A Powerful New Partnership to Build Leadership Capacity in Healthcare in Canada

Carolyn Pullen, PhD
Director of Policy, Advocacy and Strategy
Canadian Nurses Association
Ottawa, ON

As this journal’s readers well know, there is a strong need for dynamic leaders in Canada’s evolving healthcare sector. The Dorothy Wylie Health Leaders Institute (DWHLI) and the Canadian Nurses Association (CNA) have formed a partnership that has the potential to significantly contribute to building leadership capacity in healthcare in Canada.

Established more than 15 years ago and recognized in healthcare circles in Canada, DWHLI offers a unique Canadian leadership program that brings together emerging healthcare leaders from all disciplines for a concentrated, interactive and experiential study of leadership principles, models, skills and tools. Employers report they value DWHLI’s blended curriculum and approach to leadership, the evidence-based framework and the calibre of faculty and speakers. Another benefit is the facility for attendees to work on a priority project with expert support and protected time. Participants report a personal and professional impact when they realize their organizations recognize them as leaders who are worthy of development.

Since inception, almost 2,400 individuals have participated in the Institute. A recent survey found that more than 75% of DWHLI’s alumni said their experience had a positive or profound impact on their personal life and career, and it was described as a “catalyst for change.” Operating on a cost-recovery basis, DWHLI has offered over 115 bursaries and student fellowships throughout its history.

The new partnership makes sense on many levels. By joining forces, DWHLI’s reach will extend more broadly across Canada. Through the CNA, DWHLI will have a wider network of contacts across geographies and health disciplines, and
greater capacity to offer more institutes, which can be customized to meet unique regional needs. Looking at the historical numbers, to date, 75% of the participants have been from Ontario – primarily from the acute care nursing sector, so the partners clearly see the need and opportunity to expand the program’s reach.

With a core requirement of the program being that participants register in dyads working on a joint, authentic leadership project, making DWHLI more portable will make the program more locally relevant and accessible. In alignment with this objective, the CNA brings to the partnership technological capabilities and infrastructure to offer expanded, blended learning approaches that integrate into the program’s communication technologies to enhance and simplify participation.

For CNA, DWHLI is an excellent companion, adding leadership capacity-building to the existing suite of professional development offerings, which include continuing competencies, advanced practice support and specialty certification. For more than a century, CNA has demonstrated a sincere commitment to healthcare leadership, and now it will connect more professionals from across Canada to DWHLI’s proven impact. In addition, the strategic alliance with the Canadian College of Health Leaders (CCHL) has been updated to reflect the new partnership, which strengthens and extends the influence of national professional bodies concerned with quality healthcare leadership.

In the past decade, other healthcare leadership development programs have similarly been developed, and, fortunately, some have equally strong uptake and impact, including LEADS and the ICN Leadership for Change™. While the framework elements of these and other leadership programs are similar, and key elements can be comprehensively mapped across models, the DWHLI distinguishes itself with the use of Kouzes and Posner’s Transformational Leadership Model. Kouzes and Posner suggest leadership is not a position but a collection of practices and behaviours that enable leaders “to get extraordinary things done” (Kouzes & Posner 1995: p. 9). Developed through intensive research over decades, these practices have become recognized as highly effective leadership practices, essential for transformational leadership. Practices include challenging the process, inspiring shared vision, enabling others to act, modelling the way and encouraging the heart (Kouzes & Posner 1995, 2002, 2012). In developing a leadership program to meet the needs of the dynamic Canadian healthcare system, the DWHLI faculty found strong alignment between the developmental needs of emerging leaders, its own values and goals and the time-tested practices and vision for leadership of the Kouzes and Posner Model.
The long-standing DWHLI format has been a residential format where learner dyads participate together in a five-day-long immersive learning environment. Without doubt, the gift of limiting distractions, bringing full focus to learning and making human connections has impact. That said, technology now offers more options for blended and distance learning that can make DWHLI more accessible and affordable. Here, CNA can offer the technological infrastructure and expertise to develop these new avenues for learning, creating additional flexible options for participants and employers.

Work is underway to deliver the 2016 program jointly. The partners are focusing on offering a day-long introductory program in June in Saint John, NB, and a residential Institute in October in Toronto, and several informational webinars. “Business as usual” in 2016 is affording the partners the time for a national, expert advisory committee to advise on and support advancements in program design for 2017 and beyond. Priority areas of focus are adding flexibility and variety to the teaching modalities the program will use in the future. In addition, 2016 is a building year for opening conversations with regions beyond DWHLI’s traditional, central Canadian borders and preparing to launch customized offerings in the near term.

The partners are delighted about this dynamic collaboration for the advancement of healthcare leadership, and we look forward to expanding DWHLI’s reach and flexibility to accommodate the many emerging healthcare leaders across Canada.

Correspondence may be directed to: Carolyn Pullen, Director of Policy, Advocacy and Strategy, Canadian Nurses Association, 50 Driveway, Ottawa, ON K2P 1E2; Office Phone: 613-237-2159 Ext. 521; Cell: 613-266-0306; e-mail: cpullen@cna-aiic.ca.