

2011 National Healthcare Leadership Conference



NHLC



Canadian College of
Health Service Executives
Collège canadien des
directeurs de services de santé



Canadian Healthcare Association
Association canadienne des soins de santé



Rising to the
Challenge:

June 6 – 7, 2011
Whistler, B.C.

Relationships, Resources
and Realities

Call for Abstracts

The Canadian College of Health Service Executives and the Canadian Healthcare Association are pleased to co-host the National Healthcare Leadership Conference (NHLC). Themed **Rising to the Challenge: Relationships, Resources and Realities**, the conference will be held in Whistler, British Columbia on June 6-7, 2011.

This conference is the largest national gathering of health system decision-makers in Canada including trustees, chief executive officers, directors, managers and department heads. Participants represent health regions, authorities and alliances, hospitals, long-term care organizations, public health agencies, community care, mental health and social services. As well, the conference draws participants from government, education and research organizations, professional associations, consulting firms and industry.



www.healthcareleadershipconference.ca

The NHLC aims to discuss the challenges and opportunities facing today's health leadership in Canada.

Objectives

- Provide a forum to enrich health leadership practices and innovations
- Showcase best leading practices and their success
- Share ideas and solutions to address accountability, effectiveness and transparency in the health system
- Address the challenges facing both policy-makers and health leaders in the delivery of patient centered health services
- Discuss types of digital technology tools and their effective application in transforming health service
- Identify effective ways for health leaders to be catalysts for change

Keynote presentations and concurrent sessions should address one or more of the following LEADS leadership capabilities:

1. Lead self

2. Engage others

3. Achieve results

4. Develop coalitions

5. System transformation

The LEADS in a Caring Environment Framework is a pan-Canadian leadership capabilities framework adopted by CHLNet, a network of national and provincial health organizations of which both the Canadian Healthcare Association (CHA) and the Canadian College of Health Service Executives (College) are members. The framework was developed by Royal Roads University and the Health Care Leaders Association of British Columbia (HCLABC).

For more information on the LEADS framework, please visit our website at www.healthcareleadershipconference.ca

Expected Outcomes

Conference participants will:

- Come away with practical ideas to bring to their work settings
- Build strong networks and engage in new conversations
- Gain insight on what it takes to be an effective leader
- Be better equipped to address system transformation challenges



Rising to the Challenge: Relationships, Resources and Realities

A global economic recession has placed financial stresses on federal/provincial/territorial finances. As health costs assume a growing proportion of provincial/territorial budgets, the challenge facing both policy-makers and health leaders is to ensure a prudent transition in the delivery of appropriate health services that meet the needs of the population served. A number of questions arise from this challenge:

- What changes, resources and data are needed to assist decision-makers in re-orienting/re-engineering the health system to deliver appropriate health services?
- What delivery system designs will improve outcomes?
- How do we ensure that decisions adhere to evidence-informed leading practices?
- Which relationships are essential in implementing strategies to strengthen the health system?
- How do health leaders take full advantage of new and existing technologies to benefit the system?
- As more provinces move to include activity-based funding as a component of their overall funding model, internal competition increase among hospitals and other health providers and facilities. How will this potential competition affect resources, patients and the role of professions? What mix of techniques and skills will be required to meet this competition?
- How do we incorporate and expand learning processes in system change?
- What practices can we apply from the private sector to improve system efficiency and patient outcomes?



In developing your abstract submission, please consider the theme and leadership capabilities.

Categories for abstract submissions:

Lead Self

- Effective leadership practices
- Innovative leadership strategies

Engage Others

- Governance
- Citizen engagement
- Physician engagement
- Health human resources
- Effective digital technologies

Achieve Results

- Governance
- Effectiveness of interventions
- Quality and efficiency
- Effective digital technologies
- Successful leading practices and their outcomes

Develop Coalitions

- Integration and collaboration
- Knowledge transfer
- Public expectations

System Transformation

- Integrating knowledge into decision-making
- Knowledge transfer
- Successful leading practices and their outcomes
- Change management

Conference Presentations

Abstracts accepted may be presented in one of the following formats:

Oral Presentations

Each oral presentation will be 15 minutes in length followed by a five (5) minute discussion period. Accepted oral presentations will be grouped by theme. Abstracts should be informational and should report on work completed. The room will be equipped with a data projector, screen and computer. A special registration fee of \$550 + HST is extended to a maximum of two (2) presenters per oral presentation.

Panel Presentations

Panels should include a minimum of three (3) and a maximum of four (4) presentations addressing a common issue or topic from different perspectives followed by an interactive discussion. These sessions are 90 minutes including the discussion. The panel should be submitted as a single presentation and should include the word "panel" in the title. Panelists and the moderator should be listed as co-presenters. The room will be equipped with a data projector, screen and computer. A special registration fee of \$550 + HST is extended to a maximum of four (4) presenters per panel presentation.

Posters

Posters are a display presentation. Material is mounted on a poster board (approx. 231 centimeters wide by 114 centimeters high). One (1) presenter will be asked to be available at their poster during breaks to give a brief description of their poster and answer questions. Abstracts should be informational and should report on work completed. A special registration fee of \$550 + HST is extended to one (1) presenter for poster presentations. **No audio-visual equipment will be provided for posters.**

Workshops

Workshops are informal seminars that allow for the demonstration and application of techniques and skills. These are 90 minute or 2.5 hour sessions allowing for in-depth presentation and discussion through interactive activities and presentations. The room will be equipped with a data projector, screen and computer. A special registration fee of \$550 + HST is extended to a maximum of four (4) presenters per workshop.

Guidelines for Corporate Submissions

We welcome submissions from private sector partners, provided that they address (a) cooperative venture(s) with a non-profit sector partner and include the latter as a co-presenter.

The paper should present an unbiased description of a certain method or service, discussing both pros and cons. Both subtle and blatant advertisement of any products or services is in direct conflict with the spirit of the conference. Examples of the former include repeated references to products or trade names and excessive use of corporate logos and trademarks in graphic illustrations. Photographs of commercial equipment are not permitted unless they add educational value. The Planning Committee insists that all authors and presenters understand without exception, that commercialism is inappropriate and will not be tolerated; authors are asked to abide by these constraints when preparing their abstracts, papers, and presentations.

Selection Criteria

Abstracts will be peer reviewed and selected according to quality of content, relevance to the theme, clarity and innovation.

The Planning Committee reserves the right to accept abstracts for a different presentation format than indicated in the submission.



Submission Instructions

Before submitting online, please prepare your abstract using MS Word and structure it as follows:

- Title;
- Authors (including organizations);
- Abstract in paragraph format should include:
 - Objective
 - Activities, methods, innovations
 - outcomes, results, lessons learned
 - Conclusion
- Oral and poster abstract submissions must not exceed **100 words** (700 characters including spaces), panel and workshop submissions must not exceed **300 words** (2050 characters including spaces).
- Biographies for each presenting author must not exceed **50 words** (400 characters including spaces) must be included at time of submission (for introductory purposes only).

Your online submission must include the following information:

- Title of abstract;
- Target audience;
- Category of submission (ie. Lead Self, Engage Others, etc.);
- List of authors;
- 50 word biography for each **presenting author**;
- Contact person (As the primary contact, **only** this person will receive correspondence);
- Presentation preference (please select only **one format**);
- Four (4) keywords.

Abstracts must be submitted online at **www.healthcareleadershipconference.ca**. They may be submitted in English or French and, if accepted, will be presented in the language of submission. Simultaneous interpretation is only provided for plenary sessions. Online submissions will be accepted starting September 13, 2010.

Abstract submissions via e-mail, fax or mail will not be accepted. You will receive an email confirming receipt of your submission. If you do not receive an e-mail confirmation of your submission, please contact the NHLC Secretariat by e-mail at loman@cchse.org or at 1-800-363-9056, ext. 37.

Please note that abstract presenters are responsible for their conference registration fee and all related expenses such as accommodations and travel.

For further information, please contact:

Laurie Oman
Coordinator, Conference Services
NHLC Secretariat
c/o Canadian College of Health Service Executives
Tel: (613) 235-7219 or 1 800 363-9056 (ext. 37)
E-mail: loman@cchse.org



Abstracts must be received by 11:59 p.m. EST, November 1, 2010.



Important Dates

November 1, 2010	Abstract submission deadline
December 1, 2010	Conference registration opens
December 17, 2010	Notification of selected abstracts
February 11, 2011	Super early bird deadline
March 1, 2011	Conference preview available
April 22, 2011	Early bird deadline

Registration

Registration fees include admission to all conference sessions, refreshment breaks, two (2) luncheons and the Chairs' Reception. The conference preview will be available in March. All presenters are required to pay the special rate of \$550 + HST.

NOTE: The presenter registration link will be included in the presenter communication package sent to the primary contact via email at the beginning of January, 2011.

Conference Registration Fees

Super Early Bird Fee*	\$675 + HST
Early Bird Fee**	\$775 + HST
Regular Fee	\$875 + HST
Student Fee***	\$275 + HST
Daily Registration	\$550 + HST

- * Applicable to the first 150 registrations received (first-come, first-served). Registration fees must be received no later than February 11, 2011, to qualify for the super early bird rate.
- ** Registration fees must be received or postmarked no later than April 22, 2011, to qualify for the early bird rate.
- *** Proof of full-time student status required upon registration.

