traveled to Charlottetown to deliver a full day workshop on the LEADS framework, and to begin the implementation of the LEADS 360 with Health PEI's senior management team. Subsequent

development work will follow. The Ministry of Health, based on this one-day workshop, is also contemplating adopting LEADS and joining CHLNet.

**d. Ontario**

In Ontario, two organizations have formally endorsed the *LEADS in a Caring Environment* framework as a foundation for leadership development. The first is St. Michael's hospital. Geoff Rowlands traveled to Toronto on November 4 to introduce St. Mike's management team (400) to the LEADS framework and also to explain the products and services **leadersforlife** has to offer. St. Mike's is using the LEADS 360 for developmental purposes, and sent two in-house individuals to the LEADS certification event in Victoria. A three-year leadership development plan, built around LEADS, has been developed. A second organization—the Ontario Association of Community Care Access Centres (OACCAC) has also decided to adopt LEADS as the foundation for development of leaders within each CCAC as well as for OACCAC. Seven representatives attended the LEADS certification event in Victoria. Other organizations—Hamilton Health Sciences Centre, University Hospitals Network—have inquired about the potential value of using LEADS in their organizations. The Ontario Ministry of Health and Long Term care has also agreed to join CHLNet. The process of gaining Ministerial approval is in train.

**e. Manitoba**

At the Provincial Health Leadership Forum, attended by over 500 managers from across Manitoba, and held on October 28, 2010, three sessions were devoted to introducing *LEADS in a Caring Environment* to the leaders from across the province. In the keynote address to the Forum, Bill Tholl and Dr. Graham Dickson provided a context for the creation of LEADS, as well as a quick overview of where the framework came from and its contents. Geoff Rowlands and Ray Racette then joined Bill and Graham on stage for a dialogue hosted by Arlene Wilgosh, CEO of the Winnipeg Regional Health Authority. Subsequent to the keynote, Graham and Bill hosted a concurrent session explaining the LEADS framework as a model for change; and Geoff Rowlands hosted a concurrent session outlining the tools, resources, and approaches available from **leadersforlife**. In late September – early October, some 27 senior leaders from across Manitoba attended the six day RRU program on Health Systems Leadership, which is constructed around the LEADS framework. A leadership challenge on implementing patient-centered care was the vehicle for the learning of LEADS. An “Executive Brief” or synopsis of the proposed action plan is being finalized and will be posted on the CHLNet website in due course.

**f. Alberta**

Alberta Health Services has just recently hosted five regional sessions to introduce AHS leaders/managers to the *LEADS in a Caring Environment* framework. On November 30 the first session – for 550 participants – was held in Edmonton. Lynn Kirkland facilitated the day. In the morning, an overview of LEADS was provided, and a table activity asking participants to think about what each of the domains look like from a behavioural perspective was conducted. The afternoon session focused on the communication capability of Engage Others – an element of the framework deemed of high priority by the managers in AHS. Subsequent sessions have been held in Red Deer (Thursday, December 2); Calgary (Thursday, December 9). Two other regional sessions are planned for the New Year. Dr. Graham

Dickson had the privilege of attending the Calgary session and speaking to the framework at that time. This is the first step of a roll-out of LEADS that will include using the LEADS 360 for development in Alberta.

**g. British Columbia**

On October 13 the Lower Mainland Chapter of CCHL hosted an evening session prior to the HCLABC conference on the LEADS framework, and how it is being used within BC and across the country. Brian Schmidt (Senior Vice President of Strategic Planning, Transformation Support and Innovation) and Mark Allen (Chief Human Resources Officer) spoke to how the Provincial Health Services Authority (PHSA) is using the LEADS framework for selection, development, and performance management of senior leaders in the PHSA; and its plans to expand its use over the next few years. In addition, the Senior Executive Team of Vancouver Coastal Health Authority has completed the LEADS 360° Feedback Assessment is now rolling that out to four hundred next level leaders. Also, the Organizational Development representatives of all six health authorities met at the **leadersforlife** offices to determine how best pool and leverage their own programming so as to provide an overall suite of developmental activities in support of LEADS. The Michael Smith Foundation for Health Research and the Ministry are also actively considering a proposal to expand the regional node project in BC—in which the LEADS framework would be used in an action research project connected to the implementation on new priorities in the province.

## **Conclusion**

In some ways one might almost characterize the growth of interest in the *LEADS in a Caring Environment* framework as viral—in that there is now significant use of the framework in eight provinces, and of course, numerous national organizations. There appears to be a strong agreement amongst leaders in Canada that talking a common language about leadership, and using that language to support change in health systems, is very important for the future of healthcare in Canada. It is hoped that through the combined efforts of CHLNet, CCHL, and **leadersforlife** that this trend will continue. It is also hoped that health organizations across this country will continue to find ways to support the development of their leaders and will work together to ensure that our system has the leaders it needs to take it into the challenging future.

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