



Strategic Plan

2021-2025

Letter from the President and Secretary General

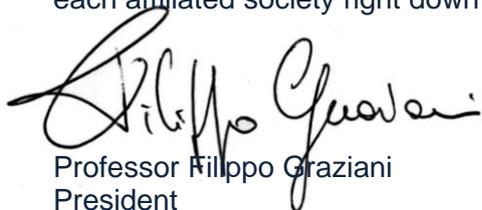
The EFP is a learned federation of national periodontal societies whose stated purpose is to provide global leadership in the promotion of periodontology and peri-implant health, aiming to reduce the impact of these two common debilitating oral diseases on individuals, with a consequent improvement of the oral and general systemic health of society.

The EFP's constitution was originally created on 12th December 1991 by eleven pioneer national societies of periodontology (Belgian, British, Dutch, French, German, Irish, Italian, Portuguese, Spanish, Swedish and Swiss), and celebrated by our 25th anniversary in 2016, and our 30th anniversary in 2021. The EFP continues to grow in membership from 11 to 26 full members, 5 associate members and 6 international associate members. The EFP has succeeded in becoming one of the leading authorities in periodontology worldwide and a leading authority in dentistry in Europe and beyond. This global reach is largely a result of exemplary co-operation between independent national societies together with a deep conviction amongst its member societies that the federation will continue to fulfil its leading role in the field of periodontology and implant dentistry.

The decision of the EFP council to review, update and disseminate its strategic plan has been an opportunity to set up and re-establish our priorities, to focus our resources and energies, to enable us to establish common goals for the benefit of all our stakeholders, to establish agreement around our planned outcomes and also to allow adjustments in the direction of the EFP in response to changing environments and challenges. A sustainability manifesto has been drawn up that emboldens the EFP to survive and thrive in perpetuity.

The delivery of previous strategic objectives has generated a successful EFP whichever parameters of evaluation are used. The objective of the proposed strategic plan is that for the next 5 years the EFP continues to deliver on that success. The EFP Executive Committee charged with the challenges of looking at the big picture with half an eye on the future, has delivered with clarity, a document that indicates a willingness to provide leadership in this field, guidance for our colleagues and support for our patients.

As President and Secretary General of this exemplary and prestigious federation, we recognise, appreciate and acknowledge with thanks, that the ongoing success of the EFP is heavily dependent on the engagement, commitment, professionalism and altruism of its executive committee as well as the immeasurable support provided by each affiliated society right down to the individual members.



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European Federation of Periodontology



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1. INTRODUCTION

1.1 What is Periodontology?

Periodontology is the scientific study of the tissues which support the natural dentition. The scope of periodontology is substantial given its broad biological base, including medical disciplines related to microbiology, immunology, histopathology, pharmacology, molecular biology. As a consequence of research and development, the scope of study has extended to include the tissues that surround and support dental implants, as well as the awareness of the associations and interactions between periodontal diseases and systemic conditions. The clinical practice of periodontology is sometimes referred to as “periodontics”. However, “periodontal science” better represents the scope of the discipline, which encompasses the prevention, diagnosis and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes; the replacement of lost teeth by implantation of natural and/or synthetic devices and the reconstruction of lost supporting structures by regeneration or repair of the hard and soft tissues in order to maintain the health, function and aesthetics of these tissues and structures to improve oral and general health and wellbeing.

Whilst there are several forms of periodontal disease, the two most prevalent are inflammatory in nature and termed gingivitis and periodontitis. Gingivitis is a largely reversible inflammation of the gingival soft tissues. It is a precursor to, and pre-requisite for, periodontitis. Periodontitis destroys the attachment apparatus of the tooth including the alveolar bone, resulting in tooth loss. Periodontitis is inflammatory in nature and alongside dental caries, the most common disease of humans affecting 50% of adults and 60% of those over 60-years of age. Severe periodontitis affects over 10% of adults worldwide. It is a major cause of tooth loss and leads to health issues such as reduced nutrition, low self-esteem/confidence and reduced quality of life. Severe periodontitis is the sixth most common disease of humans. It is independently associated with the majority of chronic, non-communicable diseases of ageing and premature mortality. Severe periodontitis therefore presents as a significant healthcare, social and

economic burden. Periodontitis is both a source and a consequence of social inequality across the world. It impacts negatively upon the broader economy of all countries.

On a global scale in 2018 periodontitis was estimated to cost \$54 billion for direct treatment and a further \$25 billion in indirect costs. The outcome of periodontal diseases also contribute to a significant cost of other dental diseases which when combined was estimated 2015 to be \$544.41 billion (Righolt et al 2018). The negative impact of periodontal disease on general health through systemic diseases has yet to be addresses but is likely to be significant.

Provision of dental implants has revolutionised the management of the failing dentition. However, they are not without their own peculiar risks of disease, such as plaque associated peri-implant mucositis (inflammation of the mucosa around the implant) and peri-implantitis (inflammation around the implant including bone loss). Contemporary evidence suggests a 43% occurrence of peri-mucositis and 22% occurrence of its continuum peri-implantitis. A history of periodontal diseases increases the risk of peri-implant diseases, with the associated burden in terms of quality of life, time and cost. In addition mechanical complications may occur associated implants, the risks of which should not be underestimated.

Periodontal diseases are chronic inflammatory processes, largely mediated by the immune system, where healthy periodontal tissues are replaced by granulation tissue. Patients vary in their susceptibility to periodontitis. Risk assessment underpins preventive oral care approach and must be individually tailored. In the majority of cases the inflammatory process can be arrested, and the disease stabilised by longterm supportive periodontal therapy, such that teeth may be further retained. The success of treatment requires patient engagement through behaviour change and a lifelong commitment to the control of risk factors, with support from the oral healthcare team. Treatment is not necessarily complex or expensive and can be successful for the majority of cases resulting in tooth retention, improvement in self-esteem, quality of life and wellbeing. It has been shown to reduce the cost of medical care in certain groups where periodontitis is a co-morbidity, such as diabetes.

The European Federation of Periodontology (EFP) is a Federation of national societies whose purpose is to reduce the impact of periodontal and peri-implant diseases on individuals and upon society, with the aim of improving oral and general health and wellbeing. Whilst the EFP has industry partners who support the much needed

educational outreach activities and public awareness campaigns of the Federation, the EFP is completely independent and does not endorse any company, company policy or product. Independence and objectivity are core tenets of the EFP.

1.2 Background and History of the European Federation of Periodontology

The first steps to developing a platform on which to coordinate the activities of the periodontal societies in Europe were taken in August 1986. The first meeting of the European Co-Ordination Committee in Periodontology-as it became known, took place in Montreux, Switzerland on 18 September, 1987 in conjunction with a joint meeting of the Swiss and Dutch Societies of Periodontology. Two further meetings took place in 1988 and 1989.

The fourth meeting of the Co-ordination Committee took place in Maastricht, The Netherlands in May 1990. A constitution including the Rules and Procedures for the European Federation of Periodontology (EFP) was proposed at this meeting. The Rules included the following:

- The EFP would be a cooperative body of the joint European Societies of Periodontology
- Each member society would have one representative on the governing body of the Federation - the General Assembly (GA)
- The EFP GA should meet at least once each year

The Amsterdam meeting of EFP, held on 12th – 13th December 1991, was a landmark event in the history of the Federation. It was at this meeting that the Constitution and Objectives of the Federation were formally adopted. It was decided that the first EFP EuroPerio meeting (EuroPerio 1) would be held in Paris, France between 12th-15th May, 1994.

Today, the EFP, which complements the activities of European national societies of Periodontology, comprises 26 full members, 5 associate members and 6 international associate members, having a collective membership of over 16,000 in Europe and beyond. The Federation runs the internationally acclaimed EuroPerio meetings once every three years and has become a global benchmark, attracting over 10,000 attendees to Amsterdam for EuroPerio 9 in 2018. The Federation, which maintains a

primary focus on European issues, has become the largest and one of the most influential bodies in Periodontology in the world.

1.3 Purpose of the EFP

The prime purpose of the EFP is to provide pan-European, and as appropriate, global leadership in the promotion of Periodontology. This is specifically linked to periodontal and peri-implant health, and in turn, oral and general health and wellbeing by means of education, research and evidence-based advances in clinical practice. The intended outcome is an enhanced public awareness and a positive influence on national and international health policy.

The groups that the EFP works with in promoting Periodontology and periodontal health include:

- Periodontists
- General dental practitioners
- Oral Healthcare professionals and other members of the dental team
- Patients and other members of the public
- Funders of oral healthcare services, together with all those with interests in the business of dentistry
- Societies, associations, other federations, colleges and all other relevant healthcare bodies and organisations at national, European and international levels
- Providers and funders of dental education and students at all levels
- Charities and other agencies which may fund relevant aspects of research
- Governments, policy makers and champions of the art and science of oral health
- Industry, in particular, the dental industry
- Publishers and all those involved in the dental and related press

In its 25-year history, the EFP has evolved from a European to global umbrella organisation of Periodontology, with EuroPerio meetings becoming highly regarded, world class, cutting-edge events for the sharing, discussion and debate of contemporary knowledge and understanding in Periodontology and implant dentistry, and as a showcase for state of the art, techniques, instrumentation, devices and materials. In addition to the EuroPerio meetings, the EFP also produces the *Journal of Clinical Periodontology* (JCP), which is one of the most highly rated peer review

scientific journals in oral and dental science. Other activities of the EFP include the highly prestigious EFP Graduate Program in Periodontology and the hosting of annual European Workshops on Periodontology. These consensus workshops have a global impact and focus on key issues in Periodontology and implant dentistry. An EFP Masterclass runs every two years between EuroPerio congresses and is a focussed meeting held in a city location that is unable to accommodate a full EuroPerio congress. The EFP communicates with its members and provides public information via the EFP website and Federation Newsletters. The JCP Digest was created in 2014 to disseminate vignettes of research from the JCP in a form that is digestible for general practitioners. The Digest is translated into five European languages. Additional complementary initiatives are planned by the Scientific Affairs Committee. The EFP runs specific projects of dental and medical interest altogether with sister medical organizations and its commercial partners.

1.4 Background to the present Strategic Plan

Since its foundation in 1990, the EFP has grown from 11 to 37 (full and associate) member (inter)national societies and established itself as a global force in the field of Periodontology. A great deal has been achieved in a relatively short space of time. Rapid growth and expansion of activities has, and continues to pose a challenge to the Federation. In addition, the field of Periodontology, and the environment in which it is applied, is rapidly changing. It was therefore considered timely for the Federation to reassess its goals and review its structure in looking beyond the vision and strategic objectives set out in the previous strategic plans. The first strategic plan (2008-2012) set out the EFP ambition and how best to achieve it, defining our mission, vision and plan. The second, strategic plan (2013-2017) covered a period of substantial growth in EFP activities and public awareness initiatives, as well as re-branding through the development of a new website and increasing professionalization by the engagement in May 2016 the appointment of a Director of Operations. The development of the third plan commenced in the second quarter of 2016 and covered the period of 2017- 2021. During this period, the EFP has again continued to grow both within and out with Europe and now encompasses a number of international associate members including, Australia, Brazil, Argentina, Mexico, Lebanon and Taiwan. As a result of this continued growth, impact of technology and the changing world of media and communications a new Strategic Plan was drawn up in Brussels in July 2019 for the period 2021-2025. An important focus of the New Strategic Plan is communication across all aspects of the

strategy, to align our structure and processes, and increase our global impact to healthcare professions, patients and The Public. A new projects committee will be created to oversee the all projects, these now being able to be undertaken simultaneously. This strategy will enhance EFP collaboration, reach and dissemination. To these ends the EFP management team is being joined by a new professional member, Head of Communication. This will facilitate the EFP to have one cohesive voice to the 'outside world' with regards to the visual, written and spoken content of the EFP. The Journal of Clinical Periodontology (JCP) is the prestigious journal of our peer reviewed science coming from our workshops and Perio community. The Executive Board and EFP staff will work closely with the JCP Editor helping him/her to deliver and maintain the quality of the journal.

A further key focus of the New Strategic Plan in line with global trends, is sustainability which will be integral across all aspects of the EFP strategy and management decisions. The wellbeing of our members must also be on our agenda and importantly recognition of success with new awards being created. The EFP also acknowledges the importance of embracing equality and diversity of opportunity for the less advantaged and a such will reflect this in its strategic plan.

1.5 Challenges for the next 4 years

The EFP has undergone a rapid expansion in outreach activities during the last years, specifically in communications, heightening public and political awareness and in the dissemination of oral health messages to patients and the public. The need for professional support to sustain and further develop this expansion was identified by the senior officers and committees. The quantum of activity identified for 2018-19 and the present plan has to be delivered within a tight financial envelope. This challenge creates a tension between realising the goals of the EFP and affordability, which needs to be carefully managed. Each project identified in the New Strategic Plan will become the responsibility the Executive Committee, with a budget agreed with the EFP Treasurer. Each committee will identify the actions necessary to deliver it delegated strategic objectives and will map these against timelines to help monitor and track progress. The website, which historically served us excellently, will be redesigned to accommodate the New Strategic Plan, refreshing and rebuilding as required to accommodate our vision for the next tranche of activities. With advances in technology the new website should enhance our communication both internally for our management information systems, and externally with our stakeholders and world

profile. It will also facilitate greater integration with our national societies and improved digital communications in line with our sustainability policy. This is a major investment, but a necessity to be able to realise the future vision of the EFP. The communication officer will work closely with the head of Operations.

2. ENVIRONMENTAL CONTEXT

The EFP is the leading learned society in the field of Periodontology. The EFP, with its wide-ranging activities and reputation for excellence, is highly regarded among sister organisations, including the American Academy of Periodontology (AAP), the International Association for Dental Research (IADR), the European Association of Osseointegration (EAO), the Association for Dental Education in Europe (ADEE) and kindred organisations such as the European Academy of Paediatric Dentistry and European Endodontic Society.

Many factors influence the activities and direction of travel of the Federation. These include, in no particular order:

- Political, social and economic changes in Europe which affect the professional environment
- Strategic changes, funding arrangements and advances in healthcare across EFP Europe and beyond
- The impact of change in population demographics, notably the increase in the proportion of older individuals, most of whom are retaining more teeth for longer and increases in the prevalence of Type 2 diabetes
- Recognition of the importance of oral health and in particular, of a healthy periodontium to general health and wellbeing
- Changes in patient behaviours and consumer group attitudes to periodontal health, and the influences of these changes on general health and wellbeing
- Increasing interests in dental attractiveness and oro-facial soft tissue aesthetics
- The impact of the increasing use and expectations of implant dentistry
- The ever-increasing rate of advances in dental and related technologies, and associated knowledge and understanding which create opportunities for new treatment modalities

- Increasing expectations in relation to evidence (value)-based care
- EFP partnerships with other societies enabling benchmark definitions and guidelines to be established
- Advances in dental education and the impact of the implementation of the Bologna process
- Increasing competition for research funding, research priority setting and the increasing need for open access dissemination of research findings
- Growth in awareness of the importance of inter-professional working in future healthcare provision
- Shifts in approaches and attitudes to professionalism and ethics in dentistry
- Engagement of young practitioners in professional bodies and associations, in particular, young practitioners who show interest in becoming the next generation of leaders of organisations such as the EFP
- The impact of the world-wide web as a source of information/ misinformation on matters pertaining to the practice and further development of Periodontology and implant dentistry
- The heterogeneity of the recognition and regulation of Periodontology as a speciality across EFP Member countries, despite widespread support for greater harmonisation

3. THE EFP STRATEGY DEVELOPMENT PROCESS

The EFP was highly successful in delivering its 2017-2021 strategic objectives, with a number of important goals achieved. The Federation must now decide where it wishes to be positioned at the end of the next planning cycle (2026) and articulate objectives to realise its vision of *Periodontal Health for a Better Life*. The strategic planning meeting was held in Brussels on 18th June 2016. The attendees were: Filippo Graziani, Nicola West, Monique Danser, Xavier Struillou, Lior Shapira, Andreas Stavropoulos, Anton Sculean, David Herrera, Mariano Sanz, Maurizio Tonetti and Sharon Legendre and Monica Guinea. A revised vision and new objectives were drafted during this meeting and were further developed at an Executive Committee meeting in Split in October 2019. Based on discussions at this meeting, the draft revised vision and new objectives was finalised and presented to the General Assembly in Pisa in March 2020.

At all stages in the development process, the members of the Executive Committee were encouraged to act as ambassadors for their respective national associations and to engage in the discussions and debate, having accepted that ownership of the 2021-2025 vision and objectives would be critical to the next phase of the development and enhanced standing of the Federation.

4. VISION & STRATEGIC OBJECTIVES

4.1 Vision and definition

Periodontal (gum) health for a better life

Periodontology encompasses the art, science and practice of attaining and maintaining healthy tissues supporting and surrounding teeth or their substitutes, replacing lost teeth by implantation of natural and/or synthetic devices and reconstructing lost supporting structures by regeneration or repair with the goal to maintain the health, function and aesthetics to improve oral and general health and wellbeing.

4.2 Strategic Objectives

Focus Area

Strategic Objective

Improved Health and Wellbeing

Improve and promote periodontal health globally as part of oral and general health and wellbeing, ensuring social and economic inclusion, by working in partnership with patients, governments, professional bodies, industry, consumer groups and other organisations.

Education and training

Maintain, refine, harmonize and further develop the highest standards of education and training in the art, science and practice of Periodontology and Implant Dentistry to increase knowledge/awareness on the importance of periodontal diseases and their consequences for other oral and non-oral health professionals.

Policy and Influence

In collaboration with national member organisations and through strong leadership, influence policy at national and international levels, including the recognition of periodontal (gum) diseases as a public health problem as well as source and consequence of social inequality. The recognition of Periodontology as a dental specialty in the EU is fundamental prerequisite.

Science and Research

Promote research and knowledge-basis in all aspects of periodontology and implant dentistry, with global dissemination and application of research findings to enhance patient and public awareness and promote the practice of evidence-based and patient-centred care and, in turn, clinical outcomes.

5. STRATEGIC ACTIONS

The following actions are considered necessary to realise the strategic objectives of the Federation. These strategic objectives are inclusive of development and maintenance of effective communication channels across all aspects of our activities, both internally and externally. A sustainable approach will be taken whenever possible with regards to all strategic objectives.

Once these actions are approved, an implementation plan will be developed. This plan will assign individuals, groups or national associations the responsibility for completion of the actions and set out desired timeframes.

Strategic Objective 1: Improved Health and Wellbeing

Improve and promote periodontal health globally as part of oral and general health and wellbeing, ensuring social and economic inclusion. This is to be achieved by working in partnership with patients, governments, professional bodies, industry, consumer groups and other organisations.

1.1 Promote the maintenance of periodontal health at all ages to increase tooth retention and improve general health and wellbeing by increasing the awareness of the

impact of periodontal diseases upon oral health, tooth loss, nutrition, self-confidence/esteem, general health and quality of life.

1.2 Monitor the changes in the global burden of periodontitis and its socio-economic impact in an increasingly ageing population, with multi-morbidity. Develop and foster the implementation of effective prevention plans with the objective to reduce the burden of periodontal and peri-implant diseases in Europe.

1.3 Develop and widely disseminate evidence-based clinical guidelines aimed at identifying and preventing periodontal and peri-implant diseases, and re-establishing and maintaining periodontal and peri-implant health.

1.4 Develop and disseminate evidence-based clinical guidelines aimed at restoring masticatory function by implantation of natural and/or synthetic devices and to reconstruct lost supporting structures with the goal of re-establishing the health, function and aesthetics to improve oral and general health and wellbeing.

1.5 Recognise and communicate the impact of peri-implant diseases as an emerging public health problem to patients, the profession, public health organizations and the dental industry, with the goal to develop evidence based clinical guidelines, to prevent and manage these diseases.

Strategic Objective 2: Education and training

Maintain, refine, harmonize and further develop the highest standards of education and training in the science, practice and art of Periodontology and Implant Dentistry to increase knowledge/awareness on the importance of periodontal diseases and their consequences for other oral and non-oral health professionals.

2.1 Update periodically, EFP primary dental degree competencies and curriculum guidelines, with the aim of enhancing the harmonization of learning, teaching and clinical instruction outcomes in Periodontology and Implant Dentistry amongst new dental graduates across EFP member Countries.

2.2 Support the development of graduate training programmes in *Periodontology and Implant Dentistry* across EFP member Countries, according to the EFP postgraduate competency and curriculum guidelines and become an international standard.

2.3 Promote EFP accreditation of postgraduate periodontal programmes in order to establish a common standard across EFP member Countries (mentor system) and become an international standard.

- 2.4 Develop and disseminate educational materials, such as a clinical journal, webinars, podcasts, materials developed in association with EFP projects, aimed at four distinct targets: universities (at graduate and postgraduate levels), general dental practitioners (GDPs), dental hygienist and dental hygiene schools; non-oral health professionals (including doctors and pharmacists).

Strategic Objective 3: Policy & Influence

In collaboration with national member organisations, and through strong leadership, influence policy at national and international levels, including the recognition of periodontal (gum) diseases as a public health problem and a source and consequence of social inequality. The recognition of Periodontology as a dental specialty in the EU is considered to be a fundamental prerequisite.

- 3.1 Update and regular review of the EFP Code of Ethical Conduct in light of current thinking.
- 3.2 Continue to support the pursuit to recognize Periodontology as a regulated specialty.
- 3.3 Develop a network of professional alliances with international healthcare organisations (e.g. WHO/ FDI/ CED/ European Platform for Better Oral Health) and international associations with the goal of periodontal health being recognised as an integral component of general health and wellbeing.
- 3.4 Continue to lobby public health organisations (e.g. WHO/ EU) and policy makers to embrace periodontal (gum) health as a significant public health issue.
- 3.5 Encourage and support national societies of Periodontology to continue, and wherever possible expand dialogue with their national competent authorities and to ensure that national issues are taken into account in EFP policy making.
- 3.6 In collaboration with the EFP Member Societies, increase the awareness of the competent authorities and the public about the high prevalence and socio-economic consequences of periodontal diseases in the general population.
- 3.7 Furthermore, increase the awareness of the public and competent authorities on the effectiveness of preventive and therapeutic strategies to improve periodontal health, function and aesthetics.
- 3.8 Increase the collaboration with medical learned bodies and associations to raise awareness on the evidence of the association of periodontal diseases with an increasing number of non-communicable diseases, their impact on quality of life and the benefit of co-management.
- 3.9 Strengthen the EFP Brand in order to improve the dissemination to the professionals, the national competent authorities and the public.

3.10 Foster the development of the EU patient associations interested in oral health to establish a relationship with these key stakeholders.

Strategic Objective 4: Science and Research

Promote research and knowledge-basis in all aspects of periodontology and implant dentistry, with global dissemination and application of research findings to enhance patient and public awareness and promote the practice of evidence-based and patient-centered care.

Knowledge Development :

4.1.Promote knowledge development and the evidence base in Periodontology and Implant Dentistry through EFP expert workshops.

4.2 Promote periodontal research amongst health professionals and scientists by encouraging research funding.

4.3 Promote periodontal research amongst health professionals and scientists by encouraging applications to current and new awards.

Disseminate knowledge:

4.3 Activation of the European Observatory of Periodontology as the authoritative and competent source of robust information on periodontal and peri-implant diseases to the public media.

4.4 Publication of the workshop systematic reviews and consensus reports in Journal of Clinical Periodontology.

4.5 Disseminate new relevant research findings globally in all EFP communication formats and EFP activities.

4.6 Develop an EFP e-learning platform

6. IMPLICATIONS

The EFP has made substantial progress in recent years significantly improving its global reach via external communications and through various outreach campaigns under the vision of 'Periodontal health for a better life'. The EFP has started to raise awareness with policymakers and the public and initiated collaborations with partner health organizations in order to make significant advances in leading the global scientific discussion about periodontal science.

Nevertheless, the ethos and philosophy of the EFP, being a Federation run by us as professionals continues to create logistical challenges as exemplified below:

- Continue to engage and drive to action a 'voluntary' Scientific Community often very busy with their practices, day to day professional/academic engagements;
- Greater involvement of the EFP Member Societies and make them feel part of this community;
- Find enthusiastic young leaders of the future that will assure the continuity of the Federation and offer them challenging new projects;
- Diversify the EFP activities, allowing a more stable financial future;
- Maintain a high-quality scientific journal, workshops and scientific congresses;
- Being able to deliver partner projects in parallel with each other and meeting timelines and expectation.
- Continue to professionalize our administration according to affordability to help deliver our business continuously rather than in peaks and troughs and to improve internal communication.

This 2021-2025 Strategic Document sets out a realistic plan for the next 5 years and we hope it will help the EFP to realise its stated goals.

9. IMPLEMENTATION PLANNING & MONITORING

This Strategic Plan will only be successful if the different EFP Committees turn this strategy and plan into specific, measurable, achievable, realistic and timed (SMART) actions. The implementation planning process requires, therefore, to identify clearly the

“who, where, when and how” for each Strategic Objective that is set in the present document.

In this sense, the four focus areas outlined in the present document will require a specific implementation plan to be undertaken during 2020.

Each focus area should have a ‘leader’ that may or may not be the chair of the relevant Committee. The EC has proposed the leader for each Focus Area in an Implementation Plan, drafted in October 2019 at the Split Core Executive Committee meeting.

The role of the leader will be to evaluate the strategy set for his/her focus area, review it, obtain advice from the specialists in a specific area, highlight any element of the area that might be especially challenging and recognize any part that might be unrealistic or excessive in cost either with respect to time or money. A team will be established to create feasible actions and name a responsible officer for each action.

The Focus area implementation plan should list the actions, the names of the people responsible for implementing each action and set an achievable and coherent timeline for each action planned.

As alluded to in section 8, the challenge should be to engage motivated professionals in each section of the Strategic Document and ensure that they report to their leader’s the progress made in their different duties and actions. The role of the different EFP Committee Chairs, whether or not they are leaders of an area, will be crucial in order to establish regular progress reports to the Executive Committee .

The Head of Operations will help the Executive Committee (EC) contact the relevant Committees, help them to determine the leaders of each Focus Area, ensure they set actions and timelines and report regularly to the EC. She will implement a reporting process that will allow the professionals to feedback to the EC regularly.

The Head of Operations will inform the EC about progress in the implementation of specific activities and involve the Secretary General when potential problems or concerns are identified.

The implementation plans should be ready by the time the first year of the strategic Plan has started in March 2021.