

# Leadership 2.0 in Action: Building A National Leadership Capabilities Framework for the Health Sector in Canada

A Presentation to the International Leadership  
Association's Conference



Canadian College of  
Health Service Executives  
Collège canadien des  
directeurs de services de santé



Canadian Health Leadership Network  
Le Réseau canadien pour le leadership en santé



Emerging  
HealthLeaders



**Bill Tholl and Graham Dickson (PhD)**

October 30, 2010

# Overview of session

- The Canadian health leadership context
- A genesis of *LEADS in a Caring Environment*
- The centrality of coalition building
- The national take-up of **LEADS** across Canada
- Questions and answers



# What is LEADS in a Caring Environment? In brief



The five domains....

# Part A: The “Leadership Challenge”

# The leadership gap in Canada



*“Making Canadians the healthiest people in the world must become the system’s overriding objective. **Strong leadership** and the involvement of Canadians are key to preserving a system that is true to our values and sustainable.”*  
(Romanow, 2002, p. xv)

## Six reports

Conversation on Health (BC)

Romanow Commission

Kirby Commission

Fyke report (SK)

Mazankowski report (AB)

Seaton Commission (BC)

## Common elements

Sustainability

Access

Delivery models

Primary healthcare

Waitlist management

Emergency Access

End of life care

Health human resource planning

Home & Community Care

Social determinants / environment /  
personal responsibility

Chronic disease management

Mental health & addictions

First Nations

Pharmacare

**Agreement on the areas for action but not on the approach to implementation: that is the responsibility of *leadership***

# Leadership is all about change...

“Effective change requires **leaders**. The system must identify leaders at all levels—within each jurisdiction, in the education system, among employers, among providers—who will work as a team to champion collaborative... planning and share the vision.” (Health Canada, 2007, Critical Success Factors, para. 7)



# Challenges to health leadership



**Political**

**Economic**

**Sociological**

**Technological**

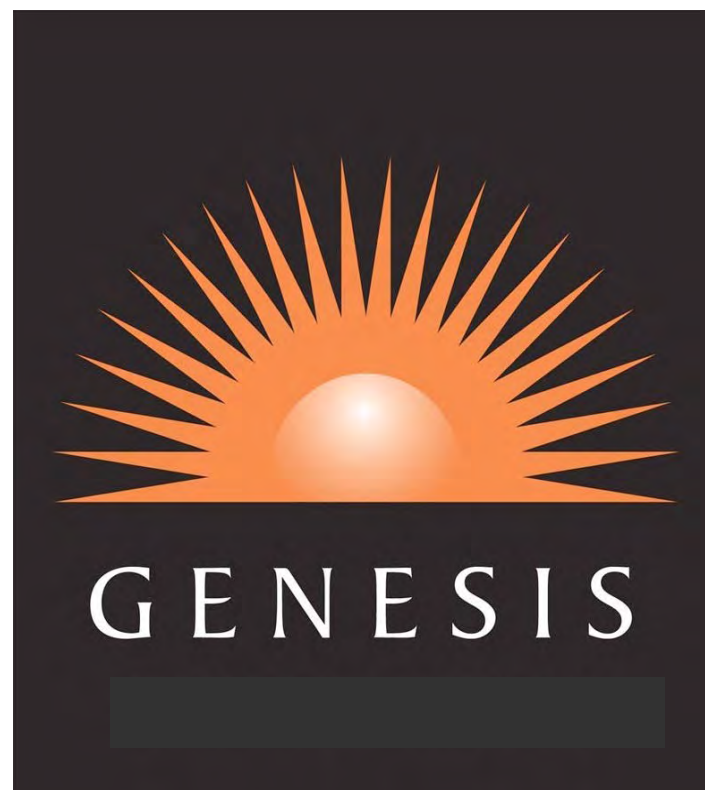
The health leader...



The 'juggernaut' of health systems reform...



**Part B: THE  
*LEADS in a  
CARING  
ENVIRONMENT*  
CAPABILITIES  
FRAMEWORK**





• Defining Leadership

# Leadership Defined

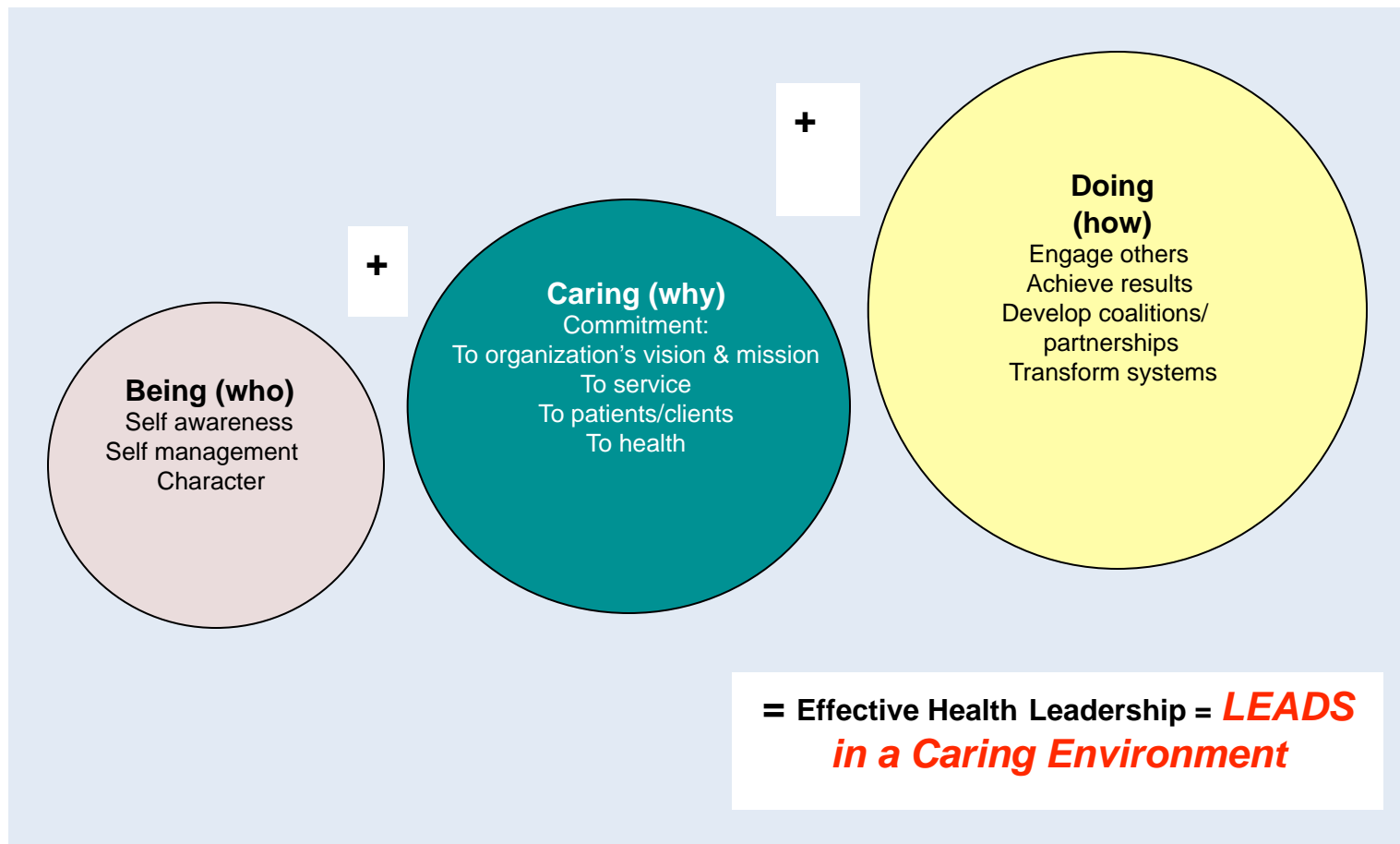
*“**Leadership** is the capacity to influence others to work together to achieve a constructive purpose”.*



# Chronology of *LEADS in a Caring Environment*

- BC research project 2006
- Pan-Canadian project 2007
- CHLNet project 2008-9
- Endorsement by HCLABC 2007
- Endorsement by CHLNet 2009  
and Canadian College in 2010
- Initial assessment by/for  
Accreditation Canada
- Provincial endorsements

# Building blocks for *LEADS in a Caring Environment*



# The Caring 'Identity'

- Anyone who has worked in the health system any length of time *cares* about the health of their fellow citizens, of their fellow workers, and the health of the health system. But what does this situation mean for leaders? At the core is tangible evidence of an **ethos of compassion and empathy for others**, which plays itself out as putting the **patient, client, employee or citizen's welfare** at the centre of our work...

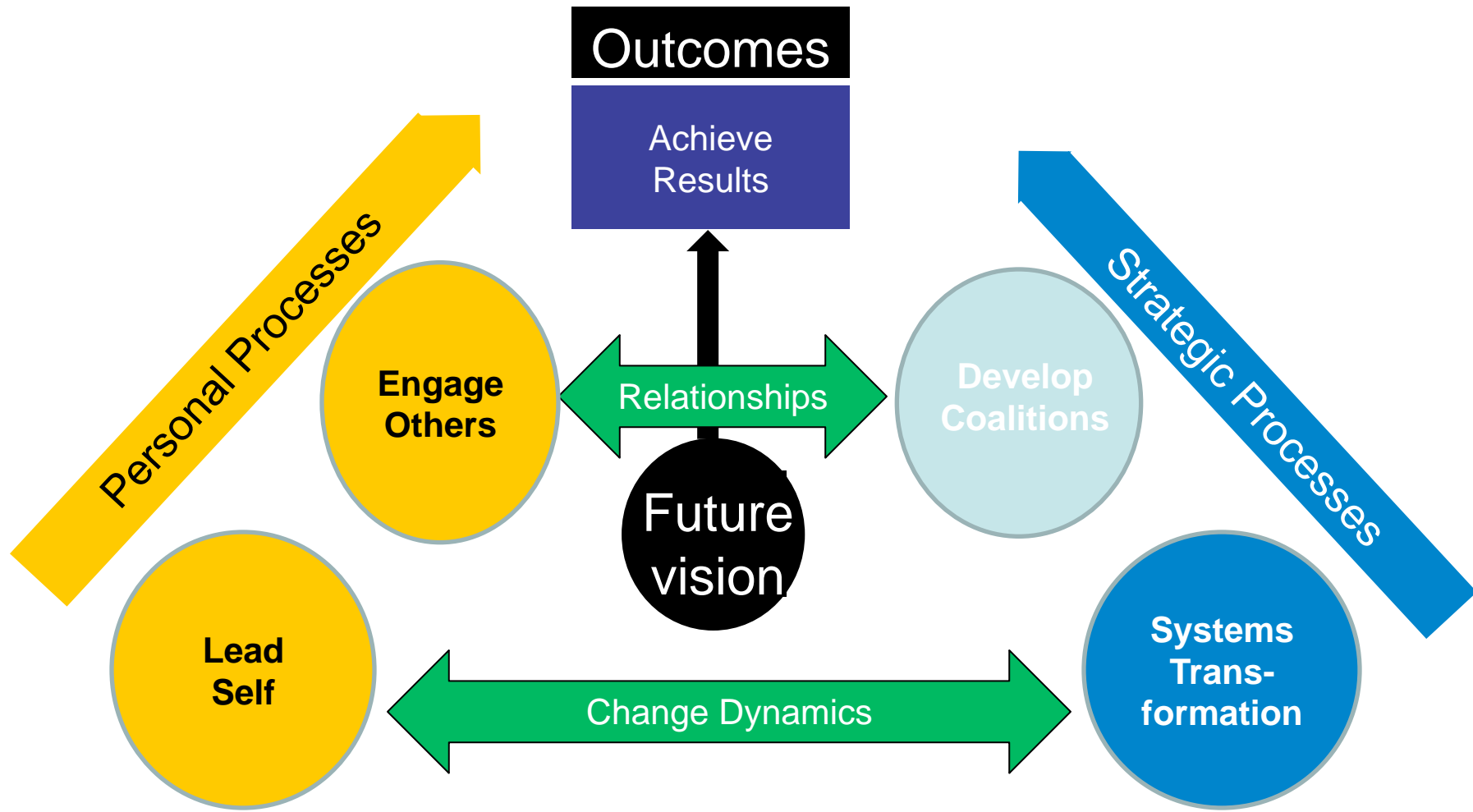
# The Power of LEADS

From a Gleam in the eye to reality...

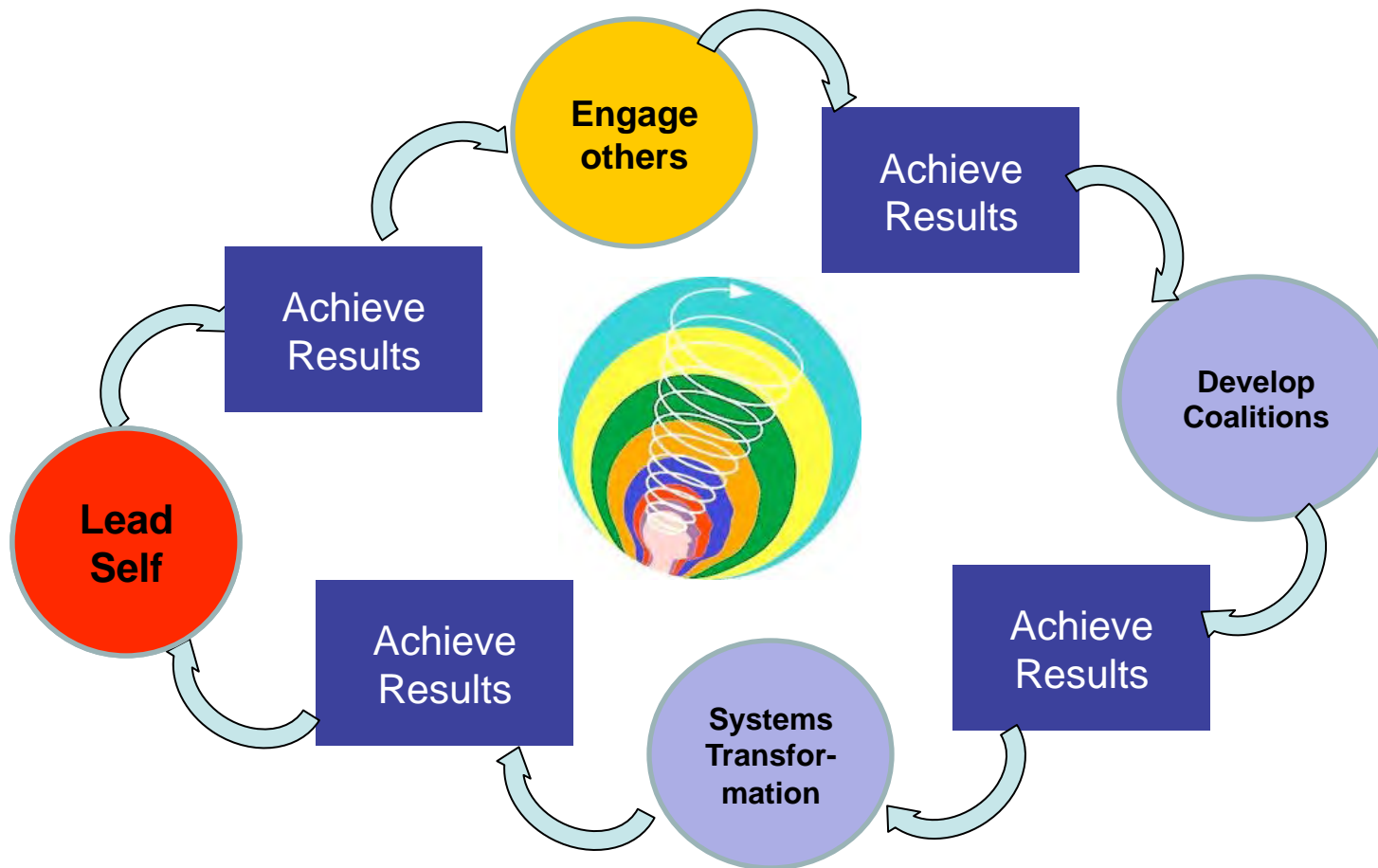
- The **LEADS** in a **Caring Environment** Framework as a guide to leading change in health systems...



# *LEADS in a Caring Environment* as a model for change



# The *LEADS* in a Caring Environment change model in action



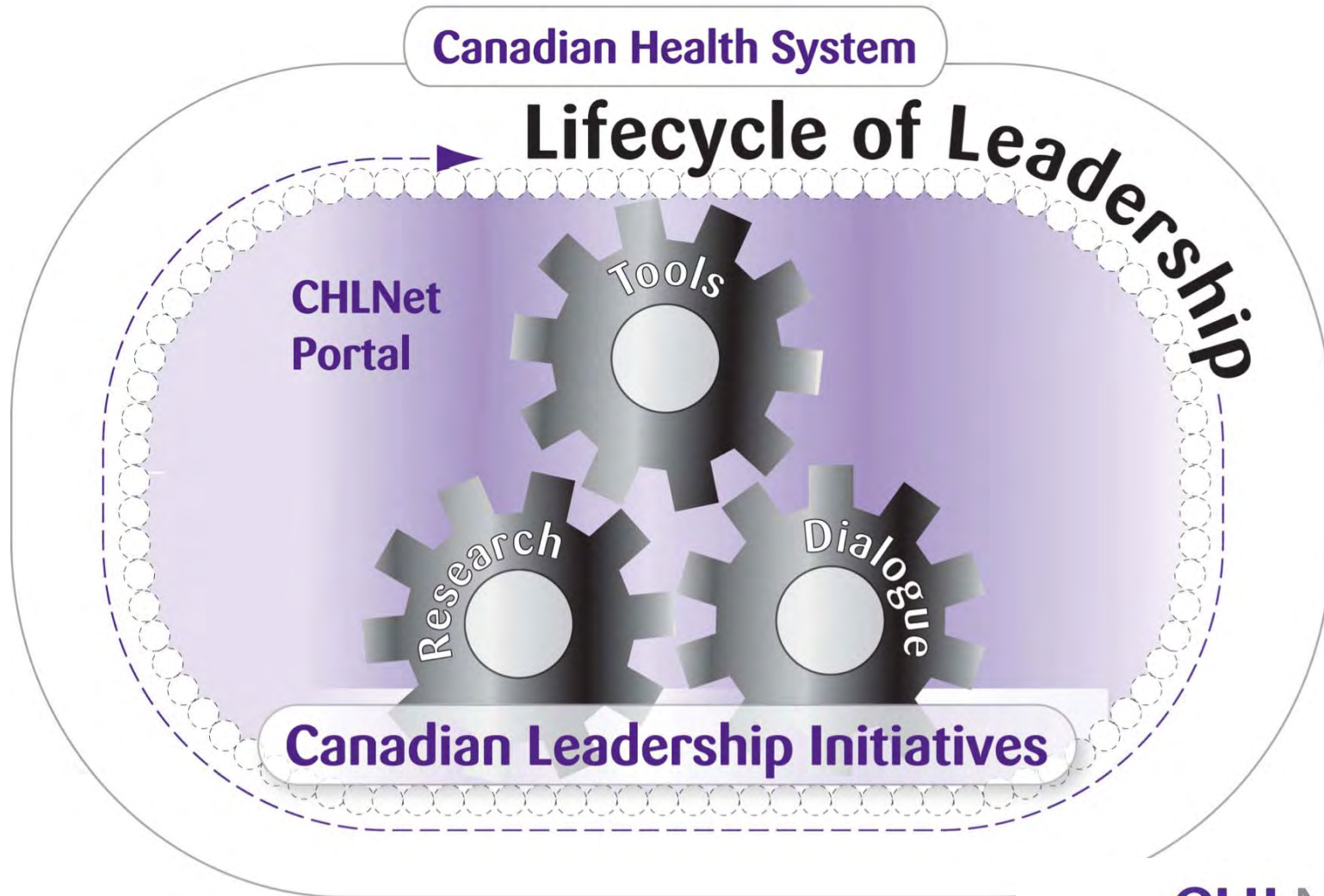
# Utility of the *LEADS* Framework

- 📌 System perspective / common model
- 📌 Clear, coherent, compelling conceptual model
- 📌 Interprofessional/interdisciplinary ‘buy-in’.
- 📌 *For Health, By Health...* Customized tools (L4L)
- 📌 Team development and management.
- 📌 Basis for curriculum development

## ***PART C: CHLNet*** **‘Core Business Lines’**

- To develop/support/disseminate ‘*for health, by health*’ leadership development **tools**.
- To create opportunities for **authentic dialogue**
- To coalesce a **research** agenda around ‘network of centres’ of **leadership** excellence.

# CHLNet 'Core Business Line'



# Coalition Building...

## The Network Partners

- **Founding Partners (n=12):** Canadian Nurses Association; Association of Academic Healthcare Organizations; Academy of Canadian Executive Nurses; Canadian Medical Association; Canadian Healthcare Association; **Emerging Health Leaders**; Accreditation Canada; Canadian College of Health Service Executives (Host Secretariat); Health Care Leaders Association of British Columbia; Canadian Agency for Drugs and Technologies in Health; Canadian Society of Physician Executives; Canadian Patient Safety Institute.
- **New Network Partners:** Canadian Pharmacists Association; Canadian Blood Services; Public Health Agency of Canada; Public Health Association of Canada; Victoria Order of Nurses; Rx and D Canada; Canadian Institute for Health Information; Royal Roads University; Royal College of Physicians and Surgeons of Canada ; Manitoba Health; Health PEI; Ontario Association of Community Care Access Centres.
- **Eligibility:** Ongoing strong commitment to excellence in health leadership; Annual Network Fee; acceptance of **LEADS in a Caring Environment** capabilities framework



# Part D: *For Health By Health Tools*

- **Develop**
- **Identify**
- **Assess**
- **Develop/**





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# The questions addressed

Personal

Institutional

Individual

Employer

Sector

How can I plan and progress my career in an organized way?

How can we ensure high calibre leaders today and into the future?

How can we be sure that capable people are leading the system?

Career plan  
Personal development plan

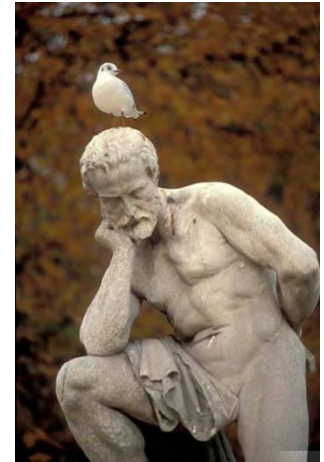
Leadership development plan  
Succession plan

Credential/licence professional development process

# Imagine...

## ***Lifecycle of Leadership* with Ongoing, Supported Career Development and Learning Management**

- Capability and behavioural expectations.
- Personal assessment against aspirational capabilities
- Mentor/Mentee matching
- Executive coach selection
- 360 assessment
- Personal career development and learning plan
- Work experience across employers and sectors
- Online access to learning opportunities
  - Self-directed and supported learning
  - Work experience / work placement matching
  - Academic offerings - Inventory of “mapped” academic programming
- Community of practice of health leadership discussion groups
- Ongoing self-evaluation and “course correction”



# *LEADS in a Caring Environment*

## Resources for leaders in healthcare

KEY POINTS TO LEADERSHIP GROWTH: A CHECKLIST FOR LEADERS

### LEAD SELF: KEY CONCEPTS AND IDEAS

LEAD SELF

ENGAGE OTHERS

ACHIEVE RESULTS

DEVELOP COALITIONS

SYSTEMS TRANSFORMATION

The *Lead Self* domain of the LEADS in a Caring Environment leadership capability framework, consists of four capabilities: a leader (1) Is Self-Aware, (2) Manages Self, (3) Develops Self, and (4) Demonstrates Character. Leaders who demonstrate these capabilities are able to:



### *Self-Aware*

- Be emotionally self-aware. This refers to the ability to recognize the leader's own emotions and determine their impact on others. It requires the ability to accurately assess the leader's own emotional triggers and weaknesses, as well as one's emotional strengths.



## Example: 360 assessment

Five *LEADS in a Caring Environment* Framework Domains

Four sentinel behaviors per domain

Three key questions for each of four executive levels.

60 questions per executive level.

Plus selective psychometric assessments

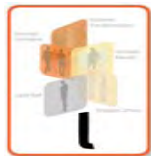
## Leadersforlife Hard Assets and Process steps involved

Most of these products, services and processes are up and running.

They are all branded and closely keyed to the LEADS Framework.

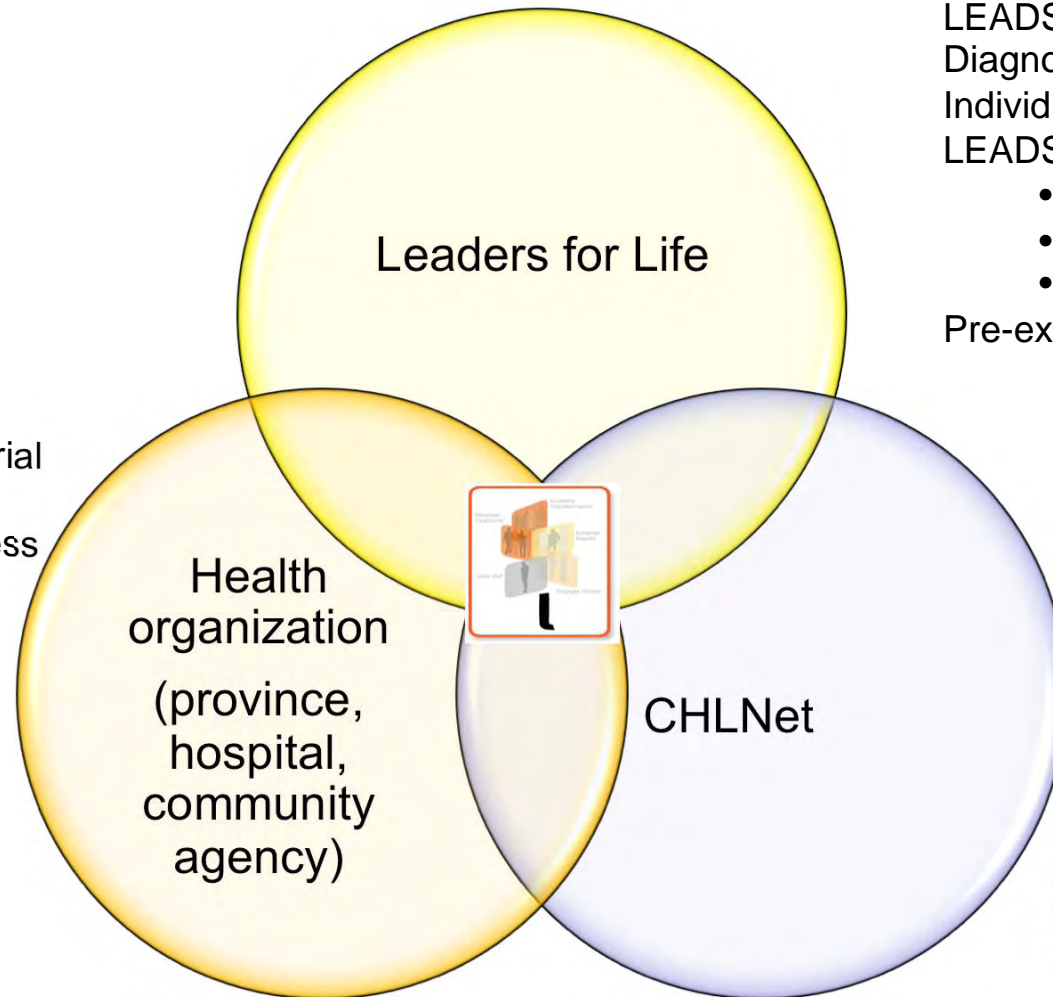
The LEADS Framework has been endorsed and or adopted in Canadian healthcare as “LEADS in a Caring Environment”.

The Framework and collateral materials are easily capable of conversion for other sectors.



- Organizational “diagnostic”
- Capabilities Framework with behavioural characteristics @ 4 levels.
- Self assessment against aspirational capabilities
- Mentor/Mentee matching
- Executive coach certification and selection
- 360° assessment
- Psychometric assessments
- Learning styles assessment
- Personal career development and learning plan
- Work experience across employers and sectors
- Online portal.
  - Self-directed and supported learning
  - Work experience / work placement matching
  - Access to learning opportunities
  - Inventory of “mapped” and pre-qualified academic programming
- Community of practice discussion groups
- Ongoing self-evaluation and “course correction”
- Graduated passport /e-portfolio/ credential (work in progress)

E-Portal  
World Class material  
24/7 leadership  
development access



Research depth.  
LEADS Organization  
Diagnostic  
Individual assessment  
LEADS-Certification.  
•Coaches  
•Facilitators  
•Consultants  
Pre-existing contract.

National dialogues  
Research  
Resource sharing

# LEADS Across Canada



# The Future of *LEADS* in a *Caring Environment*?

- Basic Building blocks...
  - (1) 'leadership without ownership'
  - (2) value network 'governance'
  - (3) power of partnering
- Managing expectations (capacity?)
- Buy-in (senior decision-makers).
- Wildcards...(PEST?).
- Stay tuned...*Participatory Action Research* project.

**Thank you**

**For more information see**

**[www.CHLNet.ca](http://www.CHLNet.ca)**

**or [leadersforlife.ca](http://leadersforlife.ca)**