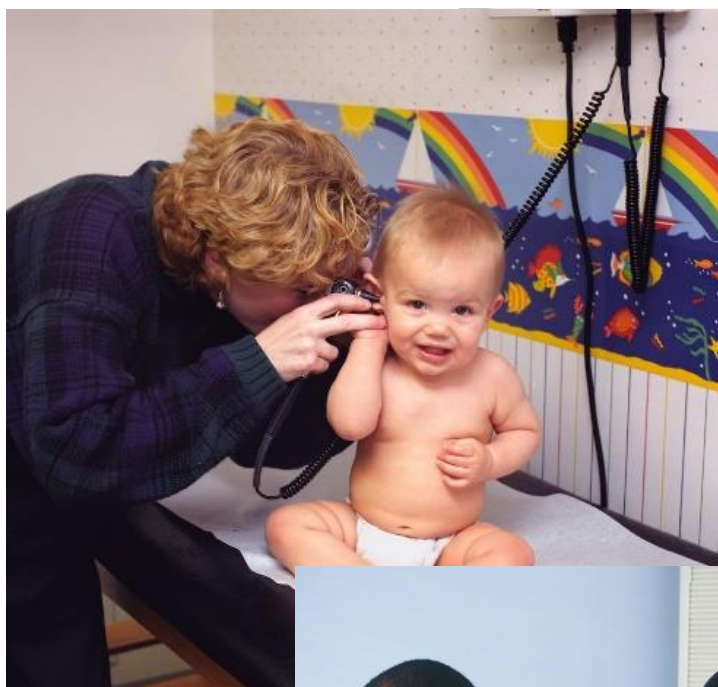


NC Pediatric Society

Three Year Strategic Plan

2023-2025



OUR VISION AND MISSION

Our Vision. Each and every North Carolina child grows up healthy and thrives.

Our Mission: To improve the health of all North Carolina children and support the pediatric professionals who care for them.

WHO WE ARE

Who We Are: The NC Pediatric Society is a leading authority, advocate, and voice for the health of our state's children and for the profession of pediatrics.

NCPeds brings together the deep expertise, diverse perspectives, and on-the-ground experience of its 2300 members to inform, educate, support, and advocate for an equitable, accessible health care system that serves the needs of every North Carolina child.

OUR CORE VALUES

We act in alignment with our core values throughout our work to improve the health of children and support the pediatric community.

- **Equity:** We believe we must actively change unjust policies, practices and norms that can prevent some children from receiving fair treatment and accessing the resources and opportunities they need to grow up healthy and thrive.
- **Collaboration:** We believe that we are more effective at achieving our goals when we work together with humility, honesty, and a shared commitment to put children first.
- **Integrity:** We believe in leading with honesty, respect, and a steadfast focus on centering the health and well-being of children in our decision-making and actions.
- **Respect:** We strive to understand and honor the perspectives and experiences of others, especially when they are different from our own.

OUR THEORY OF CHANGE

The NC Pediatric Society has created a theory of change to drive strategy for maximum impact, and most effectively direct the organization's activities and resources in a rapidly changing health care environment.

Guided by our vision that each and every North Carolina child grows up healthy and thrives, the NC Pediatric Society focuses on three high level outcomes in our work:

- Public policies that advance child health and well-being.
- Practices and systems that advance access, equity, and child health.
- A trained, compensated, supported pediatric provider community.

We believe that making significant progress with each of these outcomes will lead to improved child health in our state.

While there are myriad ways to advance these outcomes for children, NCPeds leverages its expertise, connections, and voice to strategically execute **five key strategies** that define and target our work.

We **ADVOCATE** for policies and practices that assure effective health care delivery and child well-being; **CONNECT** our members to each other and to critical resources that strengthen practice and member well-being; **EDUCATE** our members, partners and the broader community on key issues in children's health; **SUPPORT** our members in overcoming barriers to providing effective health care services; and **LEAD** efforts to strengthen systems of care that promote child health and well-being, and provide quality care.

All of our work is built on a foundation of four core values: **Equity, Integrity, Collaboration, and Respect**.

NC Pediatric Society Theory of Change



MEETING NEW CHALLENGES

The world has changed dramatically over the past decade for the pediatric health community. The global pandemic, a constantly changing –and increasingly corporatized–health care delivery system, the state’s movement to Medicaid managed care, and the staggering increase in children’s mental health issues are just a few of the trends impacting the members of the NC Pediatric Society. Recognizing the importance of assessing these trends and adapting the work of the association to support its members most effectively, NCPeds worked with a consulting firm, Michelle Hughes Consulting LLC, to gather feedback from a diverse array of stakeholders including the NC Pediatric Society Board of Directors, staff, association members, and external partners (e.g., members of DHHS, funders, allied advocacy organizations). Key themes from the stakeholder feedback provided guidance to the organization as it identified its strengths and assets, areas of growth and development, and critical areas of adaptation so that the organization can meet the challenges of a volatile and uncertain environment.

Data gathered during the organizational assessment pointed to **NCPeds numerous strengths**. The organization is seen as a valued, respected, effective, and credible organization with a strong reputation of putting children and families first, and of carefully balancing what is in the best interests of children with what pediatric providers need. The agency is perceived as having meaningful impact on policy, systems, and practice through its strategies including policy advocacy—both legislative and administrative; timely and collaborative information sharing and peer learning; educational and training opportunities; strong partnerships with key decisionmakers; and the sharing of pediatric expertise at important decision-making tables in Raleigh. The staff is well respected, and stakeholders specifically noted their confidence in the NC Peds Executive Director as a strong, effective leader for the organization.

Several challenges for NC Peds and the pediatric care profession emerged in stakeholder feedback, including workforce issues: significant pediatric provider burnout, fatigue and isolation; the impact of the children’s mental health crisis on providers (secondary trauma, new work demands, insufficient training and supports); and the decreasing number of physicians entering pediatrics, primary care/general practice, and rural practices. Stakeholders also noted systems-level challenges that are impacting the profession and the delivery of pediatric care including nursing and other provider shortages; the transition to managed care; and the burden of continued health care crises (COVID-19, RSV) on all health care staff and systems.

NC Peds is perceived as having both strengths, weaknesses, and opportunities in addressing those challenges. Strengths include: an organization that has strong and engaged Board and Executive leadership, financial health and stability, and strong external partnerships. NC Peds is highly valued by its members who see the services and supports provided by NC Peds as critical to their work, and finally, NC Peds is seen by stakeholders as responsive, nimble, and able to pivot to meet new challenges and crises [to be an effective advocate for child health in North Carolina](#).

Areas of growth and opportunity for NC Peds can be categorized into the following key themes:

Aligning Organizational Capacity with Workload: In order to fulfill their mission and objectives, organizations need adequate resources – a strong Board, supported staff members, financial resources,

and organizational infrastructure (HR, technology, communications). Importantly, the balance between the organization's workload and the resources to execute that workload must be "right-sized." The organizational assessment indicated that this is an area of needed discussion between the NCPeds Board and staff as they move forward. While the staff is strong and committed, the Executive Director is carrying a heavy workload that is not sustainable for the long-term and needs additional support. There is a need for the Board and staff to jointly develop and share a more structured **opportunity discernment process** so that there is intentional focus on ensuring workloads and resources are in alignment. Finally, while NC Peds is a financially healthy and stable organization, the assessment indicated that **growing the current financial resources** should be considered by the organization so that NCPeds can provide the needed services, supports and strategies to advance its mission. This work should include discussion of how **NC Peds integrates and supports programmatic and policy initiatives** to improve the health of specific populations (e.g., children and youth in foster care) and/or to improve the quality of care for specific issues (e.g., children's mental health).

Centering diversity, equity, inclusion and belonging (DEIB) throughout the organization and its work.

While stakeholders recognized the efforts and progress that NC Peds has made in focusing on equity within all aspects of the organization (e.g., membership, leadership, legislative priorities, programming), they also urged NC Peds to more publicly and vigorously pursue a cohesive plan for centering Diversity, Equity, Inclusion, and Belonging (DEIB) goals and strategies across all of its work. Stakeholders noted this was central to the mission and vision of the association. Not only because of the changing demographics and increased diversity of North Carolina's children, but because addressing the egregious health disparities that exist between black, Latino and Native American children and white children is core to the association's vision.

Ensuring the sustainability and future of a strong pediatric community workforce. This theme has several facets. As a membership organization striving to meet the needs of its members, NC Peds is grappling with the profound impacts that the past few years of constant health care crises and changes to the health care system have had on the pediatric healthcare community. **Pediatric providers are fatigued** due to COVID, the youth mental health crisis, increased volume of patients, the acuity of children's needs, as well as the effects of nursing and other staff shortages. Additionally, the **decreasing number of providers** who are entering pediatrics, primary care, and general practice also poses a challenge for the profession and for NC Peds in terms of ensuring a strong and sustainable pediatric workforce. **As one stakeholder succinctly observed: "The workforce crisis that we are in – that is what is going to fail children."** Repeatedly and with a sense of urgency, stakeholders lifted up the need for NC Peds to develop strategies to intentionally address this workforce crisis.

Increasingly directing organizational resources to address the children's mental health crisis.

Stakeholders lifted up the impact of the children's mental health crisis on the pediatric workforce—from the increased prevalence of children with depression, anxiety, and suicidal ideation to the acuity of the mental health challenges that children are experiencing. **Pediatricians now face an unprecedented situation** in which they are now seeing many more children with complex mental health issues and they are often doing this without the training and community-based referral and support systems to ensure effective treatment. North Carolina's mental health system has long been criticized for the lack of front-end, community-based services. Add to this a bumpy transition to Medicaid managed care, particularly for children who have complex health and mental health challenges, and the pediatric workforce is forced to operate without the needed supports to effectively manage children's care. This negatively

impacts both the children being served and the pediatric workforce that is trying to provide effective treatment. **Stakeholders lifted up the NC Pediatric Society as a key voice in addressing these issues** across multiple levels – public policy and state investment; administrative and system-level advocacy, and support of the pediatric workforce.

KEY STRATEGIC PRIORITIES FOR 2023-25

Using the organizational assessment as a foundation for defining its strategic priorities, NCPeds has identified has four strategic priority areas to advance in the next three years:

1. Assure the effectiveness and long-term sustainability of NCPeds as a professionally led association **by right-sizing the scope of work with organizational capacity**
2. Deepen efforts to center **diversity, equity, inclusion and belonging** throughout the organization, internally and externally
3. Support a **robust and sustainable pediatric workforce** by addressing trends in workforce demographics and well-being
4. Advocate for increased resources at all levels (e.g., provider, programs, social determinants) to effectively address **the children’s mental health crisis**

NOTE: The following section provides a high-level review of the objectives and tactics to advance these strategic priorities. A more detailed “tactical plan” is being developed by the staff and will be operationalized through an annual planning process.

Strategic Priority 1: Assure the effectiveness and long-term sustainability of NCPeds as a professionally led association by right-sizing the scope of work with organizational capacity

Why Important: Given constant change and the crisis driven nature of providing health care at this time, NCPeds must take active steps to build resilience as an association so that it remains a strong, effective, healthy, and strategically led organization. While the pediatric workforce and NCPeds as an association have successfully risen to meet the tremendous challenges of the past 5 years of a pandemic, health care transformation, and a children’s mental health crisis, “punching above our weight” is not a sustainable organizational approach for the future.

Current Status: NCPeds is understaffed to execute the current body of work and to successfully adapt strategy to meet the strategic priorities outlined in this plan. While many staff are experiencing the stress of the workload at various points during the year, the Executive Director is particularly bearing the brunt of the lack of capacity. And there is a handful of Board members and network members who represent, serve, and/or lead multiple committees or NCPeds activities. There is a need to both build a deeper bench at the staff and member level, and more strategically define boundaries on the workload.

The Work Ahead: Over the next three years, NCPeds will develop the staff capacity, committee design, and internal decision-making and discernment processes to “right-size” the scope of work with the

capacity of the organization to execute that work. “Right-sizing” will be guided by the following four objectives:

Objective 1. NCPeds leadership promotes a culture of well-being and sustainability by ensuring the organization has sufficient capacity to carry out defined activities.

Tactics to achieve this objective include the board and staff developing a shared understanding and agreement to right-sizing workload with capacity, adopting tools such as the theory of change and a “strategy screen” to evaluate opportunities and commitments, and trusting the staff to make decisions defining the workload of the organization. In addition, the staff will adopt an annual organizational planning and monitoring process that defines priorities aligned with the strategic plan, deepens the NCPeds bench by building a “cross-team” understanding of the work and specifically carves out “responsive time” to address unexpected needs and challenges.

Objective 2. Staff leadership positions, particularly the Executive Director’s position, are designed to support strategic impact and sustainability.

Tactics to achieve this objective include increasing staffing capacity by hiring a contractor to address “one-off” Medicaid problems for members, and by hiring a Deputy Director to focus on operational management of the organization including overseeing events management and membership services, data and evaluation and human resources. At the same time, NCPeds will restructure the Executive Director position to focus on critical strategic issues including external relations (policy advocacy, fundraising) and leading the organization’s equity work.

Objective 3. Association member committee design and other internal processes effectively leverage existing resources and efficiency while also promoting diversity and inclusion.

Tactics to achieve this objective includes redesigning committee structure (e.g., use of charters) and functioning (e.g., annual priorities) to best carry out activities aligned with the strategic plan and organizational capacity. A specific focus will be on the Policy Committee as it develops a legislative agenda aligned with the organization’s new strategic priorities and guided by tools such as a policy strategy screen. Finally, NCPeds will develop/refine the Board of Directors job description, make more transparent the Board service pathway, and target recruitment strategies to increase racial/ethnic and geographic diversity of the Board.

Objective 4. Cultivation of diverse funding streams to support organizational activities.

Tactics to achieve this objective include increased, pro-active efforts to secure grants that closely align with the organization’s strategic priorities and that add additional capacity, such as staff or contractors, to carry out the work. NCPeds will also increase efforts to generate additional general operating funds through three tactics (1) expanding sponsorship opportunities at the Annual meeting and other venues; (2) approaching key “beneficiaries” of our work, such as the PHPs, to underwrite positions/activities; and (3) growing the organization’s endowment and investments to produce increased revenue streams.

Strategic Priority 2: Deepen efforts to center diversity, equity, inclusion and belonging throughout the organization, internally and externally.

Why Important: The NC Pediatric Society cannot achieve its mission to improve the health of all North Carolina children and support the pediatric professionals who care for them without a shared, sustained, and deeply embedded commitment across the association to addressing the persistent and devastating disparities in children’s health outcomes and mortality rates. This need becomes even more acute as we look at the changing demographics of our state: North Carolina is becoming more racially and ethnically diverse, and yet too many children of color lack access to the very resources they need – quality health care, education, family financial stability, safe communities – to thrive. Furthermore, the leadership and membership of NCPeds should represent the diversity of the communities we serve so that those voices are centered throughout our work and undergird our efforts to dismantle the policies, practices, and beliefs that can put children of color furthest from opportunity.

Current Status: NCPeds has started a journey to center Diversity, Equity, Inclusion and Belonging throughout the work of the association. This can be seen in our educational programming, committee work, personnel policies, and the increasing diversity of our Board and leadership. Nevertheless, we have much more work to do to deepen our efforts and create a shared foundation of understanding, commitment and practice to embed equity in our work for children and for the pediatric community who cares for them. As one stakeholder commented *“I think the NC Pediatric Society is on track in terms of working to mitigate racial disparities. However, we as a society are generally behind so getting ahead of the curve will require NCPeds working especially hard to address this issue among members and for the benefit of our children.”*

The Work Ahead: NCPeds is committed to deepening our work on Diversity, Equity, Inclusion and Belonging (DEIB) over the next three years and beyond. The work ahead includes creating a foundation of shared understanding, definitions, and language for the organization’s DEIB work and taking action to increase diversity and representation, support members in gaining new skills and practices, and advocating for an equitable health care system. This work will be focused on achieving the following four objectives:

Objective 1: Board, staff, and membership reflects the diversity of the profession.

Tactics include specifically focusing on the recruitment and on-boarding of diverse candidates as new employee positions open (e.g., Deputy Director) and strategies to retain existing staff (e.g., professional growth pathways) are executed. NCPeds will also explore options for collecting and using data comparing the diversity of the profession to NCPeds Board, staff, and membership and will set annual recruitment goals for increased diversity at all levels of the association.

Objective 2: Strong organizational foundation for promoting DEIB through creation of shared language, understanding, and commitment to equity practices across the organization and membership.

Tactics include the development of a DEIB organizational plan by the end of 2024. It is not uncommon for organization’s DEIB work to begin in fits and starts, and while NCPeds has provided equity training and opportunities for discussion for its Board of Directors and staff, a clear pathway for continued

conversation, learning, and organizational change has not been developed. The creation of such a pathway will need Board leadership, membership engagement, and the robust support of the Executive Director, as well as the expertise of an external consultant skilled in supporting organizational change.

Objective 3: Membership services strengthen our members’ understanding, skills, and practices to advance equity in their practice and advocacy

Tactics include continuing to integrate DEIB topics and practices throughout NCPeds education programming, infusing a DEIB focus throughout NCPeds membership communications strategies (e.g., Weekly Wrap regularly including DEIB resources for members; newsletter featuring diverse membership); and membership committees will include equity priorities within their charter and annual plans. Additionally, NCPeds will develop programming specifically to support members of color through the creation and facilitation of “affinity groups” so that these members have the opportunity to be together to process and discuss their experiences.

Objective 4: NCPeds strongly promotes equitable care within programming and advocacy.

Tactics include having the NCPeds Policy committee develop and operationalize a rubric that includes a strong focus on promoting (preserving) equity, as well as aligning with the NCPeds Strategic Priorities when developing the legislative agenda for the association. Additionally, throughout its work with external initiatives (e.g., Medicaid Reform Task Force) and other administrative advocacy efforts, NCPeds will be a strong and visible voice lifting up issues of equity and the impact of decisions, financing, and policy changes that can disproportionately and negatively impact children of color.

Strategic Priority 3: Support a robust and sustainable pediatric workforce by addressing trends in workforce demographics and well-being

Why Important: The continued stressors on the pediatric workforce are having a negative impact on provider well-being. Physicians and other providers are reporting fatigue, exhaustion, secondary stress, and burnout. A September 2022 McKinsey [survey](#) of pediatricians found that more than 60% reported experiencing at least one dimension of burnout, and noted that doctors suffering from burnout were more likely to make treatment errors, ignore the social or personal impact of a child’s illness, and discharge a patient earlier than they should. The survey also found one in five pediatricians plan to leave their job in the next year and half of those planning to leave in the next five years, plan to leave the practice of medicine entirely. This phenomenon coupled with fewer medical professionals entering pediatrics overall, and an insufficient workforce currently in specific areas (rural, subspecialties) points to a crisis within pediatric healthcare, and subsequently a threat to the health of children.

Current Status: NCPeds is actively addressing workforce issues such as administrative burden, financing, and compensation through advocacy and peer problem-solving. It is also working to create community and connections as a buffer against the stressors experienced by the pediatric workforce. The Practice Manager listserv, NCPeds Annual Meeting, Solution Share are all examples of strategies employed to support the workforce. NCPeds is also focused on early career engagement in a number of ways including career day, free membership/reduced cost for residents/med students, the Early Career Pediatrician committee, and preceptorship and repayment policy advocacy and engagement in broader workforce efforts (such as serving with Center for the Workforce for Health).

The Work Ahead: Current activities to address workforce well-being are important and valuable, and will need to be expanded through additional resources in the years ahead if NCPeds is to move the needle for North Carolina's pediatricians. The Association's goals are to build a pediatric workforce that is thriving and joyful and sustainable. To do this will require a focus on the following four objectives over the next three years:

Objective 1. Membership services provide supports and resources for member mental health and well-being, including opportunities for members to connect with and support each other.

Tactics to achieve this objective include continuing existing programming such as the in-person annual meeting and [weekly Solutions Shares](#), and including resources and discussion opportunities focused on member well-being in this programming and other convening events. NCPeds will infuse resources on pediatrician well-being throughout its communications (e.g. Weekly Wrap, website resource page). Finally, NCPeds will explore the creation and facilitation of affinity groups for specific sectors of its membership (physicians of color, hospital subspecialists) to promote connection, will explore linking with the AAP mentorship portal, and will reach out to other AAP chapters to identify innovative strategies and programs being provided to foster connection and support well-being.

Objective 2. NCPeds promotes healthy and supportive health care workplaces with a strong focus on reducing administrative burden.

Tactics to achieve this objective include continuing to advocate for policies and systems/practice changes that reduce administrative burden. This will include continuing to provide supports for Practice Managers (listserv, Practice Manager retreat) and hiring a contractor to help practices trouble shoot issues and determine trends/system issues. It will also include identifying from membership key policy issues linked to administrative burden and prioritizing solutions within the NCPeds Policy Committee and [Medicaid Reform Task Force](#) and policy advocacy efforts. Additionally, NCPeds will identify key administrative and systems issues that keep trained pediatric professionals from being able to care for patients and developing administrative and legislative strategies to address them. Examples include quarterly meetings with NC Medicaid to raise issues such as timely credentialing of residents and other OPR issues, direct lines to Standard Plan and commercial plan leadership to address payment concerns, recoupments, etc, and allied policy work to identify strategies to reduce administrative burden.

Objective 3. NCPeds will explore and identify a set of strategies to better cultivate and retain NC trained pediatricians in NC.

Workforce shortages, for pediatricians and other primary care clinicians as well as key office staff, have been long in the making. Solutions will not occur overnight and likely will be a mix of long, mid and long range strategies. In the short-run, NCPeds can work to reduce burn-out and increase the joy in pediatrics so that fewer people will leave the profession. Tactics include fostering connection (Annual Meeting, PM retreat, Solution Share, PM listserv, ECP reception) and advocacy to reduce administrative burden (such as that associated with Medicaid Reform.). Part of this short-term work will include assessing and differentiating the supports needs for community practice pediatricians versus subspecialist and striking an appropriate balance. Mid-term strategies include ways to help funnel more medical professionals to

pediatrics. Examples include growing pediatric preceptorships (especially in rural communities), increasing availability of and knowledge about loan repayment and forgiveness options and exploring providing medical student/resident dyad programs. Longer-term strategies to grow the pool of medical school applicants would include strategies such as recruiting more medical students from underserved, rural areas, and beginning cultivation earlier with students (e.g., connecting middle schoolers to science opportunities, etc.) NCPeds currently participates in the Center for Workforce for Health which helps identify and recruit students, and develop cultivation strategies across this continuum.

Strategic Priority 4: Advocate for increased resources at all levels (e.g., provider, programs, social determinants) to effectively address the children’s mental health crisis

Why Important: In 2021, the American Academy of Pediatrics, in partnership with the American Academy of Child and Adolescent Psychiatry and the Children’s Hospital Association declared a National State of Emergency in Children’s Mental Health. They called for a range of policy solutions from increased federal funding for evidence-based mental health screening, diagnosis and treatment for children to school-based mental health programs to enforcement of mental health parity laws. Pediatricians across the country, including in North Carolina, are facing increased number of children with soaring rates of depression, anxiety, trauma and suicidality without the needed support, training, and access to community-based services to effectively treat the children in their care. Addressing this crisis will require interventions across multiple levels – from policy advocacy with the NC legislature and DHHS, to member support with the provision of training and resources.

Current Status: NCPeds currently promotes policy, practice and linkages to mental health supports for pediatric patients. For example, NCPeds played a critical role in for the NC-PAL program to come to NC, promoting the NC-PAL model and resources with pediatric practices across the state. NCPeds was part of the core team that the led to a stronger and more aligned Collaborative Care Model (COCM) in NC. NC Medicaid and commercial payers aligned on key definitions (such as what credentials were needed for a Behavioral Health Manager) , boosted payments and worked to help practices find startups funds. Additionally, AHEC is providing technical support and CCNC has created a registry for both finding a psychiatrist and documenting progress, essential elements of COCM implementation that can be a heavy lift for new practices. Pediatric offices are leading the way in newly adopting the COCM model. This approach is receiving national attention and acclaim. Additionally, NCPeds education events include mental health topics, and peer supports are offered during Solution Shares. At the legislative advocacy level, NCPeds works for bills that support mental health and reduce suicides and opposes bills that could threaten mental health, especially for vulnerable populations, such has children who are LGBTQ, abused or homeless.

The Work Ahead: As the nation grapples with the ongoing child and adolescent mental health crisis, NCPeds can play a critical role in North Carolina by leveraging its medical expertise and credibility among decision-makers, supporting programs and linkages that promote quality care, lifting its advocacy voice at the state level, and infusing a focus on pediatric support of children’s mental health throughout association activities. This work will be guided by the following three objectives over the next three years:

Objectives 1. Equip community pediatricians to treat mild to moderate mental health conditions of children.

Tactics include promoting and improving existing tools that support pediatric providers in effectively care for children with mental health issues, including working with partners on COCM, enhanced payments, registry of psychiatrists, tracking tool and training supports. NCPeds will also continue to support and expand the impact of NC-PAL including a focus on independent practices' access to REACH trainings. Additionally, NCPeds will seek to expand its focus on children's mental health throughout both its educational programming and its communications. Spring Open forums in 2023 and 2025 will focus on opioid topics designed to meet NCMB requirements while addressing pediatric specific concerns.

Objective 2: Promote sound policies to protect and advance child mental health.

Tactics include continued monitoring of proposed legislative and administrative policies that impact child mental health. For example, NCPeds works to mitigate negative impact of proposals that can harm children (anti-trans legislation); support and advance policies that may expand access to mental health care (funding for pediatric psych beds) and that fully integrate care. NCPeds will also monitor implementation of Tailored Plans and advocate improvement as well as provide support to pediatric professional helping patients navigate the system. We have deep concerns about care management provision for Tailored Plan eligible children.



This report was produced by Michelle Hughes Consulting, LLC which provides customized supports for individual leaders, teams, and organizations so that they can do their best work for the people and communities they serve. Contact michelle@michellehughesconsulting.com for more information.