

## **MDS Strategic Priorities for 2019-2021**

1. Increase Engagement with Members, Non-members, Leadership Bodies, and the General Public
  2. Enhance MDS' Scientific Profile
  3. Be the Premier Educational Source on Movement Disorders
  4. Professionalization of the Society
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### **1. Increase Engagement with Members, Non-members , Leadership Bodies and the General Public**

#### **Goal 1a: Provide an enriched membership experience**

##### **Identified Strategies:**

- Re-examine Associate Membership program and retention/conversion strategies for Associate Members to become full members. **(M)**
- Consider non-English education at the regional level; especially for healthcare professionals, nurses, physiotherapists etc. **(M)**
- Target specific countries for increased membership and representation around the world. **(M)**
- Target basic scientists and other Societies with overlapping interest, promoting MDS as a vehicle to increase interactions with movement disorder clinicians (see goal 1b). **(M)**

#### **Goal 1b: Dialog with the broader Movement Disorder community to establish MDS as the expert in the field**

##### **Identified Strategies**

- Collaborate with other Societies – targeting regional and local movement disorder /neurological /medical groups with overlapping goals to build strategic partnerships. **(S)**
- Provide quick, targeted and reliable information to the Movement Disorder community, including patients. **(M/L)**
- Partner with foundations and non-governmental organizations to provide outreach and guidance to the wider community (WHO). **(L)**
- Consider fresh initiatives, including consolidations, with Societies that duplicate mission, distract attention from MDS and compete for resources. **(L)**

Timeline Key:

(S) – Completed by the 2019 International Congress in Nice

(M) – Completed by the 2020 International Congress in Philadelphia

(L) – Completed by the 2021 International Congress in Copenhagen

## 2. Enhance MDS' Scientific Profile

### Goal 2a: Broaden the impact of MDS publications

#### Identified Strategies:

- Encourage maximum degree of professionalism in our products. **(Ongoing)**
- Maximize reputation and stature of our two journals, website, newsletter and official publications. **(Ongoing)**
- Explore improvements to the user platform and user experience. **(M/L)**
- Increase communication methods to highlight strengths to target audiences and to remain up-to-date and visionary in communication formats increasingly available for scientific communication (elevate visibility to Basic Scientists through translational articles). **(S)**
- Affect policy and public opinion through frequent updates on topics of interest. **(M)**
- Re-evaluate the format of Moving Along – including its target audience, optimum medium, and general purpose. **(S)**
- Explore opportunities for electronic versions of MDS products (Apps, programs tools). **(M/L)**
- Negotiate contracts for journal publications that maximizes advantages to MDS. **(S)**

### Goal 2b: Establish MDS as the catalyst for scientific endeavors

#### Identified Strategies:

- Develop formal or informal mechanisms to foster dialogue between basic scientists and clinicians, with government and non-government support with White papers or other “endurables” as outcomes. **(M)**
- Engage young basic scientist, through the Young Member Group i.e. especially to those with MD topics at the Neuroscience Meeting **(S)**
- Emphasize scientific research on MDS website. **(M)**
- Create a report guiding the next year of scientific research on a topic in collaboration with a funding source and/or governmental scientific bodies (NIH, WellcomeTrust, etc). **(L)**
- Explore registries or other research databases through patient related outcome measures and tracking of data. **(L)**
- Consider development of a “MDS Foundation” to bring together major stakeholders (MDS, allied societies, government, industry, foundation, patient interest groups) to influence and direct scientific advances and priorities. **(L)**

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### **3. Be the Premier Educational Source on Movement Disorders**

#### **Goal 3a: Engage a larger audience at MDS Congresses**

##### **Identified Strategies:**

- Increase flexibility to the CSPC to include new topics, special lectures, local representation, CME and non-CME. **(S)**
- Explore new formats (ex. e-posters, presentations from industry researchers). **(Ongoing)**
- Increase presence of young members, especially on the podium (scientific sessions, pavilion,) as well as oral presentations in front of e-posters. **(M)**
- Create horizontal topic tracks or curricular recommendations throughout Congress to attract specific groups to the meeting. **(M)**
- Leverage regional congresses for outreach to local interest groups. **(M)**
- Explore use of Congress content for enduring materials in online education. **(Ongoing)**
- Promote outreach to media and public awareness at all congresses and MDS-sponsored meetings. **(S)**

#### **Goal 3b: Provide a personalized and wide-ranging educational experiences for our members**

##### **Identified Strategies:**

- Increased marketing and use of the Virtual Professor Program. **(S)**
- Continually update education roadmap to provide individualized education plans. **(L)**
- Customize Roadmap so that different curricula can be designed and implemented for a wide variety of backgrounds including different levels of medical and scientific expertise. **(L)**
- Consider providing certificates for completion of Roadmap activities (number of hours, special “package” programs, etc.). **(M)**
- Utilize patients in live educational programming. **(M)**
- Explore offering training and education opportunities (with completion certificates), including development of OSCE (Objective Structured Clinical Examination) models. **(L)**
- Partner with Foundations or other award-determining organizations to develop skill-specific educational programs that prepare candidates for competitive grants or awards (ex. CHDI program in discussion). **(M)**
- Leverage our Roadmap as a unique educational resource that could be accessed by other societies in need of such education (e.g., AAN) with compensation or membership sharing arrangements to be explored. **(S)**

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## 4. Professionalization of the Society

### Goal 4a: Enhance the Society's governance structure through leadership development

#### Identified Strategies:

- Provide orientation and leadership training on the structure of the Society to members of all MDS groups and maintain the Leadership Manual, which must be continually updated. **(S)**
- Officers to provide feedback on biannual reports from groups. **(S)**
- Appoint IEC members to serve on committees/task forces as IEC representatives throughout the term feedback provided at the in-person IEC Meeting. **(S/M)**
- Explore opportunities for improvements, expansion and/or modifications of the LEAP Program. **(M)**

### Goal 4b: Engage more members through providing volunteer opportunities within the Society

#### Identified Strategies:

- Address the perceptions of lack of volunteer opportunities within MDS. **(S/M)**
- Explore opportunities for interested members to become involved in groups across the Society. **(S/M)**
- Highlight the various different committees, task forces, special interest groups and study groups, so people are aware of the wide range of activities in which the Society engages. **(S)**
- Launch a "Young Member Innovation Lab" to provide an opportunity for young members to develop programs and become more involved with the Society. **(S)**

### Goal 4c: Ensure the strong financial foundation of MDS

#### Identified Strategies:

- Explore consulting with industry, while avoiding perceptions of bias. **(S)**
- Market and protect MDS products, especially online and platform based products. **(S/M)**
- Pursue information regarding a philanthropic fund. **(M)**
- Explore a fund for innovative projects. **(M)**

### Goal 4d: Provide increased Section autonomy but recognizing the distinct advantages of cross fertilization as well as centralization

#### Identified Strategies:

- Strategically allocate funding for regional courses while ensuring accountability. **(Ongoing)**
- Recognize and consider strategies to accommodate differences across countries and regions **(M)**
- Explore potential of working group systems to accommodate differences within a region (i.e. Central American Working Group) **(L)**
- Recognize and address the lack of movement disorder specialists within some countries and the need to educate general neurologists and practitioners. **(L)**
- Consider Study Groups or Committees within Sections which may represent regionally focused topics. **(M)**

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