STRATEGIC PLANNING
MSA Resources

FACILITY ENGAGEMENT
Specialist Services Committee

Introduction

A strategic plan clearly outlines an organization's vision, mission, goals, and objectives. It explains where the organization is headed, how it will get there, and how it will measure whether its goals have been achieved. The plan serves as a roadmap for decision-making and resource allocation over a defined period, typically two to five years.

Strategic planning guides the direction and work of your organization. The benefits include:

- Creating an opportunity to discuss priorities and gain feedback from members.
- Ensuring MSA-funded activities are working towards an overall mission/vision.
- Enabling better MSA decision-making within a finite budget and time.
- Articulating MSA priorities to external partners when opportunities for engagement arise.

There are many ways to approach strategic planning, but general principles can be adapted to the circumstances and needs of the Medical Staff Association (MSA). The first step is to identify who should be involved in your strategic planning process. Facility Engagement (FE) recommends undertaking a collaborative approach with your health authority (HA) partners in strategic planning; working together to identify areas of alignment can lead to enhanced uptake and implementation of key activities. From an MSA perspective, the membership voice should guide priority setting, so there needs to be member engagement to inform the process. Seeking member input through engagement events, surveys, and discussion groups will provide the information needed to inform the strategic planning process, ensuring the plan represents the membership rather than just the goals of individual or MSA executive members.

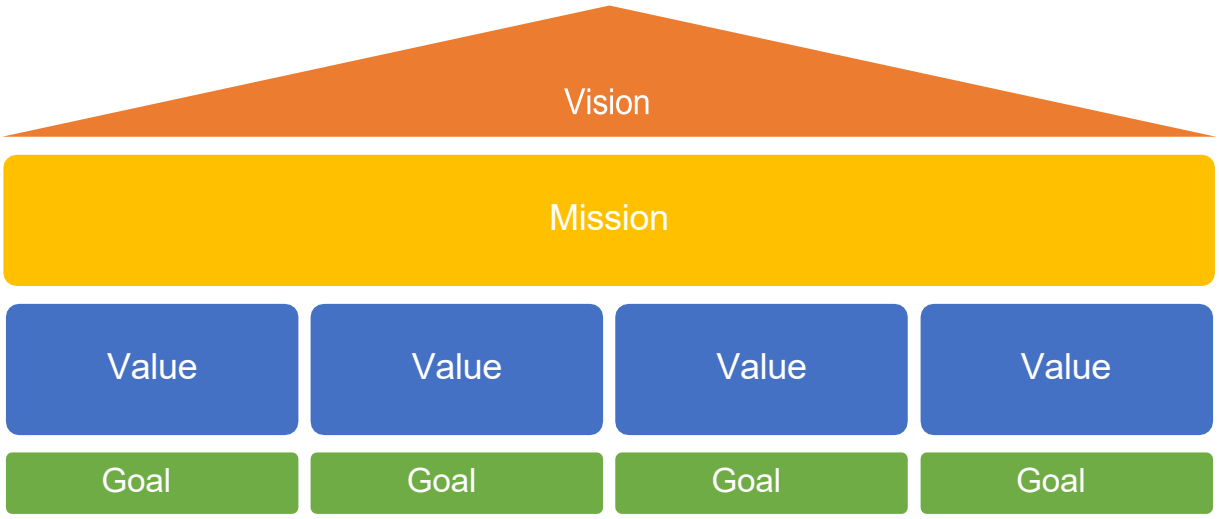
At least three strategic goals should be developed in order to create a strategic plan. These goals should be based on the "current state" discussions of your MSA working group and your key health authority partners. Strategic goals should be revisited each year to ensure they still resonate with the group and that the activities funded by your working group align with them. There is no need to craft new goals if they remain aligned with the group's direction. Best practice is to develop new strategic goals, along with a strategic planning session, every three to four years.

To get you started with strategic planning, the **"Cascade Model"** approach outlined below can help identify vision, mission, values, and goals. Additional resources to support your strategic planning process include:

- some tips on identifying strategic goals
- difference between a strategic plan and a work plan
- ten examples of strategic goals from participating MSAs around the province
- criteria for assessing current goals to ensure relevancy to the group
- prioritization and gathering medical staff input

The Cascade Model

One approach to breaking down the goals, values, mission and vision is to use the Cascade Model to guide the discussion. Using Post-it notes and Bristol board can actively engage all participants and facilitate quick changes, as items can be easily moved around, added, or removed. The completion of a framework like this can realistically be done in two hours with 10 people.



Vision, mission, and values

The vision, mission, and values of your MSA form the foundation for developing your strategic priorities, goals, and objectives for the organization. This, in turn, sets the direction and guides your decision-making.

Vision

The long-term ideal future that your organization is working towards. Vision statements are very aspirational about the future you want to create and should align with the **MOU on Local and Regional Engagement** and your HA strategic priorities.

Vision statements can be tricky to craft – one approach that might be helpful is to start with priorities and work backwards to the vision. This will allow participants to ground their thoughts in something tangible and enable the note-taker/facilitator to capture the key words and statements that can then be molded into a vision statement later on.

Mission

Your purpose or what you will do, with or for whom you do it, in broad terms, to make your vision a reality. It sets the boundaries of the MSA's activities—what the MSA is, what it aims to achieve, and who the target group of the work is.

Values

The guiding principles and ethics that your group stands for and inform how your group will operate and what you believe in. It answers the question "how do we carry out our mission?"

Goals

Clear and simple statements that act as signposts for what your MSA wants to achieve to support its vision and mission. They reflect the key issues, priorities, or areas of change your MSA wants to focus on over the longer term. Goals provide direction and may take several years to achieve. This is not your work plan. Your goals should provide direction and inform the development of annual objectives and activities in your work plan.

TEMPLATES

FE Strategic Planning Presentation – to adapt to your region
Strategic Plan Report
One Page Strat Plan

Work Plan

A work plan is a planning document that helps keep all team members aligned on your key activities. It's more transactional and logistical than it is strategic; it is how you operationalize your strategic goals. The work plan isn't setting a wider strategy to help meet the organization's vision. Instead, it generally outlines the short-term (1-year) key activities and objectives for each goal, who is responsible, the timeframe, the performance measures used to gauge success, and any resources required.

What is the difference between a strategic plan and a work plan?

A strategic plan outlines longer-term goals and how the organization will reach its mission and vision. The work plan complements the strategic plan to bring the tactical, day-to-day duties to life.

Strategic Plan	Work Plan
Roadmap to reach long-term goals	Action plan to achieve short term goals that ladder to the long-term vision
Keeps key partners informed of strategic priorities	Keeps project members on track to meet action items and project goals
Sets measurable (yet sometimes lofty) goals that often require multiple plans to achieve	Sets SMART goals that can be measured clearly by a specific deadline
Mission, vision, values, goals, key activities	Activities, outcomes, actions, tasks, deadlines, budget, specific measures

A work plan may include the following elements:

- Key activities
- Project-specific SMART objectives
- Person responsible
- Key deliverables
- Timelines, including due dates
- Performance measures or evaluation plan
- Budgets

SAMPLE:

Strategic Goal #1:				
Activity	**Activity Description**	**Performance Measures (e.g., indicators)**	**Completion Timeframe**	**Budget**
Activity 1: **…**				

TEMPLATE: MSA Work Plan Template

Strategic Goals – Tips & Examples

The purpose of strategic planning is to identify long-term, high-level goals that provide direction for the MSA's activities. These goals serve as signposts to ensure that activities that receive FE funding are aligned with and contribute to achieving the MSA's vision.

These strategic goals are not projects or activities – they do not have a beginning and an end. Your group will achieve these goals through activities. Your group will know whether these activities have been successful through performance measures.

Here are ten common examples from original strategic plans submitted by MSAs when they came forward for full funding. Feel free adapt or use these in your plan if they accurately capture the group's goal:

Strategic Goals Examples

- Contribute to the development and implementation of plans that impact patient care within the facility.
- Engage in local and regional activities that affect provider work environment and patient care.
- Effectively communicate the medical staff's views to key partners.
- Improve the quality of healthcare service and delivery.
- Improve satisfaction among physicians and allied health professionals.
- Work collaboratively with health authority leadership to optimize physician engagement.
- Strengthen physician leadership.
- Strengthen physician and allied health community within the facility.
- Build relationships with physicians and allied health professionals across facilities.
- Enhance health system performance through use of technology.
- Support our members and connect them with resources to promote physician well-being.

Criteria Matrix for Setting and/or Revisiting Annual Priorities

The matrix below can be used to assist in rating and assessing potential priorities, or in revisiting priorities identified in previous years to see whether they remain important to the group. This approach is best utilized with a larger group (10 or more).

In addition to the matrix below, here are some guiding questions to move this session along:

- What is our group capable of achieving in the next year on this issue?
- How does this issue relate to the criteria in the rating matrix?
- Is this a substantive issue that needs to be addressed, or a process we could incorporate into our work?
- What are the major issues/trends/changes impacting our members?

Issue Description:					
Criteria	Strongly Disagree				Strongly Agree
The issue is aligned with the vision and values set out in the MSA's strategic plan.	1	2	3	4	5
The issue will influence positive change for the medical staff's work environment or patient care.	1	2	3	4	5
The timing aligns with current partner activity (i.e. health authorities, Specialist Services Committee, Doctors of BC, community partners).	1	2	3	4	5
There is an opportunity to influence change on this issue.	1	2	3	4	5
This is a new issue that has not yet been addressed through existing or ongoing work.	1	2	3	4	5
The issue requires urgent attention.	1	2	3	4	5
The benefit of taking strategic action outweighs the risk of doing nothing.	1	2	3	4	5
The issue is relevant to the entirety or majority of our MSA membership.	1	2	3	4	5
	SCORE (8-40 POINTS) =				

Gathering Input and Prioritization Worksheet

This template has been prepared to assist MSAs in the strategic planning process for facility engagement.

Gathering physician input

The first step is to collect input from members, which will help define what engagement means at a personal, medical staff, and facility level, and identify and prioritize areas of concern. The "representativeness" of the working group is a significant element of these discussions, helping capture a cross-section of issues within the facility. MSAs should gather input from as broad a range of physicians and non-physician medical staff as possible within the facility. Once gathered, engagement activities can be selected and funding allocated accordingly to address these locally identified issues.

Medical staff input can be gathered in multiple ways: small- and large-group dialogue with facilitated strategic planning exercises, electronic survey tools, individual interviews, and so on. You can begin by using the discussion questions below.

TEMPLATE: Member Engagement Survey to duplicate and adapt to your site's needs (Microsoft Forms required).

Discussion questions

The following questions are drawn from the Memorandum of Understanding on Regional and Local Engagement (MOU). It is not necessary to use all the questions; use what you need to gather the information you seek.

Physician engagement

- What does physician engagement mean to you?
- What are the challenges and barriers to physician engagement at your facility?
- What are the strengths and opportunities for physician engagement at your facility?

Prioritization

- What's one project the MSA contributes to that you'd fight to protect, and why does it matter?
- If the MSA disappeared tomorrow, what would change? Who would be affected and how?
- What do you feel is the most important work the MSA could be doing that you aren't already?
- What would success look like for the community we serve, 10 years from now, regardless of who's delivering it?
- If you had to name 3 things that the MSA should prioritize over the next 3 years, what would they be?

Issues of importance to physicians

- What are the issues of importance to you as the medical staff?
- How can the working environment be improved for physicians at this facility?
- How can communication with physicians, interprofessional colleagues, and health administrators be improved at this facility?

Strengthening the physician voice

- How can physician advocacy be fostered and improved for patient care and the broader health care system?
- What are the present roles of physicians in organizational decision-making, and how can these be strengthened and improved?
- How can a culture of trust and respect be fostered between physicians and allied health professionals and with health authority leadership?

Describing the facility

Where would you place your facility on the diagram below? Using the descriptors listed, identify where you believe that you, your colleagues, and your facility are in terms of individual capacity and organizational opportunities:

a) Challenged
b) Engaged
c) Powerless
d) Frustrated

Figure 1: Medical Engagement Model (Spurgeon et al, 2008)

