



Operational Strategic Plan

Updated and Revised January 2011

Background and Introduction

In April 2008, the PPAG Board of Directors met in Little Rock, Arkansas to begin a comprehensive Strategic Planning initiative. Prior to that event, the association, under the direction of David Lorms, CAE, surveyed members and non-members to discover professional trends, opportunities, threats, and organizational strengths and weaknesses. The primarily open-response survey uncovered a wealth of information that guided the strategic planning process.

A few recurring themes and trends emerged from the survey.

- A. Our members **love their profession** and are passionate about their role in the delivery of safe and effective medications in children.
- B. The **fear of making an error** during the delivery of medication therapy keeps our members up at night. Frustration from lack of knowledge, standardized guidelines, health-systems bureaucracies, and budget constraints contribute to the fears and frustrations of our members.
- C. The opportunity to **network** (exchange of idea) with fellow pediatric practitioners and our **education** offerings (live conferences) were often cited as the **most valuable** services of PPAG.
- D. Members perceive PPAG as the sole, comprehensive **voice for pediatric medication safety**. Members would like to see more professional and patient **advocacy** efforts initiated by PPAG, especially as it related to medication safety.
- E. **Promoting** our mission, values, and goals externally; **collaborating** with other similarly-focused groups; **engaging** members at all career stages; and **increasing research**-related collaboration were areas perceived as an opportunities for PPAG.

After reviewing the association's mission and values and conducting a SWOT (Strengths-Weaknesses-Opportunities-and Threats) Analysis (appendix A), the Board developed six (6) strategic goals for PPAG's future:

1. PPAG will be a fiscally sound and responsible organization.
2. PPAG will provide a community for pediatric pharmacy practitioners, students, residents, administrators, and academicians (both current and future).
3. PPAG will be the primary provider of pediatric pharmacy education to healthcare professionals and to patients/parents.
4. PPAG will be leading voice for the safe and effective use of medication in infants and children.
5. PPAG will support research in the area of safe and effective use of medication in infants and children.
6. PPAG will be a conduit for information and the premier resource and advocate for safe medication use in infants and children.

Within each of these goals, a series action items were developed. Over the next five (5) years these action items will be appropriately assigned to individuals or committees for implementation.

The intention of this document is to inform our members and track our progress.

Our Mission

The Pediatric Pharmacy Advocacy Group is an international, nonprofit, professional association representing the interests of pediatric pharmacists and their patients. We are dedicated to improving medication therapy in children.

Our sole purpose is to promote safe and effective medication use in children through communication, education, and research.

Our Vision

The Pediatric Pharmacy Advocacy Group will be the primary resource for effective medication therapy in children.

Our Core Values

We believe:

- in the value of each member's experience and expertise
- in quality research, education, and training
- in the importance of contributing to the medical literature
- in increasing the awareness of the unique characteristics of children's healthcare issues related to medication use
- in the efficient and effective use of our resources
- in being open to new ideas
- in the benefits of collaboration
- that challenging experiences promote our growth
- in the benefits and merits of volunteerism
- in advocating for children and their families in all medication-related issues
- in the prevention of adverse drug events

Strategic Goal 1: Financial

PPAG will be a fiscally sound and responsible organization.

Achievements to-date and Considerations

PPAG has developed and expanded many operational and non-operational revenue streams, which have contributed to the financial stability of the association. These streams are as follows:

1. Membership dues
2. Education; Two (2) live continuing pharmacy education conferences offering over 40 hours of credit per year
3. Educational co-sponsored programs
4. Grants, Sponsorships, and donations
5. Print, electronic, and live advertising
6. Web-based services, such as JobCentral
7. Mail list rental
8. Bookstore

Looking into the future, it has become clear that support from the pharmaceutical industry will be more difficult to pursue and access. Continuing to find new and novel programs through partnerships and joint ventures will be a necessary driving force in the future.

Mapping our success programmatically is also important. Understanding the true costs of each of our programs to identify areas of strength and weakness is imperative. Moving to a cost-accounting process will help us achieve this goal. We believe this will, over time, improve our budgeting process and will help us achieve a quicker and more efficient internal auditing process.

Strategic Objectives

1.1. Develop internal audit procedures.

Progress: Completed. A subcommittee for internal audit was formed and meets monthly for the sole purpose of reviewing bookkeeping procedures, bank reconciliation, and so forth. The committee is chaired by the Treasurer of the organization, who reports directly to the Board of Directors.

1.2. Institute programmatic cost accounting procedures.

Progress: Completed. Since 2008, PPAG redesigned our bookkeeping procedures. We now account for the direct and indirect expenses of individual programs and projects.

1.3. Develop an annual budget with a 2-4% operational margin each year.

Progress: Ongoing. This objective is continuous. During the tough economic climate accomplishing a 2-4% margin remains difficult.

1.4. Explore continued diversification of operational and non-operational, dues and non-dues revenue streams.

Progress: Continuous/ongoing. In 2010, PPAG has partnered with Zolstice to develop a safe and effective standard for acute pediatric medicine starting with the Broselow product, and we will soon be working on a program for neonatal patients. This will be followed by critical care and other pediatric pharmacotherapy efforts.

1.5. Create a permanent reserve fund valued at 100% of our operating expenses.

Progress: Developing. By the end of 2008, PPAG opened a reserve account was opened and grew to \$100,000. However, the organization had to utilize this reserve fund to cover operational expenses throughout 2009-10.

Strategic Goal 2: Membership Community

PPAG will provide a community for current and future pediatric pharmacy practitioners, students, residents, administrators, and academicians

Achievements to-date and Considerations

PPAG was founded to provide a network of practitioners who are dedicated to and understand the pediatric patient. In many ways this strategic objective is the sole purpose of PPAG.

In the mid 1990's, PPAG developed the first online networking tool for pediatric pharmacists, PediNet. PediNet was an online bulletin Board where pharmacists can ask questions and inquire about protocols, ideas, and so on. Today, PediNet is a series of email communities (listservs) divided into therapeutic interest. PediNet has become the foundation for the development of Special Interest Groups.

PPAG is known for quality education and continues to provide networking opportunities through our live conferences each year.

Strategic Objectives

2.1. Draw up upon past PPAG leadership.

Progress: Continuous/ongoing. The Board of Directors commissioned the creation on an Advisory Committee. The Advisory Committee is made up of previous Board Presidents/Chair, executive officers and past Board members. The first Advisory Committee meeting was held in October 2010.

2.2. Attract and Expand membership participation

Progress: Continuous/ongoing. The Board is interested in expanding our membership to include; Directors/Administrators of pharmacy departments, community pharmacists, perinatal practitioners, swing-shift/night-shift pharmacists, front line pharmacists, faculty, students and residents.

In 2008, our membership committee conducted the "Just1" campaign, which encouraged each member to recruit one other person to join PPAG.

2.3. Develop the Fellow in Pediatric Pharmacy Advocacy Group (FPPAG) Recognition Program

Progress: Completed/ongoing. The Board of Directors commissioned and developed the creation on the FPPAG Recognition Program in 2008. The inaugural class of Fellows was installed during the Annual Meeting in 2009. Currently, there are 7 PPAG fellows. The program is now administered by current Fellows.

2.4. Create and Promote regional/local networking groups

Progress: Continuous/ongoing. The Board of Directors approved the "Local Communities and Recognition Program" in 2009. The program's purpose is to help make strong peer-to-peer local connections that can make a real difference in practice. The goal of PPAG is to promote and assist local groups in their efforts, not control them. These groups are not official chapters of PPAG. Currently, there are three (3) active and recognized communities: Cleveland-Akron Area Pediatric Pharmacists, Gateway Pediatric Pharmacy Group (St. Louis), and PediCats (University of Arizona student group). We anticipate 3 new communities in 2011.

2.5. Develop therapeutic Special Interest Groups (SIG)

Progress: Slow progress/ongoing. During the 2010 Annual Meeting, PPAG conducted an SIG "interest" meeting. Eventually these groups will interface with our standing committees to drive educational and advocacy content for the organization

2.6. Encourage sustained volunteerism of members.

Progress: Under Development/ongoing.

2.7. Expand levels on Membership (categories)

Progress: No progress.

Strategic Goal 3: Education

PPAG will be the primary provider of pediatric pharmacy education to healthcare professionals and to patient/parents.

Achievements to-date and Considerations

Since 1991, PPAG has offered an Annual Conference developed especially for pediatric pharmacists. It remains the only conference developed solely by pediatric pharmacists. In 1992 PPAG began to offer Specialty Conferences. These specialty conferences have offered highly focused content dedicated to neonatal and pediatric critical care, hematology and oncology, medication safety and technology, and chronic diseases. In 2009, PPAG hosted the first International Conference for Pediatric Pharmacology. Beginning in 2011, PPAG will host one live conference per year combining our Specialty and Annual Conferences.

Strategic Objectives

3.1. Plan, develop, and host LIVE continuing pharmacy education events.

Progress: Continuous/ongoing. As mentioned, PPAG has hosted live programs since its birth. In 2009 the Board of Directors conducted a needs-assessment survey of membership related to educational programming. The members overwhelmingly supported moving to one conference per year. Beginning in 2011, PPAG will host a meeting combining the best elements of our Specialty and Annual conference offerings.

3.1.1. During our live conferences, provide sessions with different skill levels of all pediatric practice.

Progress: Complete/Ongoing. A sizable challenge for PPAG is providing educational programs for practitioners in early, mid, and late career stages. In 2010, PPAG began offering Level 1 and Level 2 programs. Level 1 programs provide a review of current practices in the topic identified and are appropriate for both new practitioners and those seeking to update their knowledge base. Level 2 programs provide an advanced review of the identified topic and new developments in the field. Level 2 programs are appropriate for the advanced level practitioner.

3.1.2. Provide education to meet pharmacy CE requirements for pediatric and neonatal nurses.

Progress: No progress

3.1.3. Provide education addressing career development for young managers, supervisors, coordinators (leadership development)

Progress: No progress

3.1.3. Provide training programs for mentoring skills and precepting (leadership development)

Progress: Continuous/Ongoing. PPAG has provided a workshops for preceptors and educators during our Annual Conferences.

3.2. Provide pediatric pharmacy expertise to the healthcare community and general public.

Progress: Under development/ongoing. Pharmacists, nurse practitioners, physician assistants, federal and state officials, regulators, and state health commissioners, and parents and children are among the identified targets of this objective. The Board determined that the current President/Chair of the Board will serve as the official spokesperson for PPAG.

In 2010 PPAG encouraged members to contact their congressperson regarding changes to the 340B drug discount program for children's hospitals.

3.2.1. Create "The Value of Pediatric Pharmacist" presentation/road show

Progress: No progress

3.3. Complete Core (Aged-Based) Competencies for Pediatric Pharmacists

Progress: Continuous/ongoing. In 2007, PPAG launched a multi-year project to develop core competencies. To date, we have posted eleven (11) programs and three (3) more are under development. PPAG also developed a group purchase program for hospital institutions interested in offering these programs to their pharmacists. To date, five (5) institutions have utilized this program.

We are exploring opportunities to expand the reach of these programs through partnerships with publishers.

3.4. Develop Competencies for Front-line Practitioners

Progress: No progress

3.5. Utilize the Journal as a CE opportunity

Progress: No progress

3.6. Create or advocate for certification program for the pediatric pharmacist

Progress: Under Development/ongoing. In 2010 PPAG conducted a needs assessment on behalf of BPS. The survey indicated a strong interest in a specialty exam for pediatric pharmacists. We have reached out to other pharmacy organizations (ASHP) to gauge their interest in partnering with PPAG to petition BPS for this exam.

Strategic Goal 4: Advocacy

PPAG will be the leading voice for the safe and effective use of medications in infants and children.

Achievements to-date and Considerations

For many years, PPAG has awarded and recognized best practices in pediatric pharmacy. PPAG has also recognized individuals that have contributed to the advancement of the practice through the Sumner J. Yaffe Lifetime Achievement Award in Pediatric Pharmacology and Therapeutics and the Richard A. Helms Award of Excellence in Pediatric Pharmacy Practice. These recognition programs are designed to encourage sustained contributions among all of our members and effect outcomes.

Public awareness and public policy advocacy remains an area for continued development.

Strategic Objectives

4.1. Continue administering the peer recognition and award programs

Progress: Continuous/ongoing. As mentioned, PPAG continues to select Best Practice Award recipients, Yaffe Award recipients, and Helms Award recipients.

4.2. Provide guidance for consumers of medication in infants and children

Progress: Completed/Continuous/ongoing. In 2008, PPAG launched a new website dedicated to providing information to parents and children, www.kidsmeds.info. Currently, the Advocacy Committee provides tips and information on appropriate medication use in kids.

4.2.1. Develop practice-based position papers

Progress: Ongoing. Each year, the Advocacy Committee publishes as least two position papers. These papers are posted on the website.

4.3. Start public policy advocacy and awareness activities

Progress: Continuous/ongoing. In 2008, PPAG consulted with Joel Blackwell regarding this objective. It was determined that a grass-roots approach to advocacy makes the most sense for PPAG. Also, partnering and reaching out to larger, yet similar organizations can help move us forward in this area.

4.3.1. Encourage members to contact their Congressperson and Senator regarding key legislative and regulatory issues affecting infants and children.

Progress: Continuous/ongoing. In 2010, PPAG encouraged members to contact their US representative and Senators regarding the changes to the 340B discount orphan drug discount program. In December of 2010, the congress approved changed to the program, which allows for children's hospitals to participate in the program. PPAG continues to monitor legislative action and will address the issues as they arise.

4.3.2. Work jointly/collaboratively with other pediatric professional organizations related to public policy efforts.

Progress: No progress. While we have reached out to various organizations, nothing substantial has occurred in this area.

4.3.3. Develop and publish public policy position statements.

Progress: Continuous. In 2010, PPAG published a position on 430B pricing and encouraged members to contact their elected officials.

4.4. Provide tools that help RPh's advocate for pediatric pharmacy services at their institution. (These tools should include the advantage to patient care and reducing medication errors in the pediatric patient)

Progress: No progress.

4.5. Conduct gap analysis for Joint Commission Sentinel Event Alert on pediatric medication safety.

Progress: No progress.

4.6. Proactively reach out to media outlets, particularly parents and children magazines.

Progress: No progress. Although our Board President/Chair has fielded questions and inquires from local and national media outlets, we have not reached out to them.

4.6.1. Solicit opportunities for our members to serve on scientific advisory board for parent publications.

Progress: No progress.

Strategic Goal 5: Research

PPAG will support research in the area of safe and effective medication use in children and infants.

Achievements to-date and Considerations

PPAG has encouraged research through our scientific and practice-based poster sessions each year. The Sumner J. Yaffe Award recognizes excellence in research. Since 1996 PPAG has published the Journal of Pediatric Pharmacology and Therapeutics (previously named The Journal of Pediatric Pharmacy Practice).

Strategic Objectives

5.1. Index the Journal of Pediatric Pharmacology and Therapeutics

Progress: Completed/ongoing. In 2010, JPPT was accepted into PubMedCentral. Our articles will appear in PubMed databases beginning in the first quarter of 2011. We also plan to include legacy content going back five (5) years congruently with adding new content.

5.2. Develop four (4) clinical practice surveys that inform the membership about similarities and differences in pediatric practice (quarterly)

Progress: Area for development/ongoing. The research committee conducted four (4) surveys. However, the results have not yet been published in the newsletter or Journal.

5.3. Provide funding source for research

Progress: Completed/ongoing. In 2008, PPAG received a grant to develop the "Neonatal Pharmacy Resident/Fellow Small Grant" program. In 2009 and 2010, PPAG has awarded four (4) small grants.

5.4. Provide the infrastructure and/or network to complete multi-center data collection and research.

Progress: No progress.

5.4.1. Provide an outlet for the sharing of research findings through publications

Progress: PPAG has very well established programs and publications for the sharing of research data.

Strategic Goal 6: Communication

PPAG will be a conduit for information and the premier resource and advocate for safe medication use in infants and children.

Achievements to-date and Considerations

PPAG has published the Journal of Pediatric Pharmacology and Therapeutics since 1996. In 2003, PPAG began publishing a quarterly newsletter. The Pediatric Pharmacy Advocate is now a monthly electronic publication. PPAG continues to maintain three websites (PPAG organizational site, JPPT site, and KidsMeds)

Strategic Objectives

6.1. Develop and continue to maintain the PPAG website to provide and obtain information

Progress: Completed/ongoing. The website, www.ppag.org, continues to provide organizational and Industry news through a robust content management system. The site is maintained by the Executive Director. Every committee and task force contributes content to the website.

6.1.1 Maintain and promote the residency database with the goal of making it comprehensive.

Progress: Completed/ongoing. The Residency database includes twenty (20) PGY1 residency programs, twenty-three (23) PGY2 residency programs, and eight (8) non-accredited residency programs. The Membership Committee continues to promote the database as a resource for residency directors and prospective residents.

6.2. Keep membership informed about the goals and objectives of the PPAG Board.

Progress: Under development/ongoing. Each year the PPAG President/Chair informs members of the goals of the organization during the PPAG Town Hall Meeting during the Annual Conference. The Board also distributes Charges-to-Committees each year. However, posting our strategic plan and publishing it in the Pediatric Pharmacy Advocate has not yet happened.

6.3. Continue to publish quarterly newsletter and expand content

Progress: Completed/ongoing. The Membership Committee publishes the Pediatric Pharmacy Advocate. Beginning in 2010, the newsletter became a monthly electronic publication. Content includes organization news as well as practice-based clinical news.

6.4. Develop timely information/responses to critical issues relevant to pediatric pharmacy as they arise.

Progress: No progress.

6.5. Survey members for continuous feedback

Progress: Continuous/ongoing. The most recent member survey was conducted in 2009. Questions regarding a potential organizational name change, and educational programming were posted. As a result of the survey, PPAG kept its current name. It was also determined to combine our Specialty and Annual Conferences into one meeting offered in the Spring.

