



**The Canadian Health Leadership  
Network  
2009 – 2012  
Strategic Plan**

**April 2009**

## **Background and Context**

### **CHLNet History**

On May 15 2006, an ad-hoc “coalition of the willing” (health system leaders from across the country) met and resolved to address the imminent leadership shortage through the creation of the Canadian Health Leadership Network (CHLNet). A year later, on May 22<sup>nd</sup> 2007, over 100 emerging and senior health system leaders gathered in Ottawa to review the progress of the network and provide feedback regarding next steps.

### **Organization of CHLNet**

Since 2006, CHLNet has established itself as a network of health organizations and individuals with a collective goal to identify, develop, support, and celebrate leaders across all health professions and over the lifecycle of leadership.

Oversight of network’s activities has been led by individuals and associations. A volunteer steering committee has guided the network’s development to date. The CMA has contributed staff time and office space (on a temporary basis) for a small secretariat for the Network. More recently, the secretariat role has been assumed by the Canadian College of Health Service Executives (CCHSE). Secretariat staff is supplemented with outside assistance for project work. Volunteer co-chairs (Don Philippon and Elma Heidemann) lead the activities of the Network. Members of the steering committee also volunteer their time to participate in all activities undertaken by the network.

### **Fundamental Assumptions Underlying CHLNet**

The success of the network is based on several fundamental preconditions that have widespread support.

1. Those currently in leadership positions in the health and health service sectors are prepared to invest in appropriate and accessible professional development programs.
2. There is a critical mass of current and former Canadian health leaders who are concerned enough about the future to volunteer time and lend their support to developing a network of leadership nodes across the country.
3. There is widespread lack of succession planning/development in Canada.
4. There is no network or “market clearing mechanism” to allow for progression on the “leadership ladder”.

Broadly speaking, CHLNet seeks to bridge existing leadership development activities to facilitate a coordinated and collaborative strategy to increase the effectiveness of initiatives targeted at Canada’s emerging and senior health system leaders.

### **Goal**

The goal of CHLNet is to provide organizations and individuals interested in leadership with access to:

- Applied leadership development tools
- Collaborative dialogue and networking opportunities
- Health leadership development best practices

### **Objectives**

The objectives of CHLNet are to:

- Create a community of interest among individuals and organizations seeking to secure competent and capable leaders to meet the demands of the present and future health care system
- Espouse a culture of knowledge and exchange among CHLNet members and other networks or organizations who have undertaken leadership initiatives so that the wisdom and experience of health leaders might be disseminated
- Facilitate a greater organizational commitment to leadership development in the health and health care sector along a continuum
- Encourage coordination of research in the areas of leadership and leadership development
- Create an environment that recognizes and celebrates the success and achievements of health system leaders
- Serve as a forum to position leadership issues within the Pan-Canadian health human resources (HHR) planning process.

**CHLNet's value proposition** is to facilitate "one-stop shopping" for any organization looking to identify best practices in health leadership training and development over the lifecycle of leadership. To deliver its value proposition, CHLNet has identified three pillars - tools, research, and dialogue/networking – to be delivered via a web-based portal. When fully implemented, the portal will enable a more cohesive and comprehensive strategy to address leadership development issues in Canada.

### **Ongoing Activities**

To date, CHLNet activities have focused on establishing a partnership model, hosting leadership summits, developing and evaluating the validity of a made for CHLNet competency framework, seeking funding sources for awards and leadership fellowships, and pursuing stable funding for operations.

## **The Forward Agenda**

On February 2<sup>nd</sup>, 2009 members of the steering committee (SC) met in Ottawa to develop the short, medium and long term strategic directions for CHLNet. As part of the planning process, SC members took into consideration a scan of the current and anticipated future operating environment. The landscape is characterized by an aging leadership cadre with anticipated retirements expected to create a vacuum of experienced senior health leaders. Furthermore, it is recognized that the current traditional development channels will not be able to produce enough replacements to fill the gap left by exiting leaders. Complicating matters, the next generation of leaders wants to work differently than the one before it, and expects less hierarchy, greater involvement and earlier decision making responsibility. This generation also has needs for supports such as mentors, teaching tools, and training that the system as it is currently configured is not prepared for.

The declining economic climate will also present challenges to CHLNet as it seeks to secure additional funding to support an already scarce financial resource base. The current uncertain political and economic climate could also have negative health system implications as the sector is squeezed for greater efficiencies. The absence of a common vision of leadership in health (much of the HHR focus has been on front line

workers and less on leadership) as well as the lack of formal / systematic leadership training across the country represents both a challenge and an opportunity for CHLNet.

Other issues of importance in the planning process include the need for a focus on inter-professional health education, practice and leadership development; maximizing synergies with similar organizations; leveraging the knowledge and skills of existing leaders; understanding the impact of inter-provincial trade mobility; and growing leadership capacity.

Added to this complex environment, CHLNet is attempting to address the needs, interests and expectations of a diverse set of stakeholders. These include grassroots leaders (presidents and CEOs of regional health authorities and large health organizations across the country), employers (including those that have invested in the CHSRF EXTRA program), the learner/individual leader, federal and provincial governments, post-secondary institutions, the Canadian public, the research community, CHLNet founding member organizations (and other national/provincial health associations), and the private health sector. Key to the success of CHLNet will be its ability to deliver on a core set of expectations. These include demonstrating the value-added of CHLNet, the ability to establish mutual benefit with other organizations/groups and ensuring relevance and rigour of inputs and outputs (including up-to-date knowledge). CHLNet must demonstrate that it does not duplicate current efforts by other organizations, and it must also demonstrate its value added activities. As well, it will be important for the network to share leadership development knowledge and information, and to be able to leverage collaborative synergies.

### **Strategic Challenges and Opportunities**

In summary, these and other elements of the current context present the following strategic opportunities and challenges to CHLNet as it strives to survive and thrive in these challenging times:

Core to CHLNet's survival will be its ability to

- Differentiate itself in the market place, to clarify its value proposition and to deliver on its promises;
- Secure stable funding;
- Support collaboration;
- Leverage champions at all levels across Canada;
- Clarify CHLNet governance and organizational structure; and
- Develop the electronic portal as a magnet for users / members

Several strategic or potential growth opportunities are also available to CHLNet. These include

- Establishing a partnership model for CHLNet;
- Building on a successful leadership summit to gain additional momentum;
- Validating and leveraging the competency framework;
- Developing a national inventory of leadership development programs; and
- Pursuing leadership fellowship awards

The value of strategic planning is often in the process to get there, as it results in a set of common values, as well as a common and clear understanding of the directions set for the organization and the mechanisms to implement and to monitor progress against the plan. The thrust of this strategic plan is to ensure that the plans, priorities and resource

allocations of the organization reflect the needs and interests of CHLNet's current and potential members/stakeholders.

### **CHLNet Mandate**

CHLNet is an unincorporated network of organizations and individuals with a collective goal to identify, develop, support, and celebrate health system leaders across the country and over the lifecycle of leadership.

### **CHLNet Key Result Areas**

The themes presented below represent areas where key results must be achieved over the next three years in order for CHLNet to transition beyond its formative stage as an organization. The key result areas have been clustered into two broad categories – (1) Products and Services and (2) Strategy and Administration. The statements below each heading represent the desired outcomes CHLNet is hoping to achieve over the next 3 years.

#### ***Products and Services***

The following products and services all fit under one of CHLNet's identified three pillars: Inventory/Tools, Research, and Dialogue/Networking.

#### **1. Leadership Development Inventory**

The CHLNet inventory of leadership development curriculum and training activities in Canada is a critical product for the Network, and it is anticipated to be highly valued by all stakeholders. The Inventory will be linked to the identification of leadership development best practices and to a leadership capabilities framework. This Inventory will also support CHLNet's broader research agenda.

#### **2. Leadership Development Research Agenda**

CHLNet has identified a robust research agenda for health leadership and for its funding sources. This research will produce a respected body of knowledge. This includes action research projects to test a leadership capabilities framework, as well as other pilot projects to address leadership development gaps.

#### **3. Fostering Excellence in Health Leadership**

- CHLNet will provide a comprehensive inventory of high-quality, inter-professional leadership programs, based on CHLNet's standard criteria. .
- CHLNet will provide a nationally recognized competency framework for health system leaders, which will be communicated through CHLNet member organizations.
- CHLNet will further develop a recognized pan-Canadian awards and fellowship program, in partnership with other existing programs.

#### **4. "Commons" Meeting Space**

CHLNet will develop and implement innovative opportunities for dialogue among health system leaders. Through CHLNet, there are opportunities (virtual and in person) for dialogue among groups of health leaders.

#### **5. Safe House**

CHLNet will provide a virtual "safe house" for leaders in transition. Relevant resources and contact information will be accessible. The concept of an "Executive in Residence" will be further explored.

CHLNet will develop and implement a *virtual portal* to facilitate the aforementioned products and services. This enabling technology will connect health system leaders throughout the lifecycle of leadership.

### **Strategy and Administration**

- 1. Stable Funding**

Operational funding is committed and predictable to ensure a strong and effective CHLNet

  - Resource partners are known and diverse;
  - Funding commitments are stable and multi-year;
  - Funding is sufficient to achieve the key strategic goals;
  - The business plan and financial plan are aligned;
  - Sufficient resources are in place for funding transitions and researching new opportunities.
  
- 2. Governance Model**

CHLNet has established a governance model with a clear vision and mandate.
  
- 3. Organizational Structure**

A successful organizational structure (i.e. staff and contractors) has been implemented for CHLNet.
  
- 4. Fostering Connections**

CHLNet has fostered partnerships and alliances with stakeholders, including governments, universities, other networks (Community for Excellence in Health Governance (CEHG), EHL, Canadian Interprofessional Health Collaborative (CIHC), etc.) and research entities to meet the objectives of CHLNet priorities.
  
- 5. CHLNet Membership**

CHLNet membership (both organizational and individual) has been defined and further developed.

Two key areas require immediate attention. These are governance and membership.

#### **Governance**

It was noted that The Canadian College of Health Service Executives (CCHSE) has agreed to take over (from CMA) as the host secretariat for CHLNet. The College requires that CHLNet has a governing structure, and this should include decision making, budgeting, secretariat support, strategy, and reporting to monitor performance. It was also noted that the costs and risks associated with the services provided by the host secretariat and other costs and risks associated with the operation of CHLNet should be shared as agreed among the organizational members of the CHLNet Board. (The CHLNet Provisional Framework was revised on January 21, 2009).

Participants identified the following issues that require attention/clarification:

- The role of the CHLNet co-chairs;

- The CHLNet governing (fiduciary) board, and the possibility of also establishing an advisory committee;
- Terms of reference are required for both above;
- Responsibilities, including secretariat support to CHLNet, and financial contribution of CHLNet governing (fiduciary) organizational board members.

### **Membership**

CHLNet will focus on both organization and individual members. Governments, health authorities, and health service provider organizations are among the key target organizations. It was agreed that a strategy is required to obtain organization and individual funding, and that CHLNet needs to clearly communicate its benefits to current and potential members. A CHLNet blueprint document (including the value proposition, business plan, funding plan, and timelines) is required. The concept of current partner organizations with a membership base gaining CHLNet membership as a value-add will need to be considered.

### **Conclusion**

CHLNet is proud to work to identify, develop, support, and celebrate health system leaders across the country and over the lifecycle of leadership. This strategic plan will be used to guide the network's activities from 2009-2012.