

## ASA2020 Vision for the Future, Contract with our Community

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Paul Pomerantz, Chief Executive Officer

# Goals

Goal	Benefit
1. Member and data driven	<ul style="list-style-type: none"><li>• Member input and validation</li><li>• SWOT and environmental assessments</li></ul>
2. Drives accountability and resource prioritization guidance	<ul style="list-style-type: none"><li>• Establishes expectations</li><li>• A tool for decision making</li></ul>
3. 18 to 36 months rolling window	<ul style="list-style-type: none"><li>• Proactive visioning</li></ul>
4. Both iterative and nimble	<ul style="list-style-type: none"><li>• Adapt and revise as needed</li><li>• Supports continuous improvement</li></ul>
5. Optimize the use of intellectual and financial resources	<ul style="list-style-type: none"><li>• Optimize the use of intellectual and financial resources</li></ul>
6. Guide deemphasizing resources	<ul style="list-style-type: none"><li>• Critical Assessment's enduring process will ensure alignment of resources and strategic priorities</li></ul>

# Continuous Cycle



# Iterative and Nimble



# Strategic Planning Process and Timeline

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- AC completed online survey in February
- Potential Pillars and Priorities presented for AC discussion, refinement and validation in March
- AC Priorities are DRAFTS to provide a starting point for developing tactics and budgets
- March – May → AC and staff leads refine pillars and identify potential tactics
- AC reviewed/updated plan documents and prioritize tactics at June Retreat

# Strategic Planning Process and Timeline

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- June 26: AC approved core budget excluding strategic tactics
- July 20: AC approved 2018 tactic budgets to present to BOD in August
- Tactics not prioritized are considered for 2019 and 2020, or sooner if appropriate

# Pillars of ASA2020



# Strategic Planning Pillars

Pillar	AC Leads	Staff Leads
I. Advocacy	Jeff Plagenhoef Jim Grant	Manuel Bonilla
II. Quality and Practice Advancement	Stan Stead Ronald Harter	DeLaine Schmitz Roseanne Fischhoff
III. Educational Resources	Beverly Philip John Dombrowski	Brian Reilly Chris Wehking
IV. Member Experience	Linda Mason Ken Elmassian	Tom Conway Brian Reilly
V. Health Systems Leadership	Jim Grant	Paul Pomerantz Alex Hannenberg
VI. A. Organizational Excellence/ Internal Operations	Dan Cole Mary Dale Peterson	Tom Conway Jeremy Lewin
VI. B. Organizational Excellence/Growth and Business Development	Patrick Giam Michael Champeau	Paul Pomerantz Chris Wehking



# Mission

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Describes what business the organization is in (and what it isn't) both now and projecting into the future.



Microsoft

Vision for the future  
**ASA2020**  
Contract with our members

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***At Microsoft, our mission is to enable people and businesses throughout the world to realize their full potential. We consider our mission statement a commitment to our customers.***



*Our mission is to provide a global online marketplace where practically anyone can trade practically anything, enabling economic opportunity around the world.*



# Cleveland Clinic

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Vision for the future  
**ASA2020**  
Contract with our members

*To provide better care of the sick,  
investigation into their problems,  
and further education of those who  
serve.*

*“Advancing the Practice and  
Securing the Future.”*

Who do you want to be one day?

Beyond day to day operations and moves to a long term vision



Microsoft

Vision for the future  
**ASA2020**  
Contract with our members

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*To help individuals and  
businesses realize their full  
potential*

*To organize the world's  
information and make it  
universally accessible and useful*





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*To be Earth's most customer-centric company, where customers can find and discover anything they might want to buy online.*

***Be a model health system by  
providing extraordinary care and  
superior service at an affordable  
cost.***

***“A world leader improving health  
through innovation in quality and  
safety.”***

- Your compass
- Describe the desired culture
- Guide the perspective of the organization

- Integrity and honesty.
- Passion for customers, partners, and technology.
- Open and respectful with others and dedicated to making them better.
- Willingness to take on big challenges and see them through



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- We believe that we're on the face of the Earth to make **great products**.
  - We believe in the **simple**, not the complex.
  - We believe that we need to **own and control** the primary technologies behind the products we make.
  - We participate only in markets where we can make a **significant contribution**.
  - We believe in saying no to thousands of projects so that we can really **focus** on the few that are truly important and meaningful to us.
  - We believe in **deep collaboration and cross-pollination** of our groups, which allow us to innovate in a way that others cannot.
  - We don't settle for anything less than **excellence** in every group in the company, and we have the self-honesty to admit when we're wrong and the courage to change.



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- Great products
  - Simple
  - Own and control
  - Significant Contribution
  - Focus
  - Deep collaboration and cross-pollination
  - Excellence

- ***Integrity***
- ***Trust***
- ***Excellence***
- ***Accountability***
- ***Mutual Respect***





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- *Warmth and Belonging*
  - *Challenge the Status Quo*
  - *Be present*
  - *Deliver our best in all we do*
  - *Performance drive through the lens of humanity*

# UNITED



Vision for the future  
**ASA2020**  
Contract with our members

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- *Fly Right*
  - *Fly Friendly*
  - *Fly Together*
  - *Fly Above and Beyond*

# Values

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- AC members ranked ASA value statements that were developed during the retreat.
- AC refined and finalized the values during its meeting in August.

## Common Value Themes/Unique ASA Themes:

- *Patient Safety/Patient Centeredness or “Patient and Family Centered”*
- *Professional Commitment or “Professionalism” or “Professional Citizenship”*
- Innovation (this was noted to being similar to “Advancing Scientific Discovery”)
- Continuous Improvement or “Quality” or “Continuous Quality Improvement”
- Teamwork (it was noted that this could possibly be eliminated as it can be incorporated into the other values)
- Leadership
- “Advancing Scientific Discovery” or “Acquisition of New Knowledge/Research” or “Discovery” or “Scientific Discovery”
- “Education”
- Physician-led Care
- “Compassion” or “Empathy” (it was noted that perhaps this could be incorporated into patient safety or physician-led care)

- ***Patient Safety***
- ***Physician-Led Care***
- ***Scientific Discovery***

# Top 7 Prioritized Tactics

Tactic	Description
<i>Advocacy 5:</i>	Increase federal funding for anesthesia research for vulnerable populations (e.g., SmartTots and Brain Health Initiative). <b><i>Budget impact slide 33.</i></b>
<i>Advocacy 6:</i>	Enhancement of Committee on Governmental Affairs outreach efforts by redefining mission and duties of the CGA to further develop key contacts with government officials. Utilize existing features in ASA's current grassroots software program, Quorum, no incremental expense. <b><i>No budget impact.</i></b>
<i>Advocacy 7:</i>	Six-month pilot effort focused on measurably improving postoperative opioid pain management by providers, clinicians and patients/families. Formally participate in the 2018 National Rx Drug Abuse & Heroin Summit. <b><i>Budget impact slide 33.</i></b>

# Top 7 Prioritized Tactics (continued)

Tactic	Description
<i>Quality and Practice Advancement 2b/4a:</i>	Development of a one-stop branded microsite that will consolidate ASA with other external and support resources, host MACRA Conference and Workshops and one or two-day ONSITE consultation focused on MACRA Reporting and compliance. <b><i>Budget impact slide 33.</i></b>
<i>Education 9:</i>	Appoint an Ad Hoc Committee to work with staff to study options and develop a business plan for providing accredited continuing education to Anesthesia Care Team members. <b><i>No budget impact.</i></b>
<i>Growth and Business Development 4:</i>	Conduct a comprehensive market assessment of membership growth opportunities and also ASA's overall market opportunities. <b><i>Budget impact slide 33.</i></b>

# Top 7 Prioritized Tactics (continued)

Tactic	Description
<i>Health Systems Leadership 4:</i>	Research other organizations and what they do to develop future leadership, resources committed, tracking mechanisms used, and identify leadership needs for the organization as well as prepare members for leadership positions in health systems, business and government. <i>Budget impact slide 33.</i>



# Report 322-1.2 – Final 2018 Tactics

	2017		2018		Total
	Opex	Reserve	Opex	Reserve	
<b>ADV 5 - Identify opportunities to engage Federal policy makers to support increased federal funding for anesthesia research for vulnerable populations (e.g., Smart Tots and Brian Health initiatives).</b>					
A. Lobbyist to increase federal funding. Funded via OPERATING EXPENSE			(144,000)		(144,000)
B. Brain Summit. Funded via RESERVES				(56,000)	(56,000)
<b>ADV 7 - Implementing national initiative on opioid abuse/pain medicine, specific tactics in development.</b>					
A. Contracted project manager. Funded via RESERVES				(200,000)	(200,000)
B. National Rx Drug Abuse & Heroin Convention. Funded via RESERVES				(50,000)	(50,000)
<b>QPA 2b/4 - Expand MACRA Education via Microsite related to comprehensive MACRA plan (QPA2) and further expansion of quality consulting services.</b>					
2. MACRA Conference and Workshops. Funded via OPERATING EXPENSE			33,909		33,909
3. Provide a base offering to members for a one or two-day ON-SITE consultation focused on MACRA Reporting and compliance with quality payment programs based upon quality management, departmental administration and quality data collection/analysis.			30,000		30,000
A. Engage outside consultant. Funded via RESERVES.				(40,000)	(40,000)
B. 2 day pre-launch training in Schaumburg. Funded by RESERVES.				(17,280)	(17,280)
C. On-site visits. Funded by OPERATING EXPENSE.			(12,000)		(12,000)
<b>GBD 4 - Continued development of evolving membership growth strategy as well as the product development, marketing and sales strategies for international physician anesthesiologists and anesthesia care teams, including market assessments.</b>					
Conduct a comprehensive market assessment of membership growth opportunities and also ASA's overall market opportunities,		(50,000)		(100,000)	(150,000)
<b>LDS 4 - Expand leadership development programs.</b>					
Research other organizations and what they do to develop future leadership, resources committed, tracking mechanisms used, and identify leadership needs for the organization.		(50,000)			(50,000)

**TOTAL - (100,000) (92,091) (463,280) (655,371)**

# ASA2020: Small Group Discussions

# ASA2020 Small Group Discussions

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- Table moderators, you have a sheet of paper on your table. For the next 15 minutes, please facilitate a conversation at your table to answer the questions. I ask that at each table one person serve as a table moderator and one person serve as a scribe, recording the group's responses on the provided sheet of paper. Staff will collect these at the end of the session. When the 15 minutes has concluded, we will ask for a few table moderator volunteers to report out their table's responses to the full group. Please begin your discussions now.

# Topic: ASA2020

Regarding the strategic pillars and prioritized tactics presented, are there additional objectives or tactics that you would like the AC to consider for 2018 or 2019? If yes, please list below.

How would you measure success for the presented strategic pillars and/or prioritized tactics?

Please provide any feedback regarding the vision statement and/or values.

# ASA2020 Group Report Out

- It's time to come back to the full group. David Broussard will moderate this report out for the next 10 minutes, and help us to summarize the outcomes from table discussions.

## Instructions

- 1) A few table moderators will be asked to volunteer to provide a 1-2 minute recap of his/her table's discussion for the topic area report out.
- 2) The moderators that follow the first moderator should present:
  - What did your group discuss that was different?
  - What would you add to what has been presented?
- 3) Let's discuss the topic as a group

## Q&A