

A large, abstract artwork featuring overlapping, stylized leaves in various shades of blue and green. The leaves are outlined with thick, dark blue strokes, giving them a layered, almost 3D appearance. The background is a light, textured blue.

# Forward Together

# Forward Together

Welcome to the Department of Medicine Strategic Plan 2020/2024. Here you will find the passion and the excitement of our physicians, staff and stakeholders captured in our Mission, Vision, Values and Strategic Directions.

Through direct input from the Department’s extensive network and our key stakeholders, this strategy has emerged to guide our intentions and actions for the next 5 years. We feel strongly that our work makes positive and impactful differences in the lives of patients, learners, professional colleagues and others who benefit from our education, research and clinical care.

Currently, there are many challenges. However, uncertainty and risk also bring significant opportunity for growth and change. In this new environment in which we find ourselves, it is important that we move forward together in defining and enabling clinical and academic initiatives that are compelling and refreshingly nimble. This strategy invites the continued engagement of our stakeholders as we build on our strengths, address weaknesses and seize new opportunities to optimize our potential.

Our approach has a few notable features:

First, there is an emphasis on outcomes. Each section is prefaced by a vision for how we’d like the world to be different as a result of our efforts. These will be translated into shorter term, measurable goals that are updated annually to guide action.

Second, we have adopted two lenses for navigating change: *internal* intentions to strengthen our departmental/divisional capacity and capabilities and, *external* intentions to positively influence local, provincial and Maritime systems.

Third, we believe that our success in delivering on education, research and clinical outcomes can be enhanced by explicit goals around key supports, infrastructure and the quality of our workplace. This is why you will see a chapter dedicated to supports for physicians and administrative staff.

The quality of our relationships will be key to our success and we take our values seriously. Consider them our attitudinal and behavioural contract with you as we work together. We will regularly assess the effectiveness of our actions and account to our stakeholders on our progress.

Please join us in this exciting journey as we move forward together!

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# Forward Together

Strategic Plan | 2020/2024

## OUR VISION

A vibrant department respected for its culture of collaboration and commitment to the health of its communities.

## OUR MISSION

Together, we advance patient care by fostering excellence in research and education.

## Our Values

### HIGH-VALUE CARE

Strive for optimal outcomes and available resources, every day for every patient.

### CONTINUOUS DRIVE FOR IMPROVEMENT

Never compromise our conviction that high quality research and education are essential to delivering high quality care.

### RESPECT

Show others that we value and appreciate them through our words, actions and relationships.

Grow a culture of inclusion.

### FORWARD THINKING

Take the long view; consider what's needed now and 20 years out.

## Strengthen Foundations for Success

1

### SUPPORT ADMINISTRATIVE STAFF

- Integrate administrative staff priorities into the DoM's strategy
- Shape a more cohesive DoM culture through appreciation of all roles
- Identify and share best practices
- Invest in professional/staff development

2

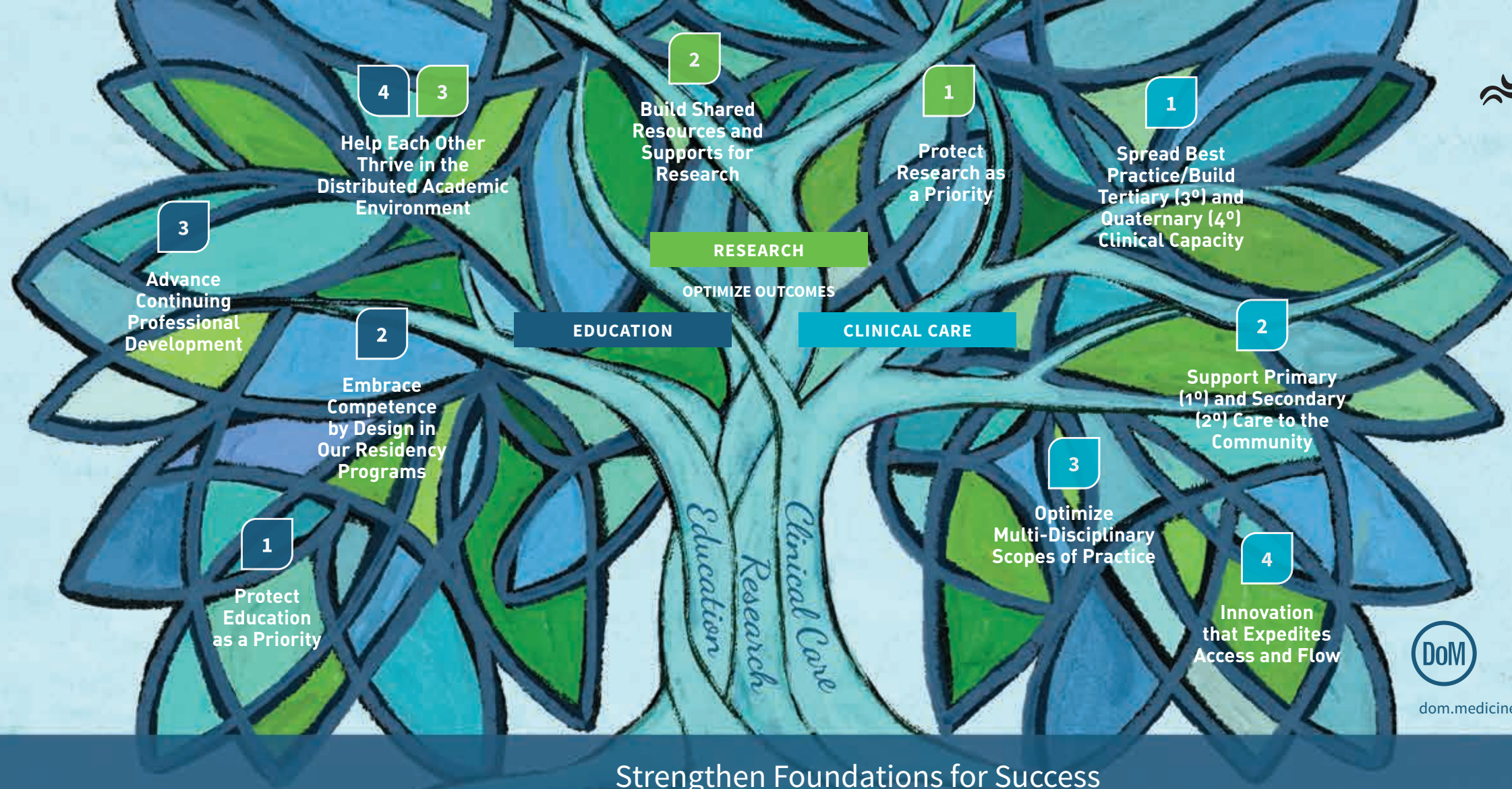
### BUILD STRONG CENTRALIZED SUPPORTS

- Quality care tools and expertise
- Advocacy
- Communication/ Coordination/ Collaboration
- Decision support
- Cultivate and support healthy accountability
- Business case development

3

### SUPPORT PHYSICIANS

- Build leadership and influence
- Support physician wellness
- Inform physician resource planning



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# Our Vision

We will know that our vision to **Protect Education as a Priority** has been accomplished when:

- Engaged teachers have time to enjoy teaching and interacting with learners.
  - > Full-time Equivalent (FTE) allocation for academic time is truly protected including preparation time.
  - > We have the appropriate clinical FTEs to allow academic work to happen.
  - > We ensure proper resources and supports, including remuneration, so that our physician teachers in the community are able to participate in the education of our learners.
  - > Academic educators are able to do work that facilitates and builds on the department and faculty teaching mandate. This includes education research, expert curriculum development, and teaching the skills that enhance our teaching.
- Engaged learners are:
  - > Encountering teachers as mentors and role models.
  - > Providing feedback that their educational experiences are excellent in preparing them to challenge both exams and real life practice.
  - > Being taught to meet the specific needs of our unique Nova Scotia and Maritime communities.
- Teaching is universally accessible.
  - > We are making better use of technology for distributed learning so that excellent teachers and mentors can access learners from anywhere in the Maritimes.
  - > There is optimal teaching space in community sites; at academic centres, in hospitals and in distributed sites.
- The Department has a process to facilitate broad recognition of the contributions that its members make to education.
  - > The Education and Awards Committees work regularly with all sites to facilitate the nominations process for members who are eligible for upcoming awards.

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Optimize Academic Outcomes — Education

## Protect Education as a Priority

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Develop policies and systems to drive continuous improvement
- B. Optimize Human Resources: Fix FTE allocations and strengthen recruitment
- C. Recognize excellence



## Our Vision

We will know that our vision to **Embrace Competence by Design (CBD) in Our Residency Programs** has been accomplished when:

- We have successfully transitioned all of our residency training programs to CBD.
- The culture and processes change such that:
  - > All faculty have the skills to coach and value observation in residency training.
  - > Learners value and regularly seek formative feedback.
  - > The Department provides opportunities for members (including residents) to acquire and grow the skills required to effectively evaluate learners at all levels.
  - > Department members receive regular feedback on how well they are evaluating others.
  - > Department members take pride in the success of our learners.
- We have objective data to measure the effectiveness of CBD as a model for residency training.
  - > Resident and faculty evaluations reflect an increased satisfaction with the quality of preparedness and progression of knowledge and skills throughout the training process.
  - > CBD facilitates programs to identify and help learners focus on areas that need more development earlier in their training.
  - > Data shows that there is more flexibility in the time allotted to achieve milestones in training.
  - > Distributed sites are contributing to CBD by meeting the needs for residents to complete their Entrusted Professional Activities (EPAs).
  - > Before-and-after comparisons reveal the value from CBD relative to what was expected.
- We are well positioned for competency-based learning to extend beyond transition to practice, into the lifelong learning environment of medicine.

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Optimize Academic Outcomes — Education

# Embrace Competence by Design (CBD) in Our Residency Programs

## **SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Develop very strong divisional infrastructure to support CBD
- B. Optimize the structure of faculty work days
- C. Provide CPD on CBD
- D. Ensure sufficient simulation exposure time and joint resources



Optimize Academic Outcomes — Education

# Advance Continuing Professional Development (CPD)

## SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:

- A. Assess patient needs to inform the evolution of our CPD strategy
- B. Assess non-clinical development needs to inform the evolution of our physician leadership CPD strategy
- C. Develop and administer continuous practice audits
- D. Administer a faculty-wide survey
- E. Co-create provincial and in some instances, Maritime coordination of a CPD strategy

## Our Vision

We will know that our vision to **Advance Continuing Professional Development (CPD)** has been accomplished when:

- We continue to support and improve department-wide CPD that is relevant to our faculty in the context of:
  - > Patients' needs.
  - > Our roles as educators.
  - > Our roles as health care system leaders.
  - > Each Department member's individual needs for content and access.
  - > The quality improvement strategy associated with every new initiative's introduction.
- CPD meets each Division's unique needs.
- The Department and Divisions use data for targeted CPD development.
- Community-based colleagues are motivated to participate in CPD initiatives pertinent to their practices.
  - > We are working with Primary Care to meet both of our CPD needs so that we can better collaborate in the provision of patient care (right care, right time, right place).
  - > Our community-based specialists have access to, and participate in, receiving and providing CPD.
- The Department as a provider of CPD:
  - > Disseminates evolving best practice knowledge to other levels of care and other professionals throughout the Maritimes.

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## Our Vision

We will know that our vision to **Help Each Other Thrive in the Distributed Academic Environment** has been accomplished when:

- Members feel a strong association with the academic department no matter where they are working in the Maritimes.
  - > More people outside of Halifax identify themselves as valued members of Dalhousie's Faculty and Department of Medicine.
  - > The Department actively seeks to recognize distributed members through our awards process.
  - > Distributed members have good knowledge of the benefits of being a part of the Department.
  - > The Department actively updates website and registry information regarding members and affiliates.
- We have expanded the reach of distributive learning to more sites:
  - > There are more, established and well-supported distributed rotations that are attractive opportunities for learners at various levels.
  - > Distributed faculty are supported with resources and infrastructure to take on new learners.
  - > The Department collaborates with the faculty to better recognize contributions from teachers at distributed sites.

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Optimize Academic Outcomes — Education

# Help Each Other Thrive in the Distributed Academic Environment

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Aggressively promote explicit networks that make collaboration and communication about research more workable
- B. Facilitate optimal engagement in networks; discover what else members need and how we can help provide it





## Our Vision

We will know our vision to **Protect Research as a Priority** has been accomplished when:

- Research and innovation are part of the departmental culture.
- The Department supports research as part of the culture of comprehensive clinical care.
- The entire department is invested in contributing to research.
- Every patient is given the opportunity to be involved in some form of research.
- We can explain the relationship between our research and demonstrated clinical need.
  - > Our tertiary (3°) and quaternary (4°) clinical efforts are driven by the research that faculty is doing.
  - > Our research drives innovation in care delivery and contributes to reduced costs.
- Funders, decision makers and policy makers understand that an academic health centre cannot advance the quality of clinical care without research.

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Optimize Academic Outcomes — Research

# Protect Research as a Priority

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- Develop a research road map with our external partners
- Drive change that demonstrates why research is important





## Our Vision

We will know that our vision to **Build Shared Resources and Supports for Research** has been accomplished when:

- Research is part of the culture and is formally and actively valued.
- Our research is recognized and celebrated by the public and other stakeholders.
- Patients' participation in research is fully incorporated into clinical care.
- Our partnerships with the Faculty of Medicine, the health authorities and Provinces promote a seamless flow of resources and funding.
- All members are aware of the available supports, from the inception of a research idea to the implementation of the knowledge learned in the clinical setting.
- We have great retention of highly skilled research staff.
- Our trainees participate in research and have the supports to learn and produce high quality research from bench to bedside.

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Optimize Academic Outcomes — Research

# Build Shared Resources and Supports for Research

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Introduce a Department Research Navigator
- B. Enhance value for money invested in key infrastructure and supports (such as the Research Methods Unit)





## Our Vision

We will know that our vision to **Help Each Other Thrive in the Distributed Academic Environment** has been accomplished when:

- There is department-wide understanding of what research is happening across Maritime sites.
- Most members have valued research relationships with colleagues across the Maritimes.
- We value distributed sites as excellent places for knowledge translation and implementation science.
- The Department and Divisions value research by advocating, protecting time and contributing resources to support research programs.
- Leaders across the Faculty and the health authorities visibly support research throughout the Maritimes.
- All new recruits bring academic value to the Department.
- The quality of our research is a recruitment tool for our department.

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Optimize Academic Outcomes — Research

# Help Each Other Thrive in the Distributed Academic Environment

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- Aggressively promote creation of explicit networks that make collaboration and communication about research more workable
- Facilitate optimal engagement in those networks





# Our Vision

We will know that our vision to **Spread Best Practice/Build Tertiary (3°) and Quaternary (4°) Clinical Capacity** has been accomplished when:

- We are collaborating with our patients and colleagues to define what quality care means at every level of the system.
- Maritimers travel less for access to high-value tertiary (3°) and quaternary (4°) care.
  - > Access and flow improvement opportunities have been optimized, starting with virtual care.
  - > Specialists and Primary Care have collaborative and mutually supported relationships that benefit the co-management of complex patients.
- Barriers to optimize providing tertiary (3°) and quaternary (4°) care have been addressed.
  - > We are providing care consistent with the unique needs of our underserved communities.
  - > Clinical and academic time are valued and protected.
  - > Physician resources and systems of care are appropriate for enhancing outreach and distributive care.
- Comprehensive generalist care has been reimagined and redesigned across the province:
  - > General Internal Medicine (GIM) has the appropriate specialist resources extended across the continuum of care for the province.
  - > General Internal Medicine (GIM) has the appropriate specialist resources to model comprehensive generalism at our teaching sites.
  - > The number of comprehensive, community-based internists has grown and been systematically redistributed to provide appropriate access to care for all Nova Scotians.
- Evidence-informed approaches to building capacity within the patient's community have been implemented, and are supported by policy makers.

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Optimize Clinical Care Outcomes

## Spread Best Practice/ Build 3° and 4° Clinical Capacity

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Champion and preserve academic 3° and 4° care
- B. Advocate to strengthen community Internal Medicine across Nova Scotia





Optimize Clinical Care Outcomes

# Support 1° and 2° Care to the Community

## **SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Define our role in Nova Scotia's Central Zone vs. our 3° and 4° roles across the Maritimes
- B. Determine optimal, 1°- level consultation (i.e. 2° care) for the Department to provide
- C. Partner with Primary Care on system-wide improvements

## Our Vision

We will know that our vision to **Support Primary (1°) and Secondary (2°) Care to the Community** has been accomplished when:

- All members and key stakeholders understand the Department's role in community hospital-level services in Central Zone.
- Supporting primary (1°) and secondary (2°) care in the community enables our role to provide tertiary (3°) and quaternary (4°) care throughout Nova Scotia and the Maritimes.
- Tertiary (3°) care services are optimally designed and distributed across the province for better access by patients and their primary (1°) and secondary (2°) care providers.

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Optimize Clinical Care Outcomes

# Optimize Multi-Disciplinary Scopes of Practice

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

A. Advocate for a re-engineered system with models of care

## Our Vision

We will know that our vision to **Optimize Multi-Disciplinary Scopes of Practice** has been accomplished when:

- Care providers are collaborating to create “one-stop” experiences for patients and families.
- Collegial networking and sharing results in more effective ways across clinical departments and sites of care.
- We see a culture built on relationships, in which we not only accept but welcome collaboration.
- The priority is to deliver patient-centered care, and as part of that, keep patient care as close to their community as possible.
- Decision making at all levels is aligned to expedite the timely acquisition of resources and supports needed to develop and sustain innovative models of care.

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## Our Vision

We will know that our vision for **Innovation that Expedites Access and Flow** has been accomplished when:

- Delivering the right care, in the right place, at the right time is a shared priority across the system, starting with the Department.
- We have learned how to create sustainable gains through creation of evidence-informed healthcare systems:
  - > In the *system* context, by focusing on a few important initiatives to demonstrate organizational capability, then expanding to broader flow initiatives; and
  - > In a *process or procedural* context, by starting small, proving an innovative solution, and then building out or spreading to other practice settings.
- We have a system-wide approach to improving flow which:
  - > Leverages quality data to minimize waste and potential harm while optimizing patient experiences.
  - > Is integrated with and informed by provincial collaborative research infrastructure in which the Department is a major collaborative stakeholder.

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Optimize Clinical Care Outcomes

# Innovation that Expedites Access and Flow

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Require standardized data to be used in defining access and flow problems across all zones
- B. Spread exemplars
- C. Innovate outflows





# Our Vision

We will know that our vision to **Support Administrative Staff** has been accomplished when:

- Staff are proud members of the Department and embrace its values.
- Our administrative staff are motivated and satisfied professionals who feel:
  - > They are well supported to perform their clinical and academic administrative roles.
  - > They have appropriate supports at work to maintain their physical, emotional and mental wellness.
  - > Respect, diversity and inclusion are foundations of the department culture.
- The majority of individuals and teams feel:
  - > Their role and title is clear.
  - > They are supported to thrive in their work environment.
- Administrative staff input is valued and enhances the quality of department plans, priority setting and departmental outcomes.
  - > Decisions include a broad lens that takes into account what is important to other members and stakeholders.
  - > Decisions are made based on a sound understanding of the Department's purpose and how it fits into a greater system.
- Our members agree that communication concerning policies, procedures and development opportunities are timely and useful in supporting a healthy professional environment.

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Strengthen Foundations for Success

# Support Administrative Staff

## **SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Integrate administrative staff priorities into the Department's strategy
- B. Shape a more cohesive Department culture through appreciation of all roles
- C. Identify and share best practices
- D. Invest in professional/staff development





Strengthen Foundations for Success

# Build Strong Centralized Supports

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL BUILD STRENGTHS IN:**

- A. Quality care tools and expertise
- B. Advocacy
- C. Communication/Coordination/Collaboration
- D. Decision support
- E. Business case development
- F. Cultivate and support healthy accountability

## Our Vision

We will know that our vision to **Build Strong Centralized Supports** has been accomplished when:

- Feedback validates member satisfaction with the supports they receive through the Department.
- Supports enhance physician and staff recruitment and retention.
- Supports help bring department members together to collaborate on common issues.
- Supports provide the mechanism to measure the accountability of members and provide a means to reward and celebrate excellence.
- Supports promote collaboration in assigning resources to the right projects.

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# Our Vision

We will know that our vision to **Support Physicians** has been accomplished when:

- Physicians are proud members of the Department and embrace its values.
- Our members are motivated and satisfied health professionals who feel that:
  - > They are well supported to perform their clinical care, education, research and administrative roles to the best of their abilities; and
  - > They have appropriate supports at work to maintain their physical, emotional and mental wellness; and
  - > Respect, diversity and inclusion are foundations of the department culture.
- Continued professional growth finds many of our members playing leadership roles at provincial and maritime academic and health system tables as well as participating in national and international clinical and academic initiatives.
- The majority of individuals and divisions feel that their roles are clear and appropriate and they are supported to meet their deliverables.
- Physician input enhances the quality of department plans, priority setting and departmental outcomes.
- Decisions made in each division/program include a broad lens that takes into account what is important to other members and stakeholders, based on a sound understanding of the Department's purpose and how it fits into the greater system.
- Our members agree that communications concerning policies, procedures and development opportunities are timely and useful in supporting a healthy professional environment.

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Strengthen Foundations for Success

## Support Physicians

**SUGGESTED DRIVER PROJECTS. TO ADVANCE TOWARD THIS VISION, WE WILL:**

- A. Build leadership and influence
- B. Support physician wellness
- C. Inform physician resource planning

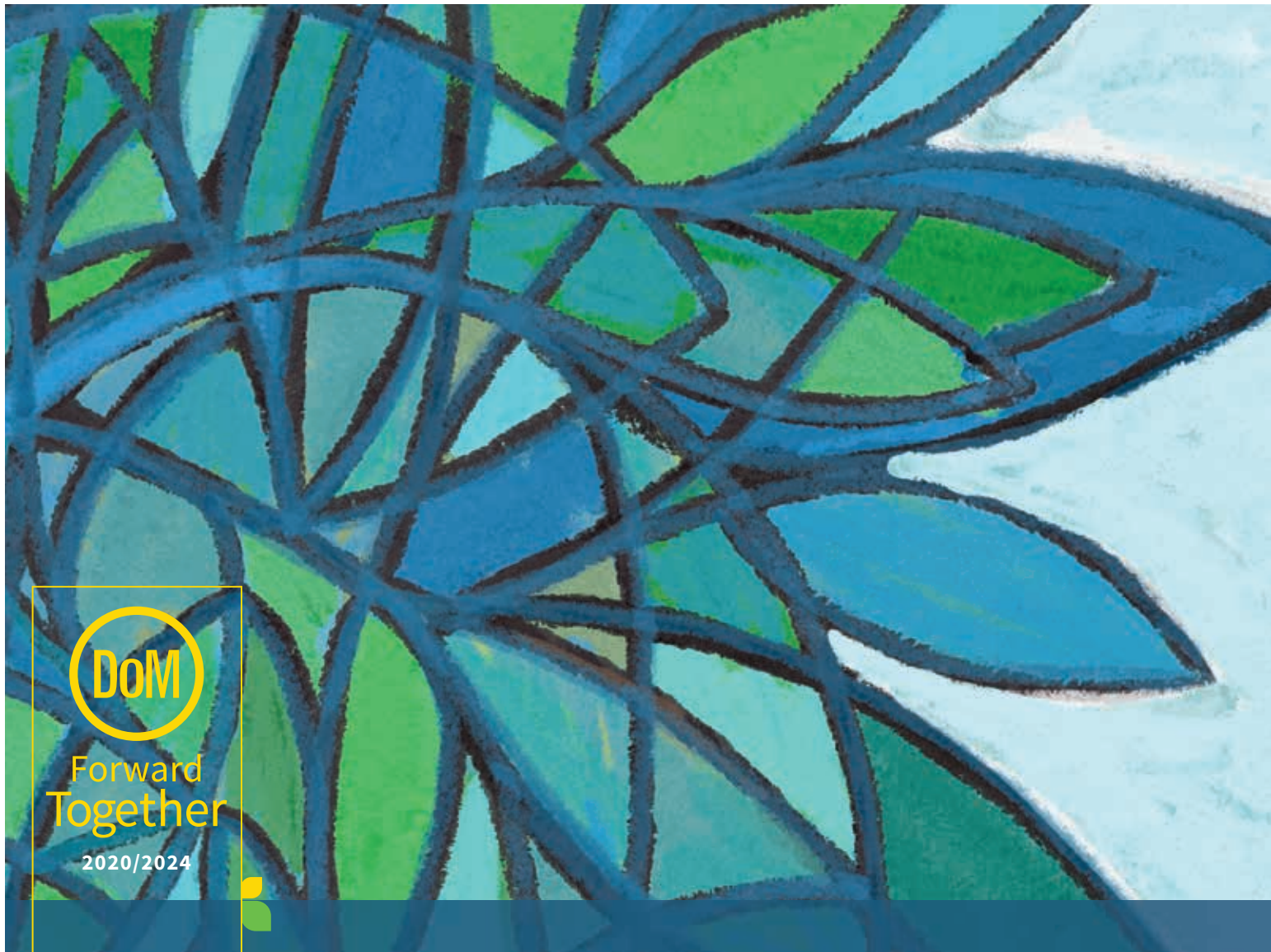




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2020/2024