

2012 CALL FOR EXTRA FELLOWSHIPS

ANNOUNCING THE NEW 14-MONTH EXECUTIVE TRAINING FOR RESEARCH APPLICATION (EXTRA) TEAM FELLOWSHIP.

BUILDING ON EXISTING CURRICULUM ELEMENTS AND STRENGTHS IN THE PROGRAM ROOTED IN ORGANIZATIONAL CHANGE INITIATIVES, THE NEW 14-MONTH EXTRA TEAM-BASED FELLOWSHIPS OFFER A SHORTER AND MORE FOCUSED TRAINING IN BETTER MANAGEMENT AND USE OF EVIDENCE FOR QUALITY AND PERFORMANCE IMPROVEMENT.

KEY DATES

APPLICATION DEADLINE: February 1, 2012
RESULTS ANNOUNCED: April 10, 2012
FIRST RESIDENCY SESSION: August 12–23, 2012

FOR COMPLETE DETAILS ON ELIGIBILITY, APPLICATION SUBMISSIONS AND SELECTION PROCESS, DOWNLOAD THE **EXTRA 2012 GUIDE FOR APPLICANTS** FROM OUR WEBSITE AT www.chsrf.ca/extra OR CONTACT CHSRF STAFF AT grantsandawards@chsrf.ca.



THE 14-MONTH EXTRA TEAM FELLOWSHIPS

The new 14-month CHSRF Executive Training for Research Application (EXTRA) fellowships identify and support teams of healthcare executives in initiating and leading evidence-informed improvements in their own organizations, or across jurisdictions involving multi-site teams and cross-boundary intervention projects. Launched in 2004, the prestigious and competitive EXTRA fellowships are acknowledged for their contribution to building a cohort of healthcare leaders with the skills to use research strategically in order to lead innovation and generate significant improvements within the Canadian healthcare system. Given the rapid evolution of reform within the system over the last decade, CHSRF and its EXTRA partners recognize the need to accelerate performance and quality improvement in Canada's healthcare. This new 14-month fellowship builds on the EXTRA program's early work by increasing the supply of well-trained executives who are not only experienced in the use and application of evidence for improvement projects, but who are also trained in the initiation, implementation and sustaining of performance and quality activity that is so pivotal to improving health services in Canada.

PARTNERS

The EXTRA program is offered through a partnership of the Canadian Health Services Research Foundation (CHSRF), the Canadian College of Health Leaders (CCHL), the Canadian Medical Association (CMA), the Canadian Nurses Association (CNA), and a consortium of Quebec partners, represented by the Institut national d'excellence en santé et en service sociaux (INESSS).

PURPOSE OF THE EXTRA FELLOWSHIP

EXTRA fellowships provide an opportunity for healthcare leaders to acquire knowledge, skills and competencies that will help them to:

- use research-informed evidence with greater confidence in decision-making
- design and implement a research-informed change-management intervention of strategic importance to their organization
- build organizational and cross-jurisdictional capacity for research use in support of quality and performance improvement

EXTRA teams have the opportunity to:

- acquire skills and knowledge to support improvement
- learn effective techniques, leadership tactics and organizational strategies to initiate, manage and sustain improvement
- use organizational research evidence, quality improvement theory and change management to support improvement
- design and achieve measured progress on an organizational improvement initiative, or a multi-site improvement initiative across jurisdictions
- implement effective and sustainable evidence-informed solutions that address organizational and regional health system priorities
- collaborate and network with Canadian peers who possess improvement experience and skills



ELIGIBILITY

The new EXTRA fellowships are available to teams composed of two to four individuals who have completed professional training in any health discipline, including medical practitioners, nurses, allied health professionals, health managers and policy-makers. It is expected that recipients of EXTRA team fellowships will have completed their initial professional training in the last five to 15 years, have an ongoing commitment to the application of evidence in healthcare, and occupy leadership roles in their organizations. The team applicant(s) must provide strong evidence of support from their organization(s) throughout the tenure of the fellowship.

a) Team applicants from healthcare organizations

Applicants from healthcare delivery organizations can apply as single organizational teams, multi-site teams, or as cross-jurisdictional teams. While most quality improvement focuses on specific programs and services, EXTRA team fellowships encourage participation of teams constituted across organizations and jurisdictions with a focus on improvements in, for example, transitions of care related to ALC, continuum of care integration between different parts of the system, interventions focused on high-priority performance issues such as infection control and more effective alignment of services across hospitals and community providers.

Individuals from small organizations who may not be in a position to put forward a team are strongly encouraged to join teams from larger organizations, or across jurisdictions, to work on intervention projects of common interest.

Typical job titles for team members include chief of nursing, chief of medicine, vice-president or chief operating officer. Directors and department heads/chiefs from these executive streams who have a significant scope of influence and authority in the organization, and who can demonstrate that they

are on a career trajectory to leadership positions, are eligible to apply. The problem to be addressed in the intervention project must be clear and well defined in the application submission. The intervention projects must be fully aligned with organizational strategic priorities and the work responsibilities of the team members.

Applications from multi-site teams must be submitted by the CEO of the organization willing to take the lead for the team, must include a physician leader on the team, and must include signatures of the CEO(s) of the other participating organizations.

b) Team applicants from government ministries or departments

Policy-makers currently occupying senior leadership positions whose responsibilities *include significant linkages to providers of direct care and delivery of services* are eligible to apply as a single government department teams or across policy jurisdictions, including teams that are made up of individuals from the policy and delivery sectors. Team applicants must identify an intervention project closely aligned with ministry priorities in implementing healthcare improvement policies in conjunction with local healthcare organizations and/or authorities. Examples of interventions include efforts to scale up and spread successful improvements across the system; system planning that uses the needs of patients to help focus improvements; and more effective alignment of improvement priorities and activities between the policy and delivery sectors.

Typical job titles for team members include assistant deputy minister, director general, executive director and managers with significant span of authority. These are individuals whose jobs and responsibilities have a significant scope of influence within government and/or who can demonstrate that they are on a career trajectory to more senior leadership positions. Team applications from a government ministry must be submitted by the deputy minister(s).

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Multi-organizational teams will need to identify one lead organization and have sign-off by all sponsoring organizations.

PERIOD OF FELLOWSHIP

EXTRA is a 14-month training experience, but only four weeks will be spent away from the workplace at residency sessions (two weeks in August, one week in February and one week in June of the following calendar year). In addition, participants will need to be released from regular duties for no less than one day per week to have focused time for the intervention project and to complete the e-learning curriculum between residency sessions. All team members are required to participate in the residency sessions.

EXTRA CURRICULUM

The new 14-month team-based EXTRA fellowship builds on key curriculum elements that have been successful to date (individual skills and competencies in using research to lead improvement), with a sharper focus on effective techniques, leadership tactics, and organizational strategies to initiate and implement improvement initiatives by teams of interdisciplinary healthcare professionals and policy-makers in leadership positions.

The EXTRA curriculum is designed to link theory to practice, promote maximum interaction and participation, and translate the learning from the classroom into effective change-management intervention projects. The key content themes are: better capacity for extraction and use of evidence in context; improvement theory; leadership development; change management; and systems thinking.

The program has five components:

- A one-day orientation session
- Away-from-home residency sessions (4 weeks in total over 14 months, spread over three residency sessions)
- Intervention projects, supported by mentors and coaches, conducted at home organization(s)
- Completion of e-learning curriculum between residency sessions
- Network building

Through active organizational coaching and academic mentoring of the implementation project, guided reading, topical coursework consisting of case-based teaching methods at residency sessions, competency-based self-directed e-learning modules, and mentored and active leadership development, EXTRA fellows will develop the following core set of competencies:

- knowing where and how to search for appropriate evidence to support improvement initiatives
- acquiring skills in health-evidence literacy, health-information literacy, research methods, change and improvement theory, and improvement evaluation, with a focus on measuring the effectiveness and efficiency of the chosen interventions
- employing leadership strategies to ensure successful execution of improvement initiatives, including effective communications and engagement with researchers, clinicians, board members, policy-makers and consumers at suitable points along the change process
- designing tactical approaches, strategic levers and feasible plans for implementing changes, including workflow mapping and simplification; six sigma and Lean processes; IHI methods; barriers and root-cause analysis; and methods to test and scale up improvements
- knowing how to assemble data and information associated with public reporting of quality and performance initiatives



FACULTY

The EXTRA curriculum is delivered by experienced leaders in quality and performance improvement, comprising high-quality domestic and international academic faculty. Teaching methods at the residency sessions are a dynamic mix of lectures, case studies, small-group work, skills acquisition for managing health information, and change-management simulation exercises. EXTRA also provides comparative and international perspectives on healthcare systems through keynote speakers and guest faculty drawn from abroad.

LANGUAGE POLICY

The EXTRA fellows and faculty can participate in all program activities using the official language of their choice. There is simultaneous interpretation at the residency sessions. The EXTRA desktop (electronic network) and major course materials are available in both English and French.

ACCREDITATION, CERTIFICATION, PROFESSIONAL DEVELOPMENT CREDITS

The EXTRA program is formally recognized by the University of Montreal, Royal Roads University, and the University of Toronto. Graduates of the EXTRA program can earn university credits toward a Diplôme d'études supérieures spécialisées in health services administration (DESS) or an MSc at the University of Montreal. Royal Roads University offers credits towards a Graduate Diploma in Health Systems Leadership, and the University of Toronto offers credits toward the MSc Health Services Research from the Department of Health Policy, Management and Evaluation.

EXTRA fellows also qualify for the following:

- a diploma conferred by the program partners - the Canadian Health Services Research Foundation, the Canadian Medical Association, the Canadian College of Health Leaders, the Canadian Nurses Association, and the Quebec Consortium (INESSS)
- Continuing Medical Education Credits offered by the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada
- Maintenance of Certification (MOC) Level 1 credits by the Canadian College of Health Service Leaders (CCHL)
- CCHL Certified Health Executive (CHE) designation
- CCHL Fellowship Program—as a partner, CCHL offers the EXTRA fellows who meet the pre-requisites for admission, as determined by CCHL, the opportunity to obtain a CCHL Fellowship designation that takes into account the EXTRA fellowship work
- certification levels will apply to competency-based e-learning curriculum
- Linkages with the LEADS in *A Caring Environment* capabilities framework that has been adopted by CCHL

SELECTION CRITERIA

1) The applicant(s)

- demonstrated commitment to evidence-based quality improvement
- strength of clinical and/or management quality improvement achievements
- clarity of roles, contribution and accountability of each team member to improvement initiative
- potential for healthcare leadership
- clarity of career goals and synergy with the goals of EXTRA fellowship
- at a career stage where the maximum can be obtained from an EXTRA fellowship



2) The intervention project

- articulation of a well-defined problem to be addressed
- intervention is important to the organization's quality and performance improvement plans
- clear evidence from the senior leadership in their organization(s) that the intervention project is aligned with organizational priorities
- clarity of priority area for improvement with specific targets and timelines for implementation
- clarity of project design, intervention, target group and methods
- innovativeness of approach
- likelihood that the team will make measured progress towards their improvement project in their host organization(s) during the fellowship timeframe
- clarity regarding the applicant(s) role in the intervention project

3) The overall application

- supported by host organization, senior executive team
- evidence of obtaining, from sponsoring organization, the required resources and dedicated time to undertake learning and intervention
- coherence between applicant(s), intervention project, organizational mentor and host organization, and the overall objectives of the EXTRA fellowship
- well written and carefully prepared application that follows the guidelines

PROGRAM FEES

A one-time \$5,000 program fee per individual must be paid by the sponsoring organization once the candidate is accepted into the program.

Please note: All participants must have a laptop computer upon entering the program.

APPLICATION PROCESS

Applicants must consult the full details on the application requirements and process provided in the **EXTRA 2012 Guide for Applicants**, available at www.chsrf.ca/extra.

The results of the selection process will be available on April 10, 2012 at www.chsrf.ca/extra.

Applicants must use the appropriate EXTRA electronic application form, which is available at grantsandawards@chsrf.ca. When requesting an application form, please specify which application form is required: Single organization or multi-site/ across jurisdiction team application. Any questions can be addressed to grantsandawards@chsrf.ca.

Applicants should review and ensure they are aware of CHSRF's conflict of interest policy, which can be found at <http://www.chsrf.ca/Libraries/Policies/ConflictOfInterestJune2011.sflb.ashx>.

Applications must be received at CHSRF on or before **12 p.m. EST on February 1, 2012**.

Completed applications should be sent by courier to:

**Grants, Awards & Partnerships
Executive Training for Research Application (EXTRA)
Program
2012 Call for Fellowships
Canadian Health Services Research Foundation
1565 Carling Avenue, Suite 700
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