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ABSTRACT
In 2006 the Chiropractors’ Association of Australia engaged a professional facilitator to develop and run a process by which a Strategic Plan could be developed to guide the activities of the Board of Directors of the Association during the period 2006-2009. This paper documents this process and lists the outcomes.

Index Term: Chiropractic

INTRODUCTION

A previous paper detailed how in 1997 Australian chiropractors used facilitated consensus processes to develop Core Values for chiropractic, Core Purposes and a Vision Statement (VS) of the Chiropractors’ Association of Australia (National) Ltd (CAAN). Successive Boards of Directors of the Association have used these statements as the bases on which to develop strategic plans to guide their activities aimed at realising the Vision Statement.

This paper describes the development of the current CAAN Strategic Plan (SP) and documents the Plan.

THE VISION STATEMENT

As explained in that previous paper, a Vision Statement (VS) is part of an envisioned future, which is composed of two parts. Firstly, big, hairy, audacious goals are developed to excite and rev up the organization. They may take decades to complete, if they are completed at all. Secondly, a VS paints a picture of what it would be like to achieve these goals, and to make them vibrant and engaging.

The VS developed by consensus processes by Australian chiropractors in 1997 is as follows:

To achieve a fundamental paradigm shift in healthcare direction where Chiropractic is recognised as the most cost efficient and effective health care regime of first choice that is readily accessible to all people."

THE PROCESS
The purpose of the SP was to determine and list what would have to be done by CAAN in the next 3 to 5 years to contribute in that time frame towards the realisation of the VS. This would mould and focus the strategic thinking of directors of the organization.

The process of developing the current SP was initiated during the November 20, 2005 meeting of the Board of Directors of CAAN by the passing of the following motion:

*MOVED:* A. Lawrence  
*SECONDED:* A. McLindon

*That a Strategic Planning session of the CAA National Board be held in Melbourne on the weekend of 4-5 February 2006 and that a facilitator be engaged to run the program.*

Based on successful previous experience in working with him, the Board selected Mr Steven Bowman to develop and facilitate the process of development of the SP. His relevant qualifications and experience included the following: joint Master of Association Management and Master of Arts degrees from George Washington University, former Executive Director of the Australian Institute of Banking and Finance, Past President of the Australian Society of Association Executives, Fellow of the Australian Institute of Company Directors and a member of the association management teaching staff at the Mount Eliza Australian Management College. He had also received a Special Commendation for Excellence in Association Management from the Australian Society of Association Executives and had been engaged as a consultant to a wide range of commercial, professional, trade, welfare, philanthropic and charitable organizations.

The process of developing the SP began with the selection of a Strategic Planning Team (SPT). The members of the team were picked to represent certain criteria as suggested by Bowman. The team was composed of:

- Members of the Board of Directors of CAA (National) Ltd: Drs Terry Crisp, Simon Floreani, Ross Gilmore, Geoffrey Irvine, Andrew Lawrence, Anthony McLindon, Duane Parkinson, Kate Quigley, Dennis Richards and Jim Wilson.
- Chief Executive Officer of CAAN: Ms Krystina Brown.
- CAAN Political and Policy Advisor: Dr Gary Sauer-Thompson.
- A relatively new member of CAA: Dr Bryce Conrad.
- A long-term CAA member: Dr Mary Ann Chance.
- A CAA member who may have held some views different from those of the Board: Dr Colin Clarey.
- Selected CAAN staff members: Mrs Leanne Jenkins and Mr Hans van Dyke.
- A bureaucrat in a position related to chiropractic: Mr Norman Brockley.
- A consumer of chiropractic: Mr Greg Buchanan.
- Registration Board Representatives: Dr Phillip Donato (South Australia) and Ms Debby Ramsay (Registrar, Queensland).
Before travelling to the SP workshop, SPT members were sent a Strategic Review Survey that had been prepared by Bowman to give him guidance in preparing the SP Workshop. The Survey was composed of two parts, the first titled *environmental filtering* and the second *strategic directions*.

The environmental filtering asked SPT members what they believed were the strengths and weaknesses of the CAA and what were the opportunities and risks facing it.

The strategic directions sections asked what was the single most important thing the CAAN should do in the next 2 years, and how should the success of the CAAN be measured.

With these preliminaries completed, the SPT eventually met in Melbourne on February 18-19, 2006, and was taken by Bowman through a day and a half of structured exercises to develop a SP and the action items needed to realise it. The process began with confirmation of the CAAN VS and understanding of its key elements – that the CAAN wishes to achieve a fundamental paradigm shift so that chiropractic is recognised as a cost efficient, effective and accessible health regime. Discussion clarified that this did not involve treatment of disease or emergency care in life threatening situations, and that persons presenting to chiropractors needing that sort of care should be referred to other professionals with appropriate training.

The SPT then moved on to identifying what might be key current and future scenarios affecting the profession in science and technology, perception shaping events, new fringe ideas and economic, political and environmental developments.

Team analysis of the CAA’s highest level strengths, weaknesses, opportunities and risks then produced the following:

**Strengths:** committed staff and Board, our status as the peak body in chiropractic, our Core Values, Core Purposes and Vision Statement and diversity of opinion within.

**Weaknesses:** apathy of members, lack of political influence, lack of influence in chiropractic educational institutions, poor communications with other professions, poor development of evidence-based policy and lack of media profile.

**Opportunities:** the need for reform of healthcare funding, the swing to alternative healthcare, the importance and saleability of the chiropractic service and our increasing profile in Canberra.

**Risks:** loss on our unique identity, marginalisation by other professions, the embedded influence of medicine in media and research funding, the desire of medicine to own *everything* and competition from other organizations.

The team then developed a draft SP that would use these perceived strengths and opportunities and address these weaknesses and risks in guiding the Board’s activities. It should be noted that this SP was developed to be that of the Board, and not of the CAAN or of its members, as it was developed by the Board’s SPT and the
Board has the responsibility for the control, management and direction of the affairs of the Association. vi

The key strategies produced for moving towards realisation of the Vision Statement during 2006-2009 were:

1. Influence health policy.
2. Credible scientific research.
3. Dealing with competitor groups.
4. Paradigm shift.
5. Communications.
6. Review Board, committees, staff and finances in light of the strategic plan.

The team spent the Sunday developing action items, which are the practical details intended to be used to realise these inter-supporting strategies. vii

ACCEPTANCE

These outcomes were presented to a workshop session of the Board of Directors of the CAAN at its March 4 meeting in Sydney for discussion, modification and acceptance. Due to the wide scope of the plan and the work that would be involved in its implementation, this workshop session prioritised the strategies and action plans based on the following criteria:

Category 1: What could be done now and should be commenced immediately.
Category 2: Important, but might not be done now due to lack of resources.
Category 3: Important, but would be implemented when opportunities presented. viii

Strategies 1,3,4, and 5 were classes as Category 1. Strategy 2 was classed as high priority, but in Category 2, and Strategy 6 was classed as ongoing. These recommendations were then considered during the formal Board meeting the next day and the following motion was carried:

30.2 MOVED: R.Gilmore
SECONDED: S.Floriani

That the CEO circulate to the Board the revised draft of the Strategic Plan with the view to it being presented at the May 2006 Board Meeting for adoption. ix

This occurred and some minor changes were made to the draft SP. The amended SP was then circulated to the Board and discussed in a Board workshop session on May 27, 2006. x

By the end of the above discussions the following details had been fleshed out:
Strategy 1. Influence health policy: improving access to chiropractic and our access to diagnostic investigations. Shifting the focus of the health system from the hospital to primary care, highlighting the different models of care and advocating the wellness approach to primary health care.


Strategy 3. Dealing with allies and competitor groups: maintaining standards, retaining members and protecting our product against encroachment.

Strategy 4. Paradigm shift: aligning the standard and content of chiropractic education, public perception and the performance of our members with our Vision.

Strategy 5. Communications: maximising relationships with our members, the media, consumers and other health professionals to educate them on the true worth and benefits of chiropractic and to raise our public profile and cultural authority.

Strategy 6. Reviewing Board, committees, staff and finances in light of the strategic plan: Monitoring progress of activities and increasing revenue streams to support SP activities.

At the Board’s formal meeting in Adelaide on May 28, 2006, the following motion was carried:

72.9  MOVED: S. Floriani  
SECONDED: K. Quigley

• That the amended Strategic Plan be adopted by the National Board.
• That the Strategic Plan be placed on the Member’s Only section of the CAA National website.

The final document then became the Board’s SP, intended to guide its activities during the upcoming years and against which its productivity would be measured. Congruent with this, Board meeting agendas have been re-organised so that they reflect the SP. Agenda items are placed and dealt with under one of the six Strategies. Items that do not fit under a Strategy are generally not dealt with.

CONCLUSION

A professional facilitator was employed to assist the CAAN Board of Directors’ SPT in developing a SP to guide the Board’s activities during the years 2006–2009. That facilitator, Steven Bowman, has described that process of development as determining what are the 5 or 6 things that just have to be gotten right in the organization in the next 2 or 3 years. The process was successful and a SP of six such strategies was produced. The ongoing challenge now facing successive Boards is to make these Strategies happen.
REFERENCES

i Richards DM. In press.
ii Richards DM. 1, In press.
iii Anon. Minutes of the meeting of the CAA (National) Ltd board meeting. Melbourne: 2005 November 20. 12.3.3P.
vii Bowman S. 5, pp 27.
xii Bowman S. 5, pp 24.