2019-22 Planning Playbook

The American Academy of Osteopathy faces a rapidly changing environment that challenges long-standing ways of creating success. Over the next 48 months AAO will need to compete for members, customers, attention and financial resources. This document reflects the beginning of an ongoing planning process that seeks to ensure the AAO stays agile and maintains a sharp competitive edge.

1. Why the AAO must continue to exist:

Our *why*, our fundamental *raisons d’être*, is embodied in our guiding vision and mission statement.

*We envision a world where all patients are aware of and have access to osteopathic medical care and osteopathic manipulative medicine for optimal health.*

Our *mission* is to teach, advocate, and research the science, art and philosophy of osteopathic medicine, emphasizing the integration of osteopathic principles, practice and manipulative treatment in patient care.

Our *central focus* continues to be the support of osteopathic focused physicians who promote and advance osteopathic principles and practices (OPP) in every patient encounter, and provide high-level skills in utilizing osteopathic manipulative medicine (OMM). We alone have the highest level of education programs on OPP and the greatest number of members with OMM expertise.

*We provide* an essential and needed osteopathic perspective and expertise that permeates and impacts patient care, osteopathic-focused scholarly activity and the osteopathic perspective in medical education. Now, more than ever, the AAO is vital to the future of medicine and health care. Without the AAO, OPP may be diluted, OMM may be diminished, and osteopathic identity and osteopathic distinctiveness may be undermined.

2. How we live our mission today:

We keep the art and philosophy of osteopathic medicine alive and vital through:

- Creating a community that supports osteopathic-focused physicians at all career stages;
- Delivering educational programs that are consistently high quality;
- Delivering the most CME with built-in palpatory experience and the application of approaches to utilizing OMT; and
- Promoting osteopathic-focused scholarly activity.
3. **In the pursuit of our guiding vision and living our mission, we value:**

- The interpersonal connection, relationships and community that the AAO provides;
- Touch – the “hands-on approach” to patient care;
- Supporting physicians in their practice and connecting them with the necessary resources (more practical applications);
- The ability to teach and learn a skill (such as OMT) that impacts patients.

4. **Bold questions we are asking about the next 12-48 months:**

1. How do we capitalize on the emerging world of single accreditation?
2. How do we stand out and garner attention in such a way that we capture the attention of both osteopathic and allopathic medical students and residents and convert them to members?
3. How will single accreditation spark broader interest in osteopathic medicine and its core principles and practices?
4. Do we have the right blend of services and products to meet the needs of medical students, residents and physicians who promote and advance OPP in every patient encounter and provide high-level skills in utilizing OMM?
5. What should we stop doing/providing to ensure we have the resources and bandwidth to do what is most important now?
6. Is our brand strong enough to capture the attention we will need to survive and thrive in the coming years?
7. Do we need to become more proactive about marketing our products and services?
8. Should we merge with or join with other organizations? Should we take over another organization?

5. **Our assumptions about our universe and our organization in the next 12-48 months:**

- The osteopathic profession will continue to grow in numbers.
- Allopathic medicine and the growing world of integrative medicine will look to osteopathic medicine for more insight and collaboration.
- COCA may dilute the requirement of an NMM/OMM board-certified physician as an OMM chairperson in our COMs due to the growth of the osteopathic profession and increased difficulty in obtaining individuals with this current requirement.
- Educational content must be integrated with different learning resources, including the use of innovative media.
- The decoupling of AOA membership and certification may negatively impact the membership of all affiliate organizations, including the AAO.
- Memberships in professional organizations generally will decline, especially with young professionals who are less loyal and more difficult to attract.
- Younger physicians’ learning styles will differ from those of older physicians.
• Society is changing its perception of osteopathic physicians, but helping society understand the value of what a DO brings to health care will continue to be both an opportunity and a challenge.
• The AAO must continue to develop *The AAO Journal (AAOJ)* and create a mechanism for the *AAOJ* to be searchable. [This can be achieved by utilizing a grant to support implementing a searchable journal program and FTE support of *AAOJ* Managing Editor to implement and maintain the database.]
• The AAO must become the clear choice for providing educational resources and programs to support distinctive osteopathic training for the profession.
• The growth of the osteopathic profession impacts medical education and health care organizations.
• Our brand (what people think about the AAO) must be strong and recognized as the organization for students, residents and physicians who care about OPP and OMM.
• Emerging threats:
  o Loss of the osteopathic profession: Limited ACGME Osteopathic Recognition programs, loss of AOA board certification, risk of loss of COMs as future conversion to LCME schools.
  o Absorption by other organizations.
  o Destructive competition by other organizations that can undermine the AAO
• Emerging opportunities:
  o ACGME Osteopathic Recognition Support Program allowing us to reach osteopathic-focused physicians in training as potential future members.
  o Reaching other health care professionals interested in OPP.
  o The opioid crisis as an opportunity to promote OMT.


AAO becomes the primary go-to organization, community, resource and support for programs pursuing osteopathic recognition and for students, residents and physicians interested in and/or dedicated to osteopathic medicine, OPP and OMM.

7. **To succeed in the next 12-48 months we must:**

• Be fully in the game as single accreditation unfolds
• Maintain financial health
• Be agile and responsive
• Understand the market and ourselves and identify our competitive edge
• Offer the right information, community, products and services
• Be seen and known by all who share our philosophy and perspective
• Field the best possible executive team and staff
• Increase our use of technology and attention-getting internet and social media tools
• Become fiercely competitive for attention, members and customers
• Proactively match emerging needs with products and services
• Support and guide programs seeking ACGME osteopathic recognition
8. **Our strategic priority (the most important thing we must do now):**

Elevate our brand as the go-to organization, community, resource and support for programs pursuing osteopathic recognition, as well as students, residents and physicians interested in and/or dedicated to osteopathic medicine, OPP and/or OMM, so we can effectively market our community, services and programs.

9. **The key objectives that support our strategic priority:**

- Evaluate, strengthen and promote our brand
- Create a realistic and executable marketing plan that reflects our strategic priority and vision
- Grow the population of osteopathic-focused physicians that are connected to the AAO for education and future membership
- Become the primary support program for osteopathic recognition
- Connect with all ACGME Osteopathic Recognition training programs
- Reconnect with our osteopathic medical students using our:
  - “Visiting Clinicians” program
  - The AAO traveling education team
  - Providing specialized education, including online courses linked to “hands-on” opportunities
- Reach out to osteopathic-focused physicians that are not as familiar with the AAO of the 21st century

10. **The on-going operating objectives (what we must continue to do well as we pursue our strategic priority):**

- **Advocacy and Partnership**
  - Develop OMT billing and coding resources and educational materials for both practicing physicians and physicians in training: Train students and residents to be successful and support physicians in practice.
  - Serve as a resource for other resources – with other component societies, states and the AOA.
  - Reach out to component societies, specialty colleges and the states to collaborate where there are common interests.
  - AAO is recognized both nationally and internationally as the premier resource for osteopathic principles and practices.

- **Membership and Mentoring**
  - Increase membership for osteopathic-focused physicians. This includes both osteopathic and allopathic physicians.
  - Develop membership category to increase resident membership through the AAO ACGME Osteopathic Recognition Support Program.
- Increase membership in practicing osteopathic-focused physicians that are outside of the academic arena.
- Enhance the mentorship program process to effectively match osteopathic physicians to all student and resident members seeking mentorship.
- Develop and grow mentorship database of available mentors.
- Implement a financial model that is not solely dependent on membership:
  - Include our educational programs.
  - Utilize foundation grants to support AAO infrastructure.
  - Increase philanthropic efforts.

- **Education**
  - Provide a robust spectrum of education from novice to expert in OPP/OMM.
  - Provide educational resources and coursework to support ACGME Osteopathic Recognition, specifically for allopathic physicians-in-training requiring exposure to OPP/OMM.
  - Become a CME granting entity or partner with another CME granting entity to grant CMEs to all physician groups.
  - Expand our educational offerings with new, innovative modalities to reach more physicians.

- **Communications and Technology**
  - Increase media exposure: Facebook and Twitter presence by 10-20%.
  - Increase promotional materials on the AAO’ YouTube channel: Develop short and effective video vignettes [message, advocacy, educational, testimonials, etc.]
    - Effectiveness determined by number of viewers and % liked
    - Clear up misconceptions on the AAO: “Did you know…;” “Ask us…”
  - Implement platform necessary for the AAO to support all needed educational and promotional initiatives.
  - Continue to enhance and expand the use of AAO mobile app for Convocation.
    - Increase usage 25% each year.
  - PowerPoint branded slides are utilized for all AAO Educational programs.
  - Release one e-book annually for the next 3 years.
  - Transition AAO committees to utilize online forums by end of 2018.
  - SAAO and PAAO leadership will notify their members of all technological advances.

- **Scholarly Activity/Research**
  - Increase the awareness of the Scholar Series as a resource available to all members.
  - Promoting scholarly activity generated from AAO members on all media platforms, including poster sessions, selected *AAOJ* articles and research training resources.
  - Continue to transition the *AAOJ* to improve the quality and quantity of articles.
  - Obtain listing in Index Medicus.