

ROYAL COLLEGE OF PODIATRY STRATEGY ACTIVATION PLAN TO 2030

Consultation draft Version 1 June 2024

EXECUTIVE SUMMARY

The Saks Report, published in 2021, is a comprehensive analysis of the current status of the podiatry profession and the opportunities and challenges it faces over the coming years. This strategic activity plan will deliver on the ambitions of the report with focus, impact and urgency.

It provides an update on the issues in the profession, the industry trends and market dynamics and the external environment in which we operate.

An updated analysis of strengths, weaknesses, opportunities and threats and a strategic rationale specifically related to the organisation, will highlight where we need to invest and focus our efforts to achieve a successful outcome.

It will set our objectives, goals, targets and measures around an ambition to halt the decline in the number of podiatrists and put the profession back into positive growth based on the needs of patients and the healthcare system.

Five strategic programmes will promote careers, position the RCPod as the leading source of clinical knowledge in podiatry and the number one learning brand, whilst raising awareness of the profession and enabling a financially sustainable organisation fit for the future.

In conclusion, it will outline the resources, budgets and timetable required to fulfil our ambitions, underpinned by a programme of capacity building activity that will be a solid platform for growth.

CONTENTS

1 Impact on long-term conditions		30
3	Strategic programmes	31
Current issues within the health sector 6		32
9	Objective two	33
11	Objective three	34
12	Objective four	36
13	Objective five	37
15	How will we measure our success?	40
17	Royal College of Podiatry governance	
	Committee organigram	43
19	The Royal College of Podiatry: Committee	
21	structure 2024	44
	Committees	45
25	Budget	46
26	Timetable	48
27	Conclusion, next steps and Purpose,	
29	Mission and values	50
	6 9 11 12 13 15 17 19 21 25 26 27	 Objective one Objective two Objective three Objective four Objective five How will we measure our success? Royal College of Podiatry governance

CURRENT STATE OF PODIATRY

The podiatry profession and the words podiatry/podiatrist still lack common recognition in the way many other healthcare professions do.

The Strategic Interventions in Health Education Disciplines project showed that many people knew that podiatry involves feet; however, there was no awareness of the breadth of the profession.



SPECIFIC ISSUES FOR PODIATRY

Traditionally, a higher proportion of students who enroll on the podiatry undergraduate programme, rather than other healthcare undergraduate programmes, are mature students. The number of mature student university applications in the UK has declined by over 70,000 since 2021.

Undergraduate podiatry programmes have been particularly affected by this trend. After the cap was lifted on the numbers of Nurses, Midwives and AHPs in England that could be trained at undergraduate level in 2016/17, the undergraduate podiatry programmes saw a reduction in student numbers of 35%, and one programme had a fallow year due to the low number of applicants.

Recruitment is a big issue for all Higher Education Institutions (HEIs). A major factor is the loss of the bursary. Another is that HEIs previously had access to a stream of students who hadn't received the grades for other healthcare programmes but were able to get onto the podiatry programme.

NHS England's Long Term Workforce Plan stated in 2023 that it foresaw up to 80% of the profession coming through the apprenticeship route. The plan did not state any mitigation for the impact that such a figure may have on current undergraduate programmes.

In Scotland undergraduates currently receive free university places, however there is no bursary available.

In Wales, university fees are covered by a NHS bursary as well as a contribution to living costs. Welsh Government intend to review the delivery of this funding.

The Department of Health in Northern Ireland cover university tuition fees for undergraduate healthcare programmes, with the addition of an income assessed bursary.

The differing funding options in the four nations have not changed the UK wide recruitment challenge.



THE NUMBER OF MATURE STUDENT UNIVERSITY APPLICATIONS IN THE UK HAS DECLINED BY OVER 70,000 SINCE 2021



35%

REDUCTION
IN THE
UNDERGRADUATE
PODIATRY
PROGRAMMES



UP TO 80%

OF THE PROFESSION
THROUGH THE
APPRENTICESHIP ROUTE
STATED BY NHS
ENGLAND'S LONG TERM
WORKFORCE PLAN IN
2023



The second

RCPOD-LED SURVEYS
OF NHS SERVICES AND
INDEPENDENT
PRACTICE SHOW THAT
BOTH SECTORS ARE
STRUGGLING TO
ATTRACT EMPLOYEES
AND ASSOCIATES
RESPECTIVELY

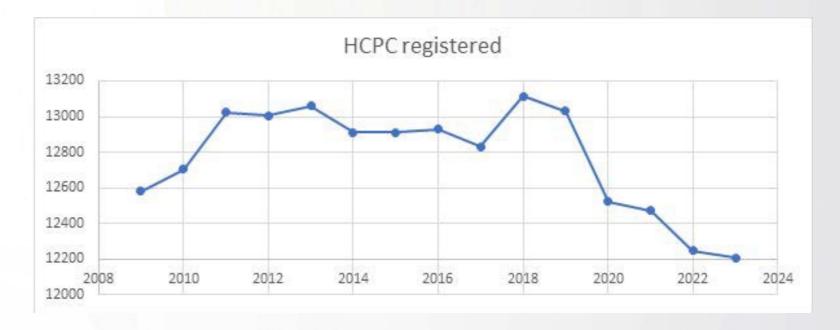


HIGH VACANCY RATES,
HAVING AN IMPACT ON
THEIR ABILITY TO
PROVIDE FULLY
ROUNDED
PODIATRY SERVICES



Recent RCPod-led surveys of NHS services and independent practice show that both sectors struggling to attract employees and associates. A vast majority of NHS Podiatry services are suffering from high vacancy rates, which is having an impact on their ability to provide

fully rounded podiatry services, i.e. many must concentrate on wound care at the detriment of MSK services. This may have a negative impact on retention with NHS services. The growing pressures on podiatrists in the NHS are showing, with many reports of burnout and long-term sickness.



HCPC FIGURES SHOW A CONTINUAL DOWNWARD TREND IN REGISTRANTS SINCE 2018.

CURRENT ISSUES WITHIN THE HEALTH SECTOR

Physician Associates (PA) and Anaesthesia Associates (AA) (described as 'Assistants' until 2014) are newer roles that were brought in to support NHS services, and which have been in place for over 20 years. Both groups are still unregistered, despite the GMC working to put this process in place.

There have been numerous media pieces by medics on the unregulated status of PAs and AAs and a perceived undermining of the status of medical doctors. We have yet to see similar negative reaction about First Point of Contact (FPC) roles in primary care, taken up by podiatrists, physiotherapists, OTs, dietitians and paramedics. These roles have been slowly increasing in the past six years.

This maybe due to the AHPs being well-established, regulated, and providing supporting to GP practices. These FPC roles, similar to PA and AA roles, are funded through the Additional Roles Reimbursement Schemes (ARRS). Therefore, the GP practice does not have to pay for the roles. It is believed that government will continue to fund the ARRS roles, due to the reduced supply of GPs.

The advancing practice agenda could be compromised if healthcare professionals are discouraged from going to advanced clinical practice roles through a lack of support from medical colleagues.

ANALYSIS OF THE EXTERNAL ENVIRONMENT, INCLUDING DIGITAL LITERACY/ARTIFICIAL INTELLIGENCE, REGULATORY CHANGES, INDUSTRY TRENDS AND MARKET DYNAMICS

EXTERNAL ENVIRONMENT

The scope of practice of podiatrists is suffering from encroachment from other sectors, yet simultaneously moving into new areas. Podiatrists do not own the foot and lower limb. Therefore, the podiatrist often shares care with other professionals. In the independent sector, they may be in direct competition with others. In the NHS, podiatrists involved in wound care often share care with orthotists, district nurses and tissue viability nurses and work closely with primary care diabetes nurses.

MSK podiatrists share care with physiotherapists and rheumatologists in Musculoskeletal Clinical Assessment and Treatment Service (MCATS) clinics. In the independent sector, many podiatrists work closely with physiotherapists, osteopaths, sports therapists, and orthotists.

Despite previous issues between podiatric surgeons and orthopaedic foot and ankle surgeons, the RCPod and the Faculty of Podiatric Surgery are working closely with the British Orthopaedic Association and the British

Orthopaedic Foot and Ankle Society to foster understanding and better working relationships.

At present, Foot Health Practitioners (FHPs) are not regulated, but may choose to sign up for voluntary registration. This is held by the Professional Standards Authority (PSA). The register is called the Alliance of Private Sector Practitioners. However, should an FHP face a disciplinary tribunal, they can easily leave the voluntary register and continue to practise without issue. This is one of many issues that will need to be addressed should FHPs be offered employment within NHS services in England.

When the NHS England Long Term Workforce Plan was released in June 2023, it stated that apprenticeships are expected to comprise:

66 ... AT LEAST 80% FOR... PODIATRISTS. **99** The plan goes on to state that:

66 FOR PODIATRY, WE PROPOSE EXPANDING APPRENTICESHIPS SIGNIFICANTLY SO THEY BECOME THE MAIN ENTRY ROUTE INTO THE PROFESSION. ??

This is an extraordinarily high proportion and may have a significant impact on NHS podiatry teams, who are already short-staffed, and who will need to provide appropriate supervision. At a time when NHS services are already over-stretched, there are serious questions as to how NHS Trusts will manage to train these additional apprentices. Such large numbers of apprenticeships call into question the viability of traditional BSc (Hons) Podiatry and pre-registration Masters routes if the direction of travel is so heavily focused on apprentices, as many of the HEIs that offer undergraduate podiatry programmes do not offer an apprenticeship route.

Apprenticeships are not offered currently in any of the devolved nations, however there are various funding and alternative pathways across Scotland, Wales and Northern Ireland.

The introduction of the PREPARE programme in 2023 provides an earn as you learn pathway to training which has expanded to 3 health Boards in 2024.

DIGITAL LITERACY/ ARTIFICIAL INTELLIGENCE

Artificial Intelligence (AI) may increase productivity within healthcare services as more routine tasks become automated.

These advances are unlikely to reduce the requirement for a fully functioning podiatric workforce, but may reduce any long term forecasted rate of growth in workforce demand.

Digital literacy among many healthcare professionals is low, and a concerted effort will be required to improve and harness AI and the potential benefits it may bring.

There are many potential efficiencies to be realised through more effective use of technology and AI in healthcare.

This is an area ripe for innovation in all facets of healthcare delivery and prevention.

WE WILL, HOWEVER, STILL REQUIRE A HIGHLY EDUCATED WORKFORCE WHO HAVE THE REQUISITE DIAGNOSTIC AND CLINICAL DECISION-MAKING SKILLS.

REGULATORY CHANGES

Following the UK leaving the European Union, the healthcare sector is likely to move from the established EU CE marking, with its own UKCA mark, which will be the national equivalent to the certification.

Initially, device manufacturers whose devices bore a CE mark would have been required to change over to the UKCA system by June 2023, but this was later delayed by the Medicines and Healthcare Products Regulatory Agency (MHRA).

INDUSTRY TRENDS AND MARKET DYNAMICS

New technological advances currently in development, along with certain core skills of podiatrists, may increasingly be used in patient management rather than in task-based roles.

The bespoke manufacture of orthoses has been an important element of podiatric practice for many years. Podiatrists are experts in biomechanical-related foot and ankle care and this work generating custom-made orthotics is often a key income stream for many podiatrists in independent practice.

This new technology could be seen to erode both the identity of podiatric care and the ability to generate income. It potentially brings an end to the skill of casting a patient's feet to create custom orthoses, being replaced with scanners and 3D printers.

This new technology is quicker and provides greater accuracy in producing custom orthoses. Podiatrists share their skills in orthoses with other professions, such as orthotic technicians, prosthetists, orthotists and physiotherapists. Therefore, as more and more NHS services and independent practices invest in this technology, it is likely that the casting skillset will wane. The podiatrist's role will still be ensuring that the correct diagnosis is made following gait analysis and a full biomechanical assessment. The actual manufacture of the orthoses can and is performed by a technician.

Orthoses that detect high-pressure areas can help prevent foot ulcers. While they are unlikely to solve the problem right away, investing in them nationally could at least help reduce the current rates of foot ulcers.

Similarly, several companies who provide gait analysis sensors and foot scans to enable increased accuracy in the diagnoses of biomechanical issues.

This is likely to increase the perception of professionalism with the public, rather than performing a gait analysis simply by eye.

Due to the high equipment cost, the NHS, whilst not excluded, is behind the independent sector.

While the new technology could be seen as a threat to current practices, podiatrists can embrace it and adapt. They should champion that, despite improved speed and accuracy, biomechanical specialists are still needed to diagnose issues and ensure the correct orthoses are created. Specialists must confirm that the printed orthoses solve the patient's issue.

By doing so, this disruptive technology can positively advance podiatry into a more technological era.

In 2021, the RCPod produced a milestone report on the state of the profession, the challenges it faces and it concluded with 28 recommendations to secure the future success of the RCPod and the profession. It is against this backdrop of change and opportunity that the RCPod has developed this activity plan.

STRATEGIC PLANNING FOR THE RCPOD'S FUTURE

A strategic plan is critical for the RCPod to be purposeful and successful in achieving its mission in the longer term. This plan will aid in the effective allocation and management of resources, ensuring they are used efficiently to achieve strategic objectives. It will provide a framework for measuring performance by setting out objectives and timelines so we can monitor progress, and accountability is clear. It will act as a reference for decision-making, helping to guide choices that are consistent with the vision and goals of the organisation.

This is the start of the planning process which will make the RCPod look ahead and anticipate change, helping to better prepare for future challenges and opportunities.

It will be an important communication tool for stakeholders, clarifying the RCPod's purpose and how it intends to succeed. By setting clear objectives and a mission, it will motivate and engage members, employees and stakeholders by involving them in the purpose of the organisation.

By frequently revisiting and revising the strategic plan, we will remain adaptable and responsive to external environmental changes.

It aims for long-term success and sustainability, rather than short-term gains, to ensure that we thrive for the future.

STRENGTH, WEAKNESSES, OPPORTUNITIES AND THREATS

When The Saks Report was completed in 2021, an analysis of the strengths, weaknesses, opportunities and threats was developed to understand the challenges and opportunities facing the profession.

For this activity plan, we have detailed in the link below a high-level SWOT analysis focused on the organisation, rather than the profession more broadly.

View Document

ROYAL COLLEGE OF PODIATRY OBJECTIVES

OUR OBJECTIVES

We have identified below five key objectives as follows:

1. RAISE THE PROFILE OF PODIATRY

As an aspirational and inspirational career choice to grow the size, scope and influence of the profession.

2. LEADING CENTRE FOR CLINICAL KNOWLEDGE

Become internationally recognised as a leading centre for clinical knowledge in podiatry.

3. NUMBER ONE LEARNING BRAND

The number one learning brand for podiatry in the UK.

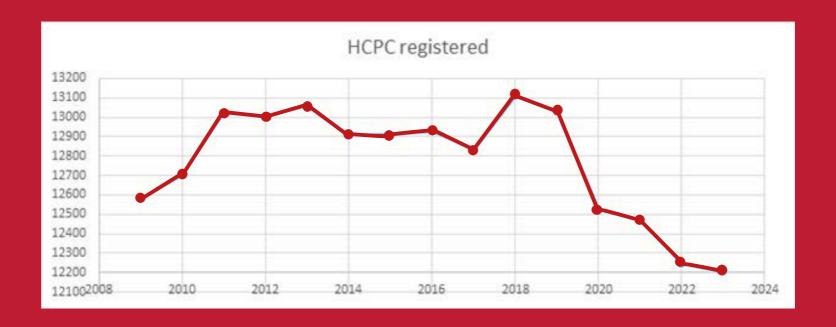
4. RAISE AWARENESS

Raise awareness of the role of podiatrists in the prevention and treatment of the foot and the lower limb with decision makers, influencers and patients to improve health outcomes.

5. SUSTAINABILITY

Ensure that the RCPod is financially sustainable, continually developing and offering the best possible service to members.

THE NUMBER OF HCPC-REGISTERED PODIATRISTS PEAKED IN 2018, WITH 13,115 REGISTRANTS. OVER THE LAST SIX YEARS, IT HAS BEEN IN DECLINE WITH THE NUMBER OF HCPC-REGISTERED PODIATRISTS REDUCED BY 6.9% TO 12,206 IN SEPTEMBER 2023.



Data from HCPC- Registrant data and statistics | (hcpc-uk.org)

OUR STRATEGIC AMBITION

The decline has been caused by three key factors:

PODIATRY IS AN AGEING PROFESSION 22% OF THE PROFESSION AGED 60 OR OLDER

(HCPC DATA - MARCH 2023)

REMOVAL OF THE STUDENT BURSARY BETWEEN 2010 AND 2016

PANDEMIC

DUE TO THE AGE OF THE PROFESSION, THE IMPACT OF THE PANDEMIC MEANT MANY CHOSE TO RETIRE EARLIER THAN ORIGINALLY PLANNED BETWEEN 2020 AND 2022 One of the key questions is whether this trend is set to continue over the next five years. Looking at the HCPC data on deregistration and the age profile of the profession, it is forecast that 2,319 podiatrists will leave the profession between 2024 and 2028.

Deregistration Year	Number of Podiatrists	5 years cumulative
2012	617	
2013	141	
2014	631	2,409
2015	206	
2016	648	
2017	202	
2018	722	
2019	180	2,375
2020	893	
2021	169	
2022	993	
2023 (til Oct)	140	

This forecast is based on the following data and assumptions

- Current number of 12,206 HCPC-registered podiatrists (Sept 2023)
- 18% of the profession is aged 60 to 69 (March 2023)
- 4% of the profession is aged 70+ (March 2023).

That between 2024 and 2028:

- 14% of the profession will retire (Aged 60 to 69 in March 2023) = 1,709
- 4% of the profession will retire (Aged 70+ in March 2023)
- = 488 1% of the profession will leave for other reasons = 122.

THEREFORE, IT IS FORECAST THAT 2,319 CURRENT PODIATRISTS WILL LEAVE THE PROFESSION BETWEEN 2024 AND 2028. BUT DOES THIS MEAN THAT THE DECLINE WILL CONTINUE?

To replace those leaving the profession, an average of 464 new registrations to the HCPC register will need to take place each year between 2024 and 2028.

The national average attrition rate for HEI courses is 5.6%, so to achieve 464 graduates each year, enrolments would need to be at least 490 new podiatry students.

Therefore:

- <490 new student enrolments each year profession will continue to decline
- =490 new student enrolments each year profession will start to stabilise/remain static
- >490 new student enrolments each year- profession will grow.

One of the challenges is that the graduating classes for 2024, 2025 and 2026 are already enrolled, so those numbers cannot be influenced.

One of the 'Objects' of the organisation, as set out in its Articles of Association, is "promotion of the profession of podiatry".

In 2021/22, 339,150 students enrolled to study 'Subjects allied to medicine'. This included 475 students enrolling to study podiatry, which is 0.14% of those studying 'Subjects allied to medicine'. If this could be increased by 0.5%, this would raise the numbers studying podiatry to 650.

	2025/26	2026/27	2027/28	2028/29	2029/30	2030/31
Target 1st year	500	530	560	590	620	650
enrolments						
% Increase on		6%	5.7%	5.4%	5.1%	4.8%
previous year					#10 T	
	An increase in first-year enrolments of 30% between September 2025 and September 2030.			2030.		

Is there enough capacity in terms of university places to accommodate these increased student numbers?

THERE ARE CURRENTLY 14 ACTIVE PODIATRY SCHOOLS IN THE UK AND IRELAND.

New College Durham
University of Brighton
University of East
London University of
Salford University of
Northampton University
of Plymouth University
of Southampton

University of Huddersfield
University of Wolverhampton
Cardiff Metropolitan University
Glasgow Caledonian University
Queen Margaret University
University of Ulster
NUI Galway

There is also potential new capacity in the pipeline:

- AECC Bournemouth approved October 2023
 Teesside University- planning to get a course up and running in either Sept 24 or Sept 25
 Sunderland University- initial interest but no timeframes
- University of Buckinghamshire plan for two-year programme, but still no information about when it might start
- University of Stirling planning pre-reg MSc programme to start Jan 2025.

STRATEGIC PLANNING PIPELINE TARGETS

TRAINING PIPELINE TARGETS

Capacity

Supply

Mix

Retention

CAPACITY

By the end of 2028 to grow the capacity of podiatry schools in the UK and ROI to meet supply targets.

SUPPLY

By the end of 2030, to have increased first-year student enrolments by 30%.

First-year enrolments		
2025/26	500	
2026/27	530	
2027/28	560	
2028/29	590	
2029/30	620	
2030/31	650	

MIX

By the end of 2030, to have 25% of those training to be podiatrists coming through the apprenticeship route and 10% coming through the preregistration MSc route.

First-year enrolments		
Current	BSc - 79% Appr - 17% MSc - 4%	
2025/26	BSc - 76% Appr - 19% MSc - 5%	
2026/27	BSc - 73% Appr - 21% MSc - 6%	
2027/28	BSc - 71% Appr - 22% MSc - 7%	
2028/29	BSc - 68% Appr - 24% MSc - 8%	
2029/30	BSc - 65% Appr - 25% MSc - 10%	

RENTENTION

Ensure that the annual attrition rate for podiatry programmes is <5% (HEI average 5.6%).

WORKFORCE PIPELINE TARGETS

Retain

Train

Sustain

RETAIN

To reduce the current forecast of 2,319 deregistering from the HCPC by 2028 by 10%, so that no more than 2,087 deregister between 2024 and 2028.

TRAIN

By end of 2025, create a suite of training resources to help members keep upto-date with changes to the profession to improve patient safety and to help members to feel confident to continue to practice for longer if wanted.

SUSTAIN

By the end of 2025, create a suite of wellbeing resources that supports members with their physical and mental wellbeing to help sustain them in their podiatry career to reduce the likelihood of leaving the profession or retiring early.

	Forecast	Target
End 2024	650	600
End 2025	185	144
End 2026	650	600
End 2027	185	144
End 2028	650	600
Total	2,320	2,088

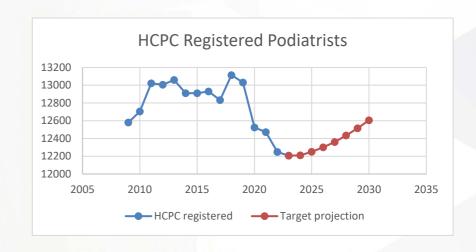
IMPACT

If the RCPod can meet the training and workforce pipeline targets, then this will lead to growth in the number of HCPC-registered podiatrists for the first time since 2017.

To view larger versions of the charts, please click here.

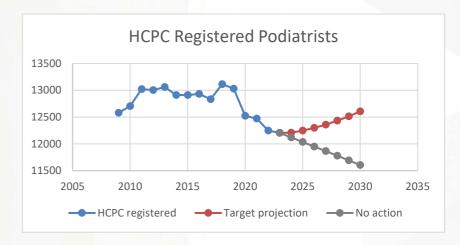
Target for the number of HCPC-registered podiatrists:

End of Year	Number of HCPC-registered podiatrists
2024	12,210
2025	12,250
2026	12,300
2027	12,360
2028	12,435
2029	12,515
2030	12,610



THIS WOULD EQUATE TO A 3.3% GROWTH IN HCPC-REGISTERED PODIATRISTS BY 2030, WHICH IS 400 MORE PODIATRISTS.

HOWEVER, IF THE RCPOD TAKES NO ACTION AND THE DOWNWARD TREND CONTINUES, IT IS FORECAST THAT BY 2030, WE COULD SEE A REDUCTION OF 600 PODIATRISTS ON THE HCPC REGISTER COMPARED TO 2023.



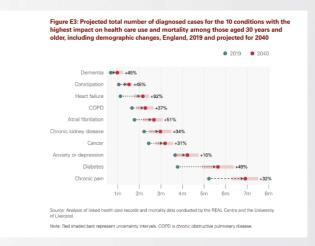
MEETING PATIENT NEED

There is currently 1 podiatrist to 5,000 people in the population based on the current population of the UK which is approximately 67.7 million people.

The Office for National Statistics (ONS) is currently forecasting that by 2028, the UK population will be 69.4 million and by 2043 will be 72.4 million.

Based on these forecasts, to maintain the current ratio of 1 podiatrist to 5,000 people, we would need approximately 340 more podiatrists by 2028 and approximately 940 more podiatrists by 2043.

However, we know that there are already insufficient numbers of podiatrists to meet patient need. Based on data about future health needs with an ageing population, these numbers are likely to be much higher to meet patient demand. One obvious pressure is demographic change and the resulting demand on health services. Between 2018 and 2028, the number of people aged 75 to 84 years in England is projected to increase by a third, and those aged 85 years and older by more than a fifth. The number of people aged 75 years and older living alone over this decade is projected to increase by 461,000 (Health Foundation, July 2023).



IMPACTON LONG-TERM CONDITIONS

MUSCULOSKELETAL CONDITIONS

The ONS estimates musculoskeletal disorders to be the second biggest cause of sickness absence, resulting in 30.8 million days lost each year. Musculoskeletal complications account for the third largest area of NHS programme spending at £4.7bn. The BMA noted that musculoskeletal conditions alone are estimated to account for 20 to 30% of GP consultations. Studies have shown that around 8% of these presentations concern foot and ankle pain.

DIABETIC FOOT COMPLICATIONS

Approximately 6,000 people die every year following a lower limb amputation. More than half (3,500) of these deaths could have been prevented if a podiatrist had been involved in their treatment. Given that 1 in 10 adults are expected to be living with diabetes by 2030, it is inevitable that the number of patients at risk of

diabetic foot complications, ulceration, infection, minor and major amputations, and sepsis, will rise exponentially. By 2025, it is estimated that 1.2 million people with diabetes in the UK will require regular podiatry appointments if they are to remain ulcer and amputation free. In the absence of this treatment, many face premature death as a result of unnecessary amputation.

VASCULAR COMPLICATIONS

Peripheral Arterial Disease (PAD) is present in 20% of people aged 60 and over. It is associated with mortality rates of around 30% at five years and in its most severe form, amputation rates of 25% at one year. Early detection and treatment of PAD by podiatrists can save limbs and lives. People with this condition are often under-diagnosed and under-treated, resulting in largely preventable mortality and amputation.

STRATEGIC PROGRAMMES

Outlined are five programmes which will be introduced over the course of the five-year activity plan to support each of our objectives.

These activities will complement, amplify and provide focus to core functions across member services, education, clinical advice and accreditations.

OBJECTIVE ONE

RAISE THE PROFILE OF PODIATRY AS AN ASPIR ATIONAL AND INSPIR ATIONAL CAREER CHOICE TO GROW THE SIZE, SCOPE AND INFLUENCE OF THE PROFESSION.

The RCPod's careers activity is currently relatively low key. There is some provision of downloadable materials for branches to use at schools and careers events. Our branded materials use the RCPod brand which, whilst appropriate for a professional audience, does not necessarily appeal to the target sector for our careers activity.

To achieve our target to increase HCPC registrations by 400 by 2030 we will need to significantly upscale the careers activities within the RCPod. We will focus on 15-to 18-year-olds who have already chosen the science route and may even already have identified healthcare as an area of interest. We will also focus on career changers coming from other professions such as nursing, physiotherapy, professional sport or the armed forces.

We will develop a new **careers brand** and **campaign** for podiatry, which would include the following:

- A suite of materials and images appropriate to the target audiences
- A dedicated web space/microsite with links to HEI sites, careers networks and an Interactive career 'map'
- Create content and co-design with user groups
- Annual social media campaigns around key academic calendar dates
- Partnerships with educators, employability organisations and placement providers
- Exhibiting and speaking at two national careers events per annum
- Scale up of activity at branch level with branded collateral and guidelines.

OBJECTIVE TWO

BECOME INTERNATIONALLY RECOGNISED AS THE LEADING CENTRE FOR CLINICAL KNOWLEDGE IN PODIATRY

Through its members, Committees and Specialist Advisory Groups (SAGs) (see organigram on pages 43-44) the RCPod has access to extensive knowledge and expertise in podiatry.

In pre-strategy preparation during 2024, we are reviewing processes and protocols to support the creation of a **clinical knowledge hub**:

This will be a knowledge centre and suite of resources which comprise a mix of public-facing and member-only information that could potentially include:

- Access to clinical experts for consultations, training expert witnesses
- Practice guidelines and regulatory updates
- Research repository
- Access to support guidance and funding for research at all stages
- Medicines and medical devices updates and guidelines
 Communities of interest
- Journal articles
- Conference recordings and speeches tools and guides.

The knowledge hub would be co-created and curated under the governance of the Clinical Senate.

OBJECTIVE THREE

BECOME THE NUMBER ONE LEARNING BRAND FOR PODIATRY IN THE UK

Academic education

We set the gold standard for podiatry across the UK. We work with external providers to accredit BSc, MSc, apprenticeship, and support worker programmes. In recent years, we have witnessed a drop in student numbers choosing podiatry. Our HEI providers need support to fill their courses and build capacity by:

- Joint lobbying for better conditions and additional funding for podiatry education
- Improved understanding of their target demographics for their educational products and services
- Tailored and targeted careers campaigns to drive course registrations
- Removal of barriers and improvement of processes to
- accredit existing and new courses
- Integration into our career materials and social media campaigns.

Practice Education

The RCPod's current CPD offers a limited number of programmes nationally on such topics as vascular, diabetic foot care, skin surgery and MSK. These programmes are accredited by the AQA Committee. The scale and scope of these programmes have been constrained by the resources available in recent years which has left limited opportunity to innovate or scale.

Subsequently, these opportunities are being taken up by a relatively small number of our members. Courses are delivered either on a blended learning model or online-only at varying price points. Online training is delivered through the RCPod's e-learning platform, TALUS.

TALUS has poor integration with the membership system. It means that there are barriers for members to engage and it doubles up on administrative tasks.

The RCPod also offers access to other learning products with partner organisations, such as the NHS and TUC.

On a regional basis, branches around the UK run CPD activities with varying degrees of involvement from the central team. This means that courses bearing the RCPod brand may not have been scrutinised by the AQA, will operate variable funding models and may not be widely publicised as a national offer.

The RCPod also accredits courses by commercial providers for a fee. This activity has stalled somewhat over recent months and is under review as part of its pre-strategy work. A future learning strategy should seek to align our CPD offer nationally and regionally and develop a model for significant scale-up in the number and scope of courses on offer. To do this, we would:

- Analyse the current CPD landscape to identify gaps and opportunities – including our regional activity
- Develop mutually beneficial partnerships with external training providers and regional branches
- Seek to minimise duplication and assure quality by accrediting partners' courses through the AQA
- Use central RCPod resources, working with clinical committees and groups to innovate and address gaps in provision
- Design, develop and pilot courses for wider rollout and reaching scale through external providers
- Build in member benefits and discounts to the accreditation process
- Develop a learning brand under which all our training activity would sit
- Improve integration of our learning offers with the digital member experience including, CPD reporting

OBJECTIVE FOUR

RAISE AWARENESS OF THE ROLE OF PODIATRISTS IN THE PREVENTION AND TREATMENT OF THE FOOT AND LOWER LIMB WITH DECISION MAKERS, INFLUENCERS AND PATIENTS TO IMPROVE HEALTH OUTCOMES.

Public-facing campaigns, by their nature, are resource-intensive and costly because of the scale of reach required to have an impact. For an organisation of our size to get the reach to have any impact we will need to focus our efforts and work with partners.

To achieve this, we will:

- Rebrand Foot Health Week as the focus for targeted public awareness campaigns on a specific condition/disease/sector/issue on an annual basis: e.g. diabetes, vascular health, sports podiatry.
- Use the week as a launch platform for a year-long campaign with clear targets and outcomes
- Form partnerships with relevant stakeholders e.g.
 Diabetes UK, Vascular Society and The Football
 Association
- Develop targeted campaign messaging for government, influencers and the media

Develop a campaign and process that will:

- Create the campaign focus and targets
- o Activate, promote and measure impact
- Leave a legacy by embedding messaging with appropriate stakeholders or creating spin-off initiatives to address specific issues by the campaign.

OBJECTIVE FIVE

ENSURE THAT THE RCPOD IS FINANCIALLY SUSTAINABLE, CONTINUALLY DEVELOPING AND OFFERING THE BEST POSSIBLE SERVICE TO MEMBERS

We will continually review our activities, resources and partners to ensure members receive the best possible service and we deliver value against the members' annual subscriptions. Activities we are actively reviewing are:

Conferences, Events and Awards

We will create a central conference, events and awards function within the RCPod that will:

- Use an internal team to deliver our annual national podiatry conference and the Faculty of Podiatric Surgery annual conference
- Grow the scope and scale of our national conference activity annually
- Ensure that the national conference is a prominent networking and profiling platform for our members and stakeholders

- Create partnership opportunities with other healthcare professionals, health charities and academic institutions to enrich the content for members
- Maximise the commercial potential and introduce innovative approaches to the trade exhibition
- Reflect the RCPod's strategic ambitions in conference content
- Create and publicise an annual events calendar of all events
- Review and develop the RCPod's awards programme and ceremony to reflect the strategic focus
- Create more opportunity to engage branch networks in the conference and events strategy.

Income Generation

Over recent years, the RCPod has been developing commercial relationships related to product development, product endorsement and industry-led CPD activities.

Because of the scale of risk associated with such activity in relation to the resources that the RCPod has to expend on these activities and the modest income generated, it has been agreed that these programmes should be wound down over the course of 2024/25.

In its place, we will develop a corporate partnership offer and tactical sponsorship opportunities that will raise the profile and value of the RCPod brand to support our programmes and activities rather than create additional activities to attract funds.

Supported by a set of ethical funding guidelines, we will work with industry partners to offer tailored partnership opportunities with inclusive benefits at different price points.

Initially, as we build the value and profile, we suggest two price bands of £25,000 and £50,000 per annum. As we build brand value, we can increase the value of these partnerships.

We will generate other income through a developing programme of:

- Grants/research funds for specific initiatives for example PASCOM, education grants
- Joint activities with partners such as the NHS.

Social and Environmental Impact

In 2022, the RCPod published a Corporate Responsibility Statement. As an evolution of that statement, we should now be ambitious about the social and environmental impact we would like to achieve. Social and environmental sustainability should not be a series of standalone activities, but rather a set of values and ambitions that underpin everything we do. Delivering an effective programme and impact in this area can offer the RCPod the opportunity to show leadership within the healthcare system and, in doing so, raise the profile of podiatry with influencers and decision makers.

Activities we should progress during this programme could include:

- Completion and progression of the Science Council's exemplar EDI Framework
- Creation of social impact through our supply chain by reviewing suppliers and using social enterprises and mission-based businesses where possible
- Creation of an environmental network/community of interest within the podiatry profession to share best practice and collaborate on sustainability initiatives
- Reviewing the RCPod's investment strategy to include a commitment to impact investing which will deliver social and environmental impacts alongside financial growth
- Alignment of the RCPod and our charities Arch Support and The College of Podiatry Trust, with the UN Sustainable Development Goals with a focus on specific ambitions around health and wellbeing, reduced inequalities and climate action and quality education.

Capacity Building Activities

The RCPod has secured a modest amount of funding from NHS England (NHSE) Workforce and Transition under their Education Reform Commission Fund to deliver several capacity-building activities between April 2024 and March 2025.

These activities will form part of the pre-strategy work to secure the necessary resources, processes and networks in place to activate the strategy.

These activities include:

- Updating the core curriculum
- Guidelines for preceptorship
- Apprenticeship mapping and promotion
- Promotion of support workers
- Equality, diversity and inclusion strategy to support recruitment practices
- Strengthened networks for academic educators, practice educators and consultant practitioners, students
- Career mapping and promotion.

Enabling our Transformation

We will need to build several enabling activities to support the delivery of our strategic ambitions. This will include:

An integrated digital strategy which will provide an

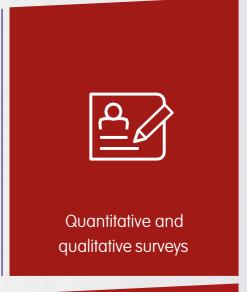
- upgraded membership system with seamless integration to web services and the learning and knowledge hubs with links to our finance systems for more efficient operations
- A robust finance and risk monitoring and management process
- Ongoing supplier and contractor review and monitoring to ensure value for money and best possible customer service
- Upgraded financial processes and controls appropriate to a growing organisation
- Re-establishment of strict clinical governance guidelines and protocols
- A people plan that offers training and development opportunities and supports staff through the change process A dedicated senior-level transformation function that will enable and project manage the change process from the pre-strategy phase
- A dedicated senior-level development function that will deliver the financial diversification plans
- Senior-level, professionally respected advisors in the clinical and academic functions in the pre-strategy phase that will inform the appropriate structure for the delivery of the strategy from 2025
- A brand and marketing development strategy that allows us the flexibility to target different audiences with appropriate imagery, content and tone.
- External support from specialist agencies on key projects relating to design, brand, research and PR.

HOW WILL WE MEASURE OUR SUCCESS?

For each programme of activity, we will agree on our target measures and measurement techniques and will set benchmarks to measure progress against. THE RANGE OF MEASURES WE WILL USE WILL INCLUDE:











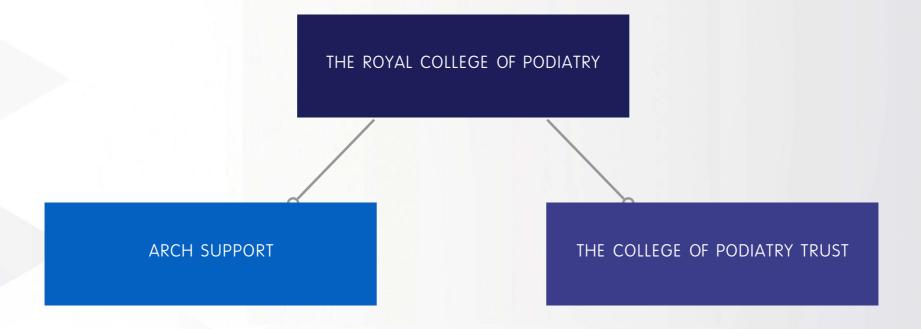




ROYAL COLLEGE OF PODIATRY GOVERNANCE

COMMITTEE ORGANIGRAM

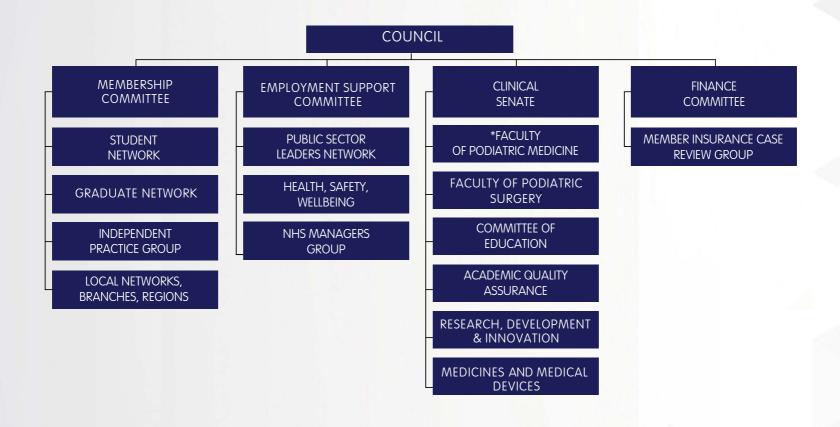
The Royal College of Podiatry Group is composed of three business entities. Council is the governing body. The RCPod also has two registered charities which report to Council: Arch Support, the College's hardship fund, and The College of Podiatry Trust.



THE ROYAL COLLEGE OF PODIATRY: COMMITTEE STRUCTURE 2024

Notes: Other committees such as Editorial and Conference are listed on the next slide.

*Faculty of Podiatric Medicine: Several independent Specialist Advisory Groups have a seat on the Faculty.



COMMITTEES

There are committees that sit outside the current structure on the previous page or that require some further explanation: Editorial Board: currently sits outside the main structure.

Overseen by the CEO and the Head of Communications, Conference Board: Split between two committees. Reports to Clinical Senate concerning the programme, and reports to Finance Committee with respect to the contract and budget.

*Faculty of Podiatric Medicine (asterisk from Clinical Senate string on previous page):

There are several independent Specialist Advisory Groups which have a seat on the Faculty of Podiatric Medicine. These Groups are as follows: MSK: UK, The Forensic Podiatry SAG, The Podiatric Sports Medicine SAG, The Podiatry Complementary Medicine SAG, The Podiatry Rheumatology SAG, The Podiatry Dermatology SAG (under Primary Care Dermatology Nursing Group), Children's Podiatry SAG, Mental Health, Learning Disabilities, and Neurodiversity SAG, The Vascular SAG, The Ultrasound SAG and The Poetwear Group.

BUDGET ASSUMPTIONS

The Royal College of Podiatry

	Base Year	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Assumptions	2024	2025	2026	2027	2028	2029	2030
Inflation - CPI based on the last quarter adjusted to reflect the forecast if the Ru continues through 2025 and 2026		7.40%	3.60%	2.00%	2.00%	2.00%	2.00%
2 Membership subscription uplift	2.90%	2.00%	2.00%	1.00%	1.00%	1.00%	1.00%
3 Membership numbers per year	10,000	10,000	10,000	10,000	10,000	10,000	10,000
4 Employees uplift	4.50%	4.00%	4.00%	2.00%	2.00%	2.00%	2.00%
5 Additional staff numbers pa - FTQ		1.00		1.00		1.00	-
6 Operation cost uplift		7.40%	3.60%	2.00%	2.00%	2.00%	2.00%
7 Anticipated Savings		2.50%	1.00%	0.25%	0.25%	0.25%	0.25%
8 Allocated funds for strategic improvement	ents, see below						
9 Strategy and Contingency	137	100	100	100	200	200	300
10 Special projects/programs - 000			100	100	200	200	300
11 Corporate partnership revenue per ann	um - 000	100	150	250	350	450	500
12 Conference growth per annum		2.5%	2.5%	2.5%	2.5%	2.5%	2.5%
13 Contribution - special projects/programs	15%	15%	15%	15%	15%	15%	15%
Capital requirements - 000							
14 CRM	0	120	0	20	0	0	150
15 Web site upgrade		0	40	0	20	0	60
16 Learning tools		0	30	0	0	60	0
17 IT hardware		35	15	0	40	20	0
18 IT software - subscription		0	0	35	0	20	0
		155	85	55	60	100	210
Increase in depreciation - 000							
19 CRM		24	24	28	28	28	34
20 Website upgrade		-	8	8	12	12	24
21 Learning tools		- 1 m - 1	10	10	10	20	20
22 IT hardware		12	17	17	30	37	37
23 IT software		-	-	12	12	18	18
		36	59	74	92	115	133

BUDGET FORECAST

The Royal College of Podiatry

	base rear	reari	rear z	rear 3	rear 4	rear 5	rear o
Revenue	2024	2025	2026	2027	2028	2029	2030
Membership income	4,034,763	4,115,458.11	4,197,767.27	4,239,744.94	4,282,142.39	4,324,963.82	4,368,213.45
Commercial and Corporate Partnership	75,000	100,000.00	150,000.00	250,000.00	350,000.00	450,000.00	500,000.00
Conference	575,000	589,375.00	604,109.38	619,212.11	634,692.41	650,559.72	666,823.72
Education and other	315,00	322,875.00	330,946.88	339,220.55	347,701.06	356,393.59	365,303.43
Sub Total	4,999,763	5,127,708	5,282,824	5,448,178	5,614,536	5,781,917	5,900,341
Expenditure Employee emoluments	2,138,876	2,224,431.55	2,313,408.82	2,416,676.99	2,465,010.53	2,571,310.74	2,622,736.96
Expenditure							
		admeidel 3					i Ei
Operational cost	1,294,040	1,357,447.96	1,392,741.61	1,417,114.59	1,441,914.09	1,467,147.59	1,492,822.67
Risk management	924,000	875,000.00	875,000.00	875,000.00	1,000,000.00	1,000,000.00	1,000,000.00
Commercial and conferences	500,000	512,500.00	525,312.50	538,445.31	551,906.45	565,704.11	579,846.71
Strategy and contingency	136,680	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
Sub Total	4,993,597	5,069,380	5,206,463	5,347,237	5,558,831	5,704,162	5,795,406
Surplus/(deficit)	6,166	58,329	76,361	100,941	55,705	77,755	104,934

TIME TABLE

VIEW THE RCPOD STRATEGIC ACTIVATION PLAN GANTT CHART HERE

Year 1 - 2024/2025

- Strategy planning
- Capacity building activity
- Specify new CRM
- Launch corporate partnership programme
- Benchmarking

Year 2 - 2025/2026

- Careers brand relaunch
- First public awareness campaign
- Relaunch awards
- Launch new digital strategy with CRM
- Pre-learning programme activities
- Monitor impact measures

Year 3 - 2026/2027

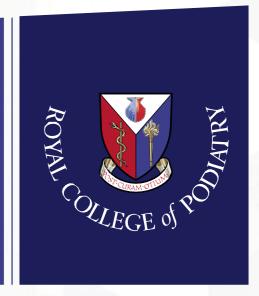
- Launch learning brand
- Ongoing digital investment
- Monitor impact measures

Year 4 - 2027/2028

- Launch knowledge hub
- Ongoing digital investment
- Monitor impact measures

Year 5 - 2029/2030

- Strategy review
- Evaluation against targets



CONCLUSION AND NEXT STEPS

This is an ambitious plan that will require a unified and collaborative approach from all parts of the organisation and our key stakeholders.

Its successful implementation will create a sea change in the profession to deliver the high ambition of The Saks Report that was an important milestone in the history of the RCPod.

We must communicate and share our ambitions and aspirations and take feedback from across the organisation around the strategic activities as we roll them out.

This strategy was initially presented to Council at its meeting on 22 March 2024. The first step was to give Council time to consider and feedback so that the RCPod could refine the strategy. It was subsequently presented to internal committees and groups and externally to our priority stakeholders to gather views and support. This updated consultation draft will now to to the RCPod's members, as well as to its staff and other external stakeholders to collect more views and feedback.

PURPOSE, MISSION AND VALUES

WHO WE ARE

We represent, support and champion healthcare professionals who prevent, diagnose and treat health conditions associated with our feet and lower limbs.

PURPOSE

Our purpose is to champion lower limb healthcare, supporting people to live their best lives.



MISSIONS

- Supporting best practice and fostering excellent conditions for all podiatrists wherever we work
- Nurturing, training and educating the next generation of podiatrists
- Championing active lives and the role of podiatrists in preventative care for everyone
- Researching and developing new evidence-based treatments using person-centred and innovative care.

VALUES

- A caring profession who put people at the heart of our practice
- Forward looking and driven by science-led knowledge and skills
- Open, diverse and inclusive in our approach to each other
- Collaborators and communicators who create real impact through our relationship with the wider health and care community.



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