



## CoDH 20<sup>th</sup> anniversary event

On 28 June 2017, the Council celebrated its 20<sup>th</sup> anniversary with about 90 members, stakeholders, our Executive and staff teams. As well as reflecting on the history of the Council and the changes in the education and training of nurses, midwives and allied health professionals (AHPs) that have taken place over the last decades, we also hosted a panel discussion on leadership with four experienced leaders from different parts of the sector. This paper will summarise the key points each of them made during the discussion.

### Jacqui Lunday Johnstone

Jacqui Lunday Johnstone is the Chief Allied Health Professions Officer in Scottish Government. She has professional leadership and policy lead role for 10 AHP groups and 51 healthcare science professions. Since 2007, she has led an international programme of work in virtual networks for health professionals as part of her role as Technical Advisor to the World Health Organisation (WHO). In 2015, she was awarded an OBE for her services to healthcare professions.

Jacqui started off by making the case for building networks and connecting with colleagues to shape the system that supports our professions and the people they support. She reminded the audience of the positive paradigm shifts that have taken place in the NHS in recent years towards more integration of services and interdisciplinary working; partnership with patients; enabling all clinical professions rather than just GPs to be a first point of contact; and the recognition of the risks of overmedicalisation and overmedication.

With regards to partnerships with other sectors, Jacqui pointed out that the NHS could learn from third sector organisations that often have more experience in co-creating services, supporting self-management and tailoring recovery support. Recognising how interdependent the experiences of staff, students and patients are, can be an important step to supporting all to thrive in our health and social care system based on a common purpose, Jacqui argued.

She also highlighted opportunities for the sector arising from the creation of new interdisciplinary workforce models, and for fostering students' appetite for research early on. The Council's role, she said, was to connect people around these common endeavours, in demonstrating the impact of the work and research of our professions, and in promoting knowledge transfer both nationally and globally.

## Jean White

Professor Jean White is the Chief Nursing Officer and Nurse Director of NHS Wales. She provides expert advice to Welsh Government, the NHS in Wales and stakeholders. Jean supports international work through the WHO European Region and was awarded a CBE in June 2017 for her services in nursing and midwifery in the UK and internationally.

As devolution has increasingly driven apart health and higher education policy in the UK's four nations, Jean stressed the importance of asking how we can keep professional consistency in this context. At the same time, devolution could be an opportunity to try and compare different policies and regulatory frameworks, which could enable mutual learning, Jean suggested.

Despite these contextual differences, Jean highlighted some challenges that most of the countries and regions in the UK are experiencing, including the number and skills of nurses in light of rising and changing demands. Whilst these workforce challenges could force service providers and commissioners to question what patients really need and where self-management could be an increasingly important resource, they clearly risk the system falling short of providing adequate care, Jean said.

Workforce challenges are of course not only a challenge in this country and Jean reminded the audience that in some areas of the world people are dying (for instance in childbirth) because of a lack of adequate professional support. The WHO's regional heads are comparing how different systems perform, not least to enable countries to learn from each other. Jean gave the example of community health workers – known particularly from the context of developing countries – who could be a useful addition to the health and social care workforce in economically disadvantaged areas of the UK. In the context of the shift towards supporting people in making choices about their health and wellbeing instead of professionals making those choices for them, new roles like these could play an important role.

The role of the Council of Deans, Jean said, was to support members in being politically aware and contributing to policy debates both nationally and internationally. Furthermore, Jean expected the Council to be a strong voice to help influence policy and say what higher education institutions could contribute to developing the best population health possible.

## Danny Mortimer

Danny Mortimer is the Chief Executive of NHS Employers, the voice of employers across the NHS leading work on workforce policy and practice on behalf of the NHS. Danny has a degree in politics and has worked in healthcare as director of NHS trusts. Before joining NHS Employers, he was Executive Director Workforce and Strategy in Nottingham University Hospitals NHS Trust.

Danny focussed on the impact of Brexit on the health and social care sector, which he is addressing as co-convenor of the Cavendish Coalition, a network of 35 health and social care organisations that have come together to influence Brexit and its impact on health and social care.

The most important issue, he explained, is that 6% of the UK healthcare workforce are EU nationals – a proportion that has increased in recent years as immigration from outside of the EU has become more restricted. Brexit poses not only a threat to the international supply of healthcare workers but also to the history of the NHS as an employer of a diverse workforce, Danny argued. At the same time, he said, the necessary investment in training more domestic healthcare staff to compensate for the possible effects of Brexit, is still lacking. On the contrary, the disinvestment in social care had brought home the interdependency of health and social care through the visible lack of community care.

A key priority of the Cavendish Coalition, Danny stressed, is a long-term approach to migration that reflects the needs of the health and social care sector and enables a flexible workforce mix – including unskilled foreign care workers without whom the system would struggle to care for the increasing number of people who need care in their own home. Therefore, health and social care staff should ideally be exempt from current immigration policy with its bias towards higher earners.

Working together to achieve the best possible outcome of Brexit for the sector, Danny concluded, was vital and could be effective in addressing some of the workforce challenges that the sector has been grappling with for years.

## Thomas Kearnes

Thomas Kearnes is the Executive Director of the Faculty of Nursing and Midwifery in the Royal College of Surgeons in Ireland (RCSI). He provides leadership and direction in the development and delivery of the strategic and operational aims of the Faculty. Prior to joining RCSI, Thomas was Education Officer in the Nursing and Midwifery Board of Ireland and has worked as an advisor to the Department of Health and European regulatory networks.

Thomas argued that healthcare has always been provided in a changing context. He saw the role of academics to understand the direction and context of that change. He raised concerns about some academics being too distant from the healthcare context, which made the engagement with stakeholders and service users all the more important. Every academic in his faculty has a clinical background, he explained, but many of them have not been in a hospital “for decades”. The greater the distance between academia and practice, the greater the disconnect between their research and clinical practice, he argued.

Thomas also advocated staff being supported in meeting their individual training needs and expanding their practice, including international staff whose needs might be different. Ultimately, he saw the role of academics as supporting clinicians to deliver high quality, safe care.