

# **AIM Recruitment Plan**

Version 1.5

**May 5, 2009**

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## 1.0 PURPOSE AND SCOPE

The AIM (Access, Improve, Measure) Recruitment Plan identifies and coordinates recruitment strategies, activities, processes and tools to recruit teams to participate in the Alberta AIM Initiative. The AIM Steering Committee members and AIM Recruitment Leaders will use these strategies and tools to recruit new teams and team members.

This AIM Recruitment Plan links closely with the AIM Communication Plan and the AIM Curriculum and Resource Development Plan and will be used to recruit for the five additional collaboratives that are planned.

## 2.0 BACKGROUND

Alberta AIM is a made in Alberta initiative that assists physicians, their teams and linked programs to focus on access, efficiency and clinical care improvements.

Participating teams are introduced to an improvement process and a set of principles based on the belief that waits and delays are costly to the health care system, both for patients and for clinics. A major focus of the AIM initiative is the invitation for teams to participate in learning collaboratives; an approach to continuous improvement that has been successful internationally as well as in Alberta.

Collaborative participation involves attendance at six, two day learning sessions – providing interactive opportunities for representatives of a clinic and/or program to learn the guiding principles and strategies involved in reducing waits and delays. Between learning sessions, during what is referred to as the action period, teams use what they learn and implement small tests of change in the way they do their work. Teams also participate in monthly conference calls and provide monthly reports on their progress. A facilitator is assigned to each team to assist them through their improvement journey. AIM Faculty lead the collaboratives, including monthly calls and provide written feedback on the reports submitted by the teams.

Key elements of AIM participation include:

- Forming an improvement team – the people who do the work are the ones who must lead and drive the change
- Setting aims/goals in three areas:
  - Improving access for getting an appointment
  - Improving efficiency at the appointment
  - Improving clinical care by using proactive, prepared multi-disciplinary teams
- Looking at how the work is done:
  - Flow mapping work process to identify areas for change
- Making changes within the following categories:
  - Balancing supply and demand
  - Eliminating the backlog of patients waiting to get an appointment
  - Reducing the number of queues
  - Developing contingency plans for variations

- Measuring to prove that the changes made actually result in improvement

### **The Aim Initiative supports additional key strategies including:**

- The development of identified physician and health leaders as Alberta AIM Faculty through a guided faculty development process
- The identification and development of AIM Facilitators
- The development of standardized curriculum and resources for AIM Faculty, AIM Facilitators and participant utilization

### **3.0 AIM RECRUITMENT GOALS AND OBJECTIVES**

- AIM Recruitment “Leaders” have access to tools and resources to support recruitment activities
- Standardized AIM recruitment tools and resources are available and accessible to support recruitment activities
- AIM Recruitment “Leaders” feel confident in the delivery of the AIM message to participant groups they are engaging
- Participant Teams have adequate information about AIM Collaborative participation in order to make an informed decision about participation in AIM prior to the first learning session
- Teams have been successfully recruited, leading to approximately 8 – 15 teams per collaborative, with proportional representation from rural / non-metro participants
- Recruitment Leaders and Facilitators can engage teams in pre collaborative activities and have access to the necessary standardized tools and resources to support this process to maximize success of the team’s participation
- A clear process is developed to support handoff from recruitment “Leaders” to Facilitators assigned to support the teams

### **4.0 AIM RECRUITMENT LEADERS**

- Provincial AIM Program
  - Julie Shemanchuk - Program Planner
- Toward Optimized Practice Program
  - Doug Stich – Program Director
  - Arvelle Balon- Lyon – Assistant Program Director
  - Arley Nelson – Rural/Non Metro Outreach Coordinator
- Alberta Health Services – Calgary Zone
  - Mandy McCabe – Calgary and area AIM Coordinator
  - Shannon Erfle – Specialist recruitment
- Alberta Health Services – Edmonton Zone
  - Marcia Kashani - Business Development Manager
  - Doug Vincent – Specialist Recruitment

- Alberta Health Services – South Zone
  - Sandra Mintz – Primary Care Planner, Chinook Primary Care Network
  - Cheryl Andres - Specialist Recruitment, Primary Care and Chronic Disease Management

AIM Recruitment Leaders will access AIM Champions and AIM Facilitators to support the recruitment and pre-work processes. See Appendix 1

### **5.0 RECRUITMENT TARGET AUDIENCE**

- Physicians and their teams
- Clinic Managers
- Alberta Health Services – linked local programs and their managers
- Primary Care Network local governance committees
- Primary Care Network Managers

## 7.0 RECRUITMENT PLAN

Action	Responsibility	Method	Timing	Notes
1. Participation in the AIM Communications and Recruitment Committee by key stakeholders	Chair: Arvelle Balon-Lyon, TOP - Assistant Program Director  Committee members	Round table and face to face	Meet monthly	Committee members contribute to the action items to support the recruitment plan
2. Develop Recruitment Plan	Communications & Recruitment Working Committee	Document	For draft presentation Oct 16,2008	Many resources have been developed it is a matter of pulling the tool kit together with some minor revisions
3. Present Recruitment Plan to: <ul style="list-style-type: none"> <li>• AIM Steering Committee</li> <li>• AIM Partner Organizations (AHS, AHW, AMA, PCI, TOP)</li> </ul>	Arvelle Balon-Lyon, TOP - Assistant Program Director	Document  Verbal description	January 2009  February 2009	
4. Develop Recruitment Tool kit <ul style="list-style-type: none"> <li>• Program goals and objectives</li> <li>• FAQs</li> <li>• Enrollment requirements</li> <li>• Enrolment Forms</li> </ul>	Jane Reid, AIM Communications Lead  Recruitment Leaders	Documents  Web	December 2008 /January 2009	Package recruitment resources so that recruitment leaders and champions are able to access available resources

## AIM Recruitment Plan

Action	Responsibility	Method	Timing	Notes
5. Develop a set of key recruitment resources : <ul style="list-style-type: none"> <li>• Recruitment PPT presentations</li> <li>• Video clips</li> <li>• Good News Stories</li> <li>• Case studies /charts demonstrating improvement results</li> <li>• Enrollment Kit</li> <li>• Testimonials</li> </ul>	Jane Reid, AIM Communications Lead  Communications & Recruitment Working Committee  Recruitment Leaders	Documents  Web	January 2009	Many resources have been developed it is a matter of pulling the tool kit together with some minor revisions  Leaders, champions and facilitators can access resources
6. Develop a standardized set of pre-work resources to support pre-work activities ( link with Curriculum and Resource development working groups) <ul style="list-style-type: none"> <li>• Pre- work overview Power Point</li> <li>• Measurement Tools on jump stick including measurement toolkit</li> </ul>	Curriculum and Resource Development Working Group – Marcia Kashani, Lead	Documents, webpage	January 2009	Link with the Curriculum and Resource Development working group
7. Develop Process Map to describe handoff process between Recruitment Leaders and Facilitators from Recruitment to Pre-work	Arley Nelson, Rural/Non Metro Outreach Coordinator	Process Maps  Word Document	January 2009	Need to educate facilitators on this plan so they understand the process (and what is done prior to their involvement)
8. Conduct an evaluation/continuous improvement process of Enrollment package	Julie Shemanchuk, Program Planner	Review meetings with local recruitment leaders	May 2009	

## AIM Recruitment Plan

Action	Responsibility	Method	Timing	Notes
9. Access AIM Communications resources to support recruitment (brochures, handouts, posters, good news stories etc) as required	Jane Reid, AIM Communications Lead	Brochures, posters, handouts, etc.	Ongoing	
10. Distribute recruitment materials to recruitment leaders and facilitators	Maura Beaton	Handouts, worksheets, etc.	Ongoing	
11. Develop Recruitment Map to chart progress and identify gaps for Steering Committee and Stakeholder reference	Julie Shemanchuk, Program Planner; Arley Nelson, TOP - Rural/Non Metro Outreach Coordinator		January 2009	
12. Post Recruitment Resources on the Alberta AIM Website	Claire Laing, TOP - Website Coordinator	Website	January 2009	
13. Host Recruitment Leaders information sessions	Arvelle Balon-Lyon, TOP - Assistant Program Director; Julie Shemanchuk, Program Planner	Face to face, Teleconference	January and May 2009	Information sessions will inform recruitment leaders of the overall plan that has been developed and their role in that plan
14. Develop Recruitment Status Reports and circulate to Steering Committee Stakeholders/Partner Organizations	Arvelle Balon-Lyon, TOP - Assistant Program Director	Monthly Status reports	Quarterly	

## AIM Recruitment Plan

### 8.0 RECRUITMENT TOOLS

Tool	Responsibility	Input/Advice	Approval	Target for Final
<p>Recruitment Toolkit Contents:</p> <ul style="list-style-type: none"> <li>- Recruitment PowerPoint presentation with speaking notes</li> <li>- Status PowerPoint presentation with speaking notes - Alberta's status to date, success stories, physician quotes</li> <li>- Recruitment key video clips</li> <li>- Testimonials</li> </ul>	<p>Curriculum and Resource Development working group – Marcia Kashani, Lead</p> <p>Curriculum and Resource Development working group – Marcia Kashani, Lead</p> <p>Julie Shemanchuk, Program Planner, Arvelle Balon-Lyon, TOP - Assistant Program Director</p> <p>Curriculum and Resource Development working group – Marcia Kashani, Lead Curriculum Committee</p>			<p>January 2009</p>
<p>AIM Communication Toolkit</p> <ul style="list-style-type: none"> <li>- Brochure</li> <li>- One pager</li> <li>- FAQ</li> <li>- AIM Update</li> <li>- Aim web site: <a href="http://www.AlbertaAIM.ca">www.AlbertaAIM.ca</a></li> <li>- Visual Identity Guidelines</li> <li>- Good News Story Template</li> </ul>	<p>Communication Committee</p>			<p>January 2009</p> <ul style="list-style-type: none"> <li>- Brochure (complete)</li> <li>- One pager (complete)</li> <li>- FAQ (complete)</li> <li>- AIM Update</li> <li>- Aim web site: <a href="http://www.AlbertaAIM.ca">www.AlbertaAIM.ca</a> (complete)</li> </ul>

### AIM Recruitment Plan

Tool	Responsibility	Input/Advice	Approval	Target for Final
<ul style="list-style-type: none"> <li>- Improvement Story Board template</li> <li>- Posters:                             <ul style="list-style-type: none"> <li>- Poster presentation template</li> <li>- Clinic poster (participation resource)</li> </ul> </li> <li>- Certificates</li> </ul>				<ul style="list-style-type: none"> <li>- Visual Identity Guidelines (complete)</li> <li>- Good News Story Template</li> <li>- Improvement Story Board template</li> <li>- Posters:                             <ul style="list-style-type: none"> <li>- Poster presentation template</li> <li>- Clinic poster (participation resource)</li> </ul> </li> <li>- Certificates</li> </ul>

## 9.0 RECRUITMENT APPROACH

Recruitment of physician clinics and PCNs will take a variety of forms, including:

- hosting information sessions by geographic region
- holding teleconference sessions
- visiting clinics, once they have expressed interest
- visiting PCNs and meeting with their management teams
- attending board meetings of appropriate organizations, i.e. CPSA, ACFP, etc. and present AIM information
- attending PCN forums
- attending conferences such as Accelerating Primary Care, Alberta Clinic Managers and others

Timelines and responsibilities for each of the above will need to be identified as each new collaborative is formed. For the detailed recruitment processes and workflow map, please see Attachment A.

## 10.0 BUDGET

### AIM Communications and Recruitment Budget

Budget Item	Total
Travel and physician time to presentations	\$20,000
Recruitment Tool development and distribution	\$50,000
<b>Total</b>	<b>\$70,000</b>

## 11.0 MEASUREMENT AND EVALUATION

Success will be measured by enrolment mapping.

Goals are to:

- increase the number of participants in AIM
- increase the number of collaboratives
- generate ongoing interest in Alberta AIM

## APPENDIX 1

### 1.1.1 AIM Recruitment Champions

The following individuals are AIM recruitment champions for this project and may assist recruitment leaders in their efforts. The list will be updated regularly and available on the Alberta AIM Website at : [www.AlbertaAIM.ca](http://www.AlbertaAIM.ca)

Organization	Name and Title
Recruitment champions include individuals such as physicians, AHS Leaders and members from TOP and the PCNs as indicated by the local recruitment leaders (as listed in Section 4.0).	
Physicians	Drs. Hilary Adams, Janet Craig, Mike Donoff, Tobias Gelber, Carmen Gingles Jana Holden, Vern Jubber, , Ernie Schuster, Rob Wedel, Harvey Woytiuk
Alberta AIM	Julie Shemanchuk, Provincial Program Planner
Alberta Health Services, Calgary Zone	Lori Anderson, VP Continuum Valerie Wiebe, Executive Director Medical Services JoAnn Beckie, Senior Manager, Primary Care Mandy McCabe, AIM Coordinator, Calgary Area Shannon Erfle, Project Manager
Alberta Health Services, Edmonton Zone	Marion Relf, Director of Primary Health Initiatives, Primary Care Networks Michele Zielinski, VP Leading Practices & System Design Support Marcia Kashani, Business Development Manager Chris Mayhew, Business Development Manager, PCN Doug Vincent, Senior Project Management Officer, Regional Project Management Office Dr. Richard Lewanczuk, Medical Director, Chronic Disease Management Wendy McLean, Primary Health Care Coordinator, North Zone Brenda Regehr Wood Buffalo PCN
Alberta Health Services, South Zone	Janet Lapins, Sr VP, Primary Care and Chronic Disease Management Shannon Spenceley, Primary Care and Chronic Disease Cheryl Andres, Primary Care and Chronic Disease Management Sandra Mintz , Primary Care Planner Chinook Primary Care Network Treena Klassen, Palliser Primary Care Manager
Toward Optimized Practice	Doug Stich, Program Director Arvelle Balon-Lyon, Assistant Program Director Arley

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	Nelson, Rural/Non Metro Outreach Coordinator
	AIM Faculty and AIM Facilitators
	Others as identified