

Council 2025 Strategy

### The Council of Deans of Health

The Council of Deans of Health (Council or CoDH) represents the UK's universities engaged in education and/or research for nursing, midwifery, and the allied health professions. At any one time, our 100 members will educate around 175,000 current and future professionals and will carry out research that improves the population's health and wellbeing. Our members are based in England, Northern Ireland, Scotland, Wales, the Channel Islands and Gibraltar. We operate as a charity, registered across the UK

#### Our vision

Our vision is that governments in the UK are committed to quality education and research and a sustainable healthcare academic workforce, in order to safeguard and improve the health and wellbeing of the public.

#### Our mission

We, on behalf of the UK university healthcare education sector, advance and promote healthcare education and research for the public benefit, through influencing Government policy and connecting our members.

#### Our values

#### We are INCLUSIVE

We champion diversity, equity, and inclusion across our sector and to its leaders. We give voice to underrepresented individuals and communities.

#### We are INNOVATIVE

We build meaningful networks that strive for innovation. We generate ideas based on evidence.

#### We are IMPACTFUL

We deliver our charity objectives with commitment and accountability. We focus on impactful outcomes.

# The strategic context in which we operate: PESTLE analysis

#### PESTLE: issues that affect our sector



#### **POLITICAL**

Devolution
Immigration (Brexit)
Government focus

#### **ECONOMIC**

Austerity
Education funding
Charity sector funding

#### **SOCIAL**

Deprivation Social mobility Wellbeing Inclusion

#### **TECHNOLOGICAL**

Future pedagogy Member networks Global collaboration

#### **LEGAL**

Sector regulation Charity law compliance

#### **ENVIRONMENTAL**

Sustainability
Business prioritisation

### P-Political: devolution, immigration, government focus

The political climate will be dominated by governments' prioritisation of healthcare over higher education as a result of the pandemic. This may lead to a move towards healthcare education being delivered both within and outside universities. The Government in England is already focusing on increasing opportunities through apprenticeships and in the further education sector.

Governments across the UK are aiming to move towards preventative and community-based care to cater for an older and sicker population as a wider range of professionals will work in primary and social care. The complexity this brings to the organisation of student placements will be reflected in our future policy work.

The recent election results in Scotland and Wales may lead to further devolution and the potential for another debate on independence in Scotland. This could have implications for our membership and the way we operate in the four countries of the UK.

Regional and local structures in England are maturing and expected to make more of their own decisions. The level of connectivity between universities and local health and social care systems varies considerably with some examples of very close working. This development has shaped our approach to regional working and may influence how we work with stakeholders on issues such as workforce planning in the future.

Brexit is impacting on immigration and workforce policy as EU staff recruitment and mobility of students and academics between the UK and EU countries are decreasing. The reduction of EU funding for European collaboration may lead to more interest from some international partners to engage with us as a UK organisation to help them understand better the political and policy healthcare higher education landscape.

### **E-Economic:** austerity, education funding and charity finances

Experts at PWC forecast that the UK will have fallen from 5th to 9th place in world economic rankings by 2050 measured by gross domestic product (GDP) at market exchange rates. With potential average annual growth of around 1.9%, the UK is projected to remain the fastest growing economy in the G7 between 2016 and 2050. The UK's position is sustained by its projected larger working-age share of the population than in most other advanced economies. However, this strong growth potential depends on the UK continuing to attract and employ talented people from around the world.

GDP grew by 4.8% in April-June 2021 compared to the previous three-month period (January-March) and grew by 1.0% in June 2021 compared to May. This was the fifth consecutive month of growth. However, GDP in June 2021 remained 2.2% below pre-pandemic levels in February 2020 (House of Commons August 2021). According to the Office for National Statistics, the recent substantial increase in borrowing has led to a sharp increase in public sector net debt, which in June 2021 stood at 99.2% of GDP, the highest ratio since the 99.5% recorded in March 1962.

Austerity may lead to a stronger interest in healthcare careers as these have been more stable in terms of employment and benefited from a strong positive narrative during the pandemic. We have noted a steady increase in applications to healthcare programmes over the last three years. An even more diverse applicant population may start to show interest in healthcare careers. This demographic is well known to many of our members as widening participation, apprenticeships and work-based models have been high on the agenda of many universities.

Austerity will undoubtably bring back live debates on 'who should pay' for education, revisiting the argument that tuition fees in England are very high compared to other European countries and universities may be called to reconsider their funding models. The charity sector, to which we belong, is less optimistic right now about government support for the sector. Reduction of public funding for charities may impact on our own income in terms of grants for specific projects.

### S-Sociological: deprivation, social mobility, wellbeing, inclusion

Our disciplines have already prioritised issues around social mobility in terms of widening participation and access to education. There is an opportunity for this agenda to be strengthened even further without undermining the value of graduate education underpinned by evidence-based and research focused academic work.

Student mental health has been a focus for universities over recent years and also links to student experience and student retention. Increasingly we will also want to focus on staff mental health and the impact of a highly pressurised environment on academic staff satisfaction, career progression and retention.

This year has brought to the fore a heightened awareness of the racism and racial inequalities that persist within wider society including our university communities. The Covid-19 pandemic has disproportionately affected members of Black, Asian and minority ethnic groups, exacerbating racial inequalities in health outcomes as well as financially. The Black Lives Matter movement, following the racist killing of George Floyd in Minneapolis in May 2020, has also drawn attention to racism within the UK and the enduring inequalities experienced by many staff members and students at UK universities, including racial harassment.

Although inclusion has been an important agenda for universities, there is still a long way to go in terms of ensuring that both our academic leaders and students we recruit to programmes reflect the breadth of our society. We therefore commit to champion the opportunities for underrepresented groups amongst our membership.

### T-Technological: future innovation in pedagogy, networking, global collaboration

Technology underpins everything we do, from how our members design and deliver their programmes and research or business collaboration to how we run our own engagement with members including our events and communications. Covid-19 has presented a significant opportunity in terms of how we deliver our business in the future. Online teamwork at the staff level and online engagement at the member and stakeholder level have been effective and successful in terms of engagement, staff development and access.

Thanks to technology, we have been able to include more of our members' staff in online events, offering them development opportunities at high level political meetings, which led to staff building more confidence, learning new skills, and picking up more responsibility in organising and chairing meetings. Similarly, we have been able to open our events to audiences we have not been able to engage before due to cost restrictions. For instance, we have engaged with all regional deans' groups in England and have widened our engagement, influence and reach within and beyond our membership.

New IT systems, simulation, robotics, genomics, and artificial intelligence will drive innovation in the delivery of education and research in the future. They also make remote delivery easier and could play a role in a shift towards work-based education. We will need to ensure as a sector that we have the right funding for our technological infrastructure, the right continuing professional development in this area for academic and practice staff as well as the right balance between online and face to face delivery of education.

#### L-Legal: charity and sector regulation

As a newly established charity we must ensure all our work is relevant to our sector and follows best practice in terms of charity priorities and charity regulation. We will make sure we comply with all relevant legislation from how we make decisions and run our business to the safety of our staff. This is relevant to the content of our work but also and more importantly to the way we manage our finances.

Our members operate in a highly regulated environment and regulation forms an important part of our work. We will want to ensure we continue to prioritise this area as it is important both for our members and our sector.

### **E-Environmental: corporate sustainability commitment**

All charities are expected to have a good sustainability policy. We developed our own environmental sustainability policy in August 2019 and will want to ensure it is benchmarked against best practice and updated to reflect what we learned during the pandemic. This may include changes in the type of suppliers, changes in our events offer and our engagement with stakeholders but also our office accommodation in the future.

Looking forward post the vaccine period of the pandemic, we will seek to ensure that any business travel undertaken is worthwhile and where possible choose the travel option with the least environmental impact. We should continue to use electronic meeting tools where this is practical and always discuss benefits and risks before considering long distance travel. We should also reconsider our flexible/working from home policy both to ensure staff effectiveness and staff engagement with the business but also in terms of our future environmental policy.

### Our member audiences

The Council has increased its reach within its membership over the last three years. We have included a wider audience in our events and information sharing and engaged with the wider academic and student community beyond just the Deans/Pro Vice Chancellors and Heads of Schools. We are now in a much better position as part of this strategy to offer tailored services and represent our membership within the following key three member audiences:

#### **Sector strategists**

The Deans, Pro Vice-Chancellors and Heads of Department are our sector strategists. We will prioritise their involvement in strategic conversations, government influencing and policy development. The CoDH nation groups involving only these members would take the lead on the Council's policy development function.

#### **Academic experts**

The wider healthcare academic community within our member institutions are our academic experts. We will open access to our member services for them in line with demand and data protection rules. We will proactively identify expertise that we need for specific areas of work and projects. Most areas of more detailed policy input will be for this group to engage with. We will review all existing policy advisory groups to ensure they are accessible to these wider audiences as required and they promote inclusion.

#### **Final beneficiaries**

Both the employers of healthcare professionals and the healthcare student population of our member institutions are our final beneficiaries. All the work we influence and deliver as part of our charitable objects lead to better outcomes for the students, our current and future professionals and their employers that form our healthcare workforce. We engage with employers of all healthcare staff proactively as part of our policy work and we will commit in this strategy to increase our involvement with the social care sector. While we commit to continuing the Student Leadership Project following overwhelming feedback from our members, we will encourage and support our members to embrace student leadership within their faculties. We will also create a mechanism within the Council to engage students with policy development.

### Our partner organisations

We work in partnership in our political influencing across the four countries of the UK. We would not have been able to achieve change in several policy areas that affect the healthcare higher education sector without partnership working with the following key stakeholders, which we would like to acknowledge here:

- Four governments and parliaments/assemblies in the UK
- Four UK Chief Nursing Officers and Chief Allied Health Professions Officers
- Health Education England, Health Education Improvement Wales, NHS Education Scotland, NIPEC in Northern Ireland
- Regulators including the Nursing and Midwifery Council, Health and Care Professions Council and the Office for Students in England

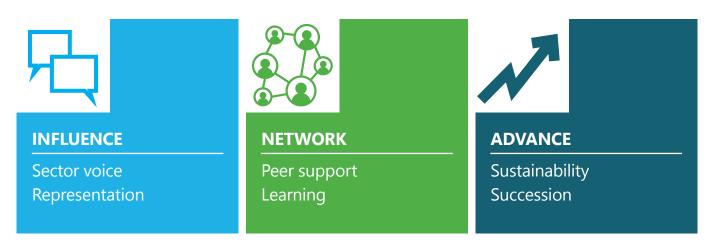
- Universities UK and university mission groups
- The healthcare research organisations in the UK including NIHR
- NHS Employers and other groups representing employers and providers of student placements
- The professional bodies, Royal Colleges and unions representing nursing, midwifery and allied health
- Think tanks including The King's Fund and The Health Foundation
- The Cavendish Coalition and Nursing Now
- Our funding partners including the Burdett Trust for Nursing, Health Education England, and the Office for Students

### Our strategic aims

We have set three core strategic aims for our Council 2025 Strategy:

- We influence policy across the UK promoting the essential contribution of our sector to health and social care.
- We offer excellent services to our members creating sustainable sector networks.
- We advance healthcare education and research by strengthening our sector and organisation.





We are **inclusive** and open to collaboration
We strive for **innovation** and are clear about our **impact** 

### Our strategic priorities



# Strategic aim: **INFLUENCE**

We influence policy across the UK.

We promote the essential contribution of our members to health and social care.

#### Our priorities:

- Sector sustainability
- Agile regulation
- Research capacity
- Diversity and inclusion
- Pedagogy and innovation



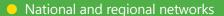


# Strategic aim: **NETWORK**

We offer excellent services to our members.

We create sustainable sector networks.

#### Our priorities:





- Member community
- Blended member events (online and face to face)
- Student engagement in policy





# Strategic aim: **ADVANCE**

We advance healthcare education and research. We strengthen our sector and our organisation.

#### Our priorities:

- Sharing experience and innovation
- Succession planning for the academic workforce
- Fellowship scheme for academic leaders
- Leadership activities for students
- Strong governance model for the Council
- Grow expertise within staff team





#### For further information contact:

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