



Building and Sustaining Value Networks: Deriving ought from is?

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CHLNet

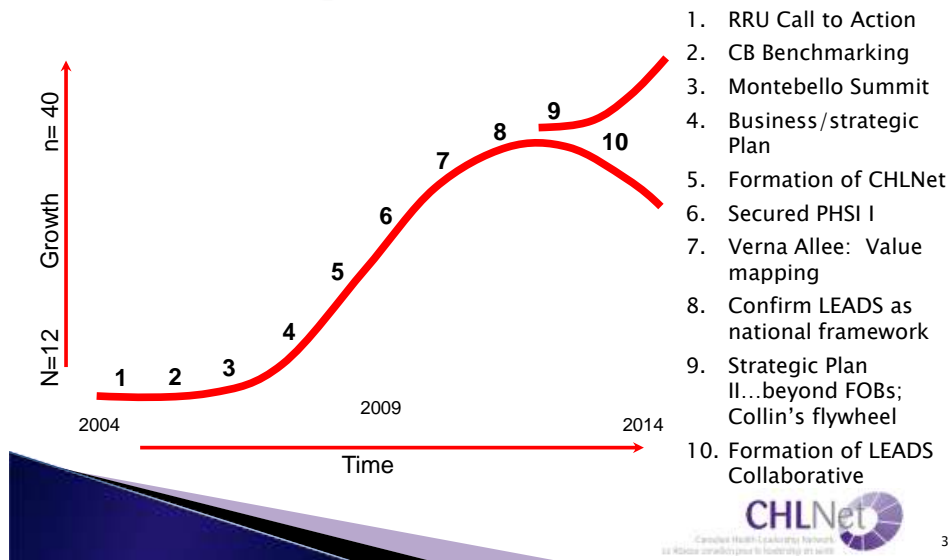
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CHLNet: Overview

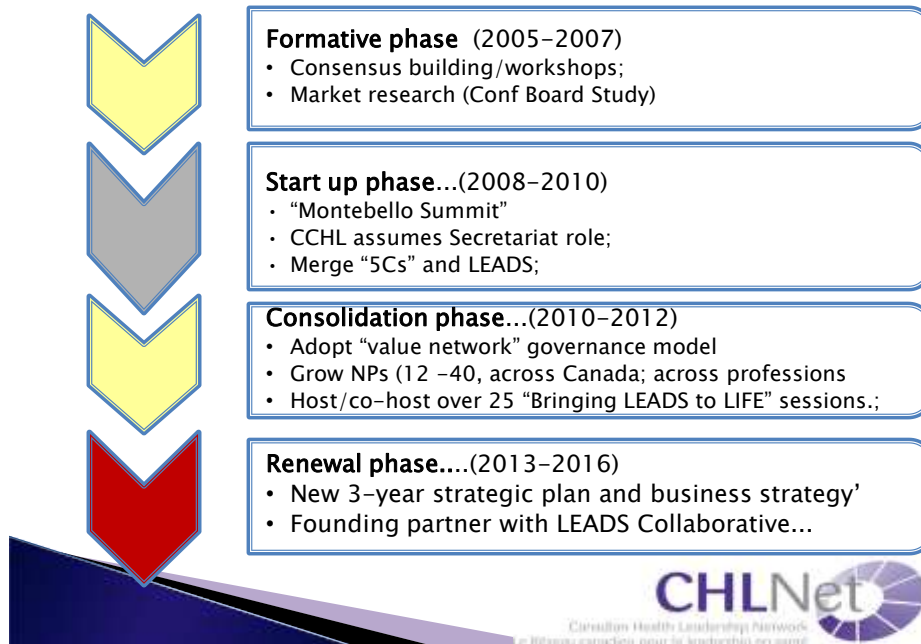
- ▶ By health, for health leadership network.
- ▶ Vision: *Better Leadership. Better Health. Together*
- ▶ Burning platform: Canada falling behind; large and growing; leadership gap; no venue for “crucial conversations”
- ▶ Driving force: “Leadership without ownership”
- ▶ Primary focus on enhancing organizational capacity; secondary focus on “Friends of CHLNet”

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Building & Sustaining a Network: Riding the Value Curve(s)



Evolution of *CHLNet*



Value Networks: In Theory



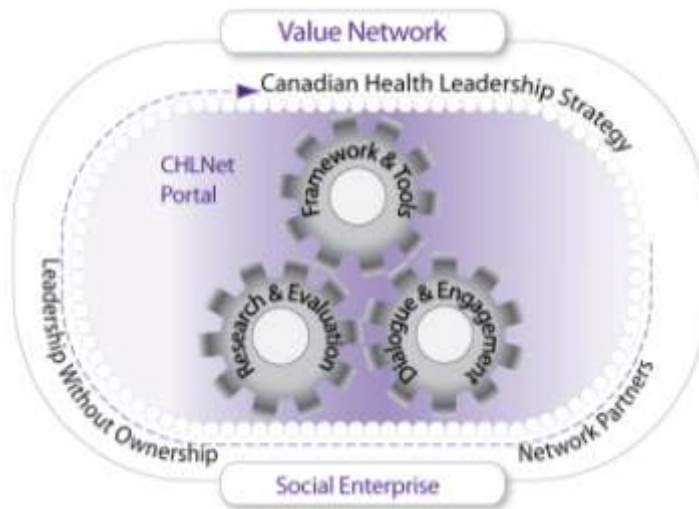
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Value Network: In Practice



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CHLNet Value Streams



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Value Streaming

- ▶ *Dialogue and engagement*...need to increasing the frequency and intensity of interactions among and between NPs.
- ▶ *Framework and tools*...need to supplement the intangible benefits with tangible benefits. (LEADS Capabilities Framework)
- ▶ *Research and Evaluation*...need to better understand the discipline of leadership in the unique context of health.
- ▶ *Advocacy*...need for a longer-term, pan-Canadian, interdisciplinary health leadership development strategy.



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CHLNet and “Carpooling”

- ▶ **Founding Partners (n=12):**
 - Canadian Nurses Association;
 - Association of Canadian Academic Healthcare Organizations;
 - Academy of Canadian Executive Nurses;
 - Canadian Medical Association;
 - Canadian Healthcare Association;
 - Emerging Health Leaders;
 - Accreditation Canada;
 - Canadian College of Health Leaders (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.



Success: CHLNet (cont.)



Growing the Network: Canadian Pharmacists Association; Canadian Blood Services; Public Health Agency of Canada; Canadian Public Health Association; Victorian Order of Nurses; Rx&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; Health Association Nova Scotia; MEDEC; BIOTECanada; Saskatchewan Health; Alberta Health; Alberta Health Services; College of Family Physicians of Canada; Yukon Health and Social Services; Mental Health Commission of Canada; BC Health Leadership Development Collaborative; Canadian Foundation for Healthcare Improvement; Ontario Hospital Association; Canadian Dental Association; Ontario Ministry of Health and Long-Term Care

LEADS across Canada

Canadian Health Leadership Network



And now, too, the potential of a
LEADS Australia...

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CHLNet & “Carpooling”: Rules of the Road

- ❑ Share the same destination
- ❑ Share the same values
- ❑ Share the risks...financial, legal, reputational
- ❑ Share the “map” (intel/info)
- ❑ Share the credit



Future Directions...the *LEADS Collaborative*



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From Concept to Reality Looking ahead

- ▶ LEADS 3.0 framework and tools
- ▶ Leadership research and evaluation (NCE, PHSI II)
- ▶ Partners' dialogue and engagement (CHLNet.ca 2.0)
- ▶ Canadian Health Leadership Strategy (Feb. 14 Montreal Forum)



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What Is the LEADS Collaborative?

- CCHL/CHLNet/RRU led
- Sustaining/growing the “Leadership commons”
- Maintaining quality/integrity of offerings
- Client-centred: Tight on outcomes – loose on process.



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LEADS Collaborative: Challenges

- Protecting/advancing LEADS framework (3.0)
- Acknowledging/addressing the “free-rider” problem...!
- Re-establishing the ground rules...”leadership without ownership”
- Getting the governance right...legal/IP/other challenges



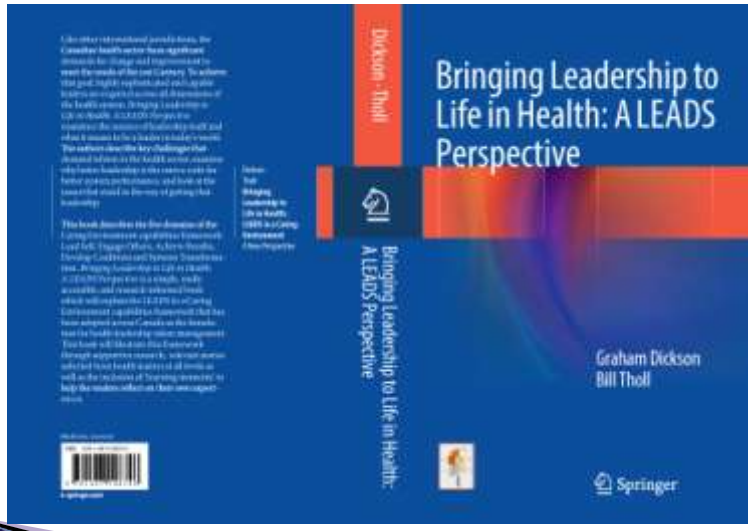
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Case study: Some key takeaways

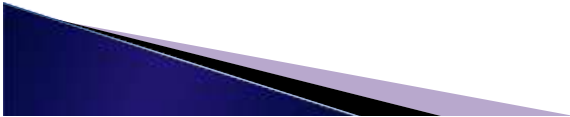
- Importance of burning platform and a clear/compelling value proposition.
- Leadership without ownership... networks are facilitated, not managed
- Values-based decision-making: trust & reciprocity
- Intangible benefits... necessary not sufficient
- Handling handoffs



Coming Soon from Springer



Q&A

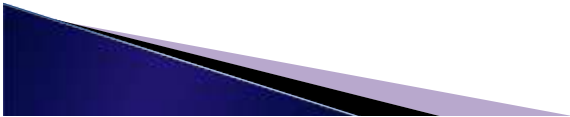


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Thank you!

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