

Bone and Joint Decade 2010 - 2020

Strategic Action Plan

moving forward together



Bone and Joint Decade



- The *Bone and Joint Decade* is an umbrella that brings together national and international professional, scientific and patient organisations with the aim of reducing the impact of musculoskeletal conditions on individuals and society. It was created in 1998 and endorsed by the UN and WHO. It has renewed its mandate for the next Decade as its objectives have not yet been fully achieved. This Strategic Action Plan highlights why there is the need for the *Bone and Joint Decade*, the objectives for the next *Decade* and how we intend to achieve them by moving forward together.



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Purpose



Musculoskeletal conditions

- Musculoskeletal problems and conditions are common in all countries and cultures. They are the most common cause of severe long-term pain and physical disability, affecting hundreds of millions of people around the world. Their impact is pervasive. They are a major burden on health and social care.
- Musculoskeletal problems and conditions are diverse. They include joint conditions — for example, rheumatoid arthritis, osteoarthritis and gout; bone conditions — for example, osteoporosis and associated fragility fractures; spinal disorders — for example, low back pain and scoliosis; regional and widespread pain disorders; musculoskeletal injuries — for example, high-energy limb fractures, strains and sprains often related to occupation or sports; and also genetic, congenital and developmental childhood disorders.
- Musculoskeletal conditions have the worst impact on quality of life of many chronic diseases, and osteoarthritis alone ranks 5th as a cause of years lost through disability in high, medium and low income countries across the globe.
- There are effective ways of preventing and controlling musculoskeletal conditions but these are not being implemented with equity. Musculoskeletal conditions are not a priority in most health systems. As a result there is an enormous unmet need and avoidable disability.
- The goal of the *Decade* is to overcome the barriers to this.



Vision 2010

“Keep people moving”

- Our vision is a society where prevention, treatment and care of people with musculoskeletal disorders is of a high standard and consistently accessible in order to improve the health-related quality of life for people with, or at risk of, musculoskeletal disorders.
- The treatment and prevention of musculoskeletal disorders and injuries should be among the leading major health concerns in the minds, actions and funding priorities of international health agencies, governments, non-governmental organisations, medical and research communities, funders, media and the general public.



Mission 2010

The Bone and Joint Decade works

- to reduce the burden and cost of musculoskeletal disorders to individuals, carers and society
- to promote musculoskeletal health and musculoskeletal science worldwide



Values of the Bone and Joint Decade

The Bone and Joint Decade is steered by an International Coordinating Council that brings together expertise and representation from all stakeholders across the globe.

There are National Action Networks in 60 countries that bring together all relevant stakeholders to achieve the aims of the *Decade*. The *Decade* has strong values that put it in a unique position to achieve its goals.

- Credibility
- Partnership
- Inclusivity
- Unity
- Global
- Strategic
- Evidence-based



What makes us unique

- We are the only organisation that brings together all stakeholders across the globe, considering all musculoskeletal conditions and providing access to high-level policy makers
- We are an umbrella, linking networks of national organisations across the globe, which include those for health care professionals and patients, providing a unified voice and a global reach
- We focus on health policy and evidence with a mandate to develop strategies and set the agenda, aimed at improving quality of life by implementing effective prevention and treatment



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Direction



Key audiences



- Our target audiences
 - WHO
 - UN
 - Regional policy makers, such as EU
 - National policy makers
 - Non-specialist health care professionals
- Our mobilising audiences
 - Professional, scientific and patient organisations relevant to musculoskeletal health advocating for change
- Our enabling audiences
 - Sponsors
 - Partners
- Our supporting audience
 - Public



Strategic Objectives 2010

Global objective

To raise the recognition of the importance of musculoskeletal conditions at the global, regional and national levels

Specific objectives

1. **Advocacy:** To raise awareness of public and policy makers of the burden of musculoskeletal conditions and what can be achieved by implementing effective prevention and treatment
2. **Partnership:** To develop sustainable networks at global, regional and national levels
3. **Surveillance:** To increase knowledge of the suffering and cost to society associated with musculoskeletal conditions
4. **Public and patient education:** To empower people to gain priority for their own care
5. **Prevention and control:** To improve access to cost-effective prevention and treatment
6. **Research:** To increase research that will advance understanding of musculoskeletal disorders and improve prevention and treatment
7. **Knowledge management:** To provide access to information that will support the objectives of the BJD
8. **Organisation fit for purpose:** To develop a sustainable global organisation able to carry out the mission, objectives and programmes of the Strategic Action Plan for 2010-2020

Priorities

Advance musculoskeletal health and science worldwide through focusing on:

- joint conditions
 - Rheumatoid arthritis
 - Osteoarthritis
- spinal conditions and back pain
- osteoporosis and other bone diseases
- trauma and injuries
- childhood musculoskeletal conditions

Underpinned by:

- basic and applied research



Strategic Action Plan 2010 - 2020

- The Strategic Action Plan focuses our resources on those activities that help BJD deliver on its mission and vision and to achieve its global objective of **gaining recognition of the importance of musculoskeletal conditions** at the global, regional and national levels.
- Activity will therefore be grouped around the delivery of **eight core programmes**, each aimed at achieving one of the specific objectives of the *Decade*.
- The programmes will be delivered by the International Co-ordinating Council, National Action Networks, supporting organisations and individuals working together, with the support of the *Bone and Joint Decade*.



Overview of the Strategic Action Plan 2010-2020

Purpose

Vision

Keep people moving

Mission

The BJD works to reduce the burden and cost of musculoskeletal disorders to individuals, carers and society

Values

**Credibility Partnership Inclusivity Unity Global Strategic
Evidence-based**

Direction

Global Objective

To raise the recognition of the importance of musculoskeletal conditions at the global, regional and national levels

Priorities

Advance Musculoskeletal Health and Science focusing on:

**Arthritis
(Inflammatory,
OA)**

**Bone Health &
Osteoporosis**

**Pediatric
MSDs**

**Spinal
Disorders &
LBP**

**Trauma &
Injury**

Research

Actions

Programs

**Advocacy | Partnership | Surveillance | Public and patient education |
Prevention and control | Research | Knowledge management | Fit for purpose
organisation**

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Programmes & actions:

There will be 8 programmes of work to deliver our ambitions. Each one is allied to a strategic objective and reflects the priorities of BJD



Programmes to deliver our ambitions

1. **Advocacy:** raise awareness of public and policy makers of the burden of musculoskeletal conditions and what can be achieved by implementing effective prevention and treatment
2. **Partnership:** develop sustainable networks at global, regional and national levels
3. **Surveillance:** increase knowledge of the suffering and cost to society associated with musculoskeletal disorders
4. **Public and patient education:** empower people to gain priority for their own care
5. **Prevention and control:** improve access to cost-effective prevention and treatment
6. **Research:** increase research that will advance understanding of musculoskeletal disorders and improve prevention and treatment
7. **Knowledge management:** provide access to information that will support the objectives of the BJD
8. **Organisation fit for purpose:** develop a sustainable global organisation able to carry out the mission, objectives and programmes of the Strategic Action Plan for 2010-2020



For each programme there will be

Expected outputs

- What are the deliverables?

Indicators

- What measure will you use to know you have achieved each of the deliverables?

Milestones

- For each deliverable - timeline, sequence of outputs, priority

Core activities

- What tasks to achieve each of the expected outputs

Accountabilities

- Who is accountable and who is responsible for each output

Budgets

- What is the budget for each output

Proposals are made for the expected outputs for the different programmes along with suggested activities to achieve them and indicators and milestones for their achievement.

The proposals will need prioritising and this will depend on whether they advance our mission and whether they are a good use of resources. When considering accountability for the activities, some may be undertaken by the BJD itself but many could be undertaken by supporting organisations, societies and NANs facilitated by the BJD.



1. Advocacy: raise awareness of public and policy makers of the burden of musculoskeletal conditions and what can be achieved by implementing effective prevention and treatment

Expected outputs	Indicators / Milestones	Activities
WHO recognise and prioritise musculoskeletal conditions (MSC) as major non communicable diseases	<ul style="list-style-type: none"> • Officer within WHO <i>2011</i> • WHO MSC programme of activities <i>2011</i> • WHA Resolution <i>2013</i> • BJD an official NGO <i>2013</i> 	<ul style="list-style-type: none"> • Establish task force and appoint public affairs expert with WHO experience • Develop work plan with WHO • Fund and appoint Assistant Professional Officer to WHO
Ministries of health recognise and prioritise MSC as major non communicable diseases	<ul style="list-style-type: none"> • Number of countries declaring priority for MSC <i>2010 onwards</i> 	<ul style="list-style-type: none"> • Develop prioritisation plan for national implementation • Develop and implement lobby campaign; regular output to health professionals & MSC experts
Relevant stakeholders (e.g. employers) recognise and prioritise MSC as major non communicable diseases	<ul style="list-style-type: none"> • Stakeholder map <i>2010</i> • Measured increase in patronage of BJD <i>2011</i> 	<ul style="list-style-type: none"> • Develop Stakeholder map • Develop and implement communication strategy - audience, content, dissemination • Develop patronage plan
Public awareness of impact of MSC health significantly raised	<ul style="list-style-type: none"> • Measured increase in public awareness <i>2011</i> 	<ul style="list-style-type: none"> • Develop and implement lobby campaign; regular output to media with support from PR agency and medical / media writer as needed • Develop public education programmes

2. Partnership: develop sustainable networks at global, regional and national levels

Expected outputs	Indicators / Milestones	Activities
International Coordinating Council that is credible, representative and efficient	<ul style="list-style-type: none"> Established ICC <i>2010</i> 	<ul style="list-style-type: none"> Identify and invite ICC members
Regional councils involving all relevant stakeholders	<ul style="list-style-type: none"> Established Regional councils <i>2011</i> 	<ul style="list-style-type: none"> Encourage and support establishment of Regional Councils
NANs with appropriate membership	<ul style="list-style-type: none"> Number of appropriate NANs in place <i>2010</i>; Annual reports of activities <i>2011</i> 	<ul style="list-style-type: none"> Set rules for NANs Encourage and support NANs
Societies and organisations supporting BJD	<ul style="list-style-type: none"> Number of societies and organisations signed up to goals of BJD <i>2010 onwards</i> 	<ul style="list-style-type: none"> Establish mechanism to identify and sign up societies
Collaboration at and across all levels	<ul style="list-style-type: none"> Number of collaborative projects <i>2010 onwards</i> Joint multi-professional, multidisciplinary meetings at national, regional and global levels <i>2010 onwards</i> 	<ul style="list-style-type: none"> Facilitate networking and establish programme of collaborative projects Endorse and / or organise joint multi-professional, multidisciplinary meetings
Alliances relevant to tasks	<ul style="list-style-type: none"> Number of Partnerships / Alliances created <i>2010 onwards</i> 	<ul style="list-style-type: none"> Create alliances for tasks that include stakeholders external to the musculoskeletal community

3. Surveillance: Raise Awareness of the Suffering and Cost to Society Associated With Musculoskeletal Disorders

Expected outputs	Indicators / Milestones	Activities
<p>Routine collection of national data that appropriately reflects the suffering and cost to society associated with MSC</p>	<ul style="list-style-type: none"> • Number of countries with agreed indicators <i>2011</i> 	<ul style="list-style-type: none"> • Establish task force and work plan • Work with existing initiatives (GBD Project, EUMUSC.NET, WHO MSK TAG etc) • Agree indicators for measuring and monitoring the impact of musculoskeletal conditions.
<p>Readily accessible national data that reflects the suffering and cost to society associated with MSC</p>	<ul style="list-style-type: none"> • Number of countries with data on burden including costs <i>2011</i> • Number of articles in peer review journals <i>2011 onwards</i> • Number of citations of data <i>2011 onwards</i> 	<ul style="list-style-type: none"> • Collect, collate and disseminate data on agreed indicators for measuring and monitoring the impact of musculoskeletal conditions • Establish programme to publish and disseminate data

4. Public and patient education: empower people to gain priority for their own care

Expected outputs	Indicators / Milestones	Activities
Development of new patient advocacy organisations particularly in developing countries and for rare conditions	<ul style="list-style-type: none"> • Number of patient advocacy organisations <i>2011 onwards</i> • Number of training programmes <i>2011 onwards</i> 	<ul style="list-style-type: none"> • Establish task force and work plan • Establish Advocacy training programmes - annual training course; training pack; web-based training programme • Provide support to NANs to develop patient organisations - mentoring programmes; awards; sharing best practice; pilot projects to develop skills of advocate leaders
Raised public awareness of the impact of MSC and what can be achieved by prevention and treatment.	<ul style="list-style-type: none"> • Number of public education programmes <i>2011 onwards</i> • Increased public awareness measured by surveys <i>2011 onwards</i> • Number of recognisable public spokespersons <i>2011 onwards</i> • Regular press releases <i>2010 onwards</i> • Regular surveys of public awareness and knowledge <i>2011 onwards</i> 	<ul style="list-style-type: none"> • Public awareness and education programme - developing and disseminating material; sharing materials via web based library of pdfs; communication between NANs of educational activities • Bone and Joint Week

5. Prevention and control: improve access to cost-effective prevention and treatment

Expected outputs	Indicators / Milestones	Activities
Implementation of the Bone and Joint Decade recommendations for health professional education and training	<ul style="list-style-type: none"> • Number of education and training programmes in medical schools and elsewhere with appropriate MSC curriculum <i>2010 onwards</i> • Number of fellows in MSC training <i>2010 onwards</i> • Training curricula for all relevant health professionals <i>2010 onwards</i> • MSC within examinations <i>2010 onwards</i> • Centres of excellence in education and training <i>2010 onwards</i> 	<ul style="list-style-type: none"> • Establish task force and work plan • Develop and disseminate education and training curricula / programmes for all levels of health worker. • Survey medical education and training with outcome-based methods to evaluate the curriculum • Develop question bank for national exams • BJD recognition programme • Teach the Teachers courses - organise, facilitate, promote
Implementation of standards of care for major MSC	<ul style="list-style-type: none"> • International accepted standards of care (SOC) <i>2010 onwards</i> • Data on number of countries with agreed standards of care for major MSC <i>2011 onwards</i> • Data on number of health care professionals who treat patients with MSC conditions <i>2010 onwards</i> 	<ul style="list-style-type: none"> • Establish task force and work plan • Agree and disseminate SOC / standardised protocols appropriate to country targeted at primary physicians and with patient versions • Agree indicators for monitoring implementation of SOC • Surveys, registers to monitor SOC

6. Research: advance understanding of musculoskeletal disorders and improve prevention and treatment through research

Expected outputs	Indicators / Milestones	Activities
Changes in national research priorities and policies to reflect burden of musculoskeletal conditions.	<ul style="list-style-type: none"> • National governmental grants given to musculoskeletal science (MSS) increase by 50 % <i>by 2015</i> • MSS listed as national health priority in 20 countries <i>by 2020</i> 	<ul style="list-style-type: none"> • Establish task force and work plan • Develop and publish position papers • Design and implement lobby campaign • Representation on research councils
Musculoskeletal joint university science programs, departments, institutes	<ul style="list-style-type: none"> • Hospitals / universities with MSC science programs = 100 <i>by 2020</i> 	<ul style="list-style-type: none"> • Design and implement lobby campaign • BJD recognition programme
Collaborative research across all disciplines with full patient engagement	<ul style="list-style-type: none"> • Scientific meetings, symposia, congresses with "overlap" of clinical and scientific interests <i>2010 onwards</i> • "Musculoskeletal Newswire" <i>2011</i> 	<ul style="list-style-type: none"> • Organise scientific meetings bringing together people at the "overlap" • "Musculoskeletal Newswire" and BJD website
Increased engagement in research by the musculoskeletal health community	<ul style="list-style-type: none"> • Number of <ul style="list-style-type: none"> – MSS Research training courses – Research Travelling Fellowships <i>2011 onwards</i> 	<ul style="list-style-type: none"> • Encourage and support research training • Create travelling research fellowships in MSC

7. Knowledge management: To provide access to information that will support the objectives of the BJD

Expected outputs	Indicators / Milestones	Activities
Web-based information system	<ul style="list-style-type: none"> • Web-based system <ul style="list-style-type: none"> – Information on – Number of users <ul style="list-style-type: none"> • public, professional – Number of web lectures <p><i>2010 onwards</i></p>	<ul style="list-style-type: none"> • Establish task force and work plan • Website giving access to <ul style="list-style-type: none"> • links to stakeholders with map • links to physician related information • links to patient related information relevant to the user • links to centres of expertise for patients • BJD material
Publication(s)	<ul style="list-style-type: none"> • Reports and articles in scientific journals; and medical and lay press <i>2010 onwards</i> • Updated BJD website and content <i>2011</i> • "Musculoskeletal Newswire" <i>2011</i> 	<ul style="list-style-type: none"> • Partnerships with journals / Providing material • Translation to a new homepage as THE firstline search engine for MSC • Develop A "Musculoskeletal Newswire" by identifying liaisons in different countries recommended by the NANs to highlight clinical and scientific advances for dissemination through the Bone and Joint Decade network.

8. Organisation fit for purpose: develop a sustainable global organisation able to carry out the mission, objectives and programmes of the Strategic Action Plan for 2010-2020

Expected outputs	Indicators / Milestones	Activities
An effective International BJD Office with staff	<ul style="list-style-type: none"> • Appointment of Permanent staff, including a COO and fundraiser <i>2010 onwards</i> 	<ul style="list-style-type: none"> • Organise International meetings • Deploy and utilise effective communication system • Organise fund raising • Coordinate publications • Support Task Force activities of other programmes
Regional councils involving all relevant stakeholders	<ul style="list-style-type: none"> • Membership of ICC <i>in place</i> • Number of regional councils <i>2011</i> • Activities and outputs <i>2011 onwards</i> 	<ul style="list-style-type: none"> • Implement Relationship management database
NANs that meet BJD criteria and committed to Strategic Action Plan	<ul style="list-style-type: none"> • Number of NANs <i>2010</i> • Activities and outputs <i>2010 onwards</i> 	<ul style="list-style-type: none"> • See Partnership (programme 2)
Supporting organisations representing all stakeholders from all countries	<ul style="list-style-type: none"> • Number of supporting organisations • Comms system in place • Funding in place 	<ul style="list-style-type: none"> • Regularly communicate with supporting organisations

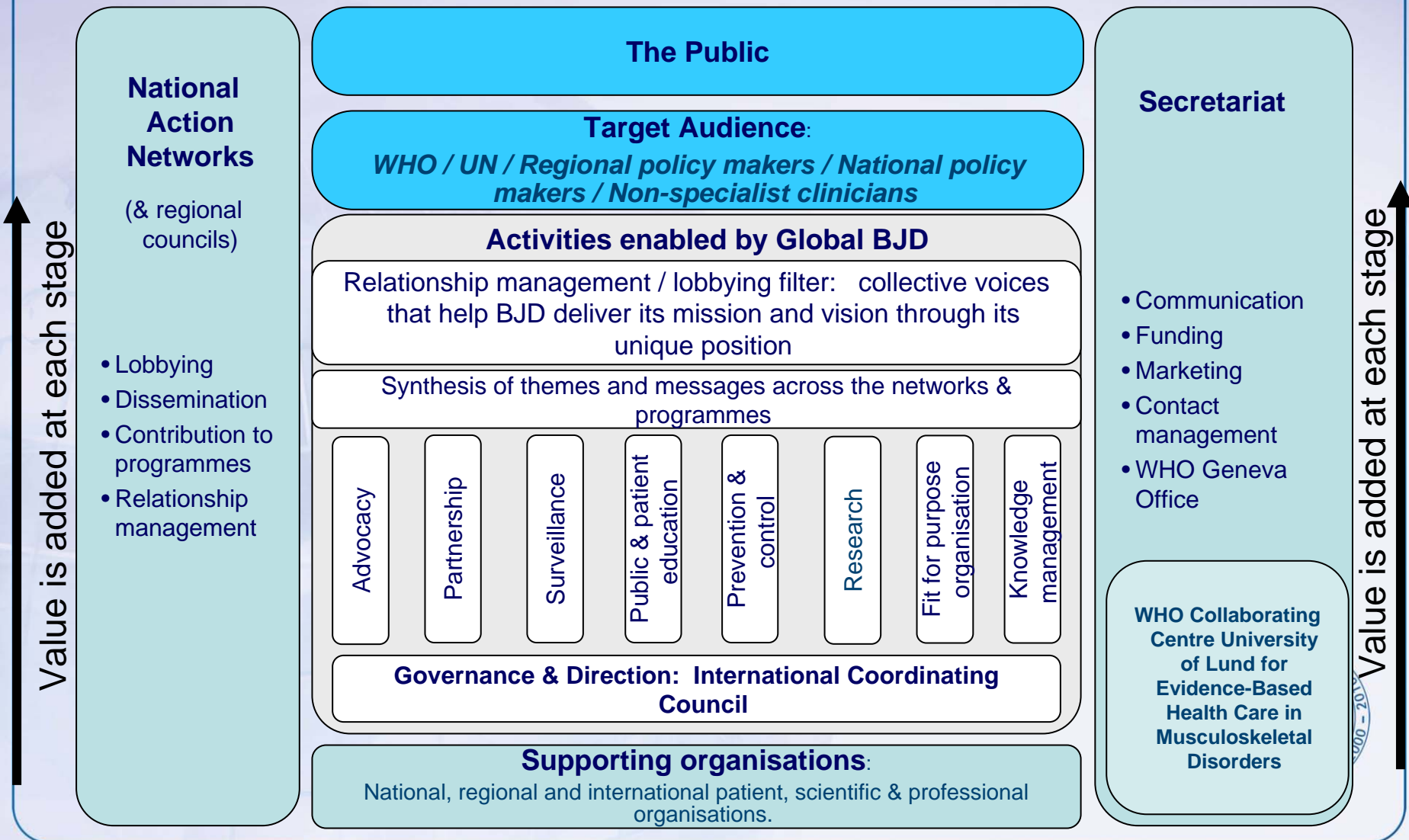
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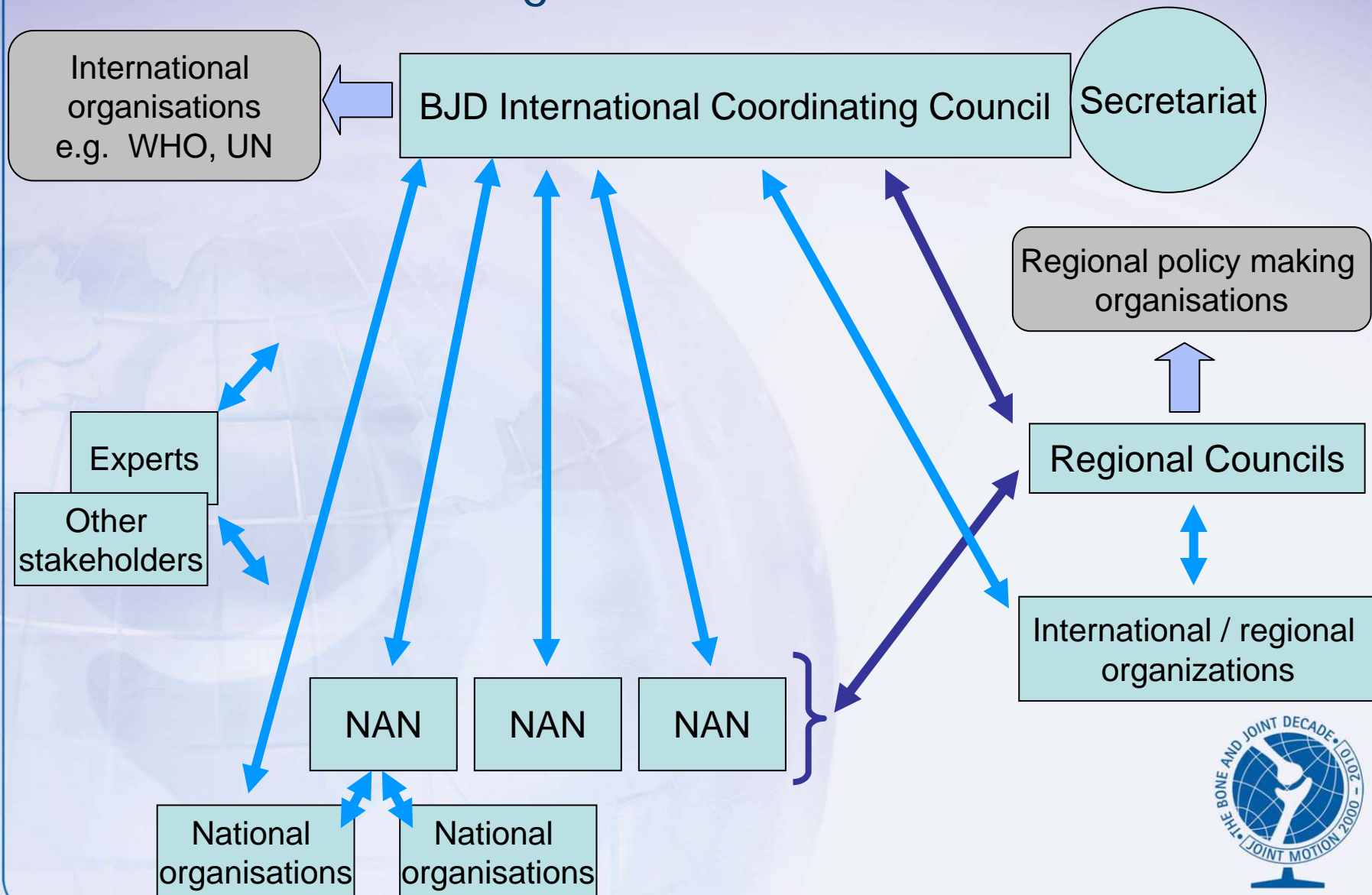
How it will operate:



BJD 2010 -2020: operating model



BJD 2010 -2020: organisational model



The Bone and Joint Decade

The only organisation that *keeps people moving* by lobbying and advocating on behalf of everyone across the globe dealing with musculoskeletal conditions



This word cloud features the following terms and phrases:

- Large Words:** Musculoskeletal, Network, Osteoporosis, Patients, Activities, Traffic, Worldwide, Canada, Common, Initiatives, Programme, Goals, Occur, Write, Chairman, Organisation, Healthcare, Science, Health, Decade, Bone, Joint, Research, Conditions, World, International, National, Global, Action, Bone, Joint, Research, Conditions, World, International, National, Global, Action, Bone, Joint, Research, Conditions.
- Medium Words:** MD, Australia, Countries, Age, Medical, Around, Fracture, Injury, Mission, United, Rheumatology, Patients, Member, Mr, Activities, Members, Traffic, Worldwide, Canada, Common, Initiatives, Programme, Goals, Occur, Write, Chairman, Organisation, Healthcare, Science, Health, Decade, Bone, Joint, Research, Conditions, World, International, National, Global, Action, Bone, Joint, Research, Conditions.
- Small Words:** Medicine, Foundation, Trauma, Strategies, Annual, Project, Surgeons, Public, Year, Work, Fractures, Promote, Diseases, Support, Networks, University, Bear, Groups, Information, Back, Education, Last, Held, Hip, Awareness, Treatment, Lebanon, Meeting, Finland, PhD, Pain, Million, People, Care, Health, Decade, Bone, Joint, Research, Conditions, World, International, National, Global, Action, Bone, Joint, Research, Conditions, World, International, National, Global, Action, Bone, Joint, Research, Conditions.