

Workshop T375:

▶ **Everyday Leadership: The
CFPC's approach to leadership
education in residency**

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Faculty/Presenter Disclosure

- ▶ This program has received **NO** financial disclosure
- ▶ **Faculty:** Dr. Ivy Oandasan
 - ▶ Relationships with financial sponsors: Employee of the CFPC
- ▶ **Faculty:** Dr. Stephanie Godard
 - ▶ Relationships with financial sponsors: None



Objectives



- ★ 1. Identify the **practical leadership skills** which facilitate transition into early career leadership roles
- ★ 2. Describe the **expectations** of leadership training in Family Medicine residency and early practice
3. Explore how to implement a **competency-based approach** to leadership education

Load on your mobile device: PollEv.com/stephaniegod310

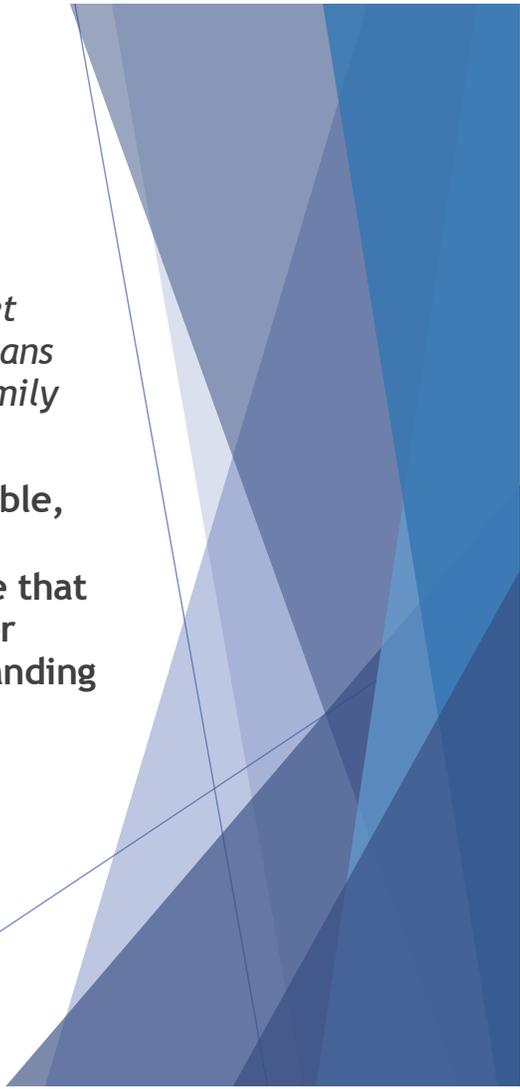
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▶ Background

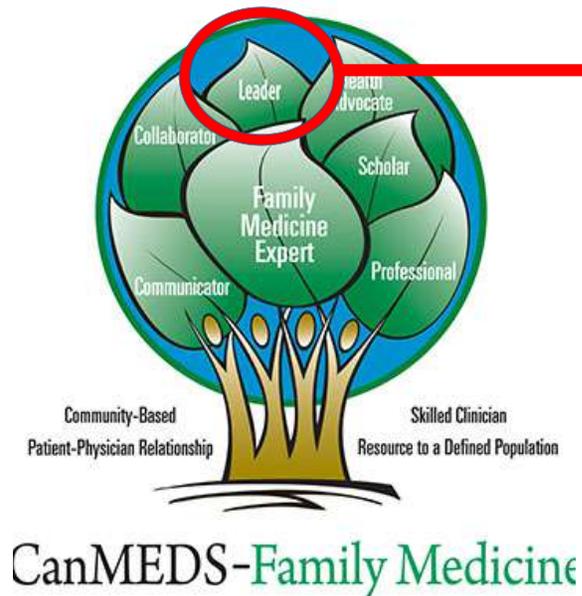


Family Medicine Professional Profile

The principal aims of the CFPC are to set educational standards for family physicians and to develop, support, and sustain family physicians in the provision of:

- ▶ **“Leadership at all levels for accessible, high-quality, comprehensive, and continuous first-contact health care that responds to local conditions, and for research that advances an understanding of this care.”**
- 

CanMEDS-FM



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Image adapted from the CanMEDS Physician Competency Diagram with permission from the Royal College of Physicians and Surgeons of Canada.

1. Contribute to the improvement of comprehensive, continuity-based, and patient-centred health care delivered in teams, organizations, and systems
2. Engage in the stewardship of health care resources
3. Demonstrate collaborative leadership in professional practice to enhance health care
4. Manage career planning, finances, and health human resources in a practice



LEAD SELF

Self-motivated leaders...

Are self aware

They are aware of their own assumptions, values, principles, strengths and limitations

Manage themselves

They take responsibility for their own performance and health

Develop themselves

They actively seek opportunities and challenges for personal learning, character building and growth

Demonstrate character

They model qualities such as honesty, integrity, resilience, and confidence



ACHIEVE RESULTS

Goal-oriented leaders...

Set direction

They inspire vision by identifying, establishing and communicating clear and meaningful expectations and outcomes

Strategically align decisions with vision, values, and evidence

They integrate organizational missions and values with reliable, valid evidence to make decisions

Take action to implement decisions

They act in a manner consistent with the organizational values to yield effective, efficient public-centred service

Assess and evaluate

They measure and evaluate outcomes, compare the results against established benchmarks, and correct the course as appropriate



SYSTEMS TRANSFORMATION

Successful leaders...

Demonstrate systems / critical thinking

They think analytically and conceptually, questioning and challenging the status quo, to identify issues, solve problems and design, and implement effective processes across systems and stakeholders

Encourage and support innovation

They create a climate of continuous improvement and creativity aimed at systemic change

Orient themselves strategically to the future

They scan the environment for ideas, best practices, and emerging trends that will shape the system

Champion and orchestrate change

They actively contribute to change processes that improve health service delivery



ENGAGE OTHERS

Engaging leaders...

Foster development of others

They support and challenge others to achieve professional and personal goals

Contribute to the creation of healthy organizations

They create engaging environments where others have meaningful opportunities to contribute and ensure that resources are available to fulfill their expected responsibilities

Communicate effectively

They listen well and encourage open exchange of information and ideas using appropriate communication media

Build teams

They facilitate environments of collaboration and cooperation to achieve results



DEVELOP COALITIONS

Collaborative leaders...

Purposefully build partnerships and networks to create results

They create connections, trust and shared meaning with individuals and groups

Demonstrate a commitment to customers and service

They facilitate collaboration, cooperation and coalitions among diverse groups and perspectives aimed at learning to improve service

Mobilize knowledge

They employ methods to gather intelligence, encourage open exchange of information, and use quality evidence to influence action across the system

Navigate socio-political environments

They are politically astute, and can negotiate through conflict and mobilize support

DISTRIBUTED LEADERSHIP

Do these capabilities apply to all leaders regardless of role or formal position?

Yes... All leaders – regardless of their role, or position in the health system – must be able to lead themselves, engage others, achieve results, develop coalitions, and conduct systems transformation in order to create the Canadian health system of the future.

“Existing roles and functions of decision-makers need to be evaluated to ensure they meet the leadership needs of the new and emerging healthcare paradigms.”

- Don Briscoe

and No... For each of the five LEADS domains, “leader effectiveness” differs, depending on the context in which an individual exerts influence. In different contexts, capabilities differ in expression.

“The mastery of the art of leadership comes with the mastery of the self. Ultimately, leadership development is a process of self-development.”

- James Kouzes & Barry Posner, The Leadership Challenge

To create a leadership culture, each person in the system, regardless of position or title, must exercise leadership when it is required. This is distributed leadership.



▶ The WHY

Family Doctors lead in a stressed healthcare system

Family doctors lead at all levels

Graduates desire "everyday leadership skills"

FMEC-PG calls for "national core leadership curriculum"

Leadership skills not universally addressed in training

Leadership Development in Family Medicine

The Learner's Perspective

FFYP Survey (CFPC 2016):

- 58% felt only somewhat prepared
15% not prepared for leadership roles
 - Working in interprofessional teams, chairing committees, patient advocacy
- Desired leadership training: conflict management, QI, practice management, career planning

McMaster Resident Survey (Gallagher 2017):

- Want more leadership training!
- Desired competencies: teaching, administration, systems leadership
- Undesired competencies: relationships, self-awareness, professionalism, communication

Leadership Development in Residency: Review of the literature

Sultan et al (2018)

- ▶ 21 residency articles incl 2 Family Medicine
- ▶ Taught “cognitive level” leadership skills (finance, communication, QI, critical thinking)
- ▶ Criticism:
 - ▶ lack of focus on character based leadership
 - ▶ lack of leadership frameworks

Godard (2018)

- ▶ 10 Family Medicine articles
- ▶ “high level” leadership skills taught through a specific lens (QI, PH, PM, teaching)
- ▶ Favourable program features:
 - ▶ Longitudinal, mixed methods, mentorship, self-reflection, placements, scholarly projects





▶ The WHAT



Activity 1: What is “everyday leadership”?

Poll

Reflecting on day-to-day work in your *clinical* setting:

- What are examples of activities that family doctors engage in as a part of “everyday leadership”?

PollEv.com/stephaniegod310

What are examples of activities that family doctors engage in as a part of "everyday leadership"?

Key leadership activities all residents should be prepared to do

1.-

2.-

3.-

4.-

5.-





Activity 2: What leadership skills and behaviours facilitate everyday leadership activities?

Instructions:

In your small groups:

1. Identify a leadership activity of focus (from Activity #1)
2. Carefully read through **LEADS** and **CANMEDS-FM** frameworks and discuss which skills/behaviours facilitate success in this leadership activity
3. **Circle the top 10 most important skill/behaviors** from each that are *key* to your leadership activity (*5 from each framework*)
4. Have one group member **submit your 10 key skills** by following the link below:
 - ❖ separate polls exist for LEADS and CANMEDS-FM

[PollEv.com/stephaniegod310](https://www.pollEv.com/stephaniegod310)

LEADS: what are the leadership skills / behaviours key to your leadership activity?

- L: self-awareness
- L: Manage themselves
- L: self-development
- L: demonstrate character (integrity, honesty)
- E: foster development of others
- E: contribute to creation of health organizations
- E: communicate effectively
- E: build teams
- A: set direction (inspire a vision)
- A: align decisions with vision, values, evidence
- A: take action for to implement decisions
- A: assess and evaluate outcomes
- D: build partnerships and networks
- D: demonstrate commitment to (patients) and service
- D: mobilize knowledge
- D: navigate socio-political environment
- S: demonstrate systems-level thinking
- S: encourage and support innovation
- S: orient themselves strategically to the future
- S: champion and orchestrate change

CANMEDS-FM: what are the leadership skills / behaviours key to your leadership activity?

- 1.1 Applies the science of QI to systems/patient care
 - 1.2 Fosters a culture of patient safety
 - 1.3 Analyzes patient safety incidence
- 1.4 Uses health data/tech to improve quality of care
- 1.5 Engages patients, families, caregivers in implement
 - 2.1 Allocates healthcare resources
 - 2.2 Combines evidence and best practice
 - 2.3 Manages health care resources judiciously
- 3.1 Facilities change
- 3.2 Advances quality care through engagement of others
 - 3.3 Works with others in coalitions
- 4.1 Balances personal and professional goals
- 4.2 Manages a professional practice
- 4.3 Implements processes to enhance improvement

Debrief:

In your small groups discuss:

▶ Leadership skills:

1. Did you graduate feeling confident in the key leadership skills identified?
2. To what extent do you feel competent in these leadership skills now? What has helped you enhance your competence?

▶ CANMEDS-FM vs LEADS Frameworks:

1. Which framework described leadership skills required for your activity most closely?
2. How did you use the two frameworks to inform your activity?



▶ The HOW



Activity 3: how do we teach and observe key leadership skills in residency?



Think-pair-share

- 
- ▶ **Think:** what are ways to teach and observe these important leadership skills in residency?
 - ▶ How might you measure and track competence?
 - ▶ **Pair:** with your neighbor and compare ideas
 - ▶ **Share:** with the group



About CFPC's

- ▶ Everyday Leadership Working Group

CFPC's Everyday Leadership Working Group



WHO WE ARE:
CFPC
COMMITTEE &
EXPERT
WORKING
GROUP
MEMBERS



OUR AIM:
PROMOTE
EVERYDAY
LEADERSHIP
DEVELOPMENT
IN RESIDENCY
AND EARLY
PRACTICE



MEETING #1:
ENGAGE
MEMBERS AND
ESTABLISH
OUR VISION



MEETING #2-4:
DEVELOP AND
TEST A
“PRODUCT”

Lessons Learned From Meeting #1



Key questions:

How do we define priority leadership skills?

How do we teach and observe these?

How do we embed leadership development into existing residency opportunities?

How can we map CANMEDS / LEADS



Possible approach:

Non-prescriptive, **graduated** leadership development

Focus on **clinical leadership**

Include **faculty development**

Include **self assessments /** needs assessments

Develop **leadership inventory**



Barriers:

Lack of agreement on importance

Time, resources

Supervisor buy-in

Distributed sites

Competency based approach

Delivery	Location	Description	Objectives	Framework	LEADS Domains (Mapping)	CanMEDS-FM Enabling Competencies (Mapping)	Intended Audience	Link for more information
In Person	Toronto	The Department of Family and Community Medicine runs an annual accredited leadership program for health professionals that will give you effective and applicable tools to help you become a better leader.	In this exciting workshop series, you will hear from distinguished speakers and learn to identify and analyze your leadership style to help you: - Be an authentic leader - Present effectively - Be culturally fluent - Coach, mentor and advocate for others - Manage change within your organization - Network and engage with others				Early career physicians	http://www.dcfm.utoronto.ca/event/leadership-basics-1
In Person	???	Facilitated by the Canadian Medical Protective Association (CMPA), these interactive workshops allow leaders to develop the attitudes and gain the knowledge and skills required to establish a workplace culture that promotes and prioritizes safe medical care.	Building reliable systems, managing physician performance, building a culture of accountability, building reliable systems (seperate workshops)				All	To submit a request for a workshop or an educational session visit www.cm.ca-acpm.ca/pl or send an email to education@cm.ca
In Person	Montreal (During CCME)	You supervise residents and you want to help them develop their leadership? The QMA presents you with a free training program, perfectly adapted to the reality of residents: Resident Credible "A strategy to gain credibility" A comprehensive training program to help residents: • Decode the different types of personality; • Define their leadership style; • Understand culture and power networks; • Develop their emotional intelligence; • Identify stressors. This training is free for resident members.					Residents	http://www.amq.ca/fr/information/formations-et-dpc/resident-credible
In Person	Hamilton	This workshop will focus on exploring concepts of leadership, reflecting on one's values, strengths and purpose as a basis for leadership, an analyzing components that are needed for effectively leading others.	At the end of this workshop participants will be able to: 1) conceptualise what leadership means in their professional and personal lives; 2) identify components of effective leadership; 3) Apply concepts to commit to one small leadership change				Residents and Faculty	https://heiter.com/facPFID/status/1101371327120000
In Person	Toronto (2019)	CAME created CLIME to develop national leaders in health sciences education and is designed to meet the needs of individuals who are engaged in leading initiatives that will promote excellence, innovation, change, and scholarship in Health Sciences. This Institute is geared towards Health Sciences educators who are in a position to implement new skills in the workplace. Teaching and learning methods will include: interactive lectures, individual assignments, self-reflection, small-group sessions, team work, and opportunities for networking. Moreover, case examples used during the program will be directly applicable to Health Sciences education.	By the end of CLIME, participants will be able to: - identify their professional goals as leaders in the health professions and discuss ways of achieving these goals; - analyze their own leadership styles and consider how style influences practice, using different models of leadership and change; - apply a framework for analyzing change to specific situations in their own professional contexts; - master different conflict management styles and negotiation strategies; - describe an approach to establishing and leading effective teams; and - define "scholarship" with respect to medical education and discuss strategies to foster scholarly work.				Health Science Educators	https://www.came-acem.ca/wp-content/uploads/2019/04/CLIME-2019.pdf
		This conference is the largest national gathering of health system decision-makers in Canada including trustees, chief executive officers, directors, managers, department heads and other health leaders representing various sectors and professions in health regions, authorities and alliances, hospitals, long-term	- Provide a forum to enrich health leadership practices and innovations; - Showcase leading practices and their success; - Explore issues of common interest in the areas of					

Leadership Index: A useful tool?

A weathered wooden sign with the words "NEXT STEPS" in a dark, bold, sans-serif font. The sign is mounted on a thick, weathered wooden post. The background is a bright blue sky with scattered white clouds. The sign is positioned horizontally, pointing to the right.

NEXT STEPS

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