

**\* 1. PRIORITY I: CONGRESS, EDUCATION AND INDUSTRIAL RELATIONS**

**Please share your ideas for ways in which MDS can innovate in this area:**

- Increase content to represent and provide educational opportunities for non-medical Health Care Professionals involved in the care of people living with Movement Disorders this could be done in concurrent streams
- Some of the congress could focus on the complexities of late stage Parkinson's disease and Atypical Parkinson's Conditions. Key areas could be identify and develop evidence to support palliative and End of life care models, Multi-Disciplinary approaches, influence of Advance care Plans /Medical directives
- Consider developing a Palliative care task force- this appears to be an area of clinical need and is of interest to clinicians
- Atypical Parkinsonism's- continues to be an area of significant clinical challenge from diagnosis to delivering care and can be identified as a gap in the knowledge of many clinicians
- In some areas of the world (esp. the UK) Parkinson's is often managed by geriatricians who are more clinically focused rather than research focused, and there knowledge needs are only addressed in the parallel sessions

**\* 2. PRIORITY II: MEMBERSHIP**

**Please share your ideas for ways in which MDS can innovate in this area:**

- Increasing the content of the congress and publications to reflect the (non-medical) health care professionals who deliver care to people with Movement disorders. This has the potential increase the pool of people who would potentially become members and subscribe to a publication.

**\* 3. PRIORITY III: PUBLICATIONS**

**Please share your ideas for ways in which MDS can innovate in this area:**

- Content in the Clinical Practice Journal could include articles written by non-medical Health Care Professional's in regard to their research- which often has a clinical focus
- More Qualitative research content which captures patient's perception of illness and care burden
- Any content or research that looks at health economic burden if illness and cost benefits in treatments would be welcomed!
- Translational research / Case reviews

**\* 4. PRIORITY IV: ORGANIZATION / FINANCES**

**Please share your ideas for ways in which MDS can innovate in this area:**

- Good financial stewardship is key to a successful MDS, there needs to be a degree of transparency in financial management especially considering the increasing scrutiny on pharmaceutical sponsorship
- The MDS offered very reasonable membership dues and pricing to attend conferences which is attractive (especially for non-medical HCP's) further developing this is an area where some growth in membership could occur. Increasing representation of these HCP's also increases the pool of potential sponsors for events.

**\* 5. PRIORITY V: OUTREACH**

**Please share your ideas for ways in which MDS can innovate in this area:**

- Out reach into developing countries is integral, considering projects which are multi-disciplinary in nature may also have lasting impact, as there are often more non-medical HCP's in a community than medical.
- Develop or strengthen links with World Health Organisation/UNHCR to facilitate and support development of Global basic care guidelines for people living with Parkinson's and Atypical Parkinson's
- More project which are run on line and can be supported with electronic resources.
- There has been rapid economic growth in China/India and parts of South East Asia-and the ability to deliver skilled care to people with movement disorders has often not kept pace- there may be the possibility to develop outreach programs to these countries on a cost recovery/ for profit basis.