

Department of
Psychiatry

Queen's
University

Strategic Planning
Framework
2018-2022



Strategic Framework (2018-2022) – planning process



November 2017: Departmental Retreat (PEST, SWOT Analyses,)

February 2018: External Assessment (CAMH, 59 recommendations)

April 2018: Departmental Retreat - discussion on vision, mission, objectives; working groups to define milestones/objectives (research, medical education, clinical care and patient flow; preliminary discussion on org chart)

Aug/Sept 2018: 3 Focus Groups (various Dept. members to discuss proposed org chart)

October 2018: Strategic Planning Working Group (25 Dept. members)

November 2018: Strategic Planning Retreat (all Dept. members)

December 2018: Final consultations, feedback (online, 70% response rate)

JANUARY 2019 – Launch of New Strategic Framework



Department Snapshots

Sizeable - **3rd largest** Clinical Department at Queen's SOM

- **7** divisions, + distinct services/units
- **10+** specialized clinics, initiatives

Widespread - The Department is responsible for clinical and academic deliverables across: **5** hospitals, **7** correctional facilities, **8+** Outreach programs, services, **20+** Ambulatory centres, clinics

Diverse, multi-cultural - Faculty members from **18** different countries, **4** Continents, **14** different languages



Department of Psychiatry Strategic Planning (2018-2022)



Vision for 2022

We are a **transformative force in mental health**, revolutionizing the way...

- Mental wellness is promoted;
- Mental illness is understood, prevented and treated across the lifespan

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We are a **transformative force in mental health**, revolutionizing the way...

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By 2022, we will have earned this reputation by:

1. Being known as a **place where people want to come, stay & grow**;
 - I. Leveraging our individual strengths, our collective talents; focus on wellness, career development
2. Providing **exceptional, evidence-based clinical services**;
 - I. Aligning, optimizing our resources (human capital, operational) across various clinical areas
 - II. Resolving critical patient flow issues
 - III. Dramatically reducing wait times
3. Becoming a **centre of excellence in strategic areas of research**;
4. Exerting **greater influence and leadership** across organizations (academic, community)
5. Embedding **effective metrics in all things we do** - clinical, educational, research

Department of Psychiatry Strategic Planning (2018-2022)

Mission to be accomplished in 2019

1. New organizational structure to be in place and functioning well
2. Individual roles & expectations re-defined, recruitment/retention needs revisited
3. Significant improvement in wait times and flow between clinical services
4. Meet/surpass benchmarks for CBME at various levels (postgrad and undergrad)
5. Identify strategic areas of research and implement initiatives - e.g. strategic recruitment, fellowships, grant writing, fund raising



Department of Psychiatry Strategic Planning (2018-2022)



Key areas and objectives for 2019

Department of Psychiatry Strategic Planning (2018-2022)



Clinical



Research



Medical Education



Governance



Advocacy, Social Responsibility

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Clinical

- Clear model of care at primary, secondary and tertiary levels; implemented and operationalized by 2021.
- Optimize patient flow, efficiency with accountability
- Use of meaningful metrics in clinical care



Research

- Identify 3 key strategic areas of research
- Align resources with those identified priorities
- Research programs to lead/facilitate the use of relevant metrics across clinical programs

Department of Psychiatry Strategic Planning (2018-2022)



Medical Education

Implement and support orientation for faculty - effective engagement in Medical Education, better matching with their skills

Maximize CBME benchmarks for undergrad and postgrad education

100% of Faculty fully trained in CBME

Department of Psychiatry Strategic Planning (2018-2022)

Governance



- Implement a more streamlined, effective org chart
- Clearly define leadership roles/ positions within and beyond the Department
- Complete comprehensive performance appraisals for key leadership roles

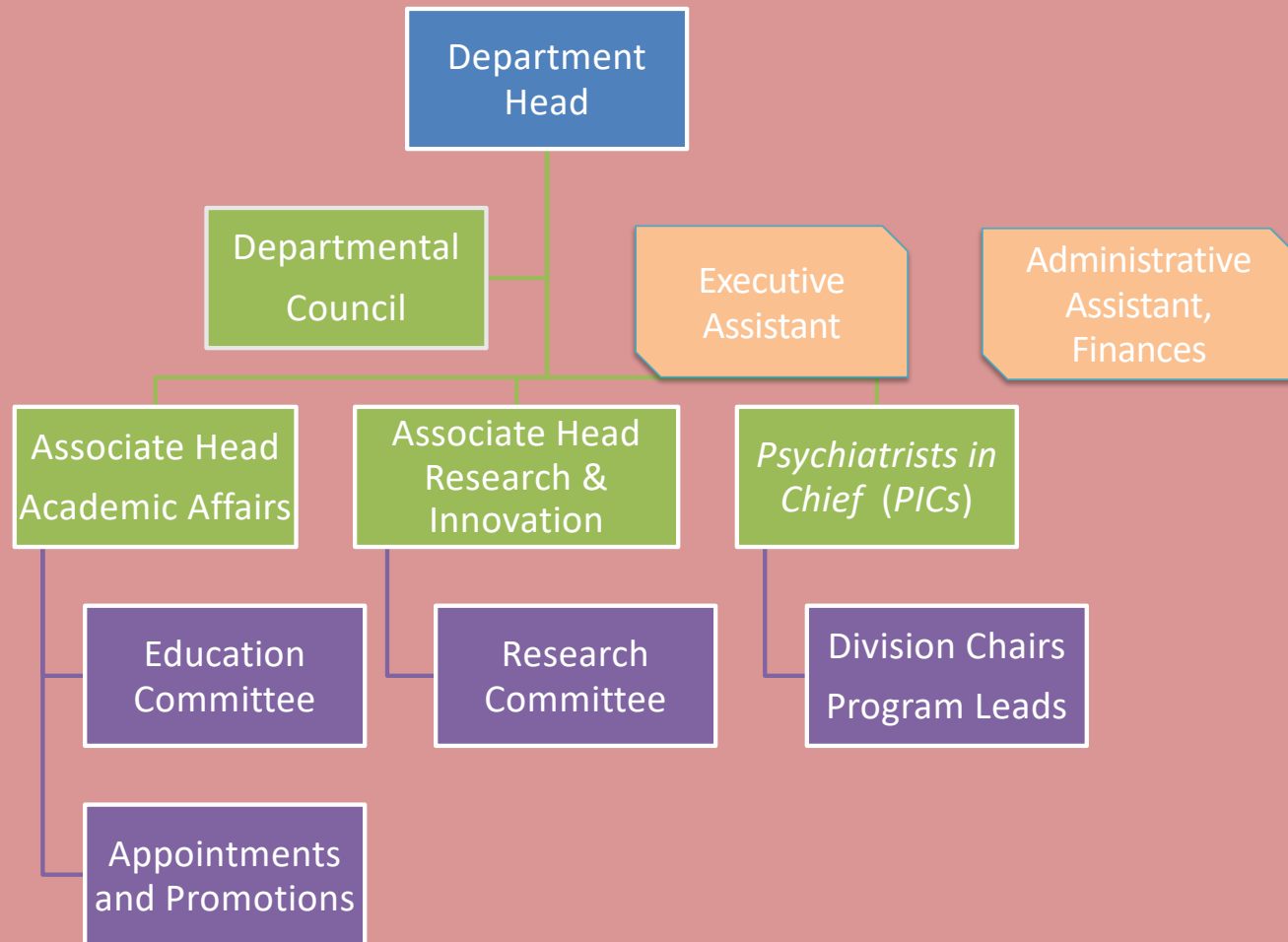


Advocacy, Social Responsibility

Active collaboration, engagement with elected officials

- Pragmatic agenda with Queen's Advancement and Hospitals' foundation
- Identify a 'cause' we think is worthy fighting for

New Organizational Chart



Associate Head, Academic Affairs - Portfolio

**To oversee and support
the Department's
engagement in
FHS/Queen's activities in
Education**

Fellowship, UGME, PGME

Explore Opportunities in
Executive Education

Support CBME-related
activities

Promote and support
Faculty Development
Activities , Career
mentoring

Oversee/promote activities
related to Appointments &
Promotions

Associate Head, Research and Innovation Portfolio

Research Operations
Support for Junior Faculty,
Residents – critical mass

Support for
Grant Writing,
Reviewing

Develop strategic planning
for Intra-mural Research
(within Department)
Short-term Goals and
Deliverables (e.g., Tri-
Council Grants)

Pursue Innovative
approaches in Quality
Improvement (QI)
Knowledge Translation
(KT), Implementation
Science (IS)

Promote Research
Training, Mentoring of
New Generation,
Mid-career

3 Psychiatrists in Chief – 3 distinct Portfolios

Psychiatrist in Chief - KHSC

Oversight of Programs, Divisions at KHSC (HDH and KGH sites)

Psychiatrist in Chief - PCH

Oversight of Programs, Divisions at PCH (Hospital and Community)

Psychiatrist in Chief - Community

Oversight of Programs, Divisions with primary focus on the community (e.g., AMHS, Shared Care, Student Mental Health)

Executive Assistant

Coordinate Support
for Research
& Innovation

Coordinate
Support for PICs

Coordinate
Support for
Academic Affairs

Promote Talent Management,
Career Development (Staff)

Collaborate with
Administrative
Assistant, Finances

Some Key Points

- This new organizational structure should facilitate strategic planning, implementation and oversight for each portfolio, streamlining resources and creating greater accountability.
- It will become easier to define champions for each cause - MRPs for any given task - and assess the progress for each task over time.

Some Key Points

- *Psychiatrist-in-Chief* portfolios will align resources, create opportunities for synergism between academic and clinical goals, deliverables. Will also provide the opportunity for stronger advocacy within a system... with strategic accountability.