

Shaping the future of OB/GYN by establishing the hospitalist model as the care standard.

# Society of OB/GYN Hospitalists

### VISION 2020

In January 2017, the Board of Directors of SOGH gathered in Las Vegas, NV to discuss the future of the society. Through facilitated activities and collaborative discussions, members of the board immersed themselves in a study of the organization's SWOT analysis and an outline of previous mission priorities. Seeking to leverage the organization's strengths and capitalize on current opportunities, the objectives and strategies outlined in this strategic plan emerged.

#### Strength & Opportunity

- ▶ SOGH is the only nonprofit organization solely dedicated to the promotion and support of OB/GYN hospitalists.
- SOGH has a deep commitment to furthering our field and establishing this emerging sub-specialty.
- SOGH now has a professional staff and a dedicated Executive Director, which will enable growth and prosperity.
- SOGH is committed to cultivating future leadership in Quality & Safety and promoting effective research to support that goal.
- SOGH has a strong history of dedicated volunteers and Board leadership.
- SOGH's signature hands-on training and signature simulation courses at the Annual Clinical Meeting provide a one-of-a-kind educational experience.
- SOGH is well positioned to lead the charge in defining core competencies for the OB/ GYN hospitalist.

We are confident that SOGH is well positioned to lead the charge to make the hospitalist model the care standard for OB/GYN. We are empowered by this vision and filled with hope that the work of the society's board and members will be a catalyst for advancement and positive change in women's healthcare.

All time, energy, and resources over the next three years will be invested in making Vision 2020 a reality.

# HISTORY & LEADERSHIP

The Society of OB/GYN Hospitalists was founded in 2010 by a group of passionate physicians dedicated to advancing the mission of the emerging sub-specialty of OB/GYN hospitalist medicine. Since its inception, the membership has grown to approximately 550 members - inclusive of physicians, certified nurse midwives, allied health-care professionals, residents, and non-healthcare professionals.

The society's primary focus is to support members in their practice of OB/GYN hospitalist medicine through education and information in our newsletter, website, and annual clinical meeting. In addition to membership dues and annual meeting registrations, SOGH has a diversified stream of revenue including online advertising, exhibitor revenue and sponsorships for the Annual Clinical Meeting, as well as restricted and unrestricted grant funding.

At the time of the organization's initial launch, all administrative and conference planning functions were carried out by SOGH's board members and other volunteers. In 2013, SOGH transitioned to an executive administrator model with leadership provided in collaboration with the Society of Hospital Medicine.

In the fall of 2016, after several months of engaging in an executive search process, the Board of Directors appointed the organization's first Executive Director. Additional paid staff have been engaged in early 2017 and the society is well positioned to successfully implement a period of long-term strategic planning and growth.

As the organization looks ahead to 2020 and the tenth anniversary Annual Clinical Meeting, this strategic plan outlines intended benchmarks for membership, programming, organizational infrastructure, community engagement, and advancement.

### SOGH TIMELINE

Birth of the first ever nonprofit professional organization of physicians, midwives and others interested in forwarding the mission of the emerging subspecialty of Ob/Gyn Hospitalist Medicine.

2010

SOGH is officially launched

SOGH transitioned from an all-volunteer managed organization to having paid executive administrative services from The Society for Hospital Medicine.

2013

Transition to executive administrator

The Board of Directors engaged in an eight-month executive search process, with an objective to review candidates and engage a dedicated Executive Director to provide successful leadership and management of the society.

2016

Hiring of first Executive Director

The tenth anniversary Annual Clinical Meeting is a significant benchmark in the life of the organization and its members, as well as the further establishment of the sub-specialty of the OB/GYN hospitalist care model.

2020

Tenth Anniversary ACM 2011

First ACM held in Denver, CO Forty-three hospitalists gathered in Denver, CO for the first annual SOGH Annual Clinical Meeting.

2014

Organizational growth period begins

During this time with SHM as administrator, SOGH achieved significant increase in operating revenue. In addition, active membership grew, largely attributed to establishing relationships with key hospital medicine staffing companies. The organizations also collaborated on an Amicus Brief to the U.S. Supreme Court defining hospitalist competency.

2017

Strategic Planning period launched The Board of Directors gathered in January for two days in Las Vegas to review the organization's mission, set a long-term vision, and outline objectives and strategies for a 2017-2020 Strategic Plan. Official launch, May 2017.

# SOGH MISSION, VISION & VALUES

#### **MISSION**

The Society of OB/GYN Hospitalists is dedicated to improving outcomes for hospitalized women and supporting those who share this mission.

#### **VISION**

Shaping the future of OB/GYN by establishing the hospitalist model as the care standard.

#### **VALUES**

#### **Excellence**

We have high expectations for SOGH and consistently pursue excellence not just as a standard for our work, but a discipline for everything we do.

#### Collaboration

We strive to have a collaborative culture and are committed to increasing opportunities for engagement and support within the broader OB/GYN and hospitalist communities.

#### Leadership

We seek to build an organization with a loyal, strong base of constituents, colleagues, and supporters. We will achieve this and all our strategic objectives by referring to our mission and vision for every decision we make thereby constantly reinforcing our commitment to these core values.

#### Quality

We expect everyone with whom we engage to perceive great value in their experience—for our members in their benefits and society affiliation, our conference attendees in their educational experience, and our community partners and supporters in our collegiality and positive, shared experience.

#### **Community**

We believe there is strength in deepening our community ties, exploring policies and practices that benefit the field, compiling shared knowledge and resources, and establishing relationships that create positive futures for our shared constituencies.

## STRATEGIC PLAN KEY OBJECTIVES

#### **MEMBERSHIP (PAGE 6)**

Members are the lifeblood of SOGH, and future success is contingent upon member engagement, commitment, and growth. In order to grow the organization, SOGH seeks to better understand the sector as a whole and where potential members live and work.

#### **ANNUAL CLINICAL MEETING & OTHER PROGRAMMING (PAGE 7)**

Since its inaugural conference in 2011, the ACM has grown in both size and scope each year. In addition to continued growth and additional learning opportunities for attendees, SOGH is committed to developing more expansive programming to assist in satisfying the educational needs of members and the greater OB/GYN medical community.

#### **ORGANIZATIONAL INFRASTRUCTURE (PAGE 8)**

Every nonprofit goes through various stages of growth and change. As SOGH looks ahead to the its tenth anniversary in 2020, it is imperative to assess the structure and all functions of internal operations to ensure long-term efficiency and effectiveness.

#### **COMMUNITY (PAGE 9)**

SOGH seeks to be collegial partners within the growing field of healthcare-focused member organizations, as well as to legitimately achieve the status as experts in all matters of the OB/GYN hospitalist sub-specialty.

#### **ADVANCEMENT (PAGE 10)**

Further diversification of funding sources and broader marketing and communications efforts are vital to long-term sustainability and growth.

# OBJECTIVE 1 MEMBERSHIP

### GOAL #1 Increase number of paid SOGH members to 1,000 and more effectively penetrate the greater OB/GYN hospitalist community.

#### **Strategies**

- Conduct comprehensive, in-depth research in order to determine the current number of OB/GYN hospitalists in the United States.
- Evaluate SOGH's group membership engagement process, levels, and current/potential participants.
- Increase the profile of SOGH.
- Increase SOGH's presence at other conferences and medical meetings where potential members will be in attendance.

#### **GOAL #2** Increase SOGH membership appeal and engagement for non-physicians.

#### **Strategies**

- Revise SOGH website language to be more inclusive and inviting to non-physicians.
- Ensure that all current SOGH members identify their professional affiliation within the database, and revise membership application and data-gathering tools to include a place for members to self-identify.

#### **GOAL #3** Engage at least 10% of all paid members in SOGH volunteer service opportunities.

- Complete the process of establishing the SOGH governance structure per nonprofit best practices which includes a defined hierarchy of standing and supporting committees and purpose statements for each.
- More effectively utilize newsletters, the member database, and the ACM to solicit volunteers for available volunteer opportunities.
- Each board member commits to cultivate 3-5 volunteers per year.

| Benchmarks & Timeline   | Responsible Party                  |
|---|------------------------------------|
| 1. Develop a strategy to research OB/GYN hospitalist programs and staffing. To be completed by Q3 of 2017.  | Survey Committee                   |
| 2. Conduct comprehensive research and data collection. To be done in Q1 and Q2 of 2018.   | Survey Committee                   |
| 3. Review and revise website language associated with membership types, benefits, and recruitment. To be done in Q3 of 2017.  | Administrative Staff               |
| 4. Revise customer relationship management software to include a data field for members to identify professional affiliation and deploy communications to encourage members to update their profiles. To be done in Q4 of 2017. | Administrative Staff               |
| 5. Develop a budget and timeline for SOGH Staff and/or Board to host an exhibitor booth at the Banner conference and potentially others. To be completed by Q3 of 2017.   | Finance & Administration Committee |
| 6. Further expand the governance structure to include additional volunteer service opportunities and more accurately define engagement opportunities for SOGH members. To be done in Q4 of 2017 and Q1 of 2018.                 | Governance Committee and Board     |
| 7. Devise and execute a volunteer engagement strategy for all paid members. To be done in Q2-Q3 of 2018.  | Governance Committee and Board     |

#### **OBJECTIVE 2**

### **ACM & OTHER PROGRAMMING**

#### GOAL #1 Define, develop, and publish core competencies for the OB/GYN Hospitalist.

#### **Strategies**

- Formulate a Task Force to codify the core competencies development process inclusive of defining content areas, conditions, procedures, and the hospitalist role in the healthcare system.
- Engage SOGH members in a survey process to validate and refine the content areas defined by the Task Force.
- Develop a list of potential contributors to develop the competencies, then engage in a vigorous review and revision process.
- Publish the SOGH OB/GYN hospitalist core competencies manual and formulate a system for an accreditation certificate, CME credit, and certificate renewal.

#### **GOAL #2** Continue to establish a presence with the Annual Clinical Meeting and increase attendance.

#### **Strategies**

- Set specific attendance measures and track progress.
- Integrate a Simulation Center or professional facility to augment the course offerings and enhance attendee educational experience.
- Utilize social media, PR Newswire, or other communications tools to increase overall recognition.

# GOAL #3 Continue to enhance and develop www.societyofobgynhospitalists.org toward becoming the trusted source for the OB/GYN hospitalist community.

- Further develop the Members-Only area on the website and provide more research and relevant content, e.g. additional articles, sample protocols, instructional videos, inspirational leadership resources, and sample job descriptions, etc.
- Enhance the interface function so members are notified when additional content is uploaded. Deploy the messaging and social engagement functions on the back-end so members can communicate with one another.
- Collaborate on file sharing opportunities with other organizations that have relevant content.

| Benchmarks & Timeline   | Responsible Party                         |
|---|---|
| 1. Develop a Core Competencies Task Force (CCTF) purpose statement, participant expectations, and roster of potential participants. To be completed by Q3 of 2017.                              | Tanner Colegrove,<br>2017 President Elect |
| 2. In consultation with the CCTF, develop a formal project timeline including meeting schedule and deliverables. To be completed by Q4 of 2017.   | Executive Director and CCTF               |
| 3. Support the CCTF in facilitating the process of developing the core competencies. To be done from Q1 2018 through Q1 of 2019.  | Executive Director, Board, and CCTF       |
| 4. Finalize the core competencies publication and details for broad distribution. To be done from Q2 2019 through Q2 of 2020.   | CCTF                                      |
| 5. Formally present core competencies at the 10th Anniversary Annual Clinical Meeting in Q3 of 2020.  | CCTF                                      |
| 6. Establish a comprehensive timeline and communications strategy for the ACM. By Q4 of 2017.   | Executive Director and Board              |
| 7. Formalize committee description for the SOGH Academic Committee to include overhaul of the Members-only section of the SOGH website, and engage them in this work. To be done by Q3 of 2017. | Governance Committee                      |
| 8. Develop a formal project timeline including meeting schedule and deliverables for completing the enhanced website. To be done by Q4 of 2017.   | Academic Committee                        |
| 9. Re-launch the enhanced SOGH Members-only section of the website. To be done by Q2 of 2018.   | Academic Committee                        |

#### **OBJECTIVE 3**

### ORGANIZATIONAL INFRASTRUCTURE

#### **GOAL #1** Diversify and expand the SOGH Board of Directors

#### **Strategies**

- Continued growth as a board and understanding of established nonprofit governance best practices and adherence to them.
- Finalize transition to properly balanced organization. Oversight = Board. Management = Staff.
- Parallel Revise the Bylaws to more effectively support the mission goals and long-term programmatic needs of the organization.
- Educate the membership of proposed governance changes and how amendments to the Bylaws better serve the organization at large.

#### **GOAL #2** Develop a proper financial reserve and plan to achieve solvency.

#### **Strategies**

- Continued education of the board on all financial matters: budgeting, cash flow, fiscal year trends, and fundraising.
- Establish a robust Finance & Administration internal operations manual.
- Define and engage a more robust budget and forecasting process; begin outlining out-year budgets.

# GOAL #3 Identify a long-term staffing infrastructure and identify the talent and expertise needed to support the programmatic goals of the organization.

- Deep-dive of the 2017-2020 strategic plan objectives and develop a list of potential paid and unpaid staffing needs.
- Identify resources necessary to expand the SOGH staff including salary, technology, and physical office space.
- Transition from a work-from-home staffing structure to establishing an official SOGH office space in order to engage a larger workforce.

| Benchmarks & Timeline   | Responsible Party                               |
|---|---|
| 1. Continued training on the structures and practices of high-performing nonprofit boards and the delineation of responsibilities between Board and Staff. Ongoing. | Executive Director and Board                    |
| 2. Complete Bylaws revision process and prepare amendments for approval at the Annual Meeting. To be done by Q3 of 2017.  | Governance Committee                            |
| 3. Approve amended Bylaws and implement more efficient and effective governance structure. To be done in Q3 of 2017 at the Annual Clinical Meeting.                 | Board & SOGH Members                            |
| 4. Devise and execute a volunteer engagement strategy for all paid members. To be done in Q2-Q3 of 2018.  | Governance Committee                            |
| 5. Develop a list of potential staffing needs for 2017-2020 based on strategic plan objectives. To be done by Q4 of 2017.   | Finance & Administration<br>Committee           |
| 6. Outline contents and practices of internal controls and formal budgeting process. To be done between Q3 of 2017 through Q3 of 2018.                              | Finance & Administration<br>Committee           |
| 7. Identify plan to achieve financial solvency. To be done by Q1 of 2019.   | Finance & Administration<br>Committee and Board |

# OBJECTIVE 4 COMMUNITY

GOAL #1 Increase SOGH awareness among healthcare-focused organizations toward creating influence and a sense of camaraderie and goodwill among them.

- Continued stewardship of existing industry and corporate relationships.
- Work to identify and develop relationships with associations that represent our view of "best practice" organizations (e.g. hospitals, nonprofit medical groups, universities, and top medical schools).
- Gain visibility with national organizations promoting best practices and their constituents through ongoing speaking engagements, committee participation, designated liaison assignments, and the overall exchange of ideas.
- Identify and establish areas of collaboration that support mutual goals including shared research, joint research, white papers, publications, etc.

| Benchmarks & Timeline  | Responsible Party              |
|--|--------------------------------|
| 1. Develop a list of organizations to develop relationships in supporting and championing the work of the Core Competencies Task Force. To be done in Q3 and Q4 of 2017. | CCTF and Board                 |
| 2. SOGH Board members and liaisons hold and maintain significant positions throughout the healthcare association field. Ongoing Q3 of 2017 through Q3 of 2020.           | Board                          |
| 3. Develop and adopt a broad scale community engagement strategy. To be done from Q1-Q4 of 2019.   | Administrative Staff and Board |
| 4. Hire a Community Engagement manager. To be done by Q3 of 2020.  | Board                          |

# OBJECTIVE 5 ADVANCEMENT

#### **GOAL #1** Diversify funding resources and practices.

#### **Strategies**

- Monetize SOGH's resources including formal SOGH survey data and access to survey SOGH's membership.
- Expand development efforts to include a dedicated fundraising staff professional.
- Continued practice of engaging local fundraising support in cities hosting Annual Clinical Meetings.
- Pursue relationships with funding sources outside the healthcare field.
- Board of Directors will take a more active role in fundraising.

#### GOAL #2 Improved branding and overall visibility

- Continued redevelopment of the SOGH website.
- Expand the organization's electronic presence including social media and cultivate deeper relationships with influential individuals, organizations, and supporters who will assist in increased exposure.
- Capitalize on the expertise of current SOGH staff to revise language used to educate and engage on the website and in all collateral and materials.

| Benchmarks & Timeline   | Responsible Party                          |
|---|--|
| 1. Complete the 2016 Salary Survey and Key Findings Report. To be done in Q3 of 2017  | Cate Stika                                 |
| 2. Develop a Survey Committee to outline a strategy to formalize the survey process in order to produce a bi-annual survey and report and support Dr. Stika's work. To be done by Q4 of 2017. | SOGH Governance Committee                  |
| 3. Develop a plan to monetize the Salary Survey and provide the data report to interested consumers. To be done in Q3 of 2017.  | SOGH Finance & Administration<br>Committee |
| 4. Develop a long-term Development Strategy that encompasses key strategic plan objectives. To be done by Q1 of 2018.   | Board of Directors                         |
| 5. Develop a Marketing & Branding Strategy. Q1-Q4 of 2018.  | Administrative Staff                       |
| 6. Continued training on the Board's role in fundraising. Ongoing.  | Executive Director                         |

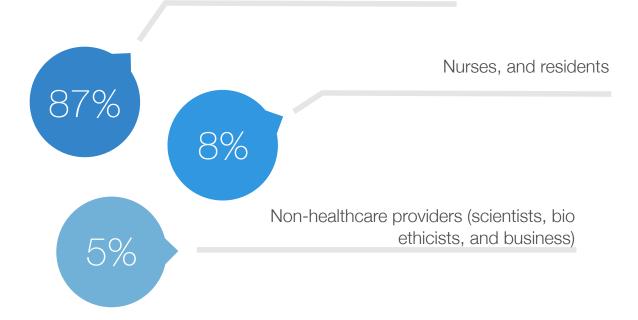
### APPENDIX DOCUMENTS

#### **Pages 12-15 outline the following data:**

- Current SOGH Membership by Profession
- Current SOGH Membership by Geographic Location
- Annual Clinical Meeting Attendance Tracking, 2011-2016
- Letter of Introduction to Core Competencies Development Strategy by Tanner Colegrove,
   President Elect
- List of Core Competency Task Force Potential Partners and Collaborators

# CURRENT SOGH MEMBERSHIP BY PROFESSION

Licensed physicians and certified nurse midwives



Membership statistics cited above reflect data as of 2.28.17.

# CURRENT SOGH MEMBERSHIP BY GEOGRAPHIC REGION

7%

#### Northeast

SOGH Membership currently in the following states:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont, New Jersey, New York, and Pennsylvania. 15%

#### Midwest

SOGH Membership currently in the following states:

Illinois, Indiana,
Michigan, Ohio,
Wisconsin, Iowa,
Kansas, Minnesota,
Missouri, Nebraska,
North Dakota, and
South Dakota.

29%

#### West

SOGH Membership currently in the following states:

Alaska, Arizona,
California, Colorado,
Hawaii, Idaho,
Montana, Nevada,
New Mexico, Oregon,
Utah, Washington,
and Wyoming.

49%

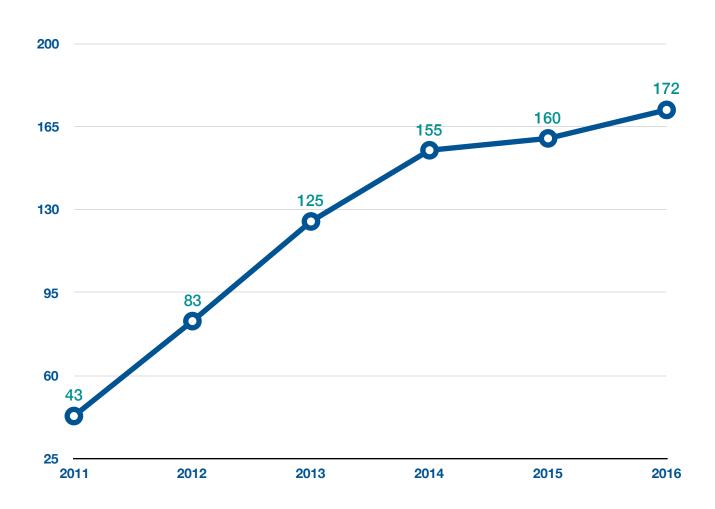
#### South

SOGH Membership currently in the following states:

Alabama, Arkansas,
Delaware, Florida,
Georgia, Kentucky,
Louisiana, Maryland,
Mississippi, North
Carolina, Oklahoma,
South Carolina,
Tennessee, Texas,
Virginia, Washington
DC, and West Virginia.

Membership statistics cited above reflect data as of 2.28.17.

# ANNUAL CLINICAL MEETING Attendance by Year



# CORE COMPETENCIES OBJECTIVES

Like our medicine hospitalist predecessors experienced just a few decades ago, the role of the hospitalist in OB and OB/GYN has evolved rapidly in response to diverse forces, such as the need for leadership on our units, the increasing emphasis on quality and safety in our field, the changing demographics of the workforce, and rising liability costs. Obstetricians and gynecologists are transitioning to the hospitalist model in increasing numbers, and more and more hospitals around the country are implementing hospitalist programs in their units. Although limited, research suggests that OB and OB/GYN hospitalists improve outcomes. Given these positive trends, along with the widespread success of the hospitalist model in other specialties, the hospitalist model in Obstetrics and Gynecology is here to stay, and the time has come to further characterize and define our role.

As SOGH President Elect, I'm proud to lead the efforts to establish core competencies for OB and OB/GYN Hospitalists. Our core competencies will establish standards for the knowledge, skills, and attitudes expected of hospitalists in our field, provide a framework for education and training of current and future physicians, and enable directors of fellowship and residency programs, medical school clerkships, and continuing medical education programs to design curriculum targeted to physicians in this field.

The work of developing the core competencies began in January of this year at the SOGH Board of Director's strategic planning meeting. Early phases of the project have including conducting research, developing a comprehensive strategy and timeline, and establishing a list of partner organizations with whom we hope to collaborate. A Core Competencies Task Force (CCTF), representing the OB/GYN hospitalist workforce at large, will be established to propose content areas for the core competencies and oversee the entire project. Contributors will then be solicited to write specific content. The core competencies will then undergo a series of reviews and revisions before being presented at the SOGH Annual Clinical Meeting in 2020.

Establishing core competencies will have far-reaching benefits for physicians and our patients. Through this exciting work, SOGH and our members have the potential to shape patient care and the future of Obstetrics and Gynecology. I invite anyone with interest to get engaged, and I look forward to seeing this work come to fruition.

Tanner Colegrove
SOGH President Elect

# CORE COMPETENCY TASK FORCE: List of Potential Partners & Collaborators

Agency for Healthcare Research & Quality (AHRQ)

American Academy of Family Practice (AAFP)

American Association of Gynecologic Laparoscopists (AAGL)

American Association of Nurse Anesthetists

American Association of Women's Health Obstetric and Neonatal Nurses (AWHONN)

American Board of Obstetrics & Gynecology (ABOG)

American College of Nurse Midwives

American Congress of Obstetricians & Gynecologists (ACOG)

American Hospital Association (AHA)

American Society of Anesthesiologists

American Society of Osteopathic Obstetricians and Gynecologists (ACOOG)

American Society of Reproductive Medicine (ASRM)

California Maternal Quality Care Collaborative

Institute for Healthcare Improvement (IHI)

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

Nurse Practitioners in Women's Health

**OB Hospitalist Group** 

Obstetrix

Residency Review Committee (RRC)

Salus Global

Society for Academic Specialists in Obstetrics and Gynecology (SASGOG)

Society for Family Planning

Society for Hospital Medicine (SHM)

Society of Maternal Fetal Medicine (SMFM)

Team Health

The Accreditation Council of Graduate Medical Education (ACGME)

The Council on Patient Safety in Women's Health

#### **STRATEGIC PLAN WRITTEN BY**

Toni Capra, Executive Director

#### STRATEGIC PLAN EDITED BY

Janet M. Burkard, SOGH Assistant

#### **2017 BOARD OF DIRECTORS**

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#### STRATEGIC PLAN 2017-2020

Shaping the future of OB/GYN by establishing the hospitalist model as the care standard.