Leadership Performance and Development Plan

Overview
February 2015
Leadership Performance & Development Plan

• The Leadership Performance and Development Form is a tool for leaders, in collaboration with their supervisors, to discuss and document
  ‣ 1) Key performance results and expectations;
  ‣ 2) Professional learning goals; and
  ‣ 3) Feedback on performance results and development progress.
About the LP&D Plan

- For all Health Leaders
- LEADS Based: Integrates with the LEADS Framework and LEADS 360
- Results Focused: Aligns with the Health PEI Strategic Direction and Quality Framework
Leadership Performance and Development Plan - Outline

1. Performance Plan
   1. **Achieve Results**: What is your mandate, annual priorities and performance goals?
   2. **Engage Others**: How will you work with others and support your team to achieve results?
   3. **Develop Coalitions**: How will you engage with patients, families and stakeholders to ensure services respond to patient / client / resident needs?
   4. **Systems Transformation**: How will you model and promote innovation, systems thinking, and knowledge sharing?

2. Comments and Feedback

3. Development Plan
   1. **Leads Self**: Leadership Capabilities Assessment and Development Plan (To be Completed Following the LEADS 360)
P&D Template Section 1: Achieve Results

• Mandate. 1 paragraph. Include:
  ‣ Service / program summary, including key responsibility areas; Budget; FTE.

• Priorities
  ‣ Strategic Priorities: Projects you lead which link to the strategic priorities
  ‣ Quality Priorities: Projects you lead which link to Quality Priorities
  ‣ Operational Priorities: Priority projects within your area of responsibility.

• Targets
  ‣ Bulleted list of annual targets related to key priorities (2-3. No more than 5).

• Performance Summary
  ‣ To be completed with supervisor at year end

• Performance Review
  ‣ To be completed by supervisor at year end
Achieve Results – Examples of Priorities

• Examples of Priorities
  ‣ Strategic Priorities include: Include Wait times fin Emergency Departments, Improve Length of Stay and Patient Flow, Implement CPOE, Implement EMR, etc.
  ‣ Quality Initiatives include LEAN Projects, AC red flags and ROP’s. Examples – Medication reconciliation, falls prevention, Advanced Clinical Access.

• Format
  ‣ Provincial Strategic or Quality Initiative
    ▪ Specific deliverables for your program area

• Sample
  ‣ Decrease wait times in Emergency Departments
    ▪ Implement LEAN Project recommendations and develop action plan for ER review
Engages Others; Develops Coalitions; Systems Transformation

- Sections under each area:
  - To complete now:
    - Goal Statement
    - Performance Metric
    - Activities to Achieve Goal
  
  - To complete at year end
    - Performance Summary (To review with Supervisor)
    - Performance Review (To be completed by supervisor)
Example: Develop Coalitions

• Goal
  ‣ The division will involve patients and families in quality improvement and service planning initiatives by inviting participation on committees and working groups.

• Metric
  ‣ Number of committees and working groups with patient / family / stakeholder members

• Activities
  ‣ Identify key groups which should include patient, family and or stakeholder representation
  ‣ Develop and implement a recruitment and orientation process
  ‣ Develop and implement a communication plan
Example: Engages Others

- **Goal**
  - Ensure that all direct reports have up to date development plans

- **Metric**
  - Rate of Completion of Development Plans submitted to HR.

- **Activities**
  - Communicate and review the development planning process and expectations to direct reports
  - Schedule meetings with direct reports to review and provide feedback on plans.
  - Schedule and conduct annual reviews of development plans with direct reports
Example: Systems Transformation

- **Goal**
  - Model and promote the use of standard engagement tools to communicate system direction to staff by regular participation in Quality Boards and Huddles

- **Metric**
  - Sign-off on Quality Board Pyramids

- **Activities**
  - Ensure an annual schedule and process for Division
  - Become trained and proficient in the process
  - Schedule meetings into calendar
Section 2: Comments

• Documentation of Supervisor and your comments at the end of the year.
Section 3: Development Plan (LEADS Self)

• The focus of this section is on YOUR development. It builds on strengths and your development priorities.

• Your data: LEADS 360 feedback as well as other development feedback and information.
LP&D Plan Schedule

• Executive Level: Plans completed by Dec. 31, 2014

• Senior Level: To be completed by March 31, 2015 (Within 4 months of LEADS 360 debrief)

• Mid-level: Target – Within 4 months of LEADS 360 debrief, with final deadline Sept. 1, 2015
Tools and Links

• For more information:
  ▪ Garth Waite, Organizational Development Lead. glwaite@gov.pe.ca. 368-5806
  ▪ Health PEI Staff Resource Center: http://www.healthpei.ca/src/
  ▪ Leadership Performance and Development Form: http://www.healthpei.ca/src/forms
  ▪ Health PEI Leadership Profiles (Executive, Senior and mid-level leaders). Call Garth Waite. 368-5806

• Other Links
  ▪ HPEI Pursuing Quality and Excellence: http://healthpei.ltsee.com/
  ▪ UPEI: http://www.upei.ca/skillsdevelopmentandlearning/welcome
  ▪ PEI Public Service Commission Learning and You: http://www.gov.pe.ca/psc/learn
  ▪ LEADS Collaborative: http://www.leadersforlife.ca/
  ▪ Canadian College of Health Leaders: http://www.cchl-ccls.ca/
  ▪ HealthCareCan: http://www.healthcarecan.ca/learning/
  ▪ Canadian Health Leadership Network (CHLNet): http://chlnet.ca/
  ▪ CMA Physician Leadership Institute: https://www.cma.ca/En/Pages/physician-leadership-institute.aspx
  ▪ Canadian Society of Physician Executives: http://www.cspexecs.com/

• The Leadership Performance and Development Form was developed under the Advisory Committee on Organizational Development through the Leadership Pathways Project.