

Tool: Succession Plan Prioritization Matrix

Purpose: Use the Succession Plan Prioritization Matrix to identify physician leadership positions that are most in need of a succession plan: roles that are both critical (e.g., strategically or operationally imperative) and vulnerable (e.g., at risk for turnover) should be prioritized for succession planning.

Instructions:

- 1 Determine each physician leadership position's "criticality" and "vulnerability" using the included discussion prompts.
- 2 Plot each role accordingly on the included 3x3 matrix. Alternatively, re-create the 3X3 matrix on a whiteboard or flipchart paper, and use post-it notes to plot physician leadership positions.
- 3 Use the plotted results to determine which physician leadership roles you should prioritize for succession planning.

Succession Plan Prioritization Matrix (cont.)

Position Criticality Discussion Prompts

- 1 Strategic importance:** If this position is vacant, will strategic priorities that are mission-critical to the health system stall? (e.g., service line growth, EHR optimization, care variation reduction strategy)
- 2 Operational importance:** If this position is vacant, will crucial processes or operations stall? (e.g., peer review, physician recruitment, mandatory quality reporting)
- 3 Connectedness:** If this position is vacant, will key lines of communication and collaboration across the organization break down?
- 4 Difficulty to fill:** Will it be significantly difficult to fill a vacancy for this position, due to specialized skillset or a lack of the needed skillset in your regional market?

Plotting criticality: The two week rule

Critical positions are those that your organization cannot afford to leave vacant for more than two weeks. To help simplify your assessment, consider:

- **Critical:** A vacancy of this position for more than two weeks would be detrimental; strategic or operational imperatives would not be achieved
- **Potentially Critical:** A vacancy of this position for more than two weeks would cause significant challenges
- **Not Critical:** A vacancy of this position for more than two weeks could reasonably be accommodated

Position Vulnerability Discussion Prompts

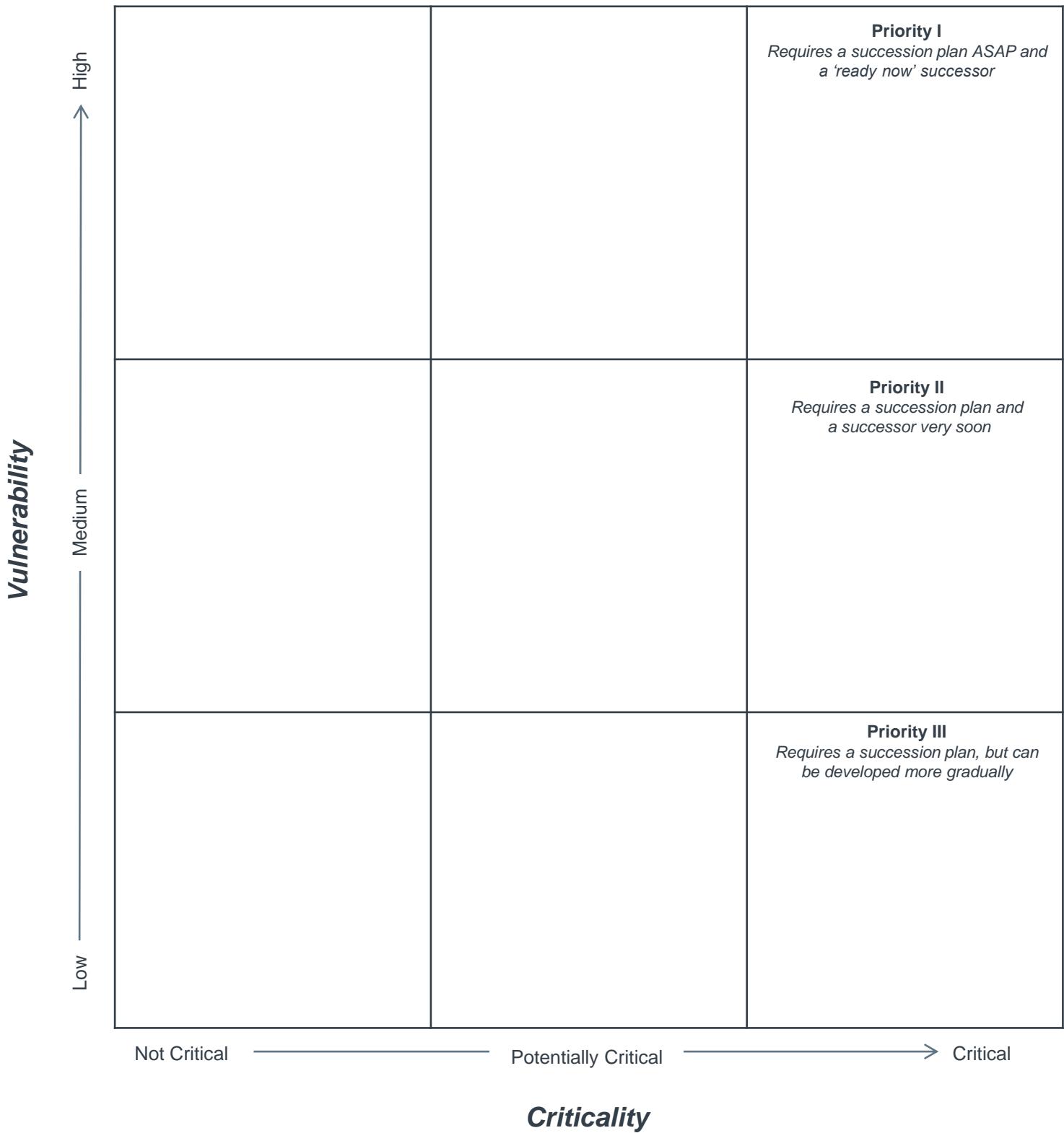
- 1 Retirement:** Is the physician leader who is currently in-seat at retirement age or nearing retirement age (or the typical retirement age for the specific position)?
- 2 Disengagement:** Does the physician leader in-seat seem disengaged, burned out, or dissatisfied with the work environment?
- 3 Competition:** Is the physician leader in-seat part of a high-demand specialty or service line that is being heavily recruited for by hospitals and health systems in your region?
- 4 Competition:** Is compensation for the position on par with external benchmarks?

Plotting vulnerability: The two year rule

Vulnerability refers to the likelihood that a position will become vacant. To help simplify your assessment, consider:

- **High Risk:** The leader-in-seat is certain to leave within the next two years, or has expressed plans to leave
- **Medium Risk:** The leader-in-seat could potentially leave within two years, due to one or more risk factors
- **Low Risk:** The leader-in-seat is certain to stay for two years, or has expressed a desire to remain in seat

Succession Plan Prioritization Matrix (cont.)



Source: HR Advancement Center research and analysis; Physician Executive Council research and analysis.