# ICS Strategic Plan

October 2016



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## Background & Process

The Board of Trustees has now completed a strategic plan which will guide the International Continence Society (ICS) over the next five years with the aim to reestablish the pre-eminent position of the ICS.

In late 2012, the first step of the review was launched with a members' survey. Information was also collected and analysed on both the ICS and similar scientific organisations within the fields of urology, gynaecology and incontinence care. Interview data from industry representatives provided key perspectives, carried out by an independent consultant. During the winter and early spring of 2013, the Trustees met on three occasions to:

- Plan strategy processes
- · Consider the information collected, and
- Create the first draft of the strategy, which was completed in May 2013

The Trustees have consulted on the draft strategy with a range of stakeholders, including ICS members and industry contacts. Nearly 200 responses were received, with the vast majority strongly endorsing the document. This final version has been amended in the light of comments received.

# Context

## Why a New Strategic Plan?

The decision to begin a new strategy was driven by several factors:

- Financial outlook
- Reduced output in terms of scholarly activity in recent years
- Reputation of the ICS

#### Financial outlook

Over the past 10 years, the major source of income for the ICS has been the Annual Meeting (75% average), the surpluses from which enabled the ICS to pursue its scholarly and charitable activities.

Projections of income from future Annual Meetings are substantially lower than in previous years. International congresses in any field generate much less income when held outside North America and Europe; this was very much the case for the ICS meeting in Beijing, which generated no surplus, in contrast with the meeting in 2011 in Glasgow. Projections for meetings after 2013 are currently at a level far below the 2011 surplus.

Future income is also potentially threatened by changes in the way industry is able to support scientific organisations such as ICS. Budgets are constrained by the global economic downturn, driving industry partners to use their money more cost-effectively, and as patents on drugs expire marketing budgets are shrinking.

Competition for industry support is therefore increasing.

### Scholarly activity

The Trustees were concerned that the reputation of the ICS for academic excellence had diminished through a reduced level of activity in the past few years. As scholarly activity (scientific, educational) is the ICS's raison d'etre, the potential consequences and threats to ICS are considerable: its influence, impact on the lives of those affected by continence problems, membership engagement and volume, and the ability to attract industry support.

#### Reputation

The Trustees recognised that conflict from a minority within the ICS has caused significant harm to its reputation among members, non-member clinicians, other health care professionals, and supporters in industry and elsewhere.

## Aim of the Strategic Plan

The Trustees were therefore keen to establish a clear direction for the next five years that will:

- Ensure the financial future of the ICS
- Re-establish the reputation and renew the influence of the ICS in the field

They agreed the purpose of the strategic review was:

To re-establish ICS as the pre-eminent scientific society in incontinence, pelvic floor disorder and lower urinary tract dysfunction

## The Core of ICS

As the starting point for the strategic review, the Trustees re-affirmed the purpose of ICS:

To improve the quality of life of people with incontinence or pelvic floor disorders by extending and improving practice

Indicators of success by which the progress and impact of the ICS and the strategy would be monitored were:

- Participation in the annual meeting (and other related parameters)
- Scholarly impact
- Change in practice
- Perceived value of engagement with ICS
- ICS being the 'go to' organisation for researchers, clinicians, the public and policy makers
- Numbers of different types of practitioners in the ICS and in the field

# Situation Analysis

## Information Gathering

Information was gathered in a variety of ways to establish a meaningful analysis of the current and projected operating position of ICS, in terms of both external and internal factors.

The inputs to the situation analysis were:

- Membership survey carried out in late 2012, to which 321 responses were received
- Information collated by ICS staff on other scientific societies in related fields and on the ICS itself
- Interviews with representatives of industry to understand their needs and concerns and their perceptions of ICS and other scientific societies
- Analyses carried out by the Trustees and directors of ICS of:
  - External factors, using the PESTEL framework (Political, Economic, Social, Technological, Ecological, Legal)
  - Internal factors, using the SWOT framework (Strengths, Weakness, Opportunities, Threats)

## **Findings**

These exercises led to the identification of a range of issues that must be considered and addressed if ICS is to re-establish its pre-eminent position:

- Reputation and status
- Relations with industry
- Financial outlook
- Potential for competition and cooperation with other scientific and professional organisations
- Engaging and growing the membership
- Issues of governance
- Key assets of the ICS

### Reputation and status

ICS was previously viewed as the pre-eminent scientific society in the field. The scholarly outputs set standards and were widely adopted. As the quantity of these outputs has fallen, so has the influence of the ICS.

This has been compounded by a perception that the ICS as an organisation has been burdened with internal conflicts which may have spilled over onto its relations with members and industry. Thus the ICS appears no longer focused on leadership in its core scientific role.

### Relations with industry

Interviews with industry made it clear that ICS occupies a unique 'niche' and has made vital contributions in the past. There is much goodwill towards the ICS and a desire that it should succeed and willingness to help it do so.

More recently, however, industry has shared in the perception of ICS as preoccupied with internal issues and not fulfilling its scientific role. Moreover, some representatives felt that ICS has become hostile to industry, disinterested in the needs or wishes of industry and unwilling to engage with them on equal terms.

### Financial outlook

This is discussed in detail elsewhere (see Page 21). The critical issue is that there are significant potential threats to income in the next few years. If the threats materialise ICS could be forced to reduce the scale and scope of its activities.

# Competition and cooperation with other organisations

As the pool of finance available to scientific and professional organisations shrinks, there is increasing competition among those organisations to secure that money for themselves. This is paralleled by competition for 'market share' in terms of membership, status of major meetings, and position as leading in key areas.

At the same time, there are areas of overlapping interest among these organisations and it may be advantageous to consider collaborations where they will lead to greater impact or cost-effectiveness.

## Growing the membership

The ability of ICS to achieve its purpose of influencing practice to improve quality of life for people affected by incontinence, pelvic floor disorders, and lower urinary tract dysfunction depends on the level of engagement it can achieve with key stakeholder groups. Central among these stakeholders are clinicians, researchers and other health care professionals.

A key means for achieving that engagement is to bring as many members into the ICS as possible. Membership numbers appear to have been driven primarily by attendance at the Annual Meeting. Success has also been achieved through the affiliate member scheme. Other methods of increasing and engaging the membership need to be found.

#### Governance

ICS is led by a highly committed and active volunteer Board of Trustees supported by a skilled office staff and an extensive cadre of committees, involving 175 members, who undertake the key activities of the ICS. The time given by those members is critical to the work of the ICS; at the same time, the number of committees, the overlap between their responsibilities, the absence of a framework that aligns their work strategically or governs delivery, and the administrative load on ICS staff, risk inefficient use of scarce resources and could impair performance and consistency of standards.

#### **Assets**

It is important to note that the ICS has a number of key strengths to draw on as it works towards the future:

- It commands much goodwill among many stakeholder groups, including members, other professionals, and industry
- The excellent work in the past is still highly valued and sets a benchmark to which the ICS can return
- It brings together multiple disciplines from across the world, which represents a unique strength greatly valued by many people
- The past three years have seen record numbers of ICS-delivered education courses, guest lectures, awards and fellowships. The strategic plan will allow the organisation to build on this activity

# Key Aims

# Key Aims

The strategy identifies three key aims for ICS over the next five years:

- To develop scholarly activity to the highest standards
- To restore the reputation of the ICS with key stakeholders
- To ensure financial health for the foreseeable future

## Critical Success Factors

Critical success factors (CSFs) identify those major areas of activity that the ICS must address and make significant progress in if it is to achieve its aims. The CSFs identified by the strategic review are:

- Ensure the highest quality scholarly activity
- Optimising organisational effectiveness
- Build stakeholder engagement
- Establish financial health

# Ensure the Highest Quality Scholarly Activity

### Current situation

Excellence in science and education are the core functions of the ICS. To date scholarly outputs have centred on the production and publication of standardisation reports which have been regarded as the gold standard for terminology in continence-related science. Reports, both as sole products or with the collaboration of partner societies with similar interests, have been widely quoted and universally used. Abstract submissions to the ASM have been increasing and quality controls are stricter.

Over the last three years there has been a decline in the number of reports from the ICS and others have taken the lead, resulting in a reduction in the standing of the ICS in the scientific community.

### Key Issues

Increase in and maintenance of quality of the scholarly output is a key issue for the ICS. Scholarly output should not only concentrate on core business to date - the production of standardisation reports and definitions of terminology for use by the scientific community - but also broaden into allied areas:

- Educational quality and accreditation standards (including establishment of ICS as an accrediting authority)
- The running of "best brains" consensus conferences resulting in the production and publication of consensus statements and scoping reviews in relevant areas of interest

• Exploitation and commercialisation of information technology products and protection of the associated intellectual property

#### Education

ICS education will be of the highest standard and consistent with current educational pedagogy

"Education" covers a wide variety of ICS activities, including workshops, symposia and seminars at or independent of the Annual Scientific Meeting, online resources including recordings of live lectures and teach-ins and bespoke learning modules with a specific learning objective.

The audience for ICS education includes its multiprofessional membership and non-members who might comprise a paying audience

Subject to the availability of sufficient and sustainable funding the ICS also needs to be active in its support for research through fellowships, scholarships, grants and awards.

# Optimising Organisational Effectiveness

#### Current situation

ICS stands on strong organisational foundations: it has an active Board of Trustees which is heavily engaged in tackling the challenges facing the ICS; it has a strong infrastructure of interested members, including 13 committees with 175 members; and a committee and capable staff group with a range of skills that gives it flexibility to respond to new challenges.

However, the Board, Committees and staff are not currently aligned around an agreed plan. A stronger framework for monitoring performance and for accountability is needed. In addition, the Board's workload is excessive, especially given the practical difficulties that arise from having a membership distributed across five continents.

#### Key issues

In taking on the ambitious programme implicit in this strategy, it will be essential to focus and align all of the resources of the ICS to achieve maximal effectiveness and efficiency.

#### We will:

 Review governance structures to ensure that the roles and responsibilities of the Board and the Committees are aligned with strategy, and that they take on only those tasks best undertaken by volunteer structures

- Develop the skills of staff to equip them to deliver the strategy
- Establish a 'dashboard' reflecting key performance indicators that will enable staff, Trustees and members to keep track of progress towards our aims
- Establish clear lines of reporting, accountability and performance management including robust governance of conduct for members and volunteers
- Examine ways to optimise membership engagement, potentially including doing so on a regional basis

## Build Stakeholder Engagement

#### Current situation

The ICS office has a strong Projects and I.T. Team which maintains regular communications output to members. However, communication has not been seen as strategically critical; activity has often been limited to disseminating information to members. Many of the substantial achievements of the society have not been effectively communicated to stakeholders. Feedback from members indicates that they seek more systematic and comprehensive information on a range of topics, including the activities of the ICS. Equally, if we are to achieve our aims we need to reach beyond the membership to all health care professionals currently or potentially involved with people affected by incontinence, and to engage in meaningful dialogue with other stakeholders including industry and policy makers.

#### Key issues

In the next three years the ICS will need to strengthen communications capability and impact.

 We will develop and implement a strategic approach to communications based on the needs and wishes of key stakeholder groups and an understanding of the media by which they prefer to engage – which will include the development of greater sophistication in the use of social and other new media

- We will aim to engage all key stakeholders to ensure that:
  - ICS is seen as a key, dependable and trusted source of information
  - We are aware of their needs and wishes and adapt to those as they change
  - They feel engaged with ICS
- Specific activities could include:
  - Establishing an active Industry Advisory Board
  - Identifying and completing key standards documents
  - Aligning the work of the Publications and Communications Committee to support the fulfilment of this strategy
  - Training for ICS office staff and/or employment of marketing or communications professionals if additional skills and/or capacity are required

## Establish Financial Health

#### Current situation

ICS currently has financial reserves in line with its policy; hence it is secure in the short term. However, in the worst-case scenario, income could fall dramatically and hence the scale and scope of ICS activities would have to be radically reduced.

The ICS depends heavily on income from the Annual Meeting. We cannot safely assume it will remain at recent levels in future; indeed we know that in 2012 there was no surplus and are uncertain of the outcome in future meetings. Our two other income streams are membership subscriptions and funding from industry. The membership fee is less than its actual cost and is subsidised by ICS from other sources; income from industry is reducing.

#### Key issues

Urgent action is required in a number of areas:

- The way in which Annual Meetings are organised must be reviewed to ensure that income is maximised while preserving value as a scientific forum designed to promote research and extend good practice
- The membership scheme will be reviewed, including consideration of an appropriate subscription structure to move towards costneutrality while continuing to grow and diversify membership

- Engagement with industry will be re-examined, so that ICS can respond to industry needs while preserving scientific and professional integrity, and hence secure and grow income from this source
- Other potential revenue sources will be established, including funding of ICS workshops and courses by other organisations; seeking donations from foundations, government bodies, etc; and becoming an accrediting body
- Financial management practices and methods will be reviewed to ensure rigorous control of funds
- ICS investments will be reviewed to optimise the return
- Consideration will be given to the establishment of an endowed foundation that can attract donations from other bodies and will distribute funds to support research

# **Implementation**

Planning of implementation is underway having taken into account the findings of the consultation. On the basis of the agreed strategy the trustees have agreed priorities for the next 3 years and the key initial tasks to be undertaken.

Please see further information in the ICS Strategy Appendix document.

# Appendix

ICS Strategic Plan, October 2016



## Critical Success Factors (CSFs)

This document contains draft frameworks for each of the CSFs agreed by the trustees in Toronto in May 2013 as the basis for translating the strategy into operational plans. The CSFs were further developed following the results of the June 2013 consultation with ICS members and key persons, and through work by ICS administrative staff and an external consultant.

Each CSF has been structured as follows

- Title
- What it looks like (when you've got there)
- Actions to be taken

#### Title

The title of each comprises a verb and an object, thus characterising the CSF as an *area of activity* with a clear *outcome*. The choice of the object part is important as it defines the destination and hence drives the activities that will be undertaken. For example, 'financial health' leads to a different focus and emphasis than "financial security"

#### What it looks like

This breaks the thinking down to specific outcomes that the ICS wishes to achieve in the next three years, thus providing greater clarity and specificity to inform operational planning.

#### Actions to be taken

The last element of each framework provides a marker. Each of these meets the criterion 'this has to be done if we are going to fulfil the CSF in three years' and will appear in the operational plan. The Board will regularly review the CSFs to monitor progress and to ensure the CSF remains relevant.

ICS Directors will prepare an operational plan for 2014 once the strategy has been ratified. This will identify time scales for each activity, assign responsibility for implementation, and include evaluation.

# Ensure the Highest Quality Scholarly Activity

## What it looks like (after 3-5 years)

- Programme of standardisation reports re-established
- ICS terminology reports are the gold standard
- High impact of research consensus statements

- Establish system(s) to coordinate and drive this work
- Create plan of standardisation reports (timetable, etc.)
- Create plan of consensus statements
- Establish process for producing consensus statements

# Optimising Organisational Effectiveness

### What it looks like (after 3-5 years)

- Governance:
  - Clear structures and roles
  - Robust systems
- Workforce, both staff and volunteers, aligned to strategy
- The Board, charity and its trading subsidiary are aligned to strategy
- · Clear lines of accountability and reporting
- Performance monitored, evaluated and managed

- Review structure relating to both staff and volunteers (e.g. committees)
- Review and update procedures related to code of conduct and grievances
- Set up a process to ensure annual review of Articles and Bylaws

# Build Stakeholder Engagement

## What it looks like (after 3-5 years)

- Staff and volunteers understand plans and their part in them
- Members and non-member professionals:
  - · Aware of what ICS is doing
  - Perceive ICS as the key sources of information on science
- Industry actively engaged with ICS

- Prepare communications plan
- Support for younger members, trainees and recent graduates
- Build database of non-member professionals and industry contacts

## Establish Financial Health

## What it looks like (after 3-5 years)

- All ASMs generate a surplus of £500,000 and above
- At least 20% of income comes from sources other than the ASM
- Strong financial planning and controls
- Robust reserves policy; 3 year projections of reserves fall within the range set by the policy

- Review financial planning and control systems and practices
- Review all areas of expenditure in order to identify potential cost savings
- Review the policy on selecting and managing ASMs
- Develop an income generation plan