



## IDENTIFICATION

Department	Position Title	
Health and Social Services	Manager, Systemic Design and Integration	
Position Number	Community	Division/Region
49-4942	Yellowknife	Community, Culture and Innovation / HQ

## PURPOSE OF THE POSITION

The Manager, Systemic Design and Integration provides leadership to guide strategic action and to advance a systemic person-centered approach to health and social services integration with a focus on children and families and primary health care reform. This position oversees a portfolio of health innovation and integration projects and works across organizational and program boundaries to build strategic alliances with system partners, communities and Indigenous innovators to co-design holistic models of care, systemic social change strategies, and programs and products that reflect and prioritize Indigenous knowledge, expertise, peoples, and communities.

## SCOPE

The Northwest Territories (NWT) health and social services system (HSS system) oversees the provision of a comprehensive range of services to a population of 45,493 people, including 20,035 Indigenous people, across an extensive geographic area of 1.2 million square kilometers, with the supports of approximately 1,400 health staff working in the Department of Health and Social Services (DHSS), Northwest Territories Health and Social Services Authority (NTHSSA), Tłıchǫ Community Services Agency (TCSA), and Hay River Health and Social Services Authority (HRHSSA). The NWT HSS system has the second highest per capita expenditures in Canada, and with a complex legislative landscape and multiple Federal funding arrangements to navigate. Efforts to support improved population wellness across multiple systems are faced with growing pressures, including rising costs and budgetary constraints, stretched human resources, and rising population needs and expectations. Addressing these barriers requires new and innovative ways of working, grounded in Indigenous health priorities and a focus on supporting Indigenous self-determination in health.

One significant challenge faced by governments is that mainstream organizations, like health and social services, cannot be separated from the legacy of colonialism and anti-Indigenous



racism in Canada. In health and social services settings, present day anti-Indigenous racism and systemic racism impact access to services, quality of care, and health outcomes for Indigenous peoples. Systemic racism also results in a system that inherently privileges the ideas, needs and norms of the dominant white settler population, including the privileging of western knowledge over Indigenous approaches and ways of knowing.

The HSS system is committed to addressing and eliminating anti-Indigenous racism and promoting cultural safety and anti-racism. DHSS staff are expected to honour and promote a culturally safe and anti-racist environment at all times and to interact with clients, families, community members, partners and colleagues in a relationship-based approach. This involves being tactful, respectful, self-aware, and humble to develop and maintain ongoing and trusting relationships.

Systemic racism is the manifestation of racism within organizations like governments, where racist ideas become part of policies and practices. In Canada, there is increasing awareness of systemic racism in health and social services, especially against Indigenous people. In the NWT, the HSS system is focusing on cultural safety and anti-racism to address this problem through the 2016 commitment to action document, “Building a Culturally Respectful Health and Social Services System” and the 2019 document, “Cultural Safety Action Plan”. Cultural safety means Indigenous people feel safe and respected, free of racism and discrimination, when using health and social services. To achieve cultural safety, anti-racism, and relationship-based care which is a way to build strong relationships between clients and providers are necessary.

To address the longstanding and complex issues and inequities in the HSS system, a new approach was developed by the Community, Culture, and Innovation (CCI) division to support a made-in-the-NWT integration model for health and social services driven by community priorities and based on trust and equity. This involves Primary Health Care Reform (PHCR) which is changing the system to work with people and communities using a community development approach. PHCR supports several community-based initiatives described as highly collaborative environments where system partners, community members, and Indigenous governments are working toward a shared vision of establishing new ways of working to achieve culturally safe and relationship-based care needed to improve the health of the NWT population.

The CCI division and Cultural Safety and Anti-Racism (CSAR) division work together in a health learning and innovation lab to apply a systemic approach to tackle complex problems and advance cultural safety in the NWT. In the health learning and innovation lab, teams generate and adapt new models, policies, resources and facilitate collaborative and brave spaces, training, as part of their day-to-day efforts to advance equity. Most importantly, Indigenous knowledge and healing practices are prioritized, and Indigenous community relationships drive the divisions’ ongoing learning.



The Community, Culture and Innovation division is responsible for developing and overseeing NWT HSS system wide initiatives to embed cultural safety, social determinants of health, community development, and public participation within the overall delivery of care for NWT residents. They identify strategic priorities by collaborating with the NWT HSS System, GNWT Departments, community partners and Indigenous government organizations, and provide leadership, guidance, direction, and support across the system to promote person-centered care and innovation based on Indigenous community priorities and data, with a focus on trust and equity.

The CCI division is dedicated to promoting the health and well-being of Indigenous Peoples and communities through collaborative efforts between three units: Indigenous Health and Community Wellness, Systemic Design and Integration, and Learning Health Systems. The teams strive for sustainable impact by fostering a culture of continuous learning and improvement through feedback and reflection, supporting team members to feel heard and valued, and embracing new challenges to enhance skills and knowledge. To maintain their commitment to excellence, the teams continuously adapt and enhance their approach.

The Systemic Design and Integration unit works to define, diagnose, design, test and scale health and social services initiatives related to early childhood development and PHCR, by building purposeful relationships with Indigenous communities, promoting cultures of continuous quality improvement and innovation, and starting from a foundation of equity.

Located in Yellowknife, the Manager, Systemic Design and Integration (Manager), reports to the Director, Community, Culture and Innovation, and is responsible for building health and social services capabilities in systemic design; a mindset, tool, and process used to address complex problems with the aim of making sustainable impact at scale. It builds on design and systems competencies to describe, map, propose, and reconfigure complex services and systems. The Manager leverages approaches and tools to improve client experience, transform systems of care, and build a culturally safe and relationship-based health and social services system. The incumbent focuses on improving the quality of design, delivery, and integration of health and social services initiatives related to early childhood development (ECD) and PHCR.

The incumbent works across various organizations, including government departments, Indigenous government organizations, non-profit organizations, research organizations, community partners, and residents. The Manager uses meaningful data, storytelling, best evidence, and person-centered design tools to identify opportunities for improvement and health system integration that contribute to improved outcomes and experiences for children, families, and communities in the NWT.

The approach of the Manager is grounded in systemic design, which involves critical analysis, systems thinking, and fluid navigation from the interpersonal to systemic issues. The Manager



fosters collaborative relationships from micro to macro and from the vertical to horizontal organizational levels to facilitate multi-partner problem solving to transform health and social services programs, processes, and cultures. The Manager functions as a change agent, provides change management expertise, and utilizes quality improvement, innovation, and rapid learning to inform policy and practice.

The Manager leads the co-design of high-quality models of care, integrated care pathways, and integrated care teams. This includes the development of the reproductive, perinatal, infant and child health Model of Care, integration of health and social services throughout the period of ECD, implementation of the renewed Healthy Family Program, and community- and regional-based approaches to primary health care reform, inclusive of integrated care teams and intergenerational land-based primary care projects.

Human-centered design is also an important approach in this role, as the Manager works with a diverse range of stakeholders, including Indigenous communities, to ensure that solutions are informed by community knowledge, Indigenous community priorities, and are in alignment with the strategic plan of the Department of Health and Social Services. The Manager also leads interdisciplinary learning and training opportunities to build relationships among teams working towards a shared goal.

The Manager oversees the implementation of *the Early Childhood Development Portfolio of Actions*, including developing and implementing future strategic plans and reporting on progress. The Manager supports the transition of the ECD portfolio as a Social Determinant of Health towards a whole-of-government approach by increasing efficiency of inter-departmental coordinating bodies to align GNWT and community vision, streamlining program funding, identifying population needs, and leading the design and development of policies to support integration.

The Manager has additional direct reporting and accountability to Assistant Deputy Minister level executive sponsors for ECD and PHCR such as the Assistant Deputy Minister, Corporate Services and Cultural Safety. The Manager oversees direct reporting relationships and a budget of \$1.4M.

During engagement activities and training sessions the incumbent will assemble and transport meeting supplies and assist with the set-up of meeting locations.

This position requires the incumbent to travel to communities in the Northwest Territories.

## **RESPONSIBILITIES**

- 1. Leads integration and quality improvement efforts across the health and social services system, with a focus on ECD and primary health care reform.**



- Build strategic alliances within and across sectors, identifying high impact opportunities for integration and transformation within the health system.
- Use design and system thinking to enhance innovation and improvement processes in ECD and primary health care.
- Use rapid learning, data -driven methods, community engagement, and diverse forms of evidence/knowledge to inform policy and practice.
- Provide expertise in health system design and integration in the areas of relationship based and person-centered care, healing-oriented care, and shared decision making.
- Build meaningful relationships and work closely with health innovation and research ecosystem partners, including communities and community partners.
- Support senior leadership, system partners and Indigenous communities in understanding wise practices, emerging trends and relevant evidence-informed innovation to address system capacity, access and flow and improve integrated care.
- Provide project and change management expertise to seek engagement and ownership for the change agenda across the HSS ecosystem.
- Utilize wise practices and frameworks to meet time and investment-bound project milestones and stage-gates (e.g., Business Model Canvas, Lean Start-up, Agile Methodology, Design Thinking).
- Regularly communicate and present updates, perspectives, and recommendations to internal stakeholders and senior leadership.
- Work with the Cultural Safety and Anti-Racism (CSAR) Division to embed culturally safe approaches to health system integration and quality improvement initiatives.
- Work with the Health Learning System unit to seamlessly embed data, rapid learning through evidence synthesis, program evaluation, innovation and quality improvement at the heart of integration efforts.

**2. Manages and facilitates the design of high-quality models of care, integrated care pathways, and integrated care teams.**

- Use meaningful data, storytelling, best evidence, and human-centered design tools (such as user experience mapping) to identify gaps, opportunities for improvement and health system integration.
- Work closely with the local operational and leadership teams for managing the development and implementation of processes to integrate quality improvement and evidence-based practice in the primary health care reform demonstration sites.
- Apply the Health Standards Organization Integrated People-Centered Health Systems standard and pathways toolkit to initiatives for building integrated services and integrated care pathways.
- Work with project teams as part of ECD-ISD and PHCR to develop context-driven and evidence informed integrated care pathways and primary health care demonstration sites in partnership with people and communities.





- Define and document the need, interest, call to action, stakeholders and resources that are needed to establish successful integrated care pathways and demonstration projects.
- Establish and reinforce governance and accountability mechanisms needed for ECD-ISC and PHCR.
- Share and validate summary reports of co-design activities, outcomes and recommendations with decision makers and senior leadership.
- Co-develop implementation and evaluation plans using evidence-based frameworks and tools to implement integrated care pathways, integrated care teams, and models of care.
- Document lessons learned, key success factors, practices, unintended or unexpected outcomes.
- Use consensus building, collaborative work planning and systemic design tools to seek partner engagement, encourage ownership and distributed championing of the change agenda.
- Lead the design, development, and implementation of reproductive, perinatal, infant and child health governance structure and model of care.
- Oversee the development and implementation of the *Early Childhood Development Portfolio of Actions*, including developing and implementing future strategic plans and reporting on progress.

**3. Leads and fosters a culture of continuous quality improvement by using quality improvement science and tools to test, implement, evaluate and learn from change initiatives.**

- Promote a culture of quality improvement and facilitate the integration of quality improvement initiatives that can be monitored and measured using reliable data.
- Provide leadership in the development, implementation, and evaluation of quality improvement processes and programs to continually improve health and social programs and services related to early childhood and primary health care reform.
- Work with Indigenous communities and system partners to develop and execute local quality improvement priorities and ensure that strategic information, quality improvement, and performance measurement initiatives are linked to strategic and operational priorities and activities.
- Provide leadership and support the development of change management and implementation tools for tests of change in clinical and system design.
- Create processes, in partnership with Health Learning System team, to evaluate new funding opportunities in alignment with strategic plan.
- Oversee the implementation of Baby-Friendly Initiative as a territorial quality improvement initiative.
- Function as the co-chair for the Territorial Baby-Friendly Initiative Quality Improvement Committee and the Pan-Territorial Infant Feeding Collaborative.



- Explore and facilitate opportunities for interdisciplinary learning and training through education initiatives, knowledge sharing forums and communities of practice.
- 4. Manages social innovation programs and products that help drive measurable impact aligned with HSS mandate and community priorities.**
    - Manage the initiation of programs/products to incubate ideas which maximize social impact in response to the needs and priorities of families and communities.
    - Establish robust process and outcome monitoring and evaluation to improve and scale social innovation programs that have demonstrated impact.
    - Deliver a set of diverse and ambitious programs that accelerate, broaden and deepen social innovation across HSS, including the Baby Bundle program.
    - Identify opportunities to establish enabling policy frameworks to support HSS, HSSAs and organizations to co-construct and implement socially innovative programs and products that address health and social system issues related to early childhood and primary health care reform.
  - 5. Leads the transition of the ECD portfolio towards a whole-of-government approach to improve early childhood indicators for all children.**
    - Inform the design of integrated service delivery approach.
    - Manage the ECD team by overseeing research for the creation of an ecological model and process to increase efficiency of inter-departmental coordinating bodies and to align GNWT and community vision.
    - Manage organizational and structural change to support a system-wide shift towards prioritizing ECD, culturally based prevention, and family and community-driven programming.
    - Pilot approaches streamlining HSS program funding for ECD initiatives and community-based programs.
    - Participate in the ECD-Integrated Service Delivery (ECD-ISD) inter-departmental working group and plays a role in elements of the work plan to develop an ECD-ISD approach and to re-design early intervention and rehabilitation services for children and families.
  - 6. Provides leadership and expert advice on strategic initiatives regarding system design, integration and quality improvement at various knowledge sharing forums and decision-making structures.**
    - Actively participate in territorial and national working groups, advisory or steering committees to enhance, protect and promote DHSS and community priorities and strategies, identify alignment, and envision improved approaches to better serve people and communities.
    - Communicate extensively with departmental staff, regional and community representatives to meet internal deadlines established by the DHSS business plan and



federal government reporting timelines, and to advise on relevant issues and related public policy matters.

- Develop correspondence, briefing notes, submissions or position papers.

**7. Manages financial and human resources and makes informed decisions concerning resource allocation and operational matters.**

- Manage an annual budget of approximately \$1.4M, which includes GNWT core funding for strategic priorities such as ECD and third-party funding for specific initiatives geared towards Indigenous communities.
- Oversee the administration of funding through multi-year contribution agreements with regional, community and partner organizations, ensuring an approach that increases fiscal responsibility and mutual accountability while promoting equity and reconciliation.
- Manage and account for funding of operations and initiatives by enhancing accountability and effectiveness, in collaboration with the Finance and Administration Officer.
- Identify third party funding opportunities to support the work of the unit, and apply for, administer, and report on funding in partnership with the Senior Finance and Administration Officer and the Manager, Health Learning Systems.
- Communicate with the Director on a regular basis keeping the Director apprised of any issues of concern.

**8. Provides leadership and guidance to a team of change-makers by providing an environment that enables relationship-building, promotes creativity, and aligns around common values that give meaning to work, and nurtures collective leadership and ownership for the Unit workplan.**

- Lead annual performance and learning planning process for 4 direct reports, including collaborative work planning, individual whole-person development plans aligned with aspirations and potential.
- Oversee the coordination and supervision aspects of day-to-day operational activities of the Systemic Design and Integration unit and assume responsibility for budgetary functions.
- Oversee the development of a comprehensive onboarding program for new staff to the GNWT, Department, Division and Unit.
- Provide mentorship and coaching as part of a continuous learning environment.
- Responsible for staff planning, staff recruitment, performance management, and ensuring that ongoing training and educational needs are identified and addressed.
- Provide support and guidance to the unit staff to assist them to accomplish tasks, responsibilities, and individual goals as described in individual, team, Divisional, and Departmental work plans.





- Provide acknowledgment, meaningful and timely feedback to staff as part of a regular and expected practice.

**9. Contributes to the efforts of the CCI divisions by showcasing public service excellence, upholding values and priorities identified by Indigenous Peoples and communities, and committing to a continuous practice of self-reflection and whole person development.**

- Implement administrative and financial processes to ensure they are meeting stated deadlines, budget requirements and deliverables.
- Complete correspondence, reporting and briefing notes to increase accountability and transparency.
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- Contribute expertise and represent the CCI Division in internal and external forums, public participation activities, and priority-setting discussions to identify issues and innovative actions required to transform and integrate the HSS system.
- Foster an environment of community and continuous learning, discovery, joy and solidarity by facilitating and participating in collaborative spaces for divisional staff to carry out day to day work and onboarding.
- Establish and/or participate in local and cross-jurisdictional communities of practice to enhance training, knowledge exchange and translation, scaling, and sustainability of key initiatives.
- Contribute to curriculum development and act as a trainer and facilitator for the promotion and delivery of cultural safety and anti-racism training.
- Provide feedback on a variety of written documents from across the HSS system that reflect anti-Indigenous racism, social determinants of health, social justice, body sovereignty, health equity and a human-centered design approach
- Develop an awareness of individual positionality within the work, and a commitment to the necessary and ongoing inner and organizational work required to show up meaningfully with humility.
- Showcase a growth mindset and navigate discomfort with curiosity and confidence.
- Seek opportunities to develop and maintain knowledge and practice of Indigenous values and cultures, in a manner appropriate to the individual and position.

**WORKING CONDITIONS**

**Physical Demands**

No unusual demands.



### **Environmental Conditions**

No unusual conditions.

### **Sensory Demands**

No unusual demands.

### **Mental Demands**

Travel to communities will be required approximately 12 to 15 times per year for periods of 3 to 5 days per occurrence.

### **KNOWLEDGE, SKILLS AND ABILITIES**

- Knowledge of the social determinants of health for Indigenous peoples, and the context and enabling environments in which programs and services operate.
- Knowledge of design system and social innovation methodologies.
- Knowledge of colonial impacts on Indigenous peoples in health and social outcomes, including HSS and dominant or western public participation and research approaches, supported by significant knowledge of Canadian and Indigenous ideologies.
- Maintain a working understanding of Cultural Safety and Anti-Racism frameworks.
- Knowledge of and/or the ability to acquire and apply knowledge of northern HSS systems and structures.
- Knowledge of and experience with public participation, health improvement, and project management methodologies.
- Knowledge of leadership and Indigenous leadership theories and practices.
- Knowledge of current research and evaluation techniques and methodologies.
- Ability to research, analyze and synthesize multiple concepts and priorities.
- Reading, oral and written communication skills, including presentations, briefing notes, charts and graphs, reports and publications for a wide variety of audiences.
- Computer skills including word processing, internet, email and desk top publishing programs within a windows environment.
- Relational skills, a growth and learning mindset, a clear focus on details and logistics, and the ability to manage multiple projects and work-streams simultaneously.
- Financial management skills, including project cost tracking and variance reporting.
- Ability to work effectively in small and large groups using project management and leadership skills, program planning and implementation skills, listening and verbal communication skills, facilitation and presentation skills, negotiation skills, team building and relationship building skills.
- Ability to maintain the goodwill of clients, colleagues and co-workers
- Ability to communicate clearly on a variety of subjects in plain language both written and verbal.



- Ability to interact, lead, and persuade those with conflicting interests sensitively, tactfully, diplomatically, and professionally at all times.
- Ability to work collaboratively to identify a problem's root causes identify short- and long-term solutions, anticipate patterns and look beyond the immediate problem to the wider implications.
- Ability to effectively supervise, lead, develop and coach teams.
- Ability to challenge longstanding norms that perpetuate inequities within the workforce.
- Ability to commit to actively upholding and consistently practicing personal diversity, inclusion and cultural awareness, as well as safety and sensitivity approaches in the workplace.

**Typically, the above qualifications would be attained by:**

A degree in a health discipline, public health, health system design, or related field, and five (5) years of progressive experience working in health, wellness, policy, governance, or related programming, that also includes one (1) year of supervisory or team lead experience.

Equivalent combinations of education and experience will be considered.

**ADDITIONAL REQUIREMENTS**

**Position Security**

- ☐ No criminal records check required
- ☒ Position of Trust – criminal records check required
- ☐ Highly sensitive position – requires verification of identity and a criminal records check

**French Language** (check one if applicable)

- ☐ French required (must identify required level below)

Level required for this Designated Position is:

ORAL EXPRESSION AND COMPREHENSION

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

READING COMPREHENSION:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

WRITING SKILLS:

Basic (B) ☐ Intermediate (I) ☐ Advanced (A) ☐

- ☐ French preferred

**Indigenous Language:** Select Language

- ☐ Required
- ☒ Preferred