



DEFINING THE ESSENTIAL CORE OF THE
ACADEMY: AOAO STRATEGIC PLAN
2018

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EXECUTIVE SUMMARY

Having a clear strategic direction is vital to keeping an organization on track and focused on its goals, as well as enabling an organization to avoid being bogged down with daily issues and occurrences. Strategic planning is an effective tool to achieve alignment, enhance accountability, and a first step in meeting the demands of the new landscape of health care and education.

In October of 2017, The American Osteopathic Academy of Orthopedics (AOAO) (the Academy) began a strategic planning process to not only aid in the next stage of internal organizational development, but also to continue to improve and advance osteopathic distinctiveness through membership and education. The comprehensive approach was facilitated by Tripp Umbach¹ as an independent third party, who worked collaboratively with AOAO and key leadership of the Academy during the planning process.

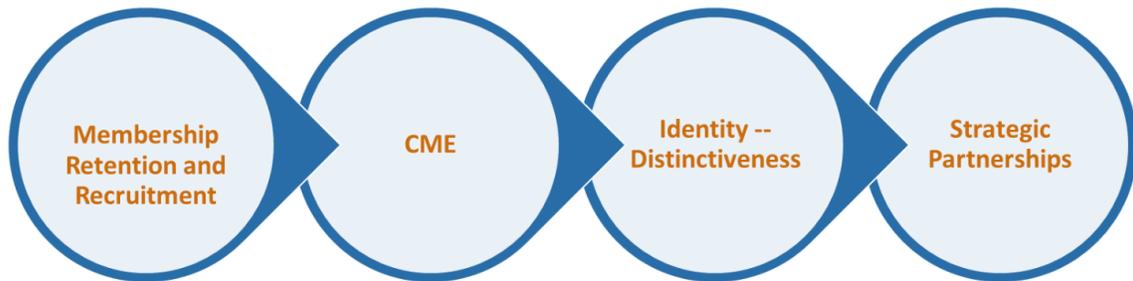
A key aspect of the planning process was the analysis of feedback (i.e., individual perceptions) obtained from key stakeholders² through interviews and a small group work session, which then was compared to factual data and national/state implications/trends. To determine the key strategic plan's focus areas, Tripp Umbach used areas identified in the factual data/trends assessment, which were also supported by a balance of secondary data (where available) and strong consensus provided by both key stakeholders and work session participants. Specifically, the purpose of the interviews and work sessions were to help identify key initiatives as well as identify potential partnerships, primary areas of growth, and identify national/state level implications/trends that were taken into consideration during the planning process (Please refer Appendix B).

Identified through an understanding of the changing environment, as well as areas of strength and potential opportunities that do/can distinguish AOAO from other associations, and adhering to the core principles of osteopathic medicine, the following key focus areas provide a framework for the goals of the strategic plan.

¹Tripp Umbach is the national leader in research and strategic planning for allopathic and osteopathic academic medical centers, health systems, new and expanding medical schools, and communities that wish to develop and expand undergraduate medical education (UME) and graduate medical education (GME).

² Please refer to Appendix A for a list of Key Stakeholders.

The Strategic Focus Areas Include:



The notion of strategic planning, especially for an academic-oriented organization, is no longer a static, specific-goal-driven process. AOAo acknowledges it must be adaptive and use real-time information and developments to guide the direction most effective for the Academy and its members. In turn, this plan purposely has not identified specific metrics to measure success. These details will continue to emerge and evolve through focused planning sessions with key leadership and members.

The main goal is that the focus areas' themes intersect with all Academy-level planning efforts and optimize human and financial capital, technological infrastructure, and educational offerings. During the months to come, AOAo hopes to focus on synergistic energy and resources that will enable the greatest success and benefit for its current and future members.

AOAO's mission and values are interwoven throughout this plan. Also, primary and secondary data cited later in this document provide a framework on how the plan's focus areas were developed.

Mission Statement

The American Osteopathic Academy of Orthopedics (AOAO) facilitates the education and continuous development of osteopathic orthopedic surgeons to improve the care, healing and quality of life of patients.

Vision Statement

The AOAo will be the premier, nationally recognized orthopedic organization that represents osteopathic principals and beliefs, while advocating for all orthopedic surgeons, their patients, and the communities in which they live.

INTRODUCTION

Osteopathic medicine, and medicine in general, is in constant transition due to economic, social, and political influences. Our health care system is facing immense challenges, which seem to grow more daunting and complex.

Both osteopathic and allopathic medical schools are attempting to increase the number of physicians being educated. According to the American Association of Colleges of Osteopathic Medicine (AACOM), the number of colleges of osteopathic medicine increased from 26 to 33 since 2012, with an additional fifteen branch campuses. Across the country, new medical colleges and branch campuses (Allopathic and Osteopathic) are in various stages of accreditation with both the Commission on Osteopathic College Accreditation (COCA) and the Liaison Committee on Medical Education (LCME). It is estimated that there are almost 20 new medical colleges in the pipeline.

At the same time, increases in graduate medical education (GME) have not kept pace with the growth in medical students. This, and the move to a single accreditation process for American Osteopathic Association (AOA) and Accreditation Council on Graduate Medical Education (ACGME) graduate training programs, will increase the competition for residency training positions among graduates.

The future of medical education and health care requires innovation and collaboration. Specifically, patients, providers, academic institutions and academies, community organizations, and industry must work together in innovative ways to provide high-quality care with better outcomes at lower costs. This may lead some to wonder, with such transition and flux, how will we maintain “osteopathic distinctiveness”. With its mission to advance osteopathic health care and education, AOA is uniquely qualified to address these challenges.

The American Osteopathic Academy of Orthopedics (AOAO) was formed in 1941. AOAO currently has over 1,900 members, including Active, Life, Military, Retired, Honorary, Allied Health and Associate Members. Each year members of the AOAO participate in the training of 500 Osteopathic Orthopedic Surgeons in 40 different residencies as Program Directors and Faculty.

Capitalizing on a Strong Osteopathic Heritage

Physicians who hold a degree in osteopathic medicine make up about 9% of the current population of licensed physicians, but enrollment trends indicate that number will grow over the next few years. At the 125th anniversary of the profession, about one in four medical students attends a college of osteopathic medicine, and enrollment has increased an average of 25 percent every five years. The American Osteopathic Association's annual report on the profession recorded more than 6,000 newly graduated D.O.s (Doctors of Osteopathic Medicine) in 2017, with more than 99 percent placed into residencies this year. There are currently 20,482 DOs in residency training.³

It is believed by some that the establishment of a single accreditation system for all residency programs in 2020 will further drive the trend, ensuring M.D.s (Doctors of Medicine) and D.O.s meet identical training standards.⁴ At the end of the five-year transition, all new physicians will be eligible to apply for osteopathic

³ The American Osteopathic Association's annual report.

⁴ Growth of osteopathic medicine offers hope for rural populations. Matt Kuhrt | Oct 24, 2017.

and non-osteopathic residencies in every specialty. Previously, physicians with a M.D. degree could not obtain osteopathic training.

Osteopathic-driven organizations' role must not be limited to maintaining the existing osteopathic tenets; they must evolve and leverage them. It will be crucial that AOA remains a viable and relevant organization for current and future members. The new Osteopathic Principles Committee established within the Accreditation Council on Graduate Medical Education (ACGME) can recognize current osteopathic residency programs as well as existing ACGME programs as osteopathically focused. M.D. graduates seeking to become a primary care physician may consider the advantages of dual-certification with osteopathic credentials as well as allopathic credentials—credentials that will distinguish their training, attributes, and skills.

AOA promotes the highest quality orthopedic service and has long provided outstanding instructional courses semi-annually. The Academy first promotes and advances the specialty of osteopathic orthopedic surgery among its members, as well as promoting osteopathic orthopedic surgery throughout the osteopathic profession and lastly, disseminating the latest medical information in the specialty. These efforts are aimed at increasing the knowledge of all osteopathic physicians, thus, enhancing their ability to manage patients in the field of orthopedics. The next couple of years present AOA with an opportunity to put a permanent stake in the ground not only as a leader in CME, but most importantly, a forward-thinking leader in osteopathic manipulative medicine and a strong resource used to cultivate and support the nation's osteopathic, orthopedic physicians.

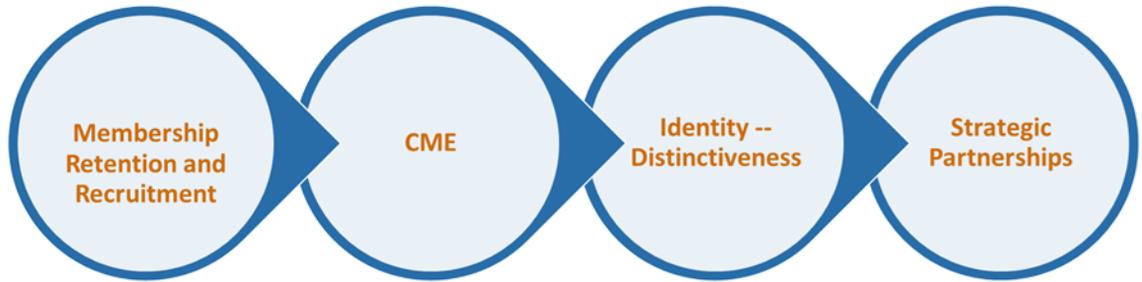
Specific focus throughout the planning process was put on strengthening the recruitment and retention of members through pipeline and outreach efforts, and most importantly, enhanced benefits and service offerings to all members through all stages of life. Ultimately, the AOA acknowledges they must be an imperative link in enhancing the overall awareness and reputation of osteopathic distinctiveness in the orthopedic profession, which must start early and be consistent.

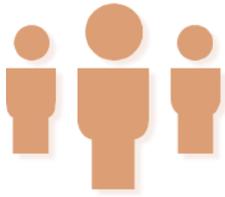
STRATEGIC FOCUS AREAS

The following strategic focus areas symbolize current and emerging strengths and opportunities that were identified during the planning process. Each represents an area where AOA is well positioned (with continued commitment, synergistic energy, and strategic investment of resources) to ignite measurable, outcome-related impact for their current and future members and the communities they serve in.

The focus areas are not intended to exclude or minimize the importance of the AOA's many other endeavors that exist across a variety of other efforts. Rather, for AOA's particular planning process, they are areas of opportunity that the AOA believes merit more attention and investment in the near term. They do not replace or diminish the importance of and investment in any other academy priorities.

The strategic planning process outlined in this document is organized in four priority areas – Membership Retention and Recruitment, CME, Identity/Distinctiveness and Strategic Partnerships. The plan includes strategies and key considerations for advancement in each of these four areas.





Membership Retention and Recruitment

One of the most important measures of your association's vitality is its membership growth – the compound result of recruitment and retention. However, member satisfaction is the highest priority.

The AOA recognizes the importance of continuous evaluation and improvement to help advance their members' professionally and personally in all stages. Ultimately, while providing quality benefits and support to its current members, AOA must also continue to consider the needs of prospective members.

Strategies:

- ✓ Enhance member benefits for all demographics. Specifically, AOA will further evaluate, develop and or provide the following:
 - The e-journal and virtual library
 - A Membership Committee
 - Help establish, guide and support a mentor program that provides connection to all members at all stages of life
- ✓ Develop a web-based timeline with customized member benefits for all stages of life (i.e., residents, new graduates, established, and matured/retired). Specifically, AOA is evaluating developing and or providing the following:
 - **Students/Residents:**
 - A member-led ambassador program to osteopathic medical schools within member communities.
 - An updated web page specific to residents that provides the following:
 - A centralized portal that engages and promotes collaboration with other residents (e.g., link to past meeting apps and slides from lectures)
 - Financial and technical resources for grant writing and research
 - A resident-led forum to post and access modules
 - A schedule of Resident (RAOAO) Meetings at the Postgrad and Annual Meetings and summary of discussion topics from each meeting.
 - Suggest addition of points for RAOAO leadership and emerging young for the Award of Fellow Application Leaders
 - Evaluate the feasibility of providing research app-based communication (e.g., GroupMe) and use of Blackboard
 - **New Graduates:**
 - Explore opportunities to discount membership/dues during first year in practice
 - Provide information on financial resources
 - **Established:**
 - Provide board review information

- **Matured/Retired:**
 - Provide retirement planning resources online and information on locum tenens/alternate opportunities
- ✓ Enhance connection to and benefits for Program Directors.
- ✓ Evaluate and enhance social media presence (e.g., review analytics on a regular basis).
- ✓ Explore ways to engage the Female Orthopedic Group.
- ✓ Encourage more applicants for the Award of Fellow through increased marketing and outreach.
 - Update application to enable a more user-friendly process



Physicians rely on accredited continuing medical education as one of the support systems that helps them continuously improve their practice and their care of patients. Participation in accredited CME helps physicians meet requirements for maintenance of licensure, maintenance of specialty board certification, credentialing, membership in professional societies, and other professional privileges. It is a critical time for CME to address the competency and performance gaps of physicians, as CME connects current practice to best practice.⁵

AOAO members strongly believe they must ensure Osteopathic CME that is distinct from other programs.

Strategies:

- ✓ Determine new and innovative ways to enhance educational activities for all demographics. Specifically, AOAO will further evaluate, develop and or promote/provide the following:
 - Explore courses for board review
 - Future of skills lab
 - More resident focused workshops/sessions
 - Symposia with panel giving 5-7-minute lectures and Q & A
 - Use of audience response
 - Consider combined sessions with specialties (i.e. peds/sports, peds/trauma, etc.)
- ✓ ACCME accreditation (through AOA or other source) to encourage allopathic attendance.
- ✓ Videos of member testimonials at meetings.
- ✓ Osteopathic principles at meetings.

⁵ ACCME. 2008.



Identity/Distinctiveness

Osteopathic medicine is one of the fastest-growing health care professions in the country. Over the past 30 years, the number of osteopathic physicians (DOs) practicing in the U.S. has more than tripled. Focusing on whole-person care, DOs are fully licensed physicians who practice their distinct philosophy in every medical specialty.

More aspiring physicians are choosing osteopathic medicine than ever before, leading to an increasingly youthful profession. In 2017, more than half of all DOs were age 45 or younger. In 2017, roughly 44% of DOs practiced in non-primary care specialties, such as Osteopathic Orthopedic Surgeons.

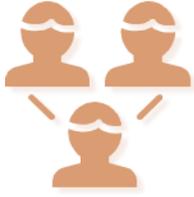
After graduating from osteopathic medical school, DOs complete internships, residencies and fellowships that prepare them to become licensed and board-certified physicians. Growth of osteopathic skills during residency is an important. Trainees in osteopathic-focused residency programs demonstrate achievement of common competencies based on the unique principles and practices of osteopathic medicine.⁶

Throughout the planning process, AOA members stressed the importance of not losing their fundamental identity; their Osteopathic identity. The AOA can be advocates for keeping the identity of D.O.'s strong.

Strategies:

- ✓ Develop strategies to guide Program Directors to achieve Osteopathic Recognition.
- ✓ Direct the Communications Committee with a focused/targeted media campaign to improve/increase identity of the AOA. Specifically, AOA is evaluating developing and or providing the following:
 - A “New Member” Spotlight
 - Videos from all demographic-levels of members at meetings and throughout the year, include exhibitors
 - Fact sheets about AOA (e.g., its relevance and membership information)
- ✓ Schedule formal and information engagement of Student (SAOA) and Resident (RAOA) Ambassadors to local/regional medical schools. Including, developing a formal process to engage various members and increase the AOA identity.
- ✓ Create criteria and method of recognition for the establishment of an award for outstanding residency programs.

⁶ 2017 American Osteopathic Association. 2017 OMP Report.



Strategic Partnerships

Partnerships must be strategically aligned, as meaningful collaboration leads to significant achievement. Partners must collectively put critical resources, knowledge, and experience on the table for a unified overall goal.

AOAO must focus on impact through partnerships, by leveraging and enhancing their identity, while simultaneously building membership retention. AOAO will strength existing relationships and continue to build synergistic relationships.

Strategies:

- ✓ Further define partnership(s) for the osteopathic orthopedic profession. Specifically, the AOAO will:
 - Explore opportunities to partner with the American Academy of Orthopaedic Surgeons (AAOS) for advocacy purposes
 - Enhance their relationship(s) with corporate sponsors
 - Enhance outreach to advanced/allied health providers through CME offerings and member benefits
 - Maintain a healthy relationship with the American Osteopathic Association (AOA), while encouraging members to become active in their state associations to have a bigger voice in the AOA.
 - Maintain a healthy relationship with the American Orthopaedic Association (the other AOA), while encouraging more Program Director involvement.
 - Establish a task force to evaluate potential collaboration with OrthoBullets
 - Continue to support the AOAO Foundation through available resources