

## Leadership Performance and Development Plan

Overview

# Leadership Performance & Development Plan

- The Leadership Performance and Development Form is a tool for leaders, in collaboration with their supervisors, to discuss and document
  - Key performance results and expectations;
  - Professional learning goals; and
  - Feedback on performance results and development progress.



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## 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)

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## 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

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### 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

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## 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

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## 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.

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## **Tools and Links**

- For more information:
  - Organizational Development Lead: <u>healthpeiworkshops@ihis.org</u>
  - Health PEI Staff Resource Center: <u>https://src.healthpei.ca/</u>
  - Leadership Performance and Development Form: <u>https://src.healthpei.ca/all-staff</u>

#### Other Links

- UPEI: <u>http://www.upei.ca/skillsdevelopmentandlearning/welcome</u>
- PEI Public Service Commission Learning and You: <u>http://www.gov.pe.ca/psc/learn</u>
- LEADS Collaborative: <u>http://www.leadersforlife.ca/</u>
- Canadian College of Health Leaders: <u>http://www.cchl-ccls.ca/</u>
- HealthCareCan: <u>https://www.chalearning.ca/</u>
- Canadian Health Leadership Network (CHLNet): <u>http://chlnet.ca/</u>
- CMA Physician Leadership Institute: <u>https://www.cma.ca/</u>
- Canadian Society of Physician Leaders: <u>https://physicianleaders.ca/</u>

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