

STRATEGIC MAP: 2022–2026

Central Challenge:

To support SHEA members' professional growth and expertise in healthcare epidemiology, antibiotic stewardship, and infection prevention and to serve as a timely and reliable source of expertise to quide institutional administrators, policymakers, public health officials, and others who influence the delivery of healthcare in ways that advance SHEA's mission of Safe Healthcare for All.

MEMBERSHIP

Embed diversity, equity, and inclusion within SHEA volunteer structures to advance DEI principles in the fields of healthcare epidemiology, infection prevention, and antibiotic stewardship.

В

GUIDANCE, EDUCATION, & **PUBLICATIONS**

Enhance the development and dissemination of SHEA developed education, quidance, and publications to ensure both timeliness and impact.

C

GOVERNANCE & LEADERSHIP

Develop leaders to promote the expertise of specialized training in healthcare epidemiology, infection prevention, and antibiotic stewardship.

D

POLICY & RESEARCH

Campaign for resources to support the research and practice of healthcare epi and antibiotic stewardship.

YEAR 1

2022

ABCD1.

- 1. Identify goals for diversity, equity, and inclusion among SHEA volunteers, especially within speaker, author, and leadership roles.
- 2. Identify and implement how SHEA will measure progress toward DEI goals.
- 3. Segment and target SHEA communications to ensure our issues cover all SHEA membership groups with programs and services.
- 4. Collaborate with like-minded organizations as appropriate.
- 5. Encourage research that investigates disparities and inequities that exist in HE and AS practice.

YEAR 2

2023

YEAR 3 2024 A2-3.

Increase membership of healthcare personnel (HCP) leading IP and AS programs domestically and internationally. 5% Dec. 2022-Dec. 2024

Target activities, including SHEA expert guidance documents and white papers, to foster sustainable growth and prevent any significant decreases in key metrics for ICHE and ASHE over 5 vears. These metrics include:

- 1. Immediacy index
- 2. Impact factor
- 3. Reviewers
- 4. Downloads
- 5. Rejection rate.

Increase participation from education-related activities. 5% Dec. 2022-Dec. 2024

Assess and optimize SHEA volunteer opportunities and governance structure.

C2-3.

- 1. Identify leadership pathways for professionals to effectively manage changes within their roles.
- 2. Create leadership opportunities for direct and indirect leadership skill development.
- 3. Create media training for HEs, IPs, and AS to take an active role in press opportunities and external leadership.

C4-5.

- 1. Support ongoing efforts to leverage lessons learned from COVID-19 for ongoing resource needs for HE and ASPs.
- 2. Maintain and track impact of C2-3.
- 3. Consider additional opportunities and educational activities to keep content fresh and relevant.

D1.

Create a comprehensive plan to proactively quide and support advocacy and research efforts.

D1-3.

- 1. Explain the value of HEs, IPs, and AS staff.
- 2. Develop ways to interact and collaborate with patient advocacy groups.

D1-5.

- 1. Develop and implement methods to grow the SHEA Research Network, and increase diversity according to facilitylevel characteristics that are identified as priorities by the DEI taskforce:
 - a. Facility membership by 5% per year
 - b. Response rate averaged across total studies per year, by **5% per** year.
- 2. Develop and establish ways to expand the grassroots program to educate federal policymakers on the role of HE, IP, and AS in improving the quality of health services.

YEAR 4

2025

YEAR 5 2026 A4-5.

- 1. Increase membership of HCPs leading IP and AS programs domestically and internationally. 10% Dec. 2022-Dec. 2026
- 2. Monitor SHEA membership retention and maintain a >75% renewal rate at the close of each renewal period over 5 years.

B4-5.

Increase participation from education-related activities. 10% Dec. 2024-Dec. 2026

Operationalization of the Strategic Plan ("tactics") are described on the next page and within committees' yearly workplans.