
Chapters use strategic planning as a management tool

by Mary H. McGrath, MD, MPH, FACS



The Connecticut Chapter conducted a strategic planning session at the Hart Hospital, Hartford, CT, May 7-8, 2010. Front row, left to right: Michael Deren, MD, FACS, Liaison to Connecticut State Medical Society; Orlando Kirton, MD, FACS, President; Robert Brautigam, MD, FACS, Councilor; W. Scott Helton, MD, FACS, Councilor; Alan Meinke, MD, FACS, Councilor; Samantha Minc, MD, Chair, Resident Committee; Rhonda Peebles, Division of Member Services; Juan Sanchez, MD, FACS, Treasurer; Scott Kurtzman, MD, FACS, Governor; Dr. McGrath, facilitator; and Philip Corvo, MD, FACS, Immediate Past-President.

Not pictured: Christopher Tasik, Chapter Executive Director.

Beginning in 2006, the American College of Surgeons (ACS) began supporting small strategic planning sessions for chapters interested in better defining their purpose and direction. So far, eight chapters have been involved in the program (see Table 1, page 64).*

*To read about the Tennessee Chapter's session, see the April 2009 *Bulletin* article by Gayle Minard, MD, FACS, and Wanda Johnson, that chapter's Executive Director; Minard G, Johnson W. The Tennessee strategic planning experience. *Bull Am Coll Surg.* 2009; 94(4):39-43. Available at: <http://www.facs.org/about/chapters/strategicplanningtn09article.pdf>.

In addition to these one-day programs, sessions on conducting and performing strategic planning have been presented at the annual Leadership Conference for Chapter Leaders and at Chapter Showcase sessions, which are provided during the Clinical Congress. Also, there are a few chapters, such as Ohio and Virginia, that conduct strategic planning on a regular basis. Chapters interested in scheduling a planning session should contact the Division of Member Services at 888-857-7545.

To help the ACS chapter leaders prepare for the strategic

planning session, background information is sent to the participants ahead of time. The surgeons and staff who are planning the meeting try to include any material that offers focus on the issues, and that discusses choices that the planning process should address. In general, the background materials include membership and financial reports, administrative and governance documents, and historical patterns of growth and member involvement. Compiled from chapter and ACS databases, materials often include the following:



John T. Preskitt, MD, FACS (standing), facilitated the strategic planning session for the Alabama Chapter leaders.

- Financial statements for the previous three to five years
- Membership counts for the previous three to five years, including statistics on specialty, practice location, age, dues-paying status, gender, and age
- Annual meeting information for the previous three to five years, including programs, dates, attendance figures, expenses, revenues, setting, vendor participation, and evaluations
- Minutes or summaries of previous board/council meetings

for the previous three to five years

- *Bylaws* with a description of officers and committee structure
- Newsletters, e-mail lists, or other communication vehicles

The program opens with an overview of strategic planning as a tool for identifying common goals, defining direction, and focusing on what's important for success. The first part of the planning session is devoted to a thorough response

to the following questions: Why does the chapter exist? What makes the chapter relevant? What does the chapter aspire to achieve? From this discussion flows development of a tailored mission statement that sets out the fundamental purpose of the chapter. (The mission statements from the chapters that have participated in these strategic planning sessions are listed in Table 2 on page 65.)

With a mission statement in place, a situation analysis of the chapter's environment is done through a detailed SWOT analysis (strengths, weaknesses, opportunities, and threats). This creates a clearer picture of the chapter's situation, including demographic changes, financial trends, marketing success, competition from other organizations, and other factors. This analysis, which can include several dozen data points, exposes issues for deeper discussion, and from this, the chapter participants must come to agreement on specific priorities. They then can move

Table 1

Chapter	Year	Facilitator
South Texas	2006	John T. Preskitt, MD, FACS
New York	2006	Charles D. Mabry, MD, FACS
Tennessee	2008	Dr. Preskitt
Louisiana	2008	Dr. McGrath and Dr. Preskitt
Iowa	2010	Rhonda Peebles
Connecticut	2010	Dr. McGrath
Alabama	2010	Dr. Preskitt
Keystone (PA)	2010	Dr. Minard (TN)

into articulating goals and objectives, and crafting a strategic action plan that will serve as a blueprint for carrying the chapter forward.

While only eight chapters have participated in these planning sessions supported by the College, a few key issues and

goals have emerged:

- Large or small, leaders in these chapters have expressed the need to be more active and involved with advocacy. Whether engaging with the state medical society, hiring a lobbyist, or concentrating on statewide trauma care and systems plan-

ning, advocacy has been identified as a service and benefit that chapters are uniquely qualified to provide.

- Electronic communications—including newsletters and websites—have consistently been identified as “must-haves” by the chapter leaders. These

Table 2

ACS mission statement: The American College of Surgeons is dedicated to improving the care of the surgical patient and to safeguarding standards of care in an optimal and ethical practice environment.

Chapter	Mission
Alabama	The mission of the Alabama Chapter of the ACS is to be an effective voice for surgeons and to advance the highest standards of ethical patient care through education, mentorship, fellowship, and advocacy.
Connecticut	Mission: The Connecticut Chapter of the ACS is dedicated to achieving the highest standards of surgical care through education, mentorship, fellowship, and advocacy. Vision: Uniting surgeons to advance patient care in Connecticut.
Iowa	The Iowa Chapter of the American College of Surgeons is dedicated to promoting the highest standards of surgical care through fellowship, education, and advocacy.
Louisiana	The mission of the Louisiana Chapter of the ACS is to: <ul style="list-style-type: none"> • Support the standards and directives of the ACS in Louisiana • Advance the art and science of surgery in Louisiana through continuing education of Louisiana surgeons • Further communication and camaraderie among Louisiana surgeons • Provide a forum for young surgeons • Provide a means through which Louisiana surgeons can cooperate with other professional, political, and civic organizations in promulgating good health among Louisiana citizens • Advocate for safe, effective surgical care for Louisiana citizens
Keystone (PA)	The mission of the Keystone Chapter of the ACS is to provide a regional voice for surgeons in all specialties, be an advocate for its members and the patients they serve, provide educational opportunities for its members, and to encourage the highest standards of ethical surgical practice.
New York	The New York Chapter of the ACS advocates for Fellows of the American College of Surgeons in New York State, assists the federal lobby efforts of the ACS, and provides continuing medical educational activities for its members.
South Texas	The mission of the South Texas Chapter is to improve quality of care through enhancing surgical education, maintenance of competency, providing a forum for young surgeons and fostering communication with all fellows, and to support the goals of the American College of Surgeons.
Tennessee	The mission of the Tennessee Chapter is to improve the health of the people of Tennessee and the Southeastern Region of the U.S. by promoting the ethical practice of the art and science of surgery.

can focus on communication among surgeons, outreach to residents and students, and/or referral databases and websites for patients.

- Universally, chapter leaders have expressed the need to involve and engage more members in the activities and programs of the chapters. In

some instances, chapters plan to expand their governing councils (or board of directors) to be more inclusive by adding young surgeons, academic surgeons, and community-based surgeons. Other chapters intend to improve their education offerings by delegating the planning and development

activities to a larger number of members, including surgical residents.

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