

Volunteer Leadership Initiative 2004

Background

The genesis for this initiative was the “Team A” report prepared in 1999 in response to the need to address “generational” issues and the amount of time members are willing to devote to reaching a senior leadership position. One result of that report was the reduction in terms of office within CDA in an attempt to build succession tracks. With shorter terms, the issue of accelerating the learning curve has become increasingly important. Some efforts, such as a mentoring system at the Board of Trustees, have been put in place in an attempt to fill that gap.

The current CDA process for choosing leaders remains very closed, however, and there is a desire to become more inclusive. The current screening process is by nature “passive” and limited to reviewing applicants that are self-identified. The committee is not able to proactively identify and recruit new talent for leadership roles and has not historically employed outreach programs.

There is a history of competition for good leaders among the components, CDA and the ADA, which must be coordinated to avoid conflict. There are changing expectations from younger potential leaders, which makes a multiple decade leadership ladder ineffective and, in fact, a barrier. Younger dentists carry a debt level from their schooling which limits the amount of nonpractice time they can dedicate to the profession. One of the aims of this initiative is to include them in the process while recognizing the limitation on their availability.

The Board of Trustees has an obligation to ensure a steady source of leadership flowing into the organization, but has not historically been able to draw potential leaders from all segments of the dental community. Movement away from the well-established tradition that an individual must follow a recognized pathway through positions of participation and leadership at the component level before being considered for leadership at the state level will require a paradigm shift.

Task Force

Russell I. Webb, DDS – Chair
Douglas J. Gordon, DDS
W. Jeffrey Moore, DDS
Virginia Hughson-Otte, DDS
Douglas N. Christiansen, DDS
Cynthia K. Brattesani, DDS
Atul Suchak, DDS
Cathy Levering
Peter A. DuBois
Linda Huscher
Liz Snow

Objectives

1. Make leadership development a high priority within organized dentistry in California and implement a systematic effort to successfully meet the leadership requirement.
2. Create outreach efforts to attract high potentials, shorten the development path for high potentials, broaden the perspective of representation within volunteer leadership, and increase the talent pool for future leadership.
3. Develop enhanced methods for assessing leadership qualities for volunteer leadership roles.
4. Increase and formalize the number of developmental opportunities which are used for leadership development.
5. Provide support mechanisms for the development of key skills within volunteer leaders and to accelerate the learning process, which increases the level of individual impact.
6. Provide an ongoing system of tracking and developing new leadership and encouraging maximum participation.

Approach

1. Target leadership roles for development and create key specifications. To facilitate this effort key competencies will need to be reviewed. Roles must be identified which can then be assigned as “developmental patterns.” Examples could include:
 - Task force assignments
 - Special event leadership
 - Scientific Sessions Assistants
 - Guests at councils (particularly new dentists)
 - Guests at Board of Trustees (designated by component leadership development committees)
 - CDA Foundation projects (i.e. train the trainer)
 - Assignment to serve at the Dental Forum (representing societal minorities)
 - Legislative support roles (CalDPAC and local legislative arena)
 - Alternates on councils/committees as a lead-in to serving in more active capacities
 - Advocacy in the grassroots arena

2. Identify sources for a leadership pool.
 - Rotary and other civic organizations
 - Leadership activity in non-dental associations
 - Charitable volunteerism and leadership
 - Participation in political campaigns
 - Prior career activities
 - Alternate dental associations
 - Members who have served in leadership at CDA and/or ADA considered for leadership roles at the component level
 - Former/current military service
 - Academic leadership as a faculty member or student leader
 - Leadership in a religious organization
 - Alumni association activity

3. Design and initiate outreach programs to recruit high potentials.
 - Reconstitute the “Screening Committee” as the “Leadership Development Committee” (LDC). Increase the representation on that committee.
 - Assign responsibility for outreach programs and the charter to develop a “bench” of leadership talent.
 - Create an Administrator of Leadership Development role on staff to serve as a central coordinator of this initiative.

4. Initiate a development process on key leadership competencies.
 - Leadership conferences (regional and state)
 - Mentoring programs both formal and informal
 - Creating a “buddy system” in support of developing leaders. (A peer resource in addition to a mentor)
 - Attendance at “point of interest” workshops
 - Participation in outreach education programs

5. Review all key Association processes which support leadership development and amend or modify as needed.
 - Bylaws
 - Screening process and procedures
 - Create a feedback process to the Administrator of Leadership Development
 - Expand membership of the Leadership Development Committee with 2 year staggered terms

6. Develop a monitoring system for leadership talent.
 - Identify capabilities of existing database resources
 - Develop process to identify skills and track in a database

7. Facilitate the placement of key potentials into development roles to accelerate the placement opportunities.
 - Administrator of Leadership Development to work with component leadership and LDC to match identified skill sets of potential candidates to leadership opportunity assignments
 - Create job descriptions for members of LDC to facilitate identification of qualified candidates
8. Expand support mechanisms to accelerate learning and reinforce development efforts.
 - Create formal mentoring process
 - Create informal “buddy system”
 - Establish staff responsibility for follow-up and support
 - Develop training programs for leadership development skills
9. Obtain necessary organizational approvals and make changes systemic.
 - Screening Committee sponsorship
 - Executive Committee approval
 - Board of Trustees approval
 - House of Delegates approval
10. Establish key contact point within staff for leadership development, information, resource identification.
 - Administrator of Volunteer Leadership Development
11. Establish at least annual review process to monitor progress.
 - Report to Executive Committee on progress, status, recommended changes
 - Report to Board of Trustees on progress, status, recommended changes on an annual basis
 - Report to the House of Delegates on an annual basis

Actions to be Approved and Implemented

Approval of:

- Renaming of the CDA Screening Committee to the Leadership Development Committee. Expand membership of the new committee and charter it with the responsibility to implement the work of the Leadership Task Force.
- Create the position of Administrator of Volunteer Leadership Development. In collaboration with the CDA Executive Director, fill this position in a timely manner.