Concurrent workshops

The 2025 Canadian Conference on Physician Leadership featured 18 90-minute workshops offered at various levels: introductory, intermediate, advanced, and suitable for all participants. A summary of these workshops follows. Please note that the descriptions have been condensed for the purposes of the journal. To view the full, detailed workshop descriptions, see the conference website: https://physicianleadershipconference.com/ccpl2025-program

Fostering co-production through distributive leadership: realizing the transformative value of patient engagement

Holly Harris, MA; Sophie Soklaridis, PhD

This workshop explored how physician leaders can create meaningful patient engagement through distributive leadership and multidirectional learning. Participants examined how intentional power-sharing and collaborative learning can elevate patient voices, challenge tokenism and promote health equity.

Learning objectives

- Articulate the value of patient engagement in health care programs and research
- Apply distributive leadership to foster shared decision-making
- Use multidirectional learning to empower patients and reduce power imbalances

Advancing equity in health care leadership through strategic intelligence

Ruth Vilayil, MD, FRCSC; Erica Phelps, MD, FRCSC; Ariella Zbar, MD, CCFP, MPH, MBA, FRCPC

This workshop introduced participants to a four-part strategic intelligence framework for leading with equity. Using foresight, partnering, visioning and motivating, participants explored how to align leadership behaviour with

equity-centred outcomes and increase awareness of implicit bias in strategic decision-making.

Learning objectives

- Identify the components of strategic intelligence
- Conduct personal gap analyses related to leadership behaviour
- Use bias awareness tools to improve inclusive leadership practices

From advocacy to influence: using negotiation skills to achieve outcomes

Amanda Brisebois, MD, Med., MMgmt (IMHL), PPC (ICF), AoDI

This session guided physician leaders in using negotiation and mediation principles to translate advocacy into influence. Participants practiced issue framing, stakeholder analysis and goal articulation through the development of impactful briefing notes and SMART-E action plans.

Learning objectives

- Describe common gaps in influencing health care change
- Apply a negotiation process to move from advocacy to influence
- Develop briefing notes integrating negotiation techniques

The interaction of leadership style and calling orientation: a novel approach to mitigating and predicting burnout in physician leaders

Gary P. Ernest, MD, CCFP, FCFP, MBA, EDBA Candidate; Catherine Loughlin, PhD

This workshop explored how physician leaders' sense of calling interacts with leadership style to affect burnout. Participants reflected on their personal pathways, analyzed peer experiences and applied evidence-based insights to support sustainability in leadership roles.

- Assess participants' own calling orientation in relation to leadership roles
- Gain insight into peer strategies for managing stress and burnout
- Identify correlations between calling and burnout
- Apply calling orientation as a burnout mitigation tool

Applying the Psychosocial Hazards Manifesto: a new system tool for medical leaders to manage disrespect and incivility*

Andrea Lum, MD, FRCPC, CCPE, FCAR; Kelly McShane, PhD, CPsych

Participants examined disrespect and incivility in medicine through a systems lens, using occupational health and safety principles. They applied the Psychosocial Hazards Manifesto to identify root causes and develop structured interventions to create safer work environments.

Learning objectives

- Describe psychosocial hazards affecting physicians
- Use root cause analysis to address incivility
- Apply a hierarchy of interventions to improve workplace culture
- * A more detailed article based on this workshop is included in this issue of CIPL.

Building leadership influence with purposeful relationships: curiosity, connectivity, community, collaboration

Anne McNamara, MBChB, FRACP, FRCPC, CEC

This interactive session supported leaders in strengthening relational influence using curiosity, collaboration and the Allyship Framework. Participants developed practical skills for trust-building and created action plans for more intentional leadership engagement.

Learning objectives

- Reflect on relationship dynamics within leadership ecosystems
- Explore the impact of allyship principles in leadership
- Practice curiosity-driven communication techniques
- Identify purposeful changes to improve leadership connectivity

Leading with humility: modeling culturally safe leadership

Jennafer Wilson, MD; Atussa Behnam-Shabahang; Katie Alexander; Amanda LaBoucane

This workshop guided participants in developing culturally safe leadership practices. Through self-reflection and case study analysis, leadership plans grounded in humility and reconciliation were designed.

Learning objectives

- Define and discuss the concept of cultural safety
- Model humility and lateral kindness within the participants' sphere of influence
- Design a personal, culturally competent leadership plan
- Develop actionable commitments to incorporating culturally safe competencies into leadership practice

Social media: amplifying voices and shaping the future of health care

Shazma Mithani, MD, FRCPC

Participants explored how to use social media to share health expertise, counter misinformation, and build professional presence. The session focused on platform differences and best practices for responsible engagement.

Learning objectives

- Identify the role of social media in health information dissemination and advocacy
- Define the demographic characteristics of each major social media platform
- Compare and contrast content types across different platforms
- Explore best practices for using social media to champion key issues in health care

Supporting physicians in the aftermath of a critical incident Heather Murray, MD, MSc, FRCPC; Keleigh James, MD, CCFP, FCFP

This workshop provided evidence-informed strategies to support physicians recovering from critical incidents. Participants assessed intervention barriers and discussed building resilience through case-based scenarios.

- Describe the impact of repeated exposure to critical incidents and recognize signs of trauma in the workplace
- Evaluate strategies for fostering individual and team resilience following a critical incident
- Compare barriers and assess the feasibility of incorporating resiliencebuilding strategies in diverse health care settings

Health system transformation requires authentic co-design with primary care

Marilyn Crabtree, MD, CCFP, FCFP; Nicole Nitti, MD, CCFP (EM), FCFP; Kim McIntosh, MD, CCFP, FCFP

This workshop explored strategies to engage family physicians and primary care teams in system transformation. Participants examined ways to strengthen leadership, improve collaboration and support more equitable, community-based care.

Learning objectives

- Explore the difference between co-design and stakeholder engagement through the "Heard, Seen, Respected" exercise, highlighting the impact of tokenistic engagement
- Discover the value of connecting family physicians and primary care teams through self-determined governance and leadership, followed by "Wise Crowds" discussions to share strategies
- Learn how formal leadership education equips family physician leaders to drive system change, reduce burnout and collaborate effectively

Finding the sweet spot of personal leadership edge: personal, philosophical, pragmatic and political Anurag Saxena, MD, M.Ed., MBA, FRCP, FCAP, CHE, CCPE; Graham Dickson, PhD

Leaders examined four dimensions of leadership — self-awareness, values, decision-making and influence — and explored how these align with their leadership styles. The session focused on reflective integration for personal growth.

- Explain the four dimensions of effective leadership: personal, philosophical, pragmatic and political
- Appraise structures and processes conducive to leadership success within participants' spheres of responsibility
- Integrate these practices into their leadership repertoire to help develop a personal leadership brand

Leadership in the era of Al: skills for 2025 and beyond*

Mamta Gautam, MD, MBA, FRCPC, CCPE, CPE; Kathleen Ross, MD, MSc, MCFP

Participants examined the leadership skills needed to ethically and effectively implement artificial intelligence (AI) in health care. Using the LEADS framework, they identified opportunities to build innovation-ready, trust-based teams.

Learning objectives

- Define Al and discuss its applications in health care
- Identify key leadership competencies using the LEADS framework required to lead change, remain agile, communicate effectively, build trust and create a positive culture of innovation
- Describe how to integrate Al tools into the health care system in an ethical, transparent and accountable manner
- * A more detailed article based on this workshop is included in this issue of CJPL.

Creating a culture of connection through informal peer support

Alexis Botkin, MD, FRCPC; Holly MacLean, RN, BN

This session emphasized informal peer support as a driver of clinician well-being and team cohesion. Participants practiced communication and listening skills to foster psychologically safe environments.

Learning objectives

- Articulate a personal vision for a more inclusive and collaborative culture of medicine through reflection and dialogue
- Identify and analyze everyday opportunities to apply informal peer support in interactions with colleagues
- Practice informal peer support skills through role play and prepare for future application in professional settings

Transforming health care: a paradigm shift toward Whole System Quality

Raymond Dong, MD, ABIM, FRCPC; Erica Phelps, MD, FRCSC

Participants applied a Whole System Quality framework to integrate planning, control and improvement. They engaged in stakeholder-based exercises to enhance learning culture and quality-driven leadership.

Learning objectives

- Define what quality means to patients and the health care workforce and craft strategies to achieve it sustainably
- Adopt leadership principles to support problem identification, experimentation and codification of effective solutions
- Integrate quality planning, quality improvement and quality control to deploy strategies that reliably meet prioritized needs
- Describe how all levels of staff can meaningfully participate in quality improvement efforts
- Assess the current stage (stages 0 to 3) of participants' organizations' progress in implementing a whole system quality approach

Meeting whisperer: taking your meetings from "meh" to magic

Jennie Aitken, MA, MADR; Maria Kang, MD, FRCPC

This practical session helped leaders address common meeting pitfalls and apply tools to improve time management, participation and decision-making. Participants left with techniques for leading more efficient and engaging meetings.

Learning objectives

- Analyze the "current state" of meetings in health care, identifying key challenges and inefficiencies that affect productivity and engagement
- Assess and justify whether a meeting was necessary using specific criteria, supporting informed decisions about when to meet and when to consider alternative communication methods
- Synthesize and apply practical tools and techniques, such as agenda setting, time management, and participant engagement strategies, to improve meeting outcomes

Tall poppy syndrome: an organizational blind spot driving talent from your organization

Jodi Ploquin, MSc, TIC, CWT, CHE; Callie Bland, BSc, BSN, Certified **Professional Co-Active Coach (CCPN)**

Participants examined how tall poppy syndrome undermines high achievers and contributes to poor retention. The workshop offered strategies to build psychologically safe, inclusive cultures that support talent and innovation.

Learning objectives

- Define tall poppy syndrome
- List key traits of "tall poppies" and describe the behaviour of "poppy cutters"
- Identify how to recognize tall poppy syndrome in the workplace
- Outline tangible organizational actions to create cultures that attract, support and retain high-performing individuals

Finding joy in practice

Andie Bains, MD, CCFP; Leah Malazdrewicz, RN

This session supported physician leaders in reconnecting with joy, managing challenges and fostering positive team cultures. Strategies focused on resilience, well-being and sustaining a meaningful medical career.

Learning objectives

- Identify ways to reconnect with joy in the practice of medicine
- Describe strategies to cope with challenging encounters and difficult periods
- Explain how team leaders can take action to cultivate a healthy, joyful work environment

Developing leadership for health care resiliency: adaptation to extreme heat, "the silent killer"

Diane de Camps Meschino, BSc(H), MD, FRCPC; Ming-Ka Chan, MD, MHPE, FRCPC; Myles Sergeant, MD, FCFP, P.Eng.

Participants explored health care risks associated with extreme heat and climate change. The session provided strategies for EDIA-focused (equity, diversity, inclusion and accessibility) planning, crisis leadership and preparing vulnerable communities for climate impacts.

- Use change leadership techniques to stimulate innovative ideas for building climate-resilient health care systems
- Develop EDIA-focused adaptation strategies for patients and communities facing high exposure and low adaptive capacity
- Apply a crisis leadership framework to support emergency response planning and system preparedness