2014 VISION: *What do we want to see in place in 3 years as a result of our actions?*

Dissemination of IS knowledge	A respected IS Research Coordinating Center	Recognized leader in IS	We are *THE* education resource for IS	A vital research portfolio	Strategic alliances	Sustainable funding	Demonstrated impact	A networking platform
●Publications, presentations, peer reviewed journals ●Publications for each network study	●Active collaborative where research teams can be referred to, to conduct research ●Have network of researchers who clinical sites can use ●Members are repeat researchers on ISRN ●Infrastructure and process to facilitate research	●Brand as global industry leader in improvement science research ●ISRN is a scientific advisory to policy groups (transform HC delivery) ●Pts prefer care from sites engaged in ISRN research ●Established leader in the filed of improvement science ●Designated multisite research network by ANCC, professional groups, sigma theta tau ●Provide think tank for researchers to inform health policy law at all levels	●Education on IS through courses, workshops, publications, etc ●Education working group that develops curriculum options ●Increase Implementation Science Summit to 350 attendees ●Solid foundation for health professions curriculum (microsystem management) ●Created opps for clinical staff to build research skills ●White papers: "What works" for each priority ●Clear distinguish Improvement Science from Implementation Science	●Scientific research projects on a rolling basis ●10 studies using ISRN as a "laboratory" ●10 multi site studies ●Several - 5-10 network studies in progress ●Conduct 2 member initiated studies ●Conduct & complete 3 landmark studies ●Comparative databases available for secondary analysis ●Establish database - research, evidence, tools, annotated bib	●Create alliances with those engaged in Systems Redesign work ●CMMI recognition ●JCAHO joint efforts & regulations ●Commitment from professional orgs. ●Engaged partnership with CMS Innovation Center to impact HC reform ●Establish partnership with Academy Health & 2 other national orgs	●Built capacity to seek funding for multi site studies ●Recognized and funded by NIH/ AHRQ and private funders ●CMMI ●Sustainable membership through extra mural funding & membership dues ●Orgs/ networks in multi site studies funding ISRN core ●NIH funding	●Energy created from engagement in discovery - see results - want more ●Change practice outcome in 2 areas (front line level) ●Reduction in small problems & medication errors that are documented ●Database on positive patient outcomes from ISRN research	●Infrastructure for a wide range of involvement ●Design infrastructure for providing access - network site for accessibility