



Strategic Plan 2014 - 2017

Dec 8, 2014

PREPARED BY: RHONA MCGLASSON

Bone and Joint Canada (BJC) is a National Action Network (NAN) under the umbrella organization of Bone and Joint Decade which has recently changed its name to the Global Alliance for Musculoskeletal Health. A framework was developed by this organization for the decade 2010 – 2020 which is the strategic framework under which BJC functions. This framework includes: Arthritis (Inflammatory, OA), Bone Health and Osteoporosis, Pediatric MSDs, Spinal Disorders and LBP, and Trauma and Injury.

BJC consists of a group of committed clinical, research, policy and administrative experts that are involved with improvements to care for MSK patients at a system level across Canada.

Through a coordinated approach to knowledge translation (KT) the work focuses on the implementation of best practices including evidence based clinical practice and operational process to ensure patients have access to best care. This approach includes:

- Identifying and synthesizing multiple areas of research into an operational and actionable toolkit that addresses the health care continuum to meet the needs of MSK patient populations
- Working at both clinical and operational levels to facilitate the implementation of best practices
- Working with local, regional and provincial health systems to facilitate policy changes to support the best practice for patients
- Working with other stakeholders to develop tools at a system level that supports patients in the management of their condition

This approach is used to influence health policy by identifying opportunities for system level improvement and working with the relevant policy makers, clinicians, researchers and administrative professionals to implement effective systems.

Summary of strategic priorities

Improve MSK service delivery

Secure funding and facilitate KT for the successful implementation of projects at regional or provincial levels to improve care for people with MSK conditions

Expand KT network

Continue to build the awareness of BJC as a 'knowledge to action' agency for MSK care and service delivery through a comprehensive communications strategy including social media

Build Capacity to Fit the Purpose

Continuously improve capacity through funding, developing partnerships, community and volunteer networks, improving processes and evaluating technologies to effectively deliver services.

Improve MSK service delivery

Secure funding and facilitate KT for the successful implementation of projects at regional or provincial levels to improve care for people with MSK conditions

BJC will submit proposals for funding for the implementation of projects that focus on improving care and service delivery for a variety of MSK conditions including hip fracture, hip and knee replacement, low back pain and early osteoarthritis. The National Directors will lead the submissions with the support of BJC staff for proposal development and submission, including engaging appropriate clinical and policy stakeholders. Once funding is secured BJC will undertake the project management to implement the project.

Strategies	Activities	When	Expected Outcomes (KPIs)
a) Identify opportunities for projects to improve MSK care across the Canada	Continue to liaise with MSK leads across the country to identify opportunities for current and future projects	Ongoing	Identification of projects
b) Develop a strategy that aligns BJC as the 'Knowledge to Action' organizations in MSK research	Develop strategy documents Promote BJC to researchers as a KT organization to include as a budget item on their research grants	Dec 2014 Ongoing	Increased funding support in grants submitted by researchers for KT activities
c) Apply for funding for the following: i. Hip Fracture (Canadian Collaborative on Hip Fracture) ii. Low Back Pain iii. OA iv. Injury prevention v. Identify other opportunities in MSK research	Submission to research and implementation funding opportunities as they become available	Ongoing Ongoing	Proposals submitted Plans developed for each funding area
d) Implementation of the funded KT strategies (e.g. FIFA 11+, Other)	a) KT activities to support the implementation of the FIFA 11+ program in Ontario b) Develop KT protocols to meet the needs of the identified project	Ongoing	Implementation as per the project deliverables

Expand KT network

Continue to build the awareness of BJC as a ‘Knowledge to Action’ agency for MSK care and service delivery through a comprehensive communications strategy including social media

Continue to build the opportunities for system improvement for patients with MSK disorders through knowledge translation with organizations and individuals that have an interest in MSK and are considered stakeholders. This includes the opportunity of building advocacy through a coordinated approach that includes patients and facilitates communication with health care influencers.

Strategies	Activities	When	Expected Measurables and Outcomes (KPIs)
<ul style="list-style-type: none"> a) Utilize a communication strategy that includes targeted information to key stakeholders b) Maximize use of all forms of communications mediums within budget 	<ul style="list-style-type: none"> a) Act as a communications resource as funding allows b) Develop a communications strategy c) Maximize exposure for BJC through the communications strategy specifically to targeted individuals/groups/stakeholders 	Ongoing	Resource identified Strategy developed and implemented
<ul style="list-style-type: none"> c) Facilitate messaging on best practices in MSK 	<ul style="list-style-type: none"> d) Identify best practices e) Updated to web site on best practices in MSK f) Update to web site on stories from across the country 	Ongoing	Best Practice documents developed Web site updated Post information about best practices from across the country

Build Capacity to Fit the Purpose

Continuously improve capacity through funding, developing partnerships, community and volunteer networks, improving processes and evaluating technologies to effectively deliver services.

Ensure effective delivery of services through establishment of appropriate levels of funding and through relationships with other stakeholders who have an interest in MSK conditions.

Strategies	Activities	When	Expected Measurables and Outcomes (KPIs)
a) Cultivate strong, sustainable relationships with key stakeholders at the national and community levels to expand BJC's reach, influence and impact	Secure in-kind support from key organizations to help promote and distribute programs and resources.	Ongoing	Increase relationships through connecting with new partners
b) Develop a strong Steering Committee that effectively advocates for improvements to MSK care including implementation of BJC projects	Increase representation on the BJC Steering Committee of individuals with influence in their professions Increase participation in the BJC Steering Committee	Feb 2015 Spring 2015	Additional representation on the BJC SC Excellent governance that promotes planning and achievement of the BJC vision
c) Continue to build relationships with individuals to provide input into programming as well as advocacy	Identify additional organizations and individuals	Ongoing	
d) Promote the work of BJC through the website for easier accessibility to information and support resources	Develop a communications strategy that promotes the web site Update the web site on an ongoing basis with stories	Dec 2014	Increase hits to the web site
e) Develop an annual report that provides a summary and focus for BJC activity	Annual report development	Annual, Summer	Report developed

BJC Projects

Hip Fracture

National Director: Lauren Beaupre

Plan 2014 - 2017

Work is required to continue to facilitate the implementation of best practice in hip fracture care across the country. In many provinces data are now being used to measure performance and work will be undertaken to promote the use of indicators and

In 2014/15, a resubmission to the November 2014 PHSI grant for ongoing funding for the EQI-HIP Hip Fracture project that focuses on using data and quality indicators provincially has been completed. This work will continue to build sustainable change for the care of hip fracture patients.

The provincial groups will be invited to a teleconference to review the findings of a Knowledge Synthesis grant that examined current quality indicators and determined future direction. This work resulted in the submission of a Catalyst grant to the Technology Evaluation in the Elderly Network (TVN).

In addition, a Canadian Collaborative on Hip Fracture is in development to link multiple hip fracture projects and develop a sustainable program of research that evaluates best practice and the implementation of such practice at the bedside.

Low Back Pain

National Director: Dr. Rampersaud

Plan 2014 - 2017

The report from the March 28th 2014 meeting will be finalized and the model of care and framework for low back pain will be developed and launched on the BJC web site in 2015. This will be used to develop a proposal for Health Canada to promote opportunities to improve the management of low back pain across the country. Additional work will be undertaken to build consensus of the framework including with the participating organizations as well as within the provinces so that there is momentum for implementation should funding become available.

Osteoarthritis

National Director: Aileen Davis

Plan 2014 - 2017

A meeting was hosted in Toronto on May 23rd 2014 which was extremely successful in building consensus on a framework for OA. BJC will be developing a number of proposals for funding including investigating the opportunity for a grant to the Public Health Agency of Canada which will require matching private industry funding. The preparation of this grant will take about one year as it will require results from the FIFA 11+ injury prevention program, results from the research in OA that is being undertaken by Dr. Davis as well as identification of other research findings that would support an early OA intervention framework. If successful the work will be undertaken to implement the OA strategies identified in the grant.

Injury Prevention:

National Director: In transition

Plan 2014 - 2017

Ensure the success of the implementation of the FIFA 11+ program in Ontario which is funded through Ontario Trillium Foundation funding. Leverage this work to identify opportunities to work with the appropriate individuals in the implementation of injury prevention in other areas including in soccer across the rest of Canada and the recreational and teaching sectors in Ontario.

Hip and Knee replacement

*National Director: Dr. James Waddell -
in transition*

Plan 2014 - 2017

Complete an update on the Hip and knee replacement toolkit to include information on appropriateness in Canada. Funding is required and opportunities are being investigated.