

2020

Our vision. Our future.



AMERICAN ACADEMY OF
HOSPICE AND PALLIATIVE MEDICINE

Strategic Plan 2020-2024

Approved by the AAHPM Board of Directors on January 10, 2020.

PREFACE AND ENVIRONMENTAL SCAN SUMMARY

Every 4–5 years Academy leaders take time to reassess progress made towards their strategic goals, identify key strategic challenges and opportunities and refine goals and objectives for the next 3–5 years. Over the course of 2019, a comprehensive environmental assessment and series of planning sessions, focus groups, and surveys were conducted with members, hospice and palliative care field leaders, previous board presidents, AAHPM staff, the Board of Directors, strategic coordinating committee (SCC) members and chairs, council chairs, AAHPM community leaders, and others.

This strategic plan document provides an overview of what was learned as part of this year’s strategic planning process and lays out a refreshed set of goals and objectives for the next 3–5 years. AAHPM has made significant progress over the past several years thanks to the collective efforts of its members and collaborating partners. AAHPM and the field of hospice and palliative care are at an exciting time of continued growth and expansion. The priorities laid out in this plan will help guide AAHPM in thoughtfully and effectively continuing to support its members and improve access to quality hospice and palliative care for those with serious illness.

Our Strategic Challenges and Opportunities

An extensive amount of input was gathered from Academy members and other key stakeholders in support of the strategic plan. A range of challenges and opportunities emerged that were used to inform discussions on the needs of patients, families and caregivers, and the membership of the Academy. Below are examples of strategic themes and conclusions used to inform the Academy’s strategic goals:

- **Preparing the workforce for growing and changing patient, family, and caregiver needs.** The growth in need and expectations for quality care delivered across all settings will require intentional and reinforcing focus on the core skills of hospice and palliative care; attention to changing demographics; improved clinical knowledge across a wider range of conditions, diseases, and settings; and effective interdisciplinary team-based care.
- **Meeting growth and access expectations while ensuring quality.** In order to meet growing needs, strategies for investing in broader workforce development initiatives, including attracting and retaining specialists across all career stages and developing the skills of all clinicians beyond hospice and palliative medicine specialists, will need to be considered. Closer collaboration with interdisciplinary team disciplines and clearer expectations regarding what constitutes quality will be critical moving forward.
- **Expanding access through the use of technology and innovative care models.** Encouraging 1) the adoption of new models of care; 2) creative clinical partnerships with other specialists and services; and 3) learning how to integrate emerging technologies to better care for patients, families, and caregivers will help move us toward more equitable and efficient access to meet the growing needs across geographies, such as rural settings, and populations, including the underserved.
- **Adapting to the evolving needs of a diverse and growing AAHPM membership.** How and where people learn the skills needed to care for seriously ill patients is evolving. Taking a creative, flexible, and inclusive approach to how the Academy designs educational offerings, engages members and key stakeholders, and advocates for quality will ensure the Academy remains a value-based, member-focused organization.
- **Partnering to effect change.** Partnerships and collaborations have proven to be effective in speaking with one voice, creating much-needed consistency in quality of care and empowering a broader audience of stakeholders to make the necessary changes to improve care for those with serious illness. Prioritizing issues and leading collectively with others creates the best hope for sustainable change and improvements.

OUR PLANS FOR THE FUTURE

The Academy's strategic plan will continue serve as the primary guide over the next 3-5 years to help prioritize both opportunities and resources. AAHPM considers planning an iterative process and expects the plan to evolve as more detailed initiatives and tactics are identified in the ever-changing healthcare environment.

Outlined on the following pages is AAHPM's strategic plan that includes its mission, vision, and values along with five strategic goals and accompanying objectives. The following definitions were used to inform the core components of the strategic plan:

- Mission: why we exist and what we do.
- Vision: a future state we hope to achieve together.
- Values: beliefs and principles that inspire and guide our work.
- Goals: outcome-oriented statements to establish general focus and direction.
- Objectives: descriptive statements to further clarify direction and measure progress.

This strategic planning process reaffirmed that the basics of the Academy's strategic goals that guided us these past 5 years remain relevant and comprehensive. What has changed is the level of precision in our strategic intention as an organization and, in some cases, taking a stronger leadership role. A few highlights include

- more explicit and intentional efforts to incorporate the patient, family, and caregiver experience
- investments in new learning platforms that offer more easily accessible and customizable offerings
- establishing higher expectations for diversity, equity, and inclusion
- establishing clearer guidance on clinical quality
- development of a broader workforce strategy that recognizes the importance of the interdisciplinary team
- intentional collaborations with other disciplines, professional organizations, and key stakeholders
- greater recognition of the balance of efforts to advance the specialty of hospice and palliative medicine with those of the hospice and palliative care field overall and all clinicians caring for patients and families with serious or life-threatening illness.

The Academy and its members are well positioned to continue to lead and work toward our joint vision that **all patients, families, and caregivers who need it will have access to high-quality hospice and palliative care.** Over the coming months and years, the plan will serve as a guide to develop more detailed operational and financial plans to ensure the Academy remains a sustainable, relevant, and high-impact organization.

MISSION, VISION, VALUES

CORE MISSION

AAHPM advances hospice and palliative medicine through enhancing learning, cultivating knowledge and innovation, strengthening workforce, and advocating for public policy to achieve our vision.

VISION

All patients, families, and caregivers who need it will have access to high-quality hospice and palliative care.

VALUES

Respect for Person- and Family-Centered Care: We are dedicated to the principles of person- and family-centered care for individuals of all ages across all stages of serious illness.

Quality: We are committed to high-quality, evidence-based, interdisciplinary hospice and palliative care access across all settings.

Diversity, Equity, and Inclusion: We listen first, seek out diverse experiences and perspectives, and celebrate differences.

Collaboration: We work together with patients and families, colleagues, and partnering organizations to identify and achieve shared goals.

Responsiveness: We operate as a flexible organization adapting to an ever-changing environment, continually striving for improvement and growing in value to current and future members

Creative and Ethical Leadership: We model positive, ethical leadership that encourages and enables new ideas and fosters creativity.

GOALS AND OBJECTIVES

Goal A: Expand and Enhance Engagement

AAHPM serves as a leading source of information, engagement, and support for physicians and all professionals in hospice and palliative care.

Objectives:

1. Provide easily accessible, valued services and resources to members, professional partners, stakeholders, and customers.
2. Nurture member communities that reflect the diversity of the field and practice settings.
3. Foster and develop relevant communication, connection, and collaboration opportunities.
4. Demonstrate value of engagement through volunteer opportunities.
5. Expand the use of Academy resources.
6. Support and cultivate an environment of diversity, equity, and inclusion.

Goal B: Build and Sustain a Diverse Workforce

AAHPM attracts, develops, and sustains a robust and diverse workforce—including clinicians, educators, researchers and innovators—in order to expand access to high-quality hospice and palliative care.

Objectives:

1. Monitor and address pertinent workforce metrics related to supply, demand, equity, and diversity.
2. Empower Hospice and Palliative Medicine fellowship program directors to achieve excellence by providing programs and tools to enhance the quality and diversity of their fellowship programs.
3. Implement strategies for engagement of medical students, residents, fellows, practicing physicians, and other healthcare professionals in hospice and palliative care.
4. Support innovative training for practicing physicians, researchers, and other healthcare professionals.
5. Encourage leadership, professional development, and career sustainability.

Goal C: Engage, Develop and Sustain Expertise

AAHPM provides learning and educational opportunities that build and sustain competence and skills to support high-quality, evidence-based hospice and palliative care practice in diverse career pathways and practice settings.

Objectives:

1. Lead in physician education at all levels of professional development.
2. Develop a diverse and integrated portfolio of high-quality learning experiences.
3. Promote initial and continuing professional certification in hospice and palliative medicine.
4. Collaborate with other disciplines and organizations to advance high-quality intraprofessional learning.
5. Provide learning experiences to support various career pathways into and within hospice and palliative care.

Goal D: Promote Quality of Care, Research, and Translation of Evidence into Practice

AAHPM strives to improve the quality of health care based on evidence and research for people with serious illness and their caregivers in all settings.

Objectives:

1. Nurture, help to train, and create a welcoming and inclusive professional home for investigators from diverse professional and cultural backgrounds who lead hospice and palliative care research, quality measurement, and quality improvement.
2. Support the development of quality standards, guidelines, and measures in hospice and palliative care.
3. Promote and provide guidance for the expansion of research and quality improvement.
4. Promote the effective dissemination and translation of research findings into information usable by clinicians.
5. Advance innovation including technology, care design, and data science to improve patient experience and to enhance access to hospice and palliative care for diverse populations.

Goal E: Advance Health Policy and Advocacy

AAHPM promotes the value of hospice and palliative care in order to transform serious illness care, expand access for patients and their caregivers, support physicians and interprofessional teams, and ensure the growth and sustainability of the field.

Objectives:

1. Expand and sustain AAHPM's role as a leading expert in the care of serious illness among patients and families, the media, policymakers, payers, healthcare providers, and industry stakeholders.
2. Advocate for health policy that recognizes and supports the needs of the diverse population of patients with serious illness, their caregivers, and the health professionals who care for them, including the unique role of hospice and palliative medicine physicians.
3. Advance policy priorities through strategic partnerships, including participation in coalitions and collaboration with other hospice and palliative care stakeholders, medical societies, and healthcare organizations.
4. Promote and sustain integration of high-quality palliative and hospice care in current and evolving payment and delivery models across all communities and care settings.
5. Equip Academy members to serve as effective advocates for patients and the field by providing timely information, training, and support.

GLOSSARY OF TERMS

The intent of this Glossary is to clarify select terms frequently used throughout the AAHPM Strategic Plan. These definitions are intended to inform readers who are less familiar with select key concepts. Leading published sources were reviewed and common definitions have been included. AAHPM recognizes that various individuals and organizations may promote or use alternative terms or define these concepts in different ways.

Sources:

www.PalliativeDoctors.org

www.getpalliativecare.org

www.dictionary.com

www.acgme.org

www.ihl.org

www.ahrq.gov

Diversity

Diversity refers to the composition of a group of people from any number of demographic backgrounds and identities (innate and selected) and the collective strength of their experiences, beliefs, values, skills, and perspectives.

The AAHPM Board of Directors approved a multi-year [Diversity, Equity & Inclusion Strategic Plan](#) that supports evidence-based practices in diversity, equity, and inclusion.

Engagement

Engagement is a means of measurement that defines investment of time (involvement, participation) or resources (purchases, dues, donations) in exchange for value.

Evidence-based practice

Applying the best available evidence gained from the scientific method to guide clinical decision making.

Hospice and palliative medicine

The medical specialty focused on relief of the pain, symptoms, and stress of serious illness by working in teams with other professionals to provide expert hospice care and/or palliative care.

Hospice

Hospice is palliative care for patients in their last year of life. Hospice care can be provided in patients' homes, hospice centers, hospitals, long-term care facilities, or wherever a patient resides.

Palliative care

Palliative care is provided by a team of doctors, nurses, and other specialists who work together with a patient's other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment. Palliative care focuses on improving a patient's quality of life by managing pain and other distressing symptoms of a serious illness including psychosocial and spiritual distress.

Quality

Degree to which health services increase the likelihood of desired health outcomes and are consistent with current professional knowledge. The Institute of Medicine has defined six dimensions of quality in health care: patient-centered, timely, beneficial, safe, equitable, and efficient. It has also been expressed by the Agency for Healthcare Research and Quality as

- doing the right thing
- at the right time
- in the right way
- to achieve the best possible results.

Serious illness

Serious illness is a condition that carries a high risk of mortality and either negatively impacts a person's daily functioning and/or quality of life or excessively strains caregivers. Serious illness may include advanced cancer, advanced heart disease, chronic obstructive pulmonary disease, end-stage renal or liver disease, and advanced neurological impairment including dementia and may be accompanied by uncomfortable symptoms, such as pain, shortness of breath, fatigue, anxiety, depression, lack of appetite, nausea, and constipation.

Stakeholder

A person or group that has an investment, share, or interest in the field or Academy.

Workforce

Healthcare professionals practicing hospice and palliative care.