

Academic/Clinical Department Review and Provincial Head Review/Search GUIDELINES

Background:

The need for a standardized review approach is apparent given the number of clinical departments, the usual term length for department heads, the recent progression towards province-wide academic programming, and the accountable unification of academic/clinical leadership roles within a restructured provincial health system.

There are currently twelve academic/clinical departments, eleven having Provincial Heads (previously known as “Unified Department Heads”). Ophthalmology does not have a Provincial Head. A thirteenth department, CH&E, has medical faculty appointees but is chaired by an in-scope department head. Additionally, there is one academic/clinical division, Oncology, chaired by a division head rather than a Provincial Head. A standardized approach that includes timelines and reproducible processes will increase efficiency, reduce expense, improve reliability, and normalize expectations.

The introduction of Unified Department Heads in the very early, general restructuring of College leadership and governance (2003) led to the development of *Interim Search Procedures for Unified Heads in the College of Medicine*, adopted in November 2013. These procedures have been loosely followed over the course of a number of Unified Head searches, but have included no standardized recommendations for *departmental* review, focusing instead on leadership review - specifically the selection and appointment or reappointment of Unified Department Heads.

The interim search procedures were developed to align, in principle, with earlier university *Search and Review Procedures for Senior Administrators (2011)*, while recognizing that health region interests must be appropriately represented in the search and selection process. This acknowledgment allowed for some degree of latitude on the committee co-chairs’ parts in determining committee composition and procedures, consistent with the recognition that the two parties to the joint appointment will have somewhat different leadership needs.

With the amalgamation of 12 provincial health regions and the introduction of the Saskatchewan Health Authority (SHA) on December 4, 2017, specific province-wide clinical and academic responsibilities for Provincial Heads have been outlined in a new position description (see Appendix C). New practitioner staff bylaws and rules refer to the establishment of province-wide departments and the appointment of Provincial Heads, with leadership search and review guidelines referenced as an appendix to the rules. This document represents a set of guidelines for use reviewing provincial departmental function, alignment, needs and leadership. Provincial Heads appointed at the time of this writing have been consulted with respect to earlier drafts and their input has been incorporated into this version of the guidelines.

Guideline Assumptions and Scope:

Reviews undertaken by review/search committees can equally inform at least four different sorts of decisions: (1) a decision to renew, or not renew, a Provincial Head for a second term (a decision to not renew would then be followed by a search), or (2) a decision to search for a new Provincial Head at the end of the incumbent's second term, or (3) a decision to replace a Provincial Head who is retiring or resigning prior to the end of a term, or is unable or unwilling to perform the role, or (4) subsequent to a joint recommendation by the provincial health authority's CMO and the Dean of the College of Medicine that the incumbent is unfit to lead and must be replaced. A review could also be requested by a department encountering difficulties midway through a Provincial Head's term, not necessarily related to the head's performance or the usual five-year review schedule.

In this province, *departmental* reviews have been historically combined with departmental *leadership* reviews, so as to increase efficiency, reduce participant fatigue, and avoid redundancy. The underlying assumption is that high-performing departments tend to be led by high-performing department heads. There have been challenges to this approach. First, it is not only possible but indeed quite likely that very strong departmental performance might occasionally be evident in the absence of strong leadership. Second, the reverse might occur: the reasons for poor departmental performance could be multifactorial, with some of these factors lying well beyond a department head's control. In these guidelines, steps have been taken to mitigate against confusing leadership concerns with departmental issues unrelated to leadership. While the two major elements (department review and leadership review/search) are presented in combination, department reviews should be viewed in two distinctly separate but complementary ways: 1) as a crucial first step in the decision-making process that results in either the renewal of an incumbent's term or the selection of a new Provincial Head, and 2) as a formative, proactive exercise in quality improvement.

It is assumed that department reviews should be broad-based, thorough, reliable and reproducible. Such an assumption can be mistaken: results can vary with culture differences relating to geographical distribution and departmental history, with differing views on the current state of financial and clinical autonomy, and with the manner in which review information is gathered. Results can vary with timing alone, and with the influence of external commitments and stressors. Factors as simple as group-think and the presence of strong personalities can significantly influence final review recommendations. Efforts have been made to maintain a focus on organizational performance combined with any positive impacts attributable to the current leadership, but it should be recognized that the assessment of leadership performance inevitably involves evaluation of the personal characteristics of current leaders.

It is assumed that the review/search committee's views can be legitimately informed by opinions gathered outside of the formal (internal) review process. For example, in the case of end-of-second-term reviews, the committee co-chairs will usually commission an external review that might turn up information not easily discovered during the usual internal review process. Generally, the format for external reviews, along with their purpose and recommendations, will be consistent with the review/search committee's needs, which might vary according to circumstance. Voluntarily provided external submissions might also occur during the departmental/leadership review process, and should be received and considered as additional information supporting the committee's eventual recommendations.

It is assumed that ongoing recruitment strategies for Provincial Heads will be aimed at strengthening bipartisan commitment to the full integration of clinical and academic missions. It is assumed that the Provincial Head's academic leadership responsibilities will be somewhat more granular in nature than his/her clinical responsibilities. Leadership structures responsible for clinical service delivery have been redesigned and new clinical leadership designations and roles have been devised. The Provincial Head's clinical role is assumed to be at a higher integrative planning level, with a focus on quality improvement, coordination, access, provincial programming, physician resources and supply, relationships, and full integration of health system design, planning and function with the academic mission.

It is assumed that incumbent Provincial Heads will inform the Dean and the CMO of their intentions regarding a second leadership term well before the end of their first term. Typically a lead time of six to eight months will be required in order to facilitate review committee selection and initiation of the review process. Advance notice is particularly important when Provincial Heads decide against seeking a second term.

Finally, departmental and leadership reviews should be viewed as routine quality improvement exercises. While they may have additional discrete functions such as choosing a new Provincial Head, confirming renewal of an incumbent's term or addressing a specific problem, their primary value rests in their potential for optimizing departmental performance and function. Independent external assessment combined with critical self-analysis can lay the groundwork for significant improvements in both patient care and satisfaction of the academic mandate.

Common Review/Search Components:

The following review/search components are presented in summary form. Further details are provided in the section titled **Review/search process guidelines**, below.

1) Review/search committee selection

Committee members will be selected by the co-chairs. The co-chairs will usually be the Dean of Medicine (the Dean) and the Chief Medical Officer of the Saskatchewan Health Authority (the CMO). Department reviews will be undertaken at least once every five years, in preparation for either the incumbent's renewal for a second term or in preparation for Provincial Headship search and selection. In the latter instance, maintaining the same committee membership throughout these two sequential processes is recommended. Committee co-chairs will be allowed some latitude in establishing committee membership, but the operative principle will be that constituent groups will be well represented within the confines of a functional committee size. Further details are provided under review/search process guidelines, below.

2) Department self-study

The self-study compiles, within one templated document, most of the background information external review committees and review/search committees will require before gathering additional interpretive information during their respective interview processes. While the current Provincial Head will be responsible for gathering and collating the information contained in the self-study, the ways in which this is done will vary from department to department. Mechanisms have been included to ensure that the final contents fairly and accurately represent current departmental circumstances. Self-studies should be completed at least once every five years, prior to end of a Provincial Head's first term and then prior to selection of a new Provincial Head.

3) Committee interviews

The interview process will vary according to the identified end goal, as determined by the committee co-chairs. Interviewees may be internal or external to the department. If departmental and Provincial Head performance is judged to be satisfactory following review committee approval of the internal self-study, the co-chairs and the review committee may decide that interviews are unnecessary. However, the committee's report may be better informed and more useful to the department if, in the case of strong demonstrated leadership during the first term, the incumbent is interviewed. In the case of end-of-second-term reviews, the outgoing Provincial Head should be interviewed, followed by any other interviews the committee determines are necessary, including interviews with new candidates for the position. In the case of departmental reviews undertaken at the request of the department or as prompted by serious departmental concerns identified mid-term, interviews may or may not occur, and could vary from broad-based to focussed, depending upon the nature of the concern.

4) Candidate/incumbent public presentation

While the initial portions of the review/search process remain confidential, in the case of Provincial Headship searches and final candidate selection, short-listed candidates will be asked by the review/search committee to provide a public presentation regarding their candidacy and perceived suitability for the position. At this point, the invited candidate's name(s) will be made public and arrangements will be made, including appropriate advertising for the event(s). This

requirement is consistent with the university's *Search and Review Procedures for Senior Administrators (2011)*, as it is widely understood that candidates seeking headship of academic units are expected to present themselves to the collegium. In the case of incumbents seeking renewal of their terms, a public presentation is not necessary.

5) Search consultant input (optional)

Search consultant expertise, if accessed, can provide invaluable input to committee deliberations, candidate screening, and logistical proceedings. These organizations are highly knowledgeable and experienced; their views may significantly inform the committee's final report, but must remain advisory only. Search consultants may be retained in the context of end-of-second-term searches or searches for new Provincial Heads that need to occur earlier than expected; such assistance is not necessary for end-of-first-term renewals, unless the review process results in a recommendation that the incumbent be replaced. In such situations, the review process converts to a search process.

6) External Reviewers' Report

External reviews will normally occur in the context of end-of-second term review/searches. Near the end of a Provincial Head's first term, a request may be made to the Dean and CMO, by the incumbent, that an external review be undertaken in addition to the usual internal self-study and committee review. In both of the preceding situations, the external reviewers' final report and recommendations will be received by the review/search committee as information. In the usual circumstance, external reviewers will be asked to formulate their report and recommendations using a framework similar to that used for both the departmental self-study (see Appendix A) or the review/search committee's final report (see Appendix B). If received early enough during the review process, the committee will be able to adjust its own plans regarding the collection of additional information and selection of interviewees, thereby avoiding unnecessary duplication of effort.

7) Committee Final Report

The committee's final report will begin with a clear identification of the process goal(s), i.e. specific issue review, overall departmental/leadership review, departmental review with subsequent new leadership selection, etc. The committee will offer a written assessment of each self-study section, highlighting data directly impacting any recommendations to be made. The report will summarize interview content relevant to the task at hand and make a final recommendation, or set of recommendations, supplying a clear rationale. In the case of reviews undertaken at the request of the department, there may be multiple recommendations made in support of optimizing departmental function. Similar recommendations may be made by review/search committees in the context of incumbent renewal or new leadership searches.

Comments contained within the report, including those provided to the committee verbally or in writing, will be de-identified and presented in summary form. Similarly, individual committee member comments will be de-identified and presented in aggregate. In the context of selecting a new Provincial Head or renewing an incumbent's term, the committee's final report will not be made available to the current/future Provincial Head or to others until after administrative negotiations are complete and in-person meetings have been held with the approved incumbent or recommended/approved new leadership candidate.

Review/search process guidelines:

1. Timelines

- a) Review/search committees will be established approximately one year prior to the end of a Provincial Head's first term
- b) Review/search committees will be established approximately eighteen months prior to the end of a Provincial Head's second term
- c) Review/search committees will be established immediately upon being advised of a Provincial Head's resignation/retirement, if that event is to occur prior to the usual end of term and sooner than allowed for in the timelines above
- d) Review/search committee co-chairs will direct the Provincial Head to undertake a departmental self-study using the prescribed template (Appendix A), for completion and submission to the committee within two months following the request
- e) Review/search committee co-chairs will oversee the selection of external reviewers in the case of end-of-second term review/searches, or in some cases, and at the request of the incumbent Provincial Head, at the end of the first term
- f) Review/search committee will review the departmental self-study and begin interviews, as necessary, within one month after receiving the self-study
- g) Review/search committee will concurrently review report provided by external reviewers if an external review was undertaken
- h) In the case of end-of-second term reviews, and after preliminary deliberations have resulted in applicant short-listing, public presentations will be arranged, at which time names of short-listed candidates are no longer held confidential
- i) Following public presentations and further deliberation, and no later than two months following conclusion of the interview and deliberation process, the review/search committee will complete and submit its final report, including any recommendations
- j) If the review process culminates in a recommendation for term renewal or the appointment of a new Provincial Head and this recommendation is approved by the provincial health authority's CEO and the university's Provost, the committee co-chairs will publicly announce the approval following completion of all contractual and administrative negotiations

2. Membership selection

- a) Selection of review/search committee members is the joint responsibility of the co-chairs
- b) The co-chairs will normally be the Dean and the CMO
- c) The co-chairs are empowered to delegate their chairperson roles, if necessary, after consultation with the university's Provost and Vice President Academic, and the health authority's CEO
- d) The co-chairs will select or oversee the selection of committee members according to prescribed roles and procedures, as outlined below
- e) Additional members may be chosen by the co-chairs so as to provide a broad perspective and a fair representation of academic and clinical mandates, while strengthening the credibility of the process
- f) The co-chairs will inform tentative committee members that the committee's review and search functions may be combined, undertaken separately, or undertaken sequentially as necessary, but that committee membership will be maintained throughout

- g) The incumbent or outgoing Provincial Head, in consultation with his/her department members, may be offered the opportunity to provide comments or express concerns regarding the tentative committee membership, prior to the committee's first meeting
- h) If a committee member ceases to serve for any reason, a replacement will be chosen using the same process and representing the same constituency, unless withdrawal occurs after the interview process has begun
- i) Any conflict of interest or perceived conflict of interest, as described in applicable health authority and/or university conflict of interest policies, will be promptly disclosed by selected members and the committee will determine whether that member shall be excused
- j) Review/search committee members (maximum 11 plus the co-chairs) will be selected by the co-chairs except as noted, and comprise the following:
 - i. One Provincial Head from another department
 - ii. One Vice Dean of the College of Medicine
 - iii. Three clinical faculty from the department, two of whom are preferably from SHA rural areas
 - iv. Two Chiefs of Staff, at least one of whom is preferably from an SHA area other than that within which the incumbent or outgoing head resides
 - v. A Department Lead, preferably from an area outside of Saskatoon or Regina
 - vi. A member of the Saskatchewan Health Authority's executive leadership team, as selected by the CEO
 - vii. Up to two additional members chosen by the co-chairs to balance committee membership in terms of stakeholder interests and geographic representation
- Note: it is recognized that not all provincial clinicians have medical faculty appointments, but because of the dual nature of the Provincial Head's role, all review/search committee members must have faculty appointments

3. Roles and responsibilities of the co-chairs

- a) Review/search committee membership selection
- b) Establish and enforce process-appropriate timelines, consistent with those described in Section 1, above
- c) Chair all committee meetings and oversee all communications to the committee
- d) Manage the process, ensuring efficiency, efficacy, fairness, comprehensiveness, and accountability
- e) Provide leadership and guidance to the committee
- f) Ensure all committee members remain actively involved in all aspects of the process
- g) Ensure that committee discussions and interviews remain respectful and objective
- h) Assist committee members in remaining focussed on observable factors and measurable data that can be used to inform a final recommendation
- i) Maintain the confidentiality of the process and educate committee members in that regard
- j) Provide the committee with a copy of these review/search committee guidelines and a copy of the Provincial Headship position description
- k) Provide the committee with an opportunity to advise on the most appropriate means and methods of obtaining applications in the case of Provincial Head searches
- l) Provide the current Provincial Head and any applicants, as applicable, with a copy of the review/search committee guidelines

- m) Provide the committee with the department's completed self-study and other departmental reports or surveys or questionnaires, including previous self-studies, accreditation reports, external review reports, or any additional materials, as requested by the committee
- n) Oversee the development of a final report (see Appendix B), including recommendations, and ensure that the report is an accurate portrayal of committee member views, including dissenting views
- o) Ensure that any recommendations contained in the final report are consistent with the strategic directions, priorities, mission and vision of the university, college, and provincial health authority
- p) Provide regular updates to the Provost and CEO
- q) Ensure that the review/search process remains consistent with these guidelines
- r) Undertake periodic review and revision, as necessary, of these guidelines
- s) Submit any agreed upon revisions to the applicable authorities for approval

4. Roles and responsibilities of committee members

- a) Become familiar with all relevant aspects of the department under review, by reading all documentation provided by the department and the committee co-chairs
- b) Attend all meetings of the committee
- c) Contribute to all committee discussions and participate in the interview process
- d) Assist in the selection of appropriate external reviewers, as applicable
- e) Assist in the selection of appropriate interviewees, in accordance with the guidelines in Section 7k), below
- f) Assist in the development of the committee's final report, and engage in the development of its recommendations
- g) Ensure that all committee deliberations and communications remain confidential, and ensure that the final report's contents remain confidential until such time they are released in accordance with these guidelines

5. Self-study

- a) A departmental self-study will be undertaken at the beginning of each review/search process
- b) Self-study timelines, as described in Section 1, above, will be followed
- c) The purpose of the self-study is twofold: 1) to provide departments with an opportunity for critical self-analysis, and 2) to provide the review/search committee (and in some cases, the external reviewers) with ample background data concerning all relevant departmental affairs, so as to better inform internal reviewers and where applicable, external reviewers
- d) The self-study will represent an accurate summary of the department's current status
- e) The self-study will be completed using a standardized template (see Appendix A)
- f) The self-study contents will be compiled under the direction of the Provincial Head
- g) The self-study contents will be signed by the Provincial Head, the department's executive members, the department's Area Leads, and at least one department member from each distributed educational site, who is not a member of the departmental executive
- h) The self-study will be provided, by the co-chairs, to the review/search committee and its contents will remain confidential throughout the process
- i) Following the formal conclusion of the review/search process, and following any action taken as a result of the committee's recommendation(s), the self-study will be released to the current Provincial Head, the Saskatchewan Health Authority's executive leadership team via the CEO,

the incoming Provincial Head in the context of end-of-second-term searches or incumbent nonrenewal, resignation or retirement, and to the college's Faculty Council as information

- j) Once released as prescribed above, the Provincial Head, whether incumbent or outgoing or incoming, may further release the self-study's contents in whole or in part, at his/her discretion

6. External review

- a) External reviews will be requested on the recommendation of the review/search committee co-chairs, following discussion with the committee
- b) External reviews will normally only be conducted in the context of end-of-second-term searches
- c) External reviews will also be conducted if a Provincial Headship search becomes necessary for any other reason, or if requested by the incumbent near the end of his/her first term
- d) Approximately one year prior to the end of the second term or immediately following establishment of the review/search committee, the committee will meet to discuss selection of appropriate external reviewers
- e) The incumbent will be asked to provide a list of names of potential reviewers
- f) The committee co-chairs will select two names and send initial and follow-up invitations, as necessary
- g) Upon obtaining external reviewer agreement, the co-chairs will meet with them to discuss the purpose of the review, the committee's expectations, the process the reviewers would like to use, and the format to be followed in preparation of their report
- h) The co-chairs will work with relevant provincial health authority and college personnel to facilitate the external reviewers' visit and provide for their needs
- i) Upon completion, the external review will be submitted to the co-chairs and circulated to committee members for information
- j) In the case of external reviews undertaken at the incumbent's request at the end of the first term, the report will be provided to the incumbent upon receipt
- k) In the case of external reviews undertaken in preparation for selection of a new Provincial Head, the report will be provided to the outgoing and incoming Provincial Heads along with the review/search committee's final report, in accordance with section 9(g), below

7. Interviews

- a) Interviews will be undertaken at the discretion of the review/search committee
- b) Interviews are intended to inform the committee's final recommendations and provide interpretive commentary or elaboration regarding specific parts of the self-study
- c) Interviews are intended to provide a variety of clinical and academic perspectives
- d) Candidate interviews are necessary during the course of a search process and should be conducted in person whenever possible
- e) Live video-conferenced interviews are acceptable but candidates short-listed for the Provincial Headship position should also be interviewed in person
- f) For the initial interview, a standardized list of questions will be used for each candidate: this list of questions will vary with the department in question, and will be assembled and approved by committee members prior to the interview
- g) Candidate interview questions may be composed with the assistance of the search consultant, as applicable
- h) For other interviews, questions will focus on specific matters of self-study interpretation or specific aspects of the interviewee's relationship or interactions with the department

- i) All interviewees should be provided with the opportunity to ask questions of the committee and encouraged to voice their own views as they relate to the overall goals of the review/search process
- j) In the case of comments made by interviewees who are not candidates for the Provincial Headship position, any such comments will be anonymized if included in the committee's final report
- k) A recommended list of potential interviewees includes, but is not limited to:
 - o the current Provincial Head
 - o the current Area Chiefs of Staff, as applicable
 - o the current Area Department Leads
 - o the current Area Division Leads, as applicable
 - o interested members of the department, as a group
 - o at least two medical residents in the department's training program, from different sites
 - o undergraduate and postgraduate associate deans
 - o department administrators (e.g. FAMs)
 - o representatives of other departments or divisions that work in close partnership with the department and Provincial Head being reviewed
 - o Provincial Heads of other departments, as appropriate
 - o representatives of government, as applicable

Notes:

- i. the preceding list is meant for consideration by both the external reviewers, if applicable, and the review/search committee
- ii. committee co-chairs must approve any interviewee list suggested by the review committee or the external reviewers
- iii. requests for interviews with certain interviewees (e.g. residents currently enrolled in the training program) should only be made on behalf of external reviewers
- iv. co-chairs will determine the appropriate timing for all interviews
- v. invited interviewees may submit written input if unavailable, or by preference

8. Public presentations

- a) Public presentations only apply in the context of end-of-second-term searches or in situations where a new Provincial Head must be selected for other reasons
- b) Presentations will be scheduled immediately upon committee selection of short-listed candidates, and usually following completion of second-round interviews of these candidates
- c) Co-chairs will ensure that adequate notice is provided to the public and that the chosen time, venue and electronic video links optimize broad-based participation from faculty, students, residents and all interested members of the public
- d) Co-chairs will welcome and introduce the candidates and ensure that adequate time is made available at the end of each presentation for questions from the audience
- e) Review/search committee members will evaluate candidate performance as part of the ongoing review/selection process, informing the final report recommendation

9. Final report

- a) While input from all committee members will be considered, responsibility for writing the final report, including committee recommendations, rests with the co-chairs

- b) The report will follow the same format as that used for the departmental self-study and will include commentary from the committee on each identified category of departmental operations
- c) The report is intended to identify key departmental challenges and opportunities, and particularly those relating to leadership performance
- d) The report is intended to be useful to the successful candidate or renewed incumbent as well as the departmental executive, health system administrators and college administrators
- e) The report must include any dissenting committee views with respect to both the recommendation being made, and the interpretation of any data considered by the committee during the review process
- f) The report will be submitted to the Provost and the CEO
- g) Only after receiving approval from both the Provost and the CEO, and only after any necessary negotiations have concluded, will the report be released to the current and incoming Provincial Heads, as applicable, the provincial health authority's executive leadership team via the CEO, and Faculty Council
- h) The co-chairs will arrange to meet with the department to present the reports' recommendations
- i) The current Provincial Head will be formally provided with the opportunity to submit a written response to the final report, which will be received by the Dean and by the CEO as information and for use in ongoing planning and quality improvement

10. Voting procedures

- a) To avoid potential conflicts of interest, the committee co-chairs will not be voting members of the review/search committee
- b) All other committee members are entitled to vote
- c) Voting procedures will be open; secret ballots will not be used unless so determined by the co-chairs
- d) A committee member, with the approval of the co-chairs, may abstain from voting
- e) Committee members who did not attend the candidate interviews in person or review recordings of these interviews will not be eligible to vote, but may contribute to the committee's discussions leading up to the vote
- f) Review/search committee recommendations will be made on the basis of a simple majority of votes from eligible committee members
- g) A majority is defined as greater than or equal to fifty percent of the committee members plus one
- h) In the case of Provincial Head searches, the report will include one of three possible deliberation outcomes: 1) a recommendation regarding the preferred candidate and any other acceptable candidates, or 2) no preferred candidate, but a list of acceptable candidates, or 3) a statement of inability to agree upon any acceptable candidates
- i) A tie vote will equate with committee inability to decide upon a preferred candidate
- j) In the case of a tie vote, the committee is obliged to state whether any or all of the candidates are acceptable, although not preferred
- k) A majority committee vote is required in the determination of acceptability
- l) In the case of incumbents seeking a second term, a vote will be held with respect to renewing the incumbent for a second term or recommending that a search for a new Provincial Head be undertaken

- m) The number and names of those voting for or against recommendation of appointment or any other recommendation will not be included in the final report

11. Appointment process

- a) The review/search committee will submit its final report to the Provost and the CEO
- b) The normal appointment term will not exceed five years
- c) Provincial Heads will normally serve no more than two consecutive terms
- d) If a preferred candidate is recommended by the committee, the Provost and CEO must be in agreement with that recommendation before authorizing the appointment
- e) It is within the purview of the Provost and CEO to choose an alternative candidate from amongst the short-listed and acceptable candidates
- f) The Provost and CEO are entitled to declare a failed search if the review/search committee was unable to make a recommendation regarding its preferred candidate and was also unable to state (majority view) that any of the candidates were acceptable
- g) In the case of a failed search, the Provost and CEO may reconstitute the committee, which may or may not include new committee members
- h) Notwithstanding the preceding recommendations in this section of the guidelines, the appointment process will proceed in accordance with applicable bylaws, rules, policies and procedures in place within the university and the provincial health authority at the time of appointment

Appendix A

Self-study template: introduction

The **self-study** will be completed by the department in preparation for the commencement of the review/search process and will ordinarily be presented to the co-chairs of the review/search committee within two months of receiving the request. The self-study will provide the review/search committee with in-depth information regarding the overall functioning of the department from governance, leadership, clinical and academic perspectives. Most information contained in the self-study can be collected internally, but some information will need to be obtained from provincial health authority or college managers and administrators. It will be the Provincial Head's responsibility to ensure all pertinent information is collected and presented as part of the self-study documentation.

While the departmental self-study will be of primary importance in conducting the review/search, the committee may also rely upon information obtained through the interview process or from external written submissions. At the co-chairs' discretion, the committee's final report may also be informed by an external departmental review.

The self-study template is available to departments in editable format but is shown in condensed outline, beginning on the following page. Self-study submissions should retain the same numbering and organization as shown in the template. "N/A" should be indicated if the question does not apply to the department being reviewed, and a brief explanation should be provided if necessary. Narrative responses to all questions should be concise and answers provided in point-form are preferred.

1. Update since last departmental review:

- a) When was the last review?
- b) Was the review combined with a departmental leadership review?
- c) Briefly outline any specific recommendations from the last review.
- d) Were the recommendations implemented?
- e) Briefly outline any changes still underway as a result of the last review.
- f) Briefly outline any new or emerging factors/trends/issues that will likely have a direct impact on the department in the next 5 years.

Supporting documentation:

- Last review/search committee final report
- Last progress report to health authority regarding review/search recommendations
- Last progress report to college/university regarding review/search recommendations

2. Strategic planning:

- a) Does the department have a strategic plan?
- b) Who was involved in the last strategic planning process?
- c) Is the strategic plan in alignment with the college's strategic plan?
- d) Is the strategic plan in alignment with the health authority's strategic plan?
- e) Briefly outline any aspects of your strategic plan that differ significantly from health authority and college strategic plans.
- f) Briefly outline any new or emerging factors/trends/issues that have impacted your strategic plan or are likely to impact during the coming five years.
- g) Briefly outline specific departmental priorities and/or actions attributable to or pursued as a direct result of strategic planning.
- h) When is the next strategic planning process scheduled to begin?

Supporting documentation:

- Current departmental strategic plan
- Current college strategic plan
- Current health authority strategic plan

3. Patient care mandate:

- a) Briefly outline the clinical services and programs offered by the department and identify whether they are local, regional or provincial in scope.
- b) Describe any challenges and issues negatively impacting the department's ability to provide expected clinical services, according to the following areas:
 - i. Physician resource planning
 - ii. Physician recruitment and retention
 - iii. Maintenance of and support for diversity in the physician work force
 - iv. Generalist, specialist and subspecialist clinical service gaps
 - v. Clinical service gaps related to access and wait times
 - vi. Clinical service gaps related to inadequate or absent facilities or equipment
 - vii. Specialist-generalist-primary care communication and collaboration gaps

- viii. Clinical services planning, organization, coordination and funding
- ix. Physician clinical payment structures
- c) Describe how the department is addressing gaps, issues and challenges as outlined in the previous question.
- d) Describe specific mechanisms the department employs to ensure that clinical services are high-quality and that quality improvement remains paramount.
- e) Describe quality improvement work department members have undertaken that led to changes in the way clinical care is provided locally and/or nationally.
- f) Describe specific mechanisms related to maintaining and improving patient safety.
- g) Describe specific mechanisms that ensure clinical services are responsive to patient needs.
- h) Describe any clinical programs or initiatives designed specifically to address the needs of socially marginalized or vulnerable patient populations.
- i) Identify how department strengths will assist in addressing any trends, opportunities, or challenges that lie ahead with respect to the provision of expected clinical care.

Supporting documentation:

- Departmental contract templates for clinical care, identifying total FTEs and FTEs associated with specific areas of clinical care
- Departmental membership list, including geographic locations

4. Teaching mandate:

- a) Briefly describe the department's teaching contributions in UGME.
- b) Briefly describe the department's teaching contributions in PGME.
- c) Briefly describe the department's graduate education contributions.
- d) Briefly describe the department's contributions to CPD both within and outside the department.
- e) Briefly describe any other teaching contributions, including interdisciplinary teaching.
- f) How is teaching monitored and reviewed in the department?
- g) How is teaching recognized and valued in the department?
- h) Briefly outline any challenges the department faces in meeting its teaching mandate.
- i) Briefly describe any departmental initiatives aimed at expanding the distributed model of medical education.
- j) Briefly outline resident teaching performed by department members outside of tertiary care settings.

Supporting documentation:

- Current contractual deliverables related to event-based (i.e. scheduled) teaching (attach contract templates and highlight teaching deliverables that form part of individual or group contractual academic deliverables)
- Approximate faculty half-days per year (total) dedicated to event-based teaching
- Approximate faculty half-days (total) per year during which clinical teaching is provided
- Most recent PG residency training accreditation report

5. Research mandate:

- a) Briefly describe how the department's research agenda aligns with its strategic plan and strategic priorities.
- b) Briefly comment on whether the department is meeting its self-identified research productivity goals.
- c) Provide examples of departmental research initiatives that support socially accountable objectives and indigenous health priorities, as identified by the department, the college, the university, and the health authority.
- d) Provide examples of original departmental research, analysis or other scholarly activity that have resulted in innovations or advances in clinical care.
- e) Describe departmental participation in original evidence-based research, analysis, planning or other scholarly activity that has led to quality improvement in clinical programming or the delivery of clinical care.
- f) Describe departmental participation in original evidence-based research, analysis, planning or other scholarly activity that has led to improvements or innovations in medical education.
- g) Briefly describe how the department provides mentorship for new researchers.
- h) Briefly describe departmental involvement in graduate student research supervision.
- i) Briefly describe how the department supports research undertaken by residents.
- j) Identify any obvious gaps in faculty expertise relating to specialty-specific research and steps taken to address these gaps.
- k) Identify any challenges associated with advancing the department's research agenda.

Supporting documentation:

- A list of faculty and resident publications during the current review period, illustrating productivity trends
- A list of faculty and resident scholarly presentations during the current review period, illustrating trends if evident
- A summary of new departmental research funding obtained annually during the current review period, illustrating trends
- Examples of available outcome analyses of quality improvement work in clinical care or medical education
- Current contractual deliverables related to research (attach contract templates and highlight research deliverables that form part of individual or group contractual academic deliverables)
- Approximate faculty half-days per year dedicated to research

6. Governance, leadership and administration:

- a) Outline the current departmental governance structure and comment on its efficacy.
- b) Is the current structure the correct one for pursuit and achievement of the department's strategic priorities?
- c) Is the department's executive engaged, representative and actively involved in decision-making processes?
- d) Are departmental committees effective and do they fulfill their mandates in accordance with their terms of reference?

- e) Are departmental policies and procedures sufficient in number and scope, clear, transparent and regularly communicated?
- f) Is the department's governance structure designed in accordance with its province-wide academic and clinical mandates?
- g) Is each department member's academic and clinical work regularly reviewed by the department head and is career advancement advice and assistance readily available? Is there an established system of performance feedback?
- h) Are the department's academic committees, planning processes and other academic administrative affairs consistent with the need for representation from learners, faculty and others associated with distributed medical education sites?
- i) Does the department have mentorship programs for new department members?
- j) What does the department do to develop and support future leaders? Is leadership succession planning actively pursued?
- k) Is exceptional performance, whether clinical or academic, recognized, acknowledged or rewarded?
- l) Are departmental lines of communication open and effective, including those involving the Provincial Head?
- m) Describe the overall culture of the workplace, as identifiably associated with the department.
- n) Does the department have a conflict resolution mechanism in place and is it effective?
- o) Is workplace and job satisfaction for departmental staff monitored and are any issues/challenges effectively addressed?
- p) Is workplace safety actively monitored and are any issues immediately addressed?
- q) Are physician/staff health and wellbeing needs monitored?
- r) Is the current Provincial Head viewed as a good communicator, inspiring leader and strong relationship builder?
- s) To the extent applicable, does the Provincial Head allocate workload or assign duties, whether clinical or academic, in a fair and transparent manner?
- t) Does the Provincial Head appear to fulfill his/her mandate with respect to the position description and reporting/accountability expectations?
- u) Does the Provincial Head keep department members up-to-date regarding health system and college changes, developments, initiatives and expectations?
- v) Does the Provincial Head effectively manage communication and relationships with key stakeholders and constituents such as faculty, learners, staff, administrators, other departments, allied health professionals, government representatives and health institutions?
- w) Is the Provincial Head a capable and trusted manager of departmental resources? Are allocation decisions collaboratively discussed? Do they remain consistent with the department's strategic priorities? Are available resources sufficient for fulfilling the departmental mandate?
- x) Does the Provincial Head feel adequately supported by the Dean's office and the health authority's senior administrators?

Supporting documentation:

- Departmental organization chart(s) showing administrative leadership structure, committee structure, and reporting structure
- List of departmental executive membership and names of leaders in key positions
- Committee current membership and terms of reference

7. Sign-off and approvals:

Department members:

“I confirm that I was provided with the opportunity to supply input to this self-study. I confirm that to the best of my knowledge, the factual information presented is complete and accurate.”

- Department executive members (dates, names, signatures)
- Department Area Leads (dates, names, signatures)
- One department member from each distributed educational site (dates, names, signatures)

Provincial Head:

“I confirm that this self-study is complete and accurate. I confirm that it has been distributed and reviewed by department members and staff prior to submission. Any opinions expressed are my own or those of individual department members and are accurately portrayed.”

- (date, name, signature)

Appendix B

Review/search committee final report:

A) Executive summary

1. Update since last department review
2. Strategic planning
3. Patient care mandate
4. Teaching mandate
5. Research mandate
6. Governance, leadership and administration

Using these self-study sections as headings, the final report will provide brief commentary on any notable content relevant to the overall process goal. Specifically, the review committee will address and comment upon:

- Any internal inconsistencies in the self-study
- Any discrepancies between the self-study contents and information obtained externally or through the interview process
- Progress made towards addressing any recommendations contained in previous departmental reviews
- Important challenges and stressors the department faces currently or in the future
- Serious leadership deficiencies requiring immediate action

B) Recommendations

The review/search committee will make its recommendation regarding leadership, if applicable, and provide a brief rationale for the recommendation. Ideally, any additional recommendations should be organized according to the six self-study sections and whenever possible, mapped to specific parts of those sections and the corresponding commentary section in the executive summary.

C) Sign-off and approval

“This report is an accurate representation of committee views. Any recommendations made represent the committee’s majority opinions.”

- Review/search committee members (dates, names, signatures)
- Co-chairs (dates, names, signatures)

Appendix C

Provincial Head position description:

< attach when available >