American Head and Neck Society

Strategic Plan

2016-2018

MISSION

Advance Education, Research and Quality of Care for the head and neck oncology patient.

VALUES

The members of the American Head and Neck Society are committed to the following values:

- Patient Centered
- Ethical
- Collaborative
- <u>Innovative</u>
- Value Based
- Global

Goals

<u>Education</u>: To be the premier educational resource for head and neck surgery and oncology.

Research: To be the leader in the promotion of head and neck cancer research.

Membership: To maximize member engagement

<u>Organizational Capacity</u>: To have sufficient organizational capacity to achieve the Mission.

GOALS, OBJECTIVES AND STRATEGIC INITIATIVES

EDUCATION

<u>Goal</u> – To be the premier educational resource for head and neck surgery and oncology.

Objective 1 – Provide accreditation for head and neck and thyroid training programs.

Strategic Initiatives:

- 1. Establish external validation with key accreditation agencies in the field of head and neck cancer. Priority 1; Key Participants ATC and Educational Consultants as required.
- 2. Develop critical curriculum components for reconstruction, skull base, endocrine and emerging treatment paradigms *Priority 1, Key Participants ATC and Educational Consultants as required.*

<u>Objective 2</u> – Provide contemporary educational programs and materials across the continuum of providers' careers.

Strategic Initiatives:

- 1. Develop cutting edge education programs and materials that meet CME and MOC requirements., Priority 2, Key Participants Program Committee, CME Committee, Quality Committee, ABO and AAO Liaisons, Consultants as required and approved by Council.
- 2. Develop a member needs assessment and business options regarding the development of an AHNS-owned Journal focusing on practice issues and translational research. Priority 1, Key Participants Task Force and Journal Consultant.
- 3. Develop plans and options for advancing interdisciplinary education opportunities amongst healthcare providers in head and neck cancer. Priority 2, Key Participants Education Committee and sub committees.
- 4. Identify key communication opportunities with medical students and residents for advocating the specialty of head and neck cancer care. Priority 2, Key Participants Education Committee and sub committees.

<u>Objective 3</u> – Serve as <u>the</u> educational resource for patients and the public in head and neck cancer care.

Strategic Initiatives:

- 1. Determine needs, assess current available materials and provide relevant material appropriate for patients. Priority 3, Key Participants Survey and Web and Education Committees.
- 2. Advocate for head and neck care in public health initiatives through an integrated education program. Priority 3, Key Participants Patient Groups, Education Committee.

RESEARCH

Goal - To be the leader in head and neck cancer research.

<u>Objective 1</u> – Promote research through support of training grants and career enhancement grants.

Strategic Initiatives:

- 1. Develop critical plans and business models that will expand the corpus of the Foundation to meet AHNS grant needs on a continuing basis. Priority 1, Key Participants Foundation and Council.
- 2. Develop business plans and recommendations to create interactive webinars on grant writing and clinical trial design and plans that will mentor applicants for clinical trials and grant programs. Priority 2, Key Participants Web and Research Committees and Consultants as needed.

<u>Objective 2</u> – Facilitate collaborative research through Society-supported research initiatives.

Strategic Initiatives:

- 1. Develop plans and budgets for collaborative research projects for seed funding and recommend same to Council for approval. Priority 2, Key Participants Research Committee.
- 2. Prepare a plan and oversee regular communication with the membership regarding research activities, clinical trials cooperative groups, including directions and opportunities for member engagements in these activities. *Priority 3, Key Participants Research Committee.*

<u>Objective 3</u> – Manage the future directions and role of the AHNS regarding outcomes, quality measurements, practice guidelines and consensus statements.

Strategic Initiatives:

1. Develop an integrated research plan that covers programs, financing and staffing. Priority 2, Key participants – Task Force, Staff and Consultants as required.

MEMBERSHIP

Goal – To maximize member engagement.

Objective – Provide meaningful opportunities for member engagement.

Strategic Initiatives:

1. Develop and conduct an annual member needs assessment survey to identify critical areas to assist AHNS in effectively achieving its Mission and adding member value. Priority 1, Key Participants - Broad based Task Force.

Objective 2 – Expand member engagement by x per cent over the three years of the strategic plan.

Strategic Initiatives:

- 1 Assess and make recommendations to Council regarding the organizational structure e.g. committees, programming/meeting structure and leadership selection and succession that will foster greater member participation.

 Priority 1, Key Participants Task Force on Leadership, Staff and Consultants as required.
- 2. Review, discuss and recommend new opportunities for member engagement and create the necessary plans and costs e.g. interest groups, liaison roles, speaker bureaus, collaboration guidelines and opportunities. *Priority 2, Key Participants Task Force, Officers and Staff.*

<u>Objective</u> – Increase membership by x per cent over the three years of the strategic plan.

Strategic Initiatives:

1. Determine member growth opportunities, identify strategies to engage new member areas, evaluate and revise membership criteria if necessary. Priority 2, Key Participants - Credentials Committee.

ORGANIZATIONAL CAPACITY

Goal - To have sufficient organizational capacity to achieve the Mission.

Objective 1 – Ensure adequate financial resources

Strategic Initiatives:

- 1. Regularly assess financial needs through a strict annual budget process, quarterly review of financial reports and management updates. Priority 1, Key Participants Creation of a new Financial Services Group to include Members, Staff and Consultants as needed.
- 2. Identify new revenue sources and prepare key option recommendations regarding uses and oversight e.g. investments, philanthropy, industry revenue programs and membership. Priority 2, Key Participants Financial Services Group, Staff and Consultants as needed.

Objective 2 – Ensure adequate management capacity i.e. personnel.

Strategic Initiatives:

- 1. On a regular basis, at least annually, assess staff needs and available staff support/resources and reconcile the two and report annually to the Council on findings and plans to appropriately address any gaps. Priority 1, Key Participants Executive Committee, Staff and Management Company.
- 2. Establish management company biannual performance metrics and accountability measures and report to Council every six months on performance issues and gaps. Priority 1, Key Participants Executive Committee and Staff.

Objective 3 – Ensure adequate governance and oversight of AHNS activities.

Strategic Initiatives:

- 1. Regularly review the committee structure required to fulfill the Mission and evaluate the need for key sections within AHNS i.e. Endocrine, Fellowships and others as needed. Priority 1, Key Participants Executive Committee, Staff and Consultants.
- 2. Conduct a regular audit of the Executive Committee and Council to ensure relevance to the Mission and routinely reassess the overall leadership structure, processes and function. Priority 2, Key Participants Executive Committee, Staff.

Definition of Priority Key

Priority 1 – Begin immediately and an update is expected in six months and twelve month intervals. The project could be ongoing or it could be concluded within a defined time frame. All reports are for Council or the Executive Committee.

Priority 2 – Anticipated to begin in year 2, but could be upgraded based on environmental issues and completion of priority 1 projects.

Priority 3 – Anticipated to begin in year 3 but requires continuous monitoring.

Summary Statement – It is critical that this plan be reviewed at every Council Meeting and that updates are given by the Executive Director or Officers as deemed appropriate.