



A Companion
Document



Succession Planning

Executive/Medical Director Leadership

This document is a companion guide that can be used in conjunction with the PCN Board Succession Guidebook to help prepare a PCN for either planned or unplanned absences of their key administrative roles. Succession planning is a key risk mitigation strategy and it makes good business and board sense! Being prepared and having a plan ready when unexpected things happen will diminish possible negative impact and allow a PCN to continue with minimal disruption.

JULY 2018

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Succession Planning for Executive/Medical Director Leadership A Companion Document

Overview

Succession planning is the process of identifying long-range future needs of the organization and finding, assessing and developing the human capital necessary to achieve the organization's strategy. A more comprehensive review of Succession Planning is available within a Guidebook available from the AMA. This document is intended to be a companion document that focuses on the key administrative staff within a PCN, as the Guidebook focuses more on succession planning for the PCN Board. The process, with some notable differences, is somewhat similar and both documents can be used accordingly.

The Executive/Medical Director positions within any Primary Care Network are key roles within a PCN and ensuring these critical administrative positions are selected well, focused on the right things, receive appropriate coaching and rewarded properly, will be key to the overall success of the PCN Board and the PCN overall. Available support guides are available from the AMA to walk a PCN board through the process of recruiting, on-boarding and ongoing performance management. The purpose of this plan is to ensure that the PCN Board of Directors has adequate information and a documented strategy to effectively provide short-term business continuity in the event the Executive/Medical Director is unable to fulfill his/her duties. The strategy for a planned transition for the Executive/Medical Director role is also outlined.



Responsibility for this plan lies with the PCN Board of Directors and it would be wise to develop a plan in consultation and collaboratively with your Joint Venture Partner – that being AHS. After all, both Joint Venture partners have a key role in mitigation risks and having a good succession plan for your key administrative roles is just good business and board sense! Risk management for the organization requires mitigation strategies for either an unplanned absence or a planned transition for the Executive/Medical Director position. It includes:

- Understanding the role and identifying critical functions.
- Ensuring that there are employees who are cross-trained on all critical functions.
- Agreeing on a **Temporary Absence Plan** and **Planned Transition** procedures in advance of the need arising to support business continuity.
- Documenting a plan to ensure business continuity for critical functions and to facilitate a smooth leadership transition.
- Identifying internal candidates with potential for succession into the Executive/Medical Director role, including gaps in needed skills and experience, and recognizing that there may be a requirement to recruit external to the organization to ensure an appropriate skill set for a new incumbent.
- Identifying possible candidates within the physician membership of a PCN who could serve as a Medical Director either temporarily or perhaps permanently through a recruitment.
- Discussing career development with individual(s) and providing formal training and leadership development opportunities to address identified gaps.

Some Food for Thought

By identifying internal candidates and developing employees for advancement, the organization creates a new risk that an employee will leave if an opportunity is not available internally when they are ready. As well, employees who are identified as successors may not be the successful candidate when a position does become available or may not be willing to assume the position. These risks are offset by having an organizational culture where succession planning is integrated into human resource aspects of the PCN and by educating employees on succession planning. Training is done strategically to include leadership throughout the organization. Employees are aware that identification to a successor role does not guarantee that they will “get the job” when it is available. Employees who leave a PCN for advancement opportunities elsewhere may still provide an excellent resource and support for the PCN from their new organization and may return at a later time.

Responsibilities

Board of Directors (Legal Model I) or Joint Board of Directors (Legal Model II)

- Ensure successful appointment and transition of the Executive/Medical Director role as a component of effective governance.
- In the event of a formal recruitment process due to a vacancy of the Executive/Medical Director position, identify potential talent in the community as potential candidates for Planned Transition for Executive/Medical Director position.
- Ensure smooth leadership transition by supporting new Executive/Medical Director.
- Conduct annual review with the Executive/Medical Director including discussion of future plans, establishment of annual goals and documentation of formal development plans.
- Review critical functions of the Executive/Medical Director position and ensure that there are employees who are cross-trained on all critical functions for the PCN to ensure business continuity.
- Review and update Communication Strategy in Appendix C annually.
- Execution of communication plan when the Temporary Absence Plan is implemented, monitor and provide advice regarding the key messages, timing and media used.
- Communicate to Joint Governance the Planned Transition for the Executive/Medical Director when he/she resigns, or when it is determined that the Executive/Medical Director will not be returning from an absence.
- Coach the Executive/Medical Director and support knowledge transfer with detailed leadership development opportunities where possible.

PCN Joint Governance and Directors Committee (Governance Committee)

- Review the Executive/Medical Director Succession Plan annually including identification of internal candidate(s), ensure alignment with strategic plans for the PCN and report to Board on status of the Executive/Medical Director Succession Plan.
- Implement the Temporary Absence Plan and approve any necessary extensions for absences beyond 30 days.
- In the event that the Executive/Medical Director position becomes vacant, form a recruitment committee with members of the board to recruit the Executive/Medical Director. The function of the recruitment committee will be to follow the recruitment plan as identified in the Transition Plan, in summary: A) write the AD position posting and post the position B) review the resumes that are submitted for the ED/MD position, develop a short list of candidates and a list of interview questions C) interview candidates, select the most suitable candidate, develop an offer letter and provide a reference and security check D) provide orientation to the board and arrange for orientation to the PCN through the cooperation of the interdisciplinary team and assistant managers.

Executive/Medical Director

- Support potential internal candidates in leadership development.
- Notify plans to depart the organization as soon as possible.
- Provide all necessary information to assist the Board in the fiduciary responsibilities as it relates to the PCN's key administrative roles.
- Support the Planned Transition as requested by Joint Governance and Directors Committee; identify potential external candidates.
- Develop and provide knowledge transfer and leadership development opportunities for employees identified as possible successors.
- Provide post-departure support to the new ED/MD, at the request of the board of directors.

Preparing for an Unplanned Absence

Absence in the Event of a Catastrophic Event

- Unplanned Absence may result from a serious illness, accident or death of close family members or other reasons such as workplace injury or absence due to natural disasters.

In the event of an unplanned temporary or short-term absence of the employee:

- The Executive/Medical Director is to inform the Board and implement the **Temporary Absence Plan**.
- In the event that the Executive/Medical Director is not able to implement the *Temporary Absence Plan*, the Board of Directors shall implement the *Temporary Absence Plan*, as soon as feasible following notification of an unplanned temporary or short-term absence.



Preparing for a Planned Absence

Short-Term Temporary Absence Plan

In the event of a *planned* temporary or short-term absence of employee:

- The Executive/Medical Director is to inform the Board and implement the *Temporary Absence Plan*.

The Board Chair will appoint an Acting Executive/Medical Director who shall have full authority for day-to-day decision-making and independent action of the position with the following caveats:

Decisions that shall be made in consultation with the Board Chair and/or designate include:

- Speaking to media or taking public policy positions on behalf of the PCN.
- Employee hiring and terminations.
- Financial issues – purchases greater than \$5,000 or commitments that extend beyond one year.
- Signoff on contracts.
- Issuing financial reports or information to external organizations including Alberta Health and Alberta Health Services.
- Starting or ending a program or clinic.

Decisions or actions required during the temporary absence that have not been anticipated will be directed to the PCN Board Chair until a designate has been determined and identified.

Communication is a critical aspect of the *Temporary Absence Plan*. The PCN Board Chair will be responsible for executing the Communication Plan in Appendix C. Key messages, timing and media used will need to be reviewed and revised to reflect the circumstances resulting in the unplanned absence.

Based on the anticipated duration of the absence, the anticipated return date and accessibility of the current Executive/Medical Director, the Board of Directors may assign all critical functions of the Executive/Medical Director as identified in Appendix A.



Extended Temporary Absence Plan

When the unplanned absence continues beyond 30 days, the *Temporary Absence Plan* may be continued at the discretion of the PCN Joint Governance and Directors Committee, with the following addition:

- The Board Chair may temporarily fill or reassign priority responsibilities as required to support the management position left vacant by the Acting Executive/Medical Director
- The Board Chair is responsible for gathering input from employees and reviewing the performance of the Acting Executive/Medical Director. A review shall be completed between 30 and 60 days. (Support to gather input could be provided by AMA Support Programs or alternate consulting organization.)

In the event of a planned or unplanned absence of the Executive/Medical Director that extends beyond 30 days, the **Planned Transition** process may be implemented. The *Temporary Absence Plan* should not continue beyond 90 days absence of the Executive/Medical Director.

Preparing for an Organized Transition

If the Executive/Medical Director of the PCN submits a resignation or advises of plans to leave the organization at a specific time, the Planned Transition is implemented. The Planned Transition may also be initiated when, at the discretion of the Board, it is determined that the events precipitating an extended absence will not be resolved and the Executive/Medical Director will not be returning to the organization.

The PCN's Board in consultation with the Joint Governance Committee will be responsible to execute the Planned Transition as follows:

- Review current job description for Executive/Medical Director per Appendix B and modify as required to reflect changes to current requirements based on strategic direction.
- Contact executive search firm (if applicable):
 - Negotiate/authorize contract for services.
 - Provide current job description for Executive/Medical Director to executive search firm.
- Provide information to executive search firm regarding internal and external candidates who have been identified as potential successors.
- Establish interview process with executive search firm:
 - Screening criteria, number of interviews and who is involved at each step.
 - Ensure that selection committee includes Alberta Health Services Joint Governance representation.
 - Determine if and how employees will be included in the selection process.
- Select candidate and with support of executive search firm, make offer to candidate, negotiate start date and salary.

NOTE: The AMA Support Programs can assist PCNs that choose not use an executive search firm.

- Provide regular updates to the Board and employees on the search process.
- Provide orientation for the successful candidate.
- Board may wish to contact the AMA's Support Programs for consultation.

Even in the event of a planned permanent departure, an Acting Executive/Medical Director may be needed if the recruitment of a replacement is anticipated to take longer than the notice period provided. The *Temporary Absence Plan* could be implemented in this situation.

Executive/Medical Director Orientation Plan

The PCN Board is responsible to provide effective orientation for the successful candidate to ensure a smooth transition and provide support during the initial year. The PCN Board Chair shall ensure that adequate resources are provided to conduct the orientation and make appropriate introductions of the Executive/Medical Director.

The PCN Board in consultation with the Joint Governance Committee shall:

- Review the evaluation process and instrument that will be used after the first 12 months on the job.
- Establish informal check-in meetings with the new Executive/Medical Director three months and six months after start date to review the work plan and priorities and resolve any issues that have arisen.
- Provide a formal performance evaluation after 12 months of service.

An orientation checklist is included in Appendix D to provide a guideline for information and introductions that will be required for a successful transition of the Executive/Medical Director position.



Strategic Leadership Development – Internal Candidates

One benefit of a formal succession plan is to establish a framework to align leadership development for senior executives with the strategic direction for your PCN. The PCN Board, through the annual review with the Executive/Medical Director, will identify opportunities for further leadership development that could include expansion of the current role or special projects to help develop the skills of potential successors. Mentorship opportunities and formal goals regarding training and development may also be identified to enhance the leadership capabilities of potential successors.

The Executive/Medical Director is responsible for identifying potential successors through the annual review process of direct reports or other employees. It is important to establish an organizational culture where employees are not in competition or have a sense of entitlement, but rather are provided with effective development opportunities that support them within the PCN. There is a risk that the candidates may leave your PCN if internal career advancement is not available when they are ready. Employees who leave the PCN for advancement opportunities elsewhere may still provide an excellent resource and support for the PCN from their new organization or may return to the PCN at a later date.

The Executive/Medical Director will discuss succession plans with the potential internal candidate(s). With the acknowledgement and awareness of the designated employee(s), they are assessed for current skills and competencies to identify gaps required to fill the Executive/Medical Director role. Professional career goals are discussed and opportunities for further development are explored resulting in the development of a formal plan for leadership development to be incorporated into annual goals. Opportunities to learn through direct experience may include roles on provincial committees and responsibility to report to Board on specific items or ex officio status on a standing committee of the Board. The Executive/Medical Director is responsible for coaching and mentoring internal candidates where appropriate.



Appendices

Appendix A

Critical Functions of the PCN
Executive/Medical Director

Appendix B

Executive/Medical Director
Position Description

Appendix C

Communication Strategy



Appendix A

Critical Functions of the PCN Executive/Medical Director

Temporary Absence Plan

(One should be written for each key administrative roles as required)

Critical Functions Executive/Medical Director	Board Support or Committee	Employee(s) Identified
Acting Executive/Medical Director		
Executing Communication Plan		
Board Administration and Support <ul style="list-style-type: none"> • Schedule board meetings • Minutes & Agenda • Ad hoc requests 		
Program Management <ul style="list-style-type: none"> • Responding to patient complaints • Responding to physician inquiries 		
Financial Management <ul style="list-style-type: none"> • Reporting to AH • Reporting to Board • Purchasing commitments • Oversight of invoice payment • Signing authority 		
Human Resource Management <ul style="list-style-type: none"> • Hiring/termination of employees • Benefit plan administration 		
Funder relations; Community & Public Relations		
PCN Member Relationships		

Appendix B

Executive/Medical Director Position Description

Position Profile EXECUTIVE DIRECTOR

Position Summary

The Executive Director provides leadership and operational business support to the PCN. In this role the Executive/Medical Director reports to the PCN Physician Board and the Joint Governance Committee and is directly accountable for all PCN operations, including the management of a budget in excess of \$1 million. The ____ PCN provides services to _____ and the surrounding communities.

MAJOR DUTIES & RESPONSIBILITIES

Program Planning and Development:

- Leads the development of ongoing implementation plans and timelines for services to be delivered by the Primary Care Network;
- Leads the service planning for new service implementation; monitors regional, national and provincial trends, in order to promote implementation of best practice in primary care service delivery;
- Makes recommendations to the Governance Committee re goal setting, program planning, implementation and evaluation for services delivered Primary Care Network;
- Contributes locally and provincially to the development of practice guidelines, standards and policies for Primary Care Networks;
- Develops operating policies to support the work of the Primary Care Network;
- Leads the development of quality assurance and risk management strategies in relation to primary care service delivery.

Communication:

- Is the PCN communication link for the Primary Care Network service providers group, and ensures strategies are in place for effective and timely communication with the provider community, Alberta Health Services, AMA, Alberta Health, the provincial Primary Care Initiative Program Management Office and the public;
- Ensures that communication tools and mechanisms are developed and deployed to keep key stakeholders up to date.

Administration:

- Manages the operations of the Primary Care Network in accordance with the strategic goals established by the Board;
- Is responsible for the operational stewardship of the PCN financial budget;
- Allocates and insures the optimum use and evaluation of resources of the PCN;
- Is responsible for the development and implementation of a PCN quality assurance program, including standards and indicators which encompass risk management;
- Facilitates meetings between various stakeholders as appropriate.

Research and Education:

- Identifies data needs and analyzes data to facilitate program planning and service delivery within the Primary Care Network;
- Establishes ongoing processes for identifying the needs of clients, families, communities and health care professionals through assessment and collaboration.

Professional Practice:

- Provides consultation to planning groups, health institutions, community groups, policy makers, organizational leaders and teaching institutions regarding issues related to the Primary Care Network;
- Provides leadership and expertise in setting direction and best practice standards.

Position Profile EXECUTIVE DIRECTOR

REQUIRED SKILLS & ABILITIES

- Ability to communicate effectively verbally and electronically, including interest based negotiating skills.
- Proven leadership skills and administrative ability.
- Demonstrated business acumen.
- Proven facilitation, consensus building and conflict resolution skills.
- Ability to conduct research, analyze data and write reports based on findings.
- Organizational skills and the ability to work independently.
- Demonstrated business planning skills.
- Experience leading community based initiatives and services.
- Ability to work collaboratively with multi-sectors and disciplines.
- Experience in managing a change process.
- Knowledge of business systems and processes.
- Knowledge of finance and accounting.
- Experience in implementing information management systems.
- Project management skills.
- Proven strong liaison capabilities with various stakeholders.

REQUIRED QUALIFICATIONS

Professional Certification/Designations	<ul style="list-style-type: none"> • Master's degree in a health related field, health administration, or business administration supplemented by healthcare experience is preferred.
Education/Experience	<ul style="list-style-type: none"> • Minimum ten years of management experience with demonstrated advancement at various levels of responsibility.

SUPERVISION

Reports to:	<ul style="list-style-type: none"> • Board of Directors, _____ PCN
Position(s) supervised:	<ul style="list-style-type: none"> • All PCN staff

COMPETENCY EXPECTATIONS

	Expected Competency Level
Effectiveness	3
Decision-Making	3
Communication	3
Helping Others	3
Self-Management	3
Leading Others	3

Position Profile **EXECUTIVE DIRECTOR**

I have reviewed this position profile and related competency dictionary and agree that it is a fair representation of position expectations as of the date of signing.

Employee Name

Employee Signature

Date

Clinic Representative

Representative Signature

Date

Position Profile **MEDICAL DIRECTOR FOR PRIMARY CARE NETWORK**

Position Summary

The Medical Director (MD), in a dyad relationship with the Primary Care Network's (PCN) Executive Director, is responsible for providing clinical leadership in PCN programming and primary care service delivery.

The MD serves as a key link between the PCN and its community physicians, with Alberta Health Services programs and stakeholders, and with Zone Physician groups such as PCN Provincial Executive Leads.

In Legal Model 1 (LM1) the MD reports directly to the PCN Physician Board of Directors and accounts to the Joint Governance Committee. In LM2 the MD reports directly to and accounts to the Joint Board of Directors.

This position ensures continuous physician and clinical leadership over time, as elected physician members of the PCN's governing body rotate through governance/board positions. This is a significant role as PCNs work to transform primary care in Alberta for the benefit of patients, providers and health outcomes.

MAJOR DUTIES & RESPONSIBILITIES

Program Planning and Development:

- Provides leadership in planning and development of clinical services and programs delivered by the PCN in accordance with Provincial PCN Objectives guided by population health data.
- Participates in the development of an annual PCN Business Plan, Zone Service Plan, PCN budget and strategic and tactical plans.
- Monitors regional, provincial, national and international health trends and evidence, in order to promote implementation and maintenance of best practice in the delivery of primary care.
- Leads the PCN in evaluating physician and patient service activities.
- Makes strategic recommendations and provides regular reports to the PCN Physician Board of Directors (LM1) or the Joint Board of Directors (LM2) and accounts to the Joint Governance Committee regarding program planning, risk identification, implementation and evaluation of services delivered by the PCN, using data and evidence.
- As directed by the board, represents the PCN at various community and provincial events.
- Participates in the development of a quality improvement strategy and its implementation in relation to PCN services and provincial mandates.
- Assists the PCN to adhere to Alberta Health policy pertaining to clinical issues such as indicators outlined in Schedule B.

Communication:

- Represents the PCN in the local medical community.
- Acts as a key link, liaison and change agent for and to PCN member physicians, and leads activities that are geared towards member engagement and participation.
- Provides clear, concise reports and recommendations to the PCN Physician Board of Directors (LM1) or the Joint Board of Directors (LM2) and accounts to the Joint Governance Committee.
- Assists in the recruitment of PCN clinical staff and promotes the retention of PCN staff by promoting an environment of trust.
- Able to articulate the vision and mission of the PCN.

Research and Education:

- Promotes and assists coordination of continuing education opportunities for PCN member physicians that promotes the development of the Patient's Medical Home.
- Participates in continuing education as instructed by the employer.
- Leads maintenance and review cycles of best practice, and spearheads development and review of care pathways that suit the population health needs.
- Encourages ongoing processes that include patients/clients, families, community and health care professionals in the development and review of PCN programming and initiatives.

Position Profile **MEDICAL DIRECTOR FOR PRIMARY CARE NETWORK**

Professional Practice and Performance:

- Provides consultation to planning groups, health institutions, community groups, policy makers, organizational leaders and teaching institutions regarding issues related to the PCN.
- In collaboration with the Board, develops MD performance goals and tracks progress for evaluation by employer annually, as per Alberta Health policy.
- Seeks personal growth and leadership development opportunities annually.

REQUIRED SKILLS & ABILITIES

- Proven leadership skills and ability, while remaining patient driven and centred.
- Demonstrated communication expertise verbally and written.
- Critical thinking and assessment of evidence and data.
- Prefer experience with stakeholder engagement.
- Demonstrated planning and decision making skills.
- Strong interest in staying aware and up-to-date with the provincial healthcare agenda.
- Clear ethical stance.
- Integrity and adheres to PCN core values.

REQUIRED QUALIFICATIONS

Professional Certification/Designations	<ul style="list-style-type: none"> • Licensed to practice medicine in Alberta. • A member in good standing of the College of Physicians and Surgeons of Alberta.
Education/Experience	<ul style="list-style-type: none"> • Minimum of three years' experience in family practice, ideally in an established or developing Patient's Medical Home.

SUPERVISION

Reports to:	<ul style="list-style-type: none"> • PCN Physician Board of Directors (LM1) or the Joint Board of Directors (LM2) and accounts to the Joint Governance Committee.
Position(s) supervised:	N/A

COMPETENCY EXPECTATIONS

	Expected Competency Level		
	Level 1 – Entry	Level 2 – Intermediate	Level 3 – Advanced
Board Relationship			3
Planning & Strategic Thinking			3
External Relationships & Political Savvy			3
Leadership & Change Management			3
Building an Effective Team			3
Management Effectiveness & Communication			3
Integrity & Ethics			3

Position Profile **MEDICAL DIRECTOR FOR PRIMARY CARE NETWORK**

I have reviewed this position profile and agree that it is a fair representation of position expectations as of the date of signing.

Employee Name

Employee Signature

Date

Clinic Representative

Representative Signature

Date

Appendix C

Communication Strategy

Temporary Absence Plan

As soon as possible, the PCN Board Chair (or designate) and Acting Executive/Medical Director shall implement the **Detailed Communication Plan** (see Table 1 below) to announce the organization's temporary leadership structure to the PCN employees, the Board of Directors and key PCN stakeholders identified in Table 2 below.

Within 48-hours after an Acting Executive/Medical Director is appointed, the Board Chair and the Acting Executive/Medical Director shall meet to implement the *Detailed Communications Plan*.

Key messages will be customized to be applicable to the events that have triggered the **Temporary Absence Plan**.

Extended Temporary Absence Plan

The Board Chair or designate shall continue to implement the *Detailed Communication Plan* according to the situation that has resulted in the extended absence. Key messages will be customized to be applicable to the events that have triggered the *Temporary Absence Plan*.

The PCN Board shall monitor and provide advice regarding the key messages and timing to initiate a **Planned Transition** for the Executive/Medical Director.

Planned Transition

The Board and the Executive/Medical Director shall meet to implement the communications plan as soon as possible after the Executive/Medical Director has submitted a resignation. Although the Detailed Communication Plan for the Temporary Absence Plan per Table 1 will provide the basis for a planned transition and key messages, timing and media will be adapted to the situation.

Table 1: Detailed Communication Plan for Executive/Medical Director Temporary Absence

Key PCN Stakeholders	Key Message / Purpose	Timing / By Whom	Media
Employees	Stability/planned approach What is happening	Weekly/as required update Board Chair or PCN designate	Employee meeting Email updates
PCN Physician Members	Stability/planned approach What is happening	Weekly/as required update	Email
PCN Clinic Managers	Stability/planned approach What is happening	Weekly/as required update	Email
Alberta Health Services	Revised contact for ED role	As required	
Alberta Health		As required	
Alberta Medical Association	Identify who to forward communication	As required	
Standing Committees where ED is a member		As required	
PCN Executive/Medical Directors		As required	

TABLE 2: KEY PCN STAKEHOLDERS

Contact list can be found on the www.____pcn.com (physician log in required)

Key PCN Stakeholders	Contact Name(s)
Employees	Email/phone listing maintained by PCN Executive Assistant
PCN Physician Members	Email/phone listing maintained by PCN Executive Assistant
PCN Clinic Managers	Email/phone listing maintained by PCN Executive Assistant
Alberta Health Services	
Alberta Health	
Alberta Medical Association	
Chair of each Standing Committees where ED is a member	
PCN Executive/Medical Directors	
Operating Support (based on need): <ul style="list-style-type: none"> • Banking • Auditor • Legal Counsel • Insurance Agent • Revenue Canada 	
Elected officials <ul style="list-style-type: none"> • MLA • MP • City Councilor 	

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