Section VI
NEXT STEPS – IMPLEMENTATION PHASE

Leadership “Buy-in” (Review, Approval, and Support)

With the submission of the report, Plan for the Coming Decade, to President Martin Drell, M.D., the Back to Project Future (BPF) Presidential Initiative will have met its initial charge – to develop a plan and roadmap for the coming decade in child and adolescent psychiatry (CAP).

The report defines a “shared vision” and “roadmap” of where the subspecialty of CAP and the AACAP will be in 2023 and how to get there from 2013. The report’s “Goals, Recommendations and Action steps” (Section III – Goals & Recommendations (the “roadmap”) for the Coming Decade) have been developed by the BPF Steering Committee and subgroups to be useful to: child and adolescent psychiatrists in practice; child and adolescent psychiatrists in academic institutions; child and adolescent psychiatrist researchers; public policymakers; and primary care physicians and allied child mental health professionals. The report can also be used to guide the AACAP leadership, membership, and staff in responding to the changing social and economic realities that are facing the AACAP and CAPs in the coming decade.

Initially, the project’s report will need to be reviewed and approved by AACAP’s Council. The AACAP leadership’s first decision should be to consider whether the project’s report (Plan for the Coming Decade) should be moved to an implementation phase. If the project receives necessary approval and buy-in from AACAP leadership, (i.e., Council and Executive Committee), then decisions will need to be made regarding the budget and allocation of resources (e.g., staff time, travel, and meeting costs) to support the project’s implementation.

Takeaway Points and Prioritizing Recommendations

During the comprehensive review and final editing of the report, the BPF Steering Committee was challenged and encouraged by the BPF honorary editors (Cohen and Enzer) and several BPF distinguished consultants to develop takeaway points and to prioritize selected recommendations and action steps. The BPF Leadership Group and Steering Committee developed a process to identify a manageable number of “recommendations with action steps” that should be targeted for implementation during the first two years of the coming decade. Seven “Recommendations” with their respective “Action steps” were prioritized for implementation during 2013-2015 by a consensus of the Steering Committee. A series of takeaway points were also developed to help summarize and focus key themes in the full report (see Section V for details).

Starting the “Journey”

Following a thoughtful review and approval process by leadership, AACAP would need to create an implementation structure and process to start the “journey” for the coming decade. The BPF Steering Committee recommends that AACAP leadership consider creating a new BPF Implementation Task Group (ITG) charged with providing coordinated leadership to “drive” the implementation process and start the journey (e.g., appoint a small leadership group of three members). This group should have support from a broad representation of AACAP committees.

The ITG could report to Council and its functions could include providing oversight for all implementation activities and working closely with AACAP leadership and Council to set priorities (i.e., which “Recommendations” and “Action steps” should be implemented in the first phase). The report’s menu of “Recommendations” and “Action steps” in Section III are presented by the BPF Steering Committee as ideas for consideration. They should not be viewed as directives to AACAP. The ITG could also assign responsibilities and monitor the progress and completion of “action steps” in the report.
The ITG could charge existing AACAP committees, the Assembly of Regional Organizations, and AACAP staff with developing implementation plans for selected, high priority “Recommendations” and “Action steps.” The Steering Committee believes that the energy and on-going activity of these groups of AACAP members and staff represent a natural “engine” that could be harnessed and tasked with carrying out the implementation work of *Back to Project Future*.

The ITG could establish “milestones” that would be reviewed every two years to coincide with Executive Committee terms and changes in AACAP leadership. The ITG could report on progress and provide updates on the “journey” to Council and Assembly at Annual Meetings. The ITG could also organize Member Forums or special Town Meetings at the AACAP Annual Meeting to inform members about the project’s implementation and to get feedback and input.

### Dissemination of Report

The BPF Steering Committee believes that this report will be of interest to many different groups. There are two principal types of audience for this report – primary and secondary. Primary audiences to receive the report would include: AACAP leadership, Council, Assembly, members, and staff. Secondary audiences to receive the report could include: other professional medical organizations, allied health organizations, parent/advocate organizations, and foundations/philanthropic groups. The report will be posted on the AACAP website and will also be distributed to all groups and individuals who submitted input to the BPF Steering Committee during the project. The BPF Steering Committee anticipates that the report would stimulate important dialogue with each of these audiences and help advance the field of CAP throughout the coming decade.

Many of the report’s “Recommendations” and “Action steps” reference the need for AACAP to work “in partnership with other organizations.” AACAP staff and leadership will need to nurture and expand strategic linkages and develop collaborations with other groups (e.g., medical organizations, advocate/family organizations) in order to implement these sections of the report.

The time is NOW for AACAP leadership, members, and staff to study the “roadmap” presented in this report and make the decision to begin the “journey” into the coming decade.