CHLNet Courses of Action to Champion Strategic Leadership Excellence

Work Plan Progress 2026: Priorities Progress: Committee Update

EVIDENCE GENERATION PRIORITIES

1. Leadership Practices for the 21st Century to Transform Health Systems
2. Anti-Racism and Social Justice to Achieve Effective, Diverse and Inclusive Leadership
3. Leadership Styles and Practices that Promote Supportive Workplaces and Workforce Wellness
4. Climate Conscious Leadership Practices for a Sustainable Health System

Courses of Action	Priorities	Deliverables	Progress
I. Enhance our Leadership Commons	1. Tailor and enhance our value proposition by various leader types to better share practices and tools. 2. Convene health leadership dialogues and roundtables. 3. Build deeper strategic partnerships for broader impact across leadership and membership based national organizations.	• Semi annual executive roundtables, leadership dialogues and network partner roundtables • Membership & Partnership Subcommittee of the Board report and strategy • Board succession plan • CEO succession plan • Building deeper partnerships with leadership national organizations meetings	*Two Semi-Annual Network Partner Roundtables, Executive Roundtables* and Leadership Dialogues *Delivered*. May 1st leadership dialogue *"Where is the Psychological Safety? Exploring the fragility health leaders face in this tumultuous environment."* Oct dialogue cohosted with KPMG discussed *Innovative and Impactful Co-Leadership Models and Partnership.* KPMG, as an in-kind contribution now producing **Executive Briefing**s. In April, CHLNet in collaboration with KPMG and the JP Centre began a new Lunch & Learn series on AI *and Health Leadership* with an Executive Summary resulting. Next one in Fall 2026. Building Deeper Partnerships. Series of meetings began in the Spring 2025 with CSPL, CCHL, HCC, HEC and CMA. No formal agenda. Each organization now highlighted their unique value proposition in a hub and spoke model with CHLNet acting as the hub to build deeper strategic relationships. Turnover has slowed this down. Presentation Oct 2025 from Health Workforce Canada on their digital front door using AI powered search tools. Opportunities to collaborate identified: CIHR BBE grant, Bench3, AI learning passport, common advocacy communication strategy to expand LD funding, link to new hub to ensure LD and learning programs based on evidence. On hold until Hub fully formed. *Board Succession*. Katherine Chubbs, Jean Louis Denis and Yvonne Mburu's terms are now complete. Very pleased three new board members: Dawn Thomas, Island Health; Melissa Braithwaite, Good Samaritan Society; and Tina Edmonds, Newfoundland Health Services. For 2026-27, the Board is rounded out by Scott Malcolm (Chair), Maria Judd (Past Chair), Valerie Grdisa (Vice Chair), Carolyn Pullen, and Tiffany Boyd. Over the last six months, excited to announce that three new network partners have joined the

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			network: *Horizon Health*, *Accreditation Canada/HSO* and *Learning Health System (LHS) Leadership Centre at Trillium Health Partners*. *CEO Succession*. After 12 years as CEO and ED on June 30th, 2026, Kelly Grimes stepped down however agreed to stay on in a reduced capacity of the summer working on specific network activities. Mullen Leadership Recruitment selected through an RFP process. Subcommittee of the Board comprised of Scott Malcolm, Maria Judd and Valerie Grdisa. Project plan in place with final candidate hopefully selected by end of July. Building Deeper Partnerships. Series of meetings began in the Spring 2025 with CSPL, CCHL, HCC, HEC and CMA. No formal agenda. Each organization now highlighted their unique value proposition in a hub and spoke model with CHLNet acting as the hub to build deeper strategic relationships. Turnover at VP level at CCHL and HCC has slowed this down. Presentation Oct 2025 from Health Workforce Canada on their digital front door using AI powered search tools. Opportunities to collaborate identified: CIHR BBE grant, Bench3, AI learning passport, common advocacy communication strategy to expand LD funding, link to new hub to ensure LD and learning programs based on evidence. CHLNet is working with CCHL to develop a separate agreement to become more collaborative. Principles to be reviewed at CHLNet's July Board meeting.
II. Link Evidence to Practice	4. Create and convene a Canadian Learning Collaborative for Health Leadership with co-leads comprised of academics and health system leaders. 5. Cultivate, gather and share leadership practices that make a difference.	• Create and convene a Canadian Learning Collaborative for Health Leadership with co-leads comprised of academic and health system leaders • Indigenous health leadership project on recruitment and retention • LEADS Refresh for capabilities for 21st century leadership practices	*Canadian Learning Collaborative for Health Leadership Convened. H*ub enhances our efforts to cultivate, gather and share leadership practices that make a difference and better link evidence to practice with co-leads comprised of academic and health system leaders. 8 universities involved. Business plan, MOA now crafted for a collaborative that would be the first of its kind in Canada that will be reviewed by the Board at its July Board meeting. Alice Aiken at CIMVR (Canadian Institute for Military and Veteran Health Research at Queens) as a model to learn from. In Spring, merged the Hub with the R&E Working Group. *Indigenous Health Leadership Healthcare Excellence Canada's EXTRA Fellowship Project Wrap Up.* By March 2026, the team (CHLNet, Good Samaritan Society, Island Health, and the Otipemisiwak Metis Government of the Metis Nation within Alberta) identified leading practices that foster a workplace environment where Indigenous health leaders can thrive and begin implementation at a pilot site within a non-Indigenous health organization. Literature review and key informant interviews have uncovered 10 themes that will form

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		• Other collaborative research projects related to leadership and networks	the foundation of a toolkit. Presentation at May Network Partner Roundtable. Working to continue building out the other pieces of the talent management framework with HEC. *LEADS Refresh Research Continues*. Joint effort between CCHL, LEADS Global, RRU and CHLNet aims to refresh the LEADS in a Caring Environment leadership capabilities framework. Phil Cady is Mitacs Post-Doctoral Research Fellow at Royal Roads University. Literature review, key informant interviews and focus groups now complete. In March LEADS Refresh Structured Group review met and in May the LEADS Expert Technical Review. A new framework will be released late June 2026. Working Groups will be involved in advising on new tools and methods to share evidence gathered to support leadership development. Four party agreement in the works to be reviewed at CHLNet's July Board meeting. *Canadian Institute for Health Research Best Brains Grant on Building 21st Century Leadership Practices Held.* In partnership with the Nova Scotia Health Leadership Academy, the NS government, HealthCare*CAN* and CHLNet, successful in a CIHR grant that brought together a diverse group of 45 participants reflecting policymakers, researchers, and health system leaders. On Oct 20th, participants explored how evidence-based leadership practices could be integrated into development programs and leveraged to support system-wide transformation. Click here to read the full report on tips and tools shared especially around successful implementation. Hosted a very well attended May 25th workshop at the Canadian Association for Health Services and Policy Research *What Does It Take to Lead a Learning Health System? Competencies, Canadian Highlights, and Collective Priorities*. Working Groups will review the report to provide advice on KM. *Health Leadership Career Pathways Project Phase 1 Completed.* CHLNet, LEADS Global and McMaster University received funding for a *Mitacs Accelerate Grant* to develop a wireframe on health leadership career pathways. Steering Group now wrapped up, and scoping review completed plus an analysis of interviews and focus groups conducted. A publication is underway with Teresa Chan at TMU. Mitacs Grant is being explored to further develop the App in Phase 2 in partnership with LEADS Global and JP Centre for Innovation and Learning Health Systems for a Fall 2026 start.

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III. Develop and Enable Network Tools and Services	6. Enhance current network products and services to better build the next generation of health leaders. 7. Through partnership, develop new tools and techniques for learning around the four evidence priorities.	• Eblasts – quarterly eblasts continue featuring partner works, tips and tools, top leadership articles, blogs and project updates • Toolkits and Inventories refreshed annually • Oversee the 2026 M&T Award delivery and prominence with Healthcare Excellence Canada	*Eblasts in* December 2025, March2026 and June 2026. Target next ones in Oct and Dec 2026. *CHLNet's Health Leadership Exchange and Acceleration Working Group* meets three times a year to share tools and practices with HR/OD/LD experts at a systems level. Oversee the refresh of all of our free toolkits Leadership Development Inventory, Wise Practices of Leadership Development, Leadership Development Impact Assessment Toolkit, and Self Assessment. With LEADS Refresh occurring, all toolkits will need to be reviewed in Fall 2026. In January 2026, the network launched the call for nominations for the MacNaught–Taillon Award, a triennial recognition in partnership with Healthcare Excellence Canada, Canada Health Infoway, and CIHI. The award honours contributions to health policy, health information, and health informatics. Owen Adam selected and Krishnu Singh as EHL.
IV. Demonstrate Leadership Matters	8. Gather and share data on why leadership matters through mechanisms such as our benchmarking study. 9. Undertake leadership case studies and scenario-based learning that demonstrate impact.	• Replicate the 2020 and 2015 Benchmarking Studies of the Health Leadership Gap in Canada specifically the supply/demand gap for health leaders and the capabilities for 21st century care • Partner with LEADS Global on World Health Leadership Network (WHLN) to share practices and tools at an international level	*Benchmarking Study complete.* The network's third benchmarking study of the health leadership gap in Canada tracks key leadership metrics and gaps over time including the 21st century care leadership practices required in the future. A steering group oversaw surveys and data aggregation through the help of a PhD candidate funded by the Mitacs Accelerate program. A final report and Infographic (English & French) shared in May 2026. Thanks to the generosity of CCHL, CMA, CNA, CSPL, EHL, HEC, HCC, GSS, LEADS Global, RRU, Saint Mary's University, University of Ottawa, and University of Manitoba/Shared Health Manitoba. Working Groups input on further dissemination strategies and tools. World Health Leadership Network. Rotating secretariat with CHLNet doing in 2025 and now Isai with LEADS Global. Five broadcasts in last 8 months: *Leading in Adversity and Complex Times (Oct); AI Implications for Leadership in Service of Quality and Safety Improvement (Dec); Leading for Quality, Safety and Performance: Expectations of Leaders for the Next Decade (Feb); Retaining a Resilient Global Healthcare Workforce (April 2026) and* Why *Do Leadership and Management Matter in Healthcare* (June 18). WHLNet has been operationalizing the network concept on an international scale with over 13 countries participating. Past resources and events can be found on CHLNet's website and WHLNet's YouTube channel. Format will change to shorten to 1 hour with no small group dialogue so can be listened to later. Further funding being sought.