

Public (when completed) Common Government

New				
Ministry				
Health				
Describe: Basic Job Details				
Position				
Position ID	Position Name (30 characters)			
	Manager, Pol, Stds & Quality			
Requested Class				
Manager (Zone 2)				
Job Focus	Supervisory Level			
Policy	01 - Yes Supervisory			
Agency (ministry) code Cost Centre Program Code: (ente	r if required)			
Employee				
Employee Name (or Vacant)				
Organizational Structure				
Division, Branch/Unit	Current organizational chart attached?			
Supervisor's Position ID Supervisor's Position Name (30 characters	Supervisor's Current Class			
	Senior Manager (Zone 2)			

## **Design: Identify Job Duties and Value**

## **Job Purpose and Organizational Context**

Why the job exists:

Reporting to the Director of Home and Community Care, the manager is responsible for providing leadership and direction to a team of individuals tasked with the development and communication of policy and legislation, the provision of strategic advice and analysis, and issues management, related to home and community care and palliative care. The manager's role is to coordinate team activities to achieve critical policy operational plan goals, as well as anticipate and respond to challenging issues. The position ensures that Alberta Health Services and other key partners and stakeholders receive clear information and direction on the future facing goals and strategic directions for these programs as articulated in legislation, provincial strategies and/or standards. The manager will use team resources effectively to research, analyze and provide strategic advice and policy alternatives.

#### Responsibilities

Job outcomes (4-6 core results), and for each outcome, 4-6 corresponding activities:

- 1. Program and Policy Development for Home Care, Community Care, Palliative Care
- Lead the development, review, implementation and evaluation of options for changes to legislation, strategies, and policies, in partnership with key stakeholders that will focus on improving the quality of life and care for Albertans requiring services through home/community care or as part of a palliative care program, including hospices.
- Develop legislation and policy options (through briefing notes, issue or discussion papers) including a focus on innovation and fueled by the perspectives of clients, their families, Alberta Health Services, and other key

GOA12005 Rev. 2022-01 Page 1 of 7

- stakeholders. It will also include deep analysis of advantages and disadvantages, and implications of different options.
- Develop options for new or updated content in the provincial operating standards (e.g., Continuing Care Health Service Standards)
- -Lead the implementation and evaluation of updated operating standards and program policy, in partnership where required, to understand the impacts and assess quality outcomes to inform strategic directions
- -Initiate and develop proposals and policy recommendations to address specific issues identified through environmental scanning and priorities identified by the Minister of Health and executive leadership.
- 2. Monitor Performance
- -Lead and coordinate improvements in the measuring, monitoring and reporting of home and community care and palliative care performance and quality outcomes to drive system wide improvements.
- -Work with partners (including clients, their families and service providers) to identify relevant, sensitive and useful outcomes and measures to inform monitoring of the system and improvements in progress (e.g., participate in projects mining available databases to monitor, describe and profile Alberta's home care and palliative care clients, work with the Health Quality Council of Alberta to identify new ways of measuring and/or analyzing available information to improve monitoring)
- -Collaborate with, and provide critical input into, the development and implementation of the Ministry's (or other delegated authority) inspection approach against the operating standards specifically, but also to the rest of the legislative framework to inform overall system monitoring. -
- -Using available data and outcomes, provide recommendations and options on proposed actions to address quality and system issues that require province-wide attention.
- -Profile quality of care and quality of life outcome measures for home care clients and their family caregivers and describe progress toward overall home care re-design, including enhanced support for family caregivers.
- 3. Provide leadership in managing critical issues arising in home/community care and palliative care
- -Regularly review and validate information provided by Alberta Health Services, other key partners and stakeholders with respect to emerging challenges, issues or opportunities
- Provide guidance and direction on how to respond to issues or seek out appropriate contact.
- -Determine the need for escalation of issues to executive leadership.
- -Present recommended actions or solutions for dealing with critical issues.
- 4. Provide leadership, coaching, and mentoring to members of the team within the unit.
- -Ensure the department priorities are reflected in individual performance plans
- -Conduct regular (typically bi-weekly) update meetings with staff to provide guidance on team projects, coaching and support.
- -Conduct quarterly Performance Excellence meetings with to discuss individual progress and goals during each fiscal year
- -Attend branch management, unit, divisional and other relevant meetings to provide updates on team projects and coordinate/integrate activities and linkages across areas.

## **Problem Solving**

### Typical problems solved:

The Manager provides leadership to and helps the team manage multiple, complex competing priorities such as implementing projects and initiatives that comprise home care re-design/transformation, reviewing and updating standards and legislation, and dealing with urgent issues and requests from senior and executive leadership. Work of the team routinely involves intense activity, in very short timeframes; the ability to tolerate, navigate and support staff to

GOA12005 Rev. 2022-01 Page 2 of 7

respond to constant changes in approaches, timelines and desired outcomes, while still ensuring progress, is essential.

Working with key stakeholders to build relationships, understand perspectives, resolve divergence and issues and work to achieve consensus related to home and community care and and palliative care focused initiatives is critical. This includes using negotiation and interpersonal skills to ensure all perspectives are valued and reflected in the final work (e.g., implementation plans and proposed options), including where consensus was not feasible and highlighting the implications of the various options (i.e., how those will be received).

Leads and resolves policy interpretation challenges, in relation to the application and interpretation of legislation/regulations, operating standards and other strategic policy/initiatives, to support clarity of application and implementation with internal and external stakeholders.

Palliative care and home care are emotional areas in the health and social care systems. Issues typically require timely, sensitive and skillful responses while ensuring the safety and wellness of clients requiring services and supports.

#### Types of guidance available for problem solving:

The complex projects, and issues requiring resolution, are often unique and require sensitivity and a collaborative approach and the ability to generate new ideas and paths to achieve objectives. Approaches to the work are grounded in deep professional gerontological and continuing care experience; experience and expertise in planning and implementing complex change and quality improvement initiatives; experience in listening to and understanding/ responding to the many voices impacted by the work (clients, families, staff, service providers, hospice operators and other community serving organizations). Assistance is also available from the Director and colleagues and highly skilled and professional team members from across the branch, other areas of the Ministry, as well as Alberta Health Services, all providing resources and advice that augments personal knowledge and experience.

### Direct or indirect impacts of decisions:

Action led by this Manager directly (and indirectly) has the potential to impact over 100,000 Albertans who receive services through the home care program, not to mention those in receipt of other types of care in community and/or palliative care recipients. As well as their families/friends. Work of this Manager directly impacts the ability of the broader health care system to function optimally and longer term sustainability as the upstream results (or lack of) in home and community care delays or prevents visits by these clients to hospital/emergency departments or more permanent admissions into facility based continuing care. It is also especially important to recognize the anticipated growth in the number of seniors and persons with disabilities for whom home and community care services will be needed as the population continues to grow and age (expected to more than double over the next 20 years).

### **Key Relationships**

Major stakeholders and purpose of interactions:

## Internal

- Ongoing and regular engagement with all team members (individually and as a team), to direct and support activities regarding their roles and responsibilities and to ensure that there is awareness (by the team) of up to date priorities and directions.
  - o This includes engaging the team in providing input into the directions of the team, unit and branch, to the greatest extent possible, and supporting their ongoing learning and development.
- Ongoing and regular engagement with unit leadership (the Director, Home and Community Care and the Manager of Home and Community Care: System Improvement)
- Ongoing and regular engagement with the branch management team including the Executive Director
- Ad hoc (as needed) involvement with the Assistant Deputy Minister and other senior leaders, as required, to provide clear and concise briefings, advice and updates on ongoing mandates and priority projects including options analysis and implementation related challenges.
- Ongoing, an ad hoc engagement with all managers across the branch to ensure that work is coordinated.
- As needed and per project requirements, there is also collaboration with management in other branches of the

GOA12005 Rev. 2022-01 Page 3 of 7

ministry (e.g., Primary Care, Compliance and Monitoring, Public Health) or in other ministries (Seniors and Housing, Community and Social Services).

#### External

- AHS: Regular, ad hoc but ongoing, contact with key leaders in AHS including but not limited to senior leaders (who and frequency varies by project; monthly at least and often weekly or more often) to enable information sharing, ongoing consultation, cross-organizational alignments/joint planning/developments, discussion and implementation related joint planning and ongoing issues management.
- Operator/provider association, professional associations: Weekly interactions including consultation/collaboration on program and policy development, option analysis and implementation issues, issue management.
- Operators/service providers, residents, families: Periodic, to validate support and preferences related to priorities and options development
- Researchers and community partners (e.g., grantees): Ad hoc as participating in research projects; regular (at least quarterly) for funded grant projects
- Other levels of government (federal, provincial counterparts): Ad hoc, depending on projects

## Required Education, Experience and Technical Competencies

Education Level	Focus/Major	2nd Major/Minor if applicable	Designation			
Bachelor's Degree (4 year)	Other					
If other, specify:						
Other - health field. Master's degree pref'd. Registration in the relevant professional body.						

Job-specific experience, technical competencies, certification and/or training:

### Education:

- Minimum of a Bachelor's Degree in a health field (Nursing, OT, PT, etc.).
- Active registration in good standing with professional licensing body if required by the individual's profession.
- > University degree at a Master's level preferred, in health care administration/management or other relevant field.

# Work Experience:

- > 5 or more years progressively responsible senior management experience in the health field.
- Recent clinical or leadership experience in one or more continuing care settings (home care, continuing care homes, or palliative care/hospice
- > Project management experience is an asset.

# Knowledge:

- ➤ Knowledge of the continuing care system in Alberta, its various levels and interactions with acute and primary care.
- Theory and practice of complex, multi-stakeholder policy and program development process.
- Understanding of health system structures and accountabilities.
- Understanding of Government goals, objectives, and processes.
- Use and application of best evidence, and quantitative and qualitative research and analysis in developing policies, standards and legislation.
- Theory and practice of team work and consulting/consensus-building techniques.
- Building and implementing conceptual frameworks, including knowledge related to change management.
- Knowledge of standards development, monitoring, compliance, and quality improvement practices.
- Knowledge of InterRAI and other standardized assessment tools used in continuing care.

### Skills and Abilities:

- Ability to manage and prioritize multiple, complex competing priorities.
- Project management skills.
- > Strong leadership skills based on problem-solving, negotiation, and decision making.

GOA12005 Rev. 2022-01 Page 4 of 7

- Strong communication and interpersonal skills.
- Create effective working relationships based on credibility, understanding, and commitment to overall objectives and directions.
- Ability to integrate numerous pieces of work into a comprehensive end product.
- Ability to understand operational applications and match practical solutions to an overarching conceptual framework.

# **Behavioral Competencies**

Pick 4-5 representative behavioral competencies and their level.

Competency	Level A B C D E	Level Definition	Examples of how this level best represents the job
Systems Thinking		Shapes APS goals with a view of entire network:  Considers whole system and links; sets goals for long-term outcomes and broad perspectives  Evaluates short, medium, and long-term impacts to inform progress  Shapes organization to meet client needs; helps others see their role in this	-Work closely with officials who are responsible for the design and delivery of primary care and acute care - as an effective home and community care is well-integrated within the broader health and social care system to achieve mutually beneficial goals and objectives
Drive for Results		Works to remove barriers to outcomes, sticking to principles:  • Forecasts and proactively addresses project challenges  • Removes barriers to collaboration and achievement of outcomes  • Upholds principles and confronts problems directly  • Considers complex factors and aligns solutions with broader organization mission	-A focus on well thought out and practical provincial legislation and standards will enable others to implement and achieve quality of care and life for clients and their families
Creative Problem Solving		Works in open teams to share ideas and process issues:  Uses wide range of techniques to break down problems Allows others to think creatively and voice ideas Brings the right people together to solve issues Identifies new solutions	partners will ensure that varying perspectives are

GOA12005 Rev. 2022-01 Page 5 of 7

	for the organization	
Develop Networks	Makes working with a wide range of parties an imperative:  • Creates impactful relationships with the right people  • Ensures needs of varying groups are represented  • Goes beyond to meet stakeholder needs  • Ensures all needs are heard and understood	-Creating opportunities to leverage new or different than normal practice partners working together is expected to maximize the benefits associated with community based service provision
Agility	Proactively incorporates change into processes:  Creates opportunities for improvement  Is aware of and adapts to changing priorities  Remains objective under pressure and supports others to manage their emotions  Proactively explains impact of change on roles, and integrates change in existing work  Readily adapts plans and practices	-With a current focus on increasing capacity in the acute care system, the incumbent will need to be acutely aware and pivot quickly to any and all opportunties that present themselves to champion and deliver on policy options that will expand home and community care - this is challenging in light of the focus to simultaneously grow acute care and facility based bed models

# **Benchmarks**

ı	List 1-2 potential comparable Government of Alberta: Benchmark	

GOA12005 Rev. 2022-01 Page 6 of 7