



Project Name:	Performance Management Policy	Date:	June, 2013
----------------------	--------------------------------------	--------------	------------

Key Message(s):

To ensure our faculty members and WRHA Medical staff members are undergoing a consistent and transparent performance review process the Faculty of Medicine and WRHA have been working with our members, academic leaders and Program Medical Directors to draft a Performance Management Policy and Performance Standards. The objective of the policy is to provide regular career guidance and support to all our faculty members and WRHA Medical staff members encouraging an overall culture of support and development within the Faculty of Medicine

Contentious Issues Expected:

1) Faculty within the FOM feel that the policy should not be moved forward until a more robust appeals process is in place as GFT's are otherwise vulnerable to arbitrary judgments by their supervisors

Response:

Stakeholder/Audience (Who?)	Stakeholder Category	Message (What?)	Method(s) (How)	Timeframe/Frequency (When?)	Responsibility	Objective/ Intent (Why?)
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					
	Developer					



Stakeholder Category Legend		
Category	Role/Responsibility	Interests
Developer	Develops and delivers the tangible items produced by the project (e.g. Project Team and work groups)	<ul style="list-style-type: none"> • Scope and deliverables • Task assignment • Project status
User	Use the project deliverables	<ul style="list-style-type: none"> • Ease of use • Quality
Supporter	Supports the project deliverables – the “Product” (e.g. Facilities Management, Health Information Services, Finance)	<ul style="list-style-type: none"> • Product suitability • Consultation
Executive	Approves funds, resolves issues, represents the project at the senior management level	<ul style="list-style-type: none"> • Measurable business benefits • Opportunity cost • Resource allocation
Supplier	Develops tangible items for the project outside of the project team (3 rd party)	<ul style="list-style-type: none"> • Scope and deliverables • Resource use and cost • Task assignment and timelines
Evaluator/Reviewer	Audits process, ensure standards are followed	<ul style="list-style-type: none"> • Meets standards • Format
Publics	Any group or individual affected by the project deliverables (e.g. unions, community)	<ul style="list-style-type: none"> • Cost • Impact on current routine • Perceived benefits
Interdependent	Stakeholders in other projects that could affect project deliverables	<ul style="list-style-type: none"> • Resource use • Operational impact • Target dates

Instructions for use of the Communications Plan Template:

The Program Teams in conjunction with their Project Manager will complete the following template prior to implementing any approved service transfers. Assistance from the Human Resources, Media Relations and Communications Department should be solicited for specific areas of specialization.

Key Messages (Brief and concise statement describing the intended transfer and timeline):

e.g. Access to emergency care is becoming more difficult due to a growing shortage of Urologists within Winnipeg; it is recognized that this issue is not unique to Winnipeg. The Urology Training Program is at risk due to a shortage of Faculty staff. Therefore, the consolidation of tertiary urology services from SBGH to HSC will occur by April 2006.



Contentious Issues (Include the hot points and response strategies):

e.g. Deletion notices will be issued to staff.

- All staff will be presented with an opportunity to transfer with the service transfer, offered alternate position with the site, etc.
- Some Physician groups are opposed to the transfer.
- Medical leadership to reinforce benefits of consolidation – reduce call schedule, development of Centres of Expertise, use of new technology/equipment.
- Public perceptions of transfer may not be favorable.
- Reinforce Centres of Expertise, improved access to care, reduced waitlists, better quality of care, etc.

Stakeholders (The following is a list, select those most appropriate, other groups may be identified):

- | | |
|---|--|
| <ul style="list-style-type: none"> • WRHA Senior Management • Hospital Senior Management • Site Directors • Site Managers/Supervisors • Supervisors of staff whose functions are changing • Staff directly impacted by change • Physicians • Staff in General (region-wide) • The General Public | <ul style="list-style-type: none"> • WRHA Board Members (through Programs and Services Committee) • Professional Bodies • Office of the CME • Manitoba Health/Ministry • Community Agencies/Partners • HR/Unions • Community Advisory Councils • Programs (as defined by the impact of the change) • Other RHAs |
|---|--|

Messages (The following is a list of possible messages, this list may not be all inclusive):

- | | |
|---|--|
| <ul style="list-style-type: none"> • Provide regular updates on project progress • Formally Announce Service Transfer • Formal notice to patients scheduled for services re: new location of service | <ul style="list-style-type: none"> • Need for change, nature of change and timelines • General Broadcast Information • Formal announcement of staff changes |
|---|--|

Objective/Intent (To clarify the purpose/reason for the communication):

- | | |
|--|--|
| <ul style="list-style-type: none"> • Respond to public • Inform • Seek Approval | <ul style="list-style-type: none"> • Seek Feedback • Consult |
|--|--|



Methods (The following is a list of possible methods, this list may not be all inclusive):

- Status Reports
- Letters/Special Bulletins
- E-mail
- Telephone
- Information for Managers and Supervisors
- Site(s) Newsletters
- Aspire!
- Intranet/Internet
- Staff Meeting
- Special Meeting
- Media (Press Release, Interviews, Media Conference, Media Briefing)
- Website
- PMO In-Scope Newsletter

Time frame/Frequency

Timeframe is related to a specific event occurring – what would trigger the need for the communication (media leak, patient incident, etc.). Frequency is related to regular communications (weekly, bi-weekly, monthly, etc.)

Responsibility – (The following is a list of people who may be assigned the responsibility for the development and distribution of the communication and the person assigned, may delegate it to another person. This list may not be all-inclusive):

- Program (Medical Director or Program Director)
- Communications – Organizational
- Communications – Media Relations
- Executive Management (CEO or specific VP)
- Project Management Office
- Project Manager
- Site CEO, CMO or CNO
- Human Resources
- Site Directors/Managers
- Project Sponsors