



Council of Pediatric Subspecialties (CoPS)

www.pedsubs.org

Strategic Direction

2011 – 2015

Goals

Four goals were set to deliver value to subspecialty societies and pediatric organizations. The intent being to distinguish the Council from other organizations – and not overlap in their own areas of competencies – while delivering a forum of expertise and a ready network of collaboration.

The goals areas include:

- I. Network of Subspecialty Organizations
- II. Source of Expertise
- III. Workforce Development Focus
- IV. Sustainability and Strength of CoPS

L=Later

<i>I. Network of Subspecialties¹ – Recognize CoPS as an effective and efficient pediatric subspecialty network for communications and issues development.</i>	
A. Establish a Network Designed to Serve Pediatric Subspecialties	
Establish relationships and lines of communications that create an integrated network <ul style="list-style-type: none"> • Benefits of membership for groups delineated in Summer 2011 • ListServ created in Spring 2012 • Newsletters/updates every two months 	2011 (ongoing)
Determine process for vetting issues <ul style="list-style-type: none"> • Process for vetting and responding to issues developed 	2011 (completed)
Outline the issues that CoPS and its integrated network can best address <ul style="list-style-type: none"> • Action teams: <ul style="list-style-type: none"> ○ SCTC: Created Summer 2011; completed Summer 2013 ○ PEEAC: 3rd biannual meeting, CoPS joined co-sponsorship spring 2011; expanded in 2012; recent meeting held fall 2013 with success ○ Fellowship Readiness: Created Spring 2012 ○ Fellowship Start Date: Created Spring 2013 	2012 (ongoing)

¹ The Network is the *product*.

<ul style="list-style-type: none"> • EPAs • MOC • ACGME subspecialty program requirements – reviewed and commented 	
<p>Identify CoPS's relationships to <i>other</i> (i.e NEW) pediatric subspecialty organizations' goals and activities</p> <ul style="list-style-type: none"> • Invite to be a member of CoPS (June 2013): <ul style="list-style-type: none"> ○ Pediatric Hospitalists (invited) ○ Council on Medical Student Education in Pediatrics (COMSEP) • Invite to annual meeting (2014) <ul style="list-style-type: none"> ○ Pediatric Surgery • Pediatric Anesthesia Consider inviting to be a member of CoPS (2014) <ul style="list-style-type: none"> ○ Pediatric Urology ○ Pediatric Orthopedics ○ Pediatric ENT ○ Pediatric Neurosurgery ○ PM&R 	2012 (ongoing)
<p>Develop functional model for effective, efficient communications amongst the pediatric organizations' community</p> <ul style="list-style-type: none"> • Benefits of membership delineated (Summer 2011) • CoPS ListServ (Spring 2012) • Consider creating ListServ of ListServes (2013)-work with administrators 	2011 (ongoing)
<p>Provide a rapid response to facilitate communications within the profession</p> <ul style="list-style-type: none"> • Process for vetting and responding to issues developed 	2011 (completed)
<p>B. Develop a Portfolio of Consulting Areas in Which CoPS can Provide a Consultant/Service</p>	
<p>Create a record of past successes and areas for future endeavors</p> <ul style="list-style-type: none"> • First 5 years paper (Summer 2012) • Newsletters/Updates • PEEAC (2011, 2013) • Strategic planning document • Action Team Reports 	2011 (ongoing)
<p>Multiple interests where CoPS can serve as a forum and or use its network</p> <ul style="list-style-type: none"> • Collaboration with other organizations <ul style="list-style-type: none"> ○ ABP: SCTC, EPAs, MOC ○ ACGME: Milestones ○ APDIM, ASP, APDS: Fellowship Start Date ○ APPD: Fellowship Readiness and Fellowship Start Date ○ FOPO: Peds Training ○ NRMP: match ○ AMSPDC: Education Committee ○ COMSEP: Career Guidance • 	2012 (ongoing)
<p>Serve as a communications network to help subspecialty organizations market their education and issues</p> <ul style="list-style-type: none"> • Develop a process/guidelines for <ul style="list-style-type: none"> ○ determine criteria whether the issue has multi-subspecialty appeal <ul style="list-style-type: none"> ▪ submission form: include start/end date for duration of posting 	2012 (initiated)

<ul style="list-style-type: none"> ○ method of dissemination <ul style="list-style-type: none"> ▪ CoPS ListServ ▪ Updates ▪ Calendar of events on website ▪ ListServ of Listservs ○ fees: members free? Charge for non-members? ○ examples: leadership conferences, content of cross discipline interest 	
<p>C. Promote the value of CoPS among pediatric colleagues</p>	
<p>Promote the value (services) of CoPS</p> <ul style="list-style-type: none"> • Disseminate a portfolio of accomplishments <ul style="list-style-type: none"> ○ Updates ○ First Five Years Paper ○ Presentations at APPD/PAS/PEEAC 	<p>2012 (ongoing)</p>
<p>D. Effective Communication Strategies: External and Internal</p>	
<p>Social Media</p> <ul style="list-style-type: none"> • Evaluate practicality and value 	<p>2012 (initiated)</p>
<p>Maintain and enhance website</p> <ul style="list-style-type: none"> • Communications Committee assignment: consider restoring bulletin board for responses and examining website functionality to enhance bidirectional communication. 	<p>2011 (ongoing)</p>
<p>Develop a comprehensive database</p> <ul style="list-style-type: none"> • PDs: e-mail addresses from ACGME; updated twice a year; all CoPS subs • Leaders of organizations (include sub-board chairs, if applicable): office calls to obtain e-mail addresses; update 6-12 months; go to reps as secondary resource. Also obtain url address, if there is one. Consider resurveying reps. • Fellows: consider as task for later <p>Subspecialists: tabled. Not an element of the current strategic plan</p>	<p>2011 (completed except for fellows)</p>
<p>Improve brand identity of CoPS in the pediatric community</p> <ul style="list-style-type: none"> • CoPS ListServ 	<p>2012 (completed)</p>
<p>II. Source of Expertise – Position CoPS as a resource for sharing and developing expertise among pediatric subspecialties.</p>	
<p>A. Identify the important issues (i.e. health care system reform, medical home, subspecialist referrals, reimbursement, fellowship training, etc.).</p>	
<p>Approach collaborating organizations to identify how CoPS processes can assist them in achieving their goals</p> <ul style="list-style-type: none"> • AAP-disseminate information about legislative affairs • Internal Medicine: APPDIM/ASP(start date) • Surgery 	<p>2013 (ongoing)</p>
<p>Select at least one issue annually that positions CoPS as a leader in expertise and collaboration</p> <ul style="list-style-type: none"> • ABP Subspecialty Clinical Training and Certification Initiative (2011-2013) • Fellowship Readiness (2012-2013) • Fellowship Start date (2013-2015) • EPAs (2013-) • Common Match Date (ongoing) • Subspecialty Descriptions (ongoing) 	<p>2011 (ongoing)</p>

<ul style="list-style-type: none"> • Resource Center (central location on web to post leadership programs) - ? • Social Media TF ? • ABP Part IV MOC; Cost of Boards - ? • COMSEP career pathways - ? 	
<p>Identify issues that CoPS can optimally manage as a third party, reflecting its work product expertise</p> <ul style="list-style-type: none"> • Fellowship start date • EPAs-dissemination, promoting discussion and feedback 	2013 (ongoing)
B. Develop functional process and model for expert collaboration.	
<p>External collaboration– Relationships with other organizations and subspecialty societies</p> <ul style="list-style-type: none"> • First step-Process for vetting issues developed (Summer 2011) • Building collaborations with other groups <ul style="list-style-type: none"> ○ ACGME ○ NRMP ○ ERAS ○ PPC 	2011 (ongoing)
<p>Internal collaboration mechanisms</p> <ul style="list-style-type: none"> • CoPS ListServ 	2012 (ongoing)
C. Promote, sustain, and enhance partnerships and synergize with others in the pediatric community.	
<p>Identify and establish CoPS network of experts</p> <ul style="list-style-type: none"> • EPA Preliminary meeting • ACGME at Annual Meeting 	2013 (ongoing)
<p>Identify and utilize appropriate venues to demonstrate and expand the role and activities of CoPS</p> <ul style="list-style-type: none"> • PEEAC • Posters & presentations • Webinars 	2013 (ongoing)
III. Workforce Development Goal – Focus on issues of workforce development, curriculum and job satisfaction.	
A. Be the pediatric subspecialties program knowledge center.	
<p>Form working groups to explore existing resources and establish new programs</p> <ul style="list-style-type: none"> • Collaboration with FOPO on future education of trainees • Fellowship readiness Action Team • Process to disseminate information from subspecialties 	2012 (initiated)
<p>Develop regional hubs of subspecialty education</p> <ul style="list-style-type: none"> • Possibilities for webinars: <ul style="list-style-type: none"> ○ Creating EPAs/milestones ○ Giving feedback 	2013
B. Serve as a pediatric subspecialty recruitment source.	
<p>Improve Recruitment Strategies by raising awareness of CoPS resources among trainees, subspecialty organizations and subspecialists</p> <ul style="list-style-type: none"> • Work with APPD, AAMC, AMSPDC, and COMSEP to promote subspecialty descriptions on website 	2013
<p>Promote and track utilization of CoPS website</p>	2012

<ul style="list-style-type: none"> • APPD poster • Website data 	(ongoing)
Increase medical student/resident research with pediatric subspecialists	L
Promote scholarships for medical students and residents to attend subspecialty meetings	L
Increase subspecialty visibility at national meetings	L
Potentially use social networking sites to reach medical students and trainees	2013
Create and promote job boards <ul style="list-style-type: none"> • Consider for non-subspecialty specific jobs, i.e. chair, DIO, Dean 	L
Solicit disease based organizations (parents) for support of subspecialist training to meet children's needs	L
C. Be a pediatric subspecialty professional development resource	
Partner with existing leadership training programs and identify gaps in existing resources	2013
Survey and catalog leadership training programs/bootcamps for trainees, subspecialists and program directors	2013
Include listing and URL link to leadership courses on CoPS website	2013
Partner with organizations to fill gaps in leadership training/professional development	2013
Emphasize the importance of professional development	L
D. Be the quality-of-life resource for the pediatric subspecialties.	
Identify issues with reimbursement, loan repayment and life balance that influence recruitment and retention	L
Partner with other organizations to improve reimbursement / loan repayment for the pediatric subspecialties <ul style="list-style-type: none"> • Cosign letters 	2012 (ongoing)
Conduct focus group(s) with medical students and trainees to gain a better understanding of the current work life balance, the future vision of such balance, and the barriers to subspecialty careers	L
IV. Sustainable CoPS Organization – Create and maintain an effective Council with sustainable resources and leadership	
A. Short-term sustainability	
Develop a budget identifying costs of programs and services and necessary income; appoint a treasurer and/or finance committee <ul style="list-style-type: none"> • Budget developed • Initial treasurer to be appointed • Role of treasurer determined 	2011 (completed)
Prepare a dues schedule immediately to fund 2011 operations and identify support from subspecialty societies and sections <ul style="list-style-type: none"> • Dues structure reviewed • Initial mailing to PAS societies completed in spring 2011 • Dues letter to the remainder of Societies. For AAP sections, invoice may be sent out through reps pending further discussion with AAP leadership • Updated letter for invoices (add ABP initiative) • Basic dues category for subspecialty societies • Registration included for up to two reps for dues categories above basic. For Basic, need to pay for registration. 	2013 (completed)

<ul style="list-style-type: none"> • “Pay to play” mandatory July 2012 • Advise Council of pay to play at annual meeting in October • Can have more than one rep but only two votes per subspecialty • “Liaison” changed to “Allied Pediatric Organization” • FOPO invited guest through July 1, 2013; invited to become a member • By-laws will need to be updated to reflect changes 	
<p>Advise supporting organizations of the repositioning of CoPS and of the services that CoPS can provide</p> <ul style="list-style-type: none"> • CoPS Chair (or designee) to attend meetings of supporting organizations (ongoing) • Distribute copies of strategic plan to organizations (ongoing) • Consider brief paper detailing strategic plan 	2011 (completed; ongoing)
<p>Approach AAP to discuss areas of common interest and where CoPS unique structure can benefit each organization</p> <ul style="list-style-type: none"> • Discussions ongoing 	2011 (ongoing)
<p>Finalize the selection process of Council representatives to optimize continuity</p> <ul style="list-style-type: none"> • Responsibility of member organizations/societies 	2012 (completed)
<p>Ensure Executive Committee leaders involvement in governance and Council informed</p> <ul style="list-style-type: none"> • Involvement of Council in task forces • Monthly calls of Executive Committee • Bi-Monthly e-mails (<u>brief</u> updates/progress) • Process for responding to issues delineated which addresses this issue 	2011 (ongoing)
B. Long-term sustainability.	
<p>Annually review financial commitments to ensure long-term sustainability</p>	2012 (ongoing)
<p>Consider establishing financial relationships with other organizations/groups of common interest</p>	2013
<p>Explore feasibility and legality of leasing database</p> <ul style="list-style-type: none"> • Discussed: not feasible 	2012 (completed)