



USBJI Strategic Plan June 2018-June 2021

Vision

Every American knows how to maximize musculoskeletal health throughout his or her lifetime.

Mission

To raise the priority of musculoskeletal health through the collective action of all stakeholders.

USBJI Values

1. The USBJI believes that a broader and unified multidisciplinary voice will lead to more effective advocacy and increased public awareness of the need for improved musculoskeletal health.
2. The USBJI will add depth and breadth to the understanding of bone and joint disorders through a broad membership, a sharing of diverse perspectives, and exchange of knowledge among diverse providers, researchers and individuals with musculoskeletal disorders.
3. The USBJI believes in identifying, fulfilling and promoting collaborative partnership opportunities.
4. The USBJI promotes funding of musculoskeletal research, recognizing that improved patient-centered outcomes are the essential measure of return on such investments.
5. Racial and ethnic and other disparities are an integral consideration in all our programming activity.
6. The USBJI believes that all the above should be driven by data based on the burden of disease and its impact.

Goal Statement

The USBJI's goal is to advance care for and to reduce the burden of disease of individuals with all forms of musculoskeletal disorders, including but not limited to osteoarthritis, inflammatory arthropathies, systemic autoimmune rheumatic disorders, osteoporosis and other metabolic bone diseases, spinal conditions including low back and neck pain, bone and joint trauma and injuries including fractures, pediatric musculoskeletal conditions, including inherited disorders of bone, connective tissue and muscle, and chronic musculoskeletal pain conditions including fibromyalgia. These disorders affect a person's ability to function and perform his/her activities of daily living and instrumental activities of daily living, thus diminishing independence, quality of life, and contributions to society. The medical care and societal effects (such as inability to work) lead to a profound economic burden on society. Musculoskeletal disorders frequently are complicated by other medical conditions (comorbidities such as obesity, cardiovascular disease, hypertension and diabetes). The USBJI recognizes that musculoskeletal disorders have differing etiologies and may present differently in men and women, and that disparities in care exist among diverse populations, especially those defined by race/ethnicity. We believe that everyone should have access to high quality musculoskeletal care.

GOALS

Goal 1 – Increase awareness of the impact of musculoskeletal disorders on Americans, regaining optimal function in their daily lives, and lowering societal and economic cost

The USBJI will provide authoritative information on the burden of musculoskeletal diseases in the United States including not only the prevalence of these diseases by age, gender, race/ethnicity and region, among other factors, but also the economic burden of these diseases on the American society.

Strategies/Tactics

1. To ensure the availability of compelling objective epidemiologic and socioeconomic evidence of the need for better care and understanding of musculoskeletal disorders, USBJI will maintain and enhance *The Burden of Musculoskeletal Diseases in the United States: Prevalence, Societal and Economic Cost (BMUS)*. The 4th Edition of this authoritative source will include more specificity including additional data on race/ethnicity, and regional differences, other disparities, more specificity on different forms of arthritis, links to CPGs, AUCs, and Registries, expanded sections on Unmet Needs and Challenges, and new sections translating the data for lay audiences to support research, education and advocacy efforts of our member organizations.

Goal 2 – Increase awareness of the importance of musculoskeletal treatment and prevention strategies

USBJI will promote health services research that assesses the value of musculoskeletal care, and stimulates its improvement.

Strategies/Tactics

1. Past USBJI efforts have generated proposals for measuring and improving the value of musculoskeletal care. We will review not only the recommendations of MSK Summits in 2009 (future priorities), 2011 (value), and 2013 (best practices in patient-centered care), as well as that of the Chronic Osteoarthritis Management Initiative (COAMI) and the National Bone Health Alliance (NBHA), and create plans for acting on the most promising ones, with careful study of their results.

Prepare talking points, slide set(s) and other tools for use by the USBJI and member organizations to help develop relationships with potential supporters of these efforts to increase research.
2. Assemble a list of potential supporters for projects that create, demonstrate, and assess approaches for improved delivery of musculoskeletal health care. The first step will be to create a working group to prepare the list. Next, the group will recommend ways to propose suggested projects to prospective sources of funding support, within government programs and NGOs.
3. The USBJI believes that there is an ongoing need for healthcare professional organizations and their members to offer presentations to the public about the prevention, diagnosis, treatment and the importance of research on selected musculoskeletal diseases. We currently collaborate in three such programs - *Experts in Arthritis*, *Fit to a T*, and *PB&J (Protect your Bones & Joints)*. We propose to continue delivering such public education programs, and to engage an increasing number of partners among healthcare professional organizations, as well as voluntary health and other public service entities. We recognize the need for monitoring and continuously improving these presentations. We will consider developing a multidisciplinary public education program on back pain.

Goal 3 – Increase funding for musculoskeletal research

The USBJI provides a means for the entire American community of musculoskeletal care providers and researchers to identify and communicate with potential sources of research funds. Our collaborative efforts present a stronger request for support than can be generated by individual member organizations.

Strategies/Tactics

1. To strengthen our promotion of research funding, USBJI will conduct an "environmental scan" of our member organizations to determine their research priorities. We will also consider the priorities noted by the USBJI-sponsored MSK Summit Conferences of 2009, 2011, 2013, and the Chronic Osteoarthritis Management Initiative (COAMI). We will identify shared interests, and prepare a coordinated, cross-disciplinary USBJI research agenda.
2. Increase the understanding of the impacts of sex, gender, race/ethnicity and socioeconomic status on musculoskeletal health.
 - a. Review the current programs and initiatives in place within the USBJI to determine the current status of programming in this area.
 - b. Recruit participation of participating organizations to review the known impact of these factors on common musculoskeletal conditions (e.g., osteoporosis, osteoarthritis, inflammatory arthritis, back pain, low impact fractures).
 - c. Identify sources to publish this review, as well as gaps in current knowledge in the various specialties represented by the USBJI.
 - d. Identify gaps in current research in this area and encourage participants in the YII to address these gaps.
3. To increase the number and quality of research grant applications, USBJI will continue our Young Investigator Initiative program, with its strong track record of generating successful research grants from early career researchers in our various member organizations. We will continue to document research successes and academic career progress of YII graduates.

Goal 4 – Increase musculoskeletal education for all students, trainees and providers of healthcare

The need for musculoskeletal education is suggested by the proportion of the burden of disease that is related to MSK disorders. Efforts to address the inadequate attention to MSK education in most American medical schools began during the Bone & Joint Decade, with considerable progress. The USBJI believes that further improvement will enhance patients' access to quality musculoskeletal care. We thus propose additional strengthening of MSK educational efforts, in curricula for other relevant healthcare disciplines and also post-graduate medical education. Particular attention should be given to those who are preparing for careers as primary care providers (e.g. MDs and DOs preparing for Family Practice, General Internal Medicine, and Pediatrics as well as Nurse Practitioners and Physician Assistants.)

Strategies/Tactics

1. The USBJI believes that there is a need for education of primary care providers in the diagnosis and management of patients with musculoskeletal disorders. Toward this end, USBJI has developed the MSK-Ed program: a one-month elective for senior medical students planning to enter a career in primary care that will focus on the diagnosis and management of common musculoskeletal disorders that present to primary care.

Approved by the USBJI Board: June 8, 2018