Royal College of Obstetricians & Gynaecologists

OUR IMPACT IN 2025

Introduction

This impact report marks the final year of the Royal College of Obstetricians and Gynaecologists' 2020 to 2025 strategy and reflects on a period of significant achievement.

Over the past five years, the College has gone through profound change and challenge. We recognise, with gratitude, the leadership of former Presidents, Edward Morris and Ranee Thakar, and their teams of Officers, for guiding the organisation through this transformative period.

During this strategy period, the College strengthened its position as a global leader in women's health. We supported more clinicians to join the College, advancing training, raising clinical standards and improving outcomes for women and girls worldwide.

Membership has grown by a quarter (25%) to a record 19,000 across 124 countries. The College has transformed access to the MRCOG qualification with exams now being delivered through digital test centres in over 70 countries. Candidate numbers for the exam have increased by more than a quarter since 2019. The launch of Obstetrics and Gynaecology (O&G) Curriculum 2024 further ensured that doctors are equipped with modern skills to meet the challenges of future practice.

Alongside education and training, the College's advocacy work has driven meaningful change. We helped shape policy on COVID-19 vaccination, maternity safety and gynaecology waiting lists. We also secured progress on abortion reform, safe access zones around abortion clinics, continuing telemedicine for early abortion care, and the legal ban on virginity testing and hymenoplasty.

Globally, over the last five years, we strengthened our impact by tackling inequalities in gynaecological health, working with partners and training healthcare professionals to help end female genital mutilation/cutting (FGM/C), and improving access to safe abortion care.

As the College looks ahead to its centenary in 2030, we do so with renewed ambition. The 2025 to 2030 strategy sets out a bold vision: to be a global force for progress, a thriving home for the O&G profession, and a powerful advocate for the wellbeing and rights of women and girls everywhere. Guided by our new President, Dr Alison Wright, and her team of Vice Presidents, we will continue to use our voice to shape policy, strengthen systems, support Members globally, champion equity, and ensure that women's experiences are embedded in all that we do.

Highlights of the last five years: 2020 to 2025

- We supported more clinicians to become Members of the College, **advancing their training, raising clinical standards and improving outcomes for women's health worldwide.** Our **membership grew by 25% in the strategy period** to reach a record high of 19,000 members across 124 countries.
- Since 2019, the total number of **candidates sitting MRCOG exams increased by more than a quarter (27%). Our exams are now available in digital test centres in more than 70 countries around the world**. This has **transformed access to the MRCOG qualification, allowing more candidates to sit the exam closer to home and reducing financial and travel barriers**.
- The College launched O&G Curriculum 2024, **equipping doctors with emerging skills and modernised clinical practices to meet the challenges of the future.**
- We delivered five World Congresses, attracting **11,412 delegates**, receiving **10,424 abstract submissions**, and featuring **756 speakers**. This demonstrates the sustained global reach and impact of our Congress programme**, supporting the sharing of knowledge, professional development, and advancements in women's health worldwide.**
- Our ongoing **advocacy work has set the agenda and achieved change** in relation to COVID-19 vaccines, gynaecology waiting lists, abortion reform, maternity safety, safe access zones around abortion clinics, a legal ban on virginity testing and hymenoplasty, and continuing telemedicine for early abortion care.
- We **championed the diversity of roles within our profession**, recognising the vital contribution of specialty, associate specialist and specialist (SAS) and locally employed doctors (LED), to patient care.
- We achieved our vision of creating a centre of excellence with 17 organisations now co-located in our Union Street building, enabling collaboration and collective advocacy for women, children and babies.
- The College has developed practical tools to help **tackle racism within the O&G workforce.** They will support meaningful dialogue, learning and action to help make sure everyone in the profession has equal opportunities to thrive.
- **The College has strengthened its global impact** by improving access to safe abortion care in Zimbabwe, Sierra Leone, Rwanda and Nigeria, equipping healthcare professionals to tackle inequalities in gynaecological health in Bangladesh and Nigeria and championing work with partners to help end FGM/C globally through advocacy and training for healthcare professionals.

- We continued to lead the National Maternity and Perinatal Audit (NMPA), **the largest evaluation of maternity services worldwide,** providing vital data to drive improvements in safety and outcomes. With partners, we also led on the Avoiding Brain Injury in Childbirth (ABC) programme which is being introduced across the NHS in England, **making maternity services safer.**
- We launched RCOG Learning, our digital education platform, which is **a central hub for training resources, courses and digital education materials for women's health professionals.**

Meeting our members' needs

Goal one: We will develop our membership offer to best meet the needs of our members globally and the women they serve and expand our reach across the international O&G community.

Our impact highlights

Advancing practice around the world

- There are now more obstetricians and gynaecologists trained to the highest standards around the world, which means more women and girls are receiving the highest standards of care. In 2025, we **grew our membership** by 4.5% to reach a record high of 19,000 Members across 124 countries.
- We **welcomed over 700 new Fellows and Members** at nine membership ceremonies, including one in London at the RCOG World Congress and another at an event in Chennai, India, which was organised by the All India Coordinating Committee. When our Members join us, they stay with us – **annual Member retention remained at 96%** this year.
- We provided more examination places in 2025 than ever before, **equipping healthcare professionals with essential knowledge and skills, and improving education, training and standards of care globally.** A total of 10,941 candidates sat our three membership exams across 56 countries, which was a 6% increase from 2024, and a 37% increase across our five-year strategy period. This is **allowing more doctors worldwide to progress in their careers** which will improve women's access to skilled O&G care.
- We recruited and trained over 120 new clinical and lay examiners in 2025, bringing the total number of Fellows and Members contributing to the Part 3 examination to 783 across 24 countries. This growth means **more doctors can take the MRCOG Part 3 exam** and be assessed to the highest possible standard. We've also made sure

there's **greater diversity in our group of examiners** which has helped to ensure assessors represent candidates across the globe**.**

- This year, we opened two new MRCOG Part 3 examination centres in Pakistan and Saudi Arabia. These centres will **allow more doctors in South Asia and the Middle East to complete the MRCOG exam and progress in their careers**. This will help develop a skilled O&G workforce around the world.
- A major milestone was achieved in October 2025 when we signed the Malaysia Accreditation Agreement with the Ministry of Health Malaysia, the Academy of Medicine of Malaysia, and O&G society Persatuan Obstetrik and Ginekologi Nasional (PROGEN). The agreement means that our new accreditation model will be embedded in Malaysia's postgraduate training system from July 2026. This will support the government of Malaysia's ambition to **expand the number of O&G specialists** in the country.
- In 2025, **192 doctors completed the** UK O&G **specialty training programme**. This involves a minimum of seven years of structured training to develop their careers in medical and surgical fields. The doctors were all recommended to the General Medical Council (GMC) to receive their completion of training certificate. They are now **qualified to enter the specialist O&G workforce** and contribute to delivering NHS maternity and gynaecology services.
- Excluding our World Congress, we delivered 48 educational events and courses worldwide, which were attended by 3,657 delegates. More than 36,200 Continuing Professional Development (CPD) credits were awarded to members and healthcare professionals who completed courses, went to conferences, and carried out online learning activities. This supported them to **maintain their professional development** and meet revalidation requirements, **so they could continue providing high standards of care in O&G.**
- We ran new educational events for O&G professionals on chronic pelvic pain and using ultrasound to diagnose endometriosis. The aim is to help women who have these conditions to be diagnosed and get treatment quicker, **improving outcomes.**
- In 2025**, more than 2,200 clinical experts supported our work on a voluntary basis in three different areas.** These were: clinical quality, research and patient safety; education, exams and professional development; and supporting the O&G profession at all stages in their careers. Without this clinical support we could not achieve our mission of improving the health of women and girls globally. Getting involved with the work of the College is a great way for Members to meet other clinicians from across the globe, learn new skills, and make a difference to clinical practice and how patients receive care.

- We held 28 elections to choose clinical leaders of the College, including the new President and Vice-President team. These professionals help to oversee the clinical, educational, professional, academic and ethical activities of the College**,** making sure **what we do is driven by leaders in O&G**.
- We worked with our International Representative Committees (IRCs) – which represent our work globally – to **develop and support O&G doctors outside of the UK.** The IRCs act as a point of contact between Members in their country and the College. We supported the IRCs by holding a meeting to showcase their work and bring everyone together to hear about our new strategy.

Providing the guidance and support professionals need to excel

- In June 2025, we welcomed 3,165 attendees from 95 countries to London for the RCOG World Congress. The event had 250 speakers and the largest programme in its history, providing Members and the wider O&G community with an opportunity to build their skills and knowledge. By **bringing together clinicians, researchers, and professionals in education from around the world**, we are enhancing clinical practice and sharing expertise and innovation, which **supports improvements in women's health.**
- Our census of the UK O&G workforce revealed that nearly two thirds (65%) of the obstetricians and gynaecologists who responded are at risk of burnout. We will use this information to **better understand the support that our members need and to call on governments across the UK for additional resources in women's healthcare.** As part of this work, we will update our 'Supporting our Doctors' suite of services, including: peer-to-peer support; information on returning to work after parental leave, sickness or a career break; and workplace champions to address undermining and bullying behaviour.
- An evaluation of our formal structured training is helping us **understand what is working well with the new curriculum for O&G specialty trainees and what needs improving.** We will share a report summarising the evaluation of Curriculum 2024 with the GMC in early 2026, along with an action plan to further improve O&G standards of training.
- Long gynaecology waiting lists, workforce shortages and increasingly complex surgeries have limited O&G trainees' exposure to surgical skills practice and training. This was the finding of a report we published in February 2025 on surgical training in the UK. The *O&G Surgical Skills Interim Report* sets out our **recommendations for how to improve O&G surgical training.** It is part of a wider project to develop and shape the future of O&G surgical training in the UK and globally.

- We continued to review and improve our examination revision resources to **provide the best possible exam support for O&G professionals**. Now, we have 430 validated, fit-for-purpose questions to support candidates to prepare and revise for the MRCOG Part 1 exam. A working group reviewed the MRCOG Part 2 examination resources, producing 200 new single best answer questions. These developments continue to strengthen the quality, validity and accessibility of our learning resources.
- In 2025, we published nine new pieces of evidence-based guidance and information for patients and updated 15 existing resources. This is **helping members to enhance their clinical practice, strengthen their decision-making, and deepen their knowledge and understanding.** Our patient information provides women and families with clear, reliable and up-to-date information, supporting them to make informed decisions about care.

Tackling racism and discrimination in O&G

- We launched Race Equity in the Workforce, a free online resource to **tackle racism and discrimination in the workplace**. Aimed at leadership, management and employees, the resources cover five key areas: anti-discrimination leadership; diverse and inclusive teams; support for doctors; empowerment; and psychological safety.

Case study: Improving workplace culture

Dr Ganga Verma, consultant in maternal and fetal medicine at University Hospital Southampton, is one of our workplace behaviour advisers. She contributed to the recently launched Race Equity in the Workplace eLearning package and the Workplace Behaviour Toolkit.

Here, Ganga explains that poor workplace behaviour and racial inequity are recognised as problems in the O&G workplace. She shares how the two College resources are helping to positively change workplace cultures. They're supporting the wellbeing of the O&G workforce and improving working relationships, ensuring high quality care for women and girls.

"O&G can be a stressful working environment. Sometimes, working under these pressured conditions can affect people's behaviours. Unconscious and, sometimes, conscious biases come into play. For example, healthcare professionals may make an assumption that someone isn't good at their job because of their race, gender or how they look.

"The more we talk about these issues, the more healthcare professionals will be conscious of them. The College developed the training resource and toolkit to raise awareness of

these workplace issues amongst healthcare professionals. The two resources overlap – if you're being subjected to inequity in the workplace, it has the same impact on you as poor behaviours do.

Treating people with compassion

"I experienced inequity and incivility – disrespectful and impolite behaviour – in the workplace which inspired me to contact Civility Saves Lives, an organisation that raises awareness of the impact of behaviour within healthcare settings. I worked with the organisation to produce a module for the College's Workplace Behaviour Toolkit.

"The key message of the module is the importance of calling out incivility within the workplace to avoid these behaviours from becoming ingrained. It is imperative to do this in a kind, compassionate, and non-judgemental way.

Promoting positive workplace behaviour

"As part of my workplace behaviour adviser role within the College, I promote the importance of positive behaviour in the workplace. This has included producing a module on psychological safety for the Race Equity in the Workplace resource. Psychological Safety is about individuals within a team feeling able to question the status quo without worrying that this would have a negative impact on them.

"High psychological safety allows teams to get the best outcomes. But it is impossible to feel psychologically safe in a work environment where incivility is allowed to fester. That's why I'm promoting both of the College resources to the O&G workforce.

"I hope, over time, that behaviours in the O&G workforce improve. This will support wellbeing in the workplace and patient safety because healthcare professionals will feel happier and work together as a team."

Looking to the future

In 2026, we will:

- **Develop and scale up our franchise courses** so that more clinicians can benefit from high-quality education closer to their workplaces. These courses will support clinicians to develop their skills and improve clinical practice in O&G, providing better outcomes in women's health.
- Continue to **grow our membership** by promoting the value of being a Member and the benefits of completing examinations. We will retain our existing Members by supporting clinicians at different stages of their career.

- **Support and engage our honorary membership community** by looking at opportunities to involve them in our work as ambassadors and to engage with each other. Honorary Fellows are often professionals from outside the medical profession who have made significant contributions to women's health or O&G.
- **Strengthen what we offer to our Associates** to provide them with more support. This includes doctors in training outside of the UK; SAS doctors; LED; and established overseas doctors who aren't on the MRCOG training pathway.
- **Improve the support we give to our volunteers** to make sure they feel valued and connected to our work. This includes producing a brochure that explains the benefits of volunteering with the College.
- Make sure our wellbeing services benefit members at different stages of their careers and support improvements in workplace behaviour. We will do this by continuing to **update and refresh Supporting Our Doctors resources on our website.** To promote the resources, we will **launch six podcasts** that highlight the work our members are doing to support the wellbeing of the O&G workforce.

Developing partnerships and expanding our influence

Goal two: We will leverage our strong brand and world-renowned reputation to develop partnerships and influence UK and international policy to improve women's health globally.

Our impact highlights

Maternity safety

- Our reviewed and updated Maternity Service Standards Framework aims to **reduce the variation in maternity care across the UK and improve outcomes for mothers and babies**. The framework helps commissioners and service providers deliver high-quality services, making them more consistent, safer, equitable and compassionate.
- **Women and families** will be able to **provide feedback on their experience of maternity and neonatal care in** 2026. This is thanks to our collaboration with the London School of Hygiene and Tropical Medicine to develop a new Patient Report Experience Measure (PREM) for maternity and neonatal care. PREMs capture patients' experience of receiving care.

- The College worked with partners as part of the National Maternity and Perinatal Audit (NMPA) to provide a unique picture of birth trends and outcomes for 592,594 people who gave birth in England, Scotland and Wales in 2023. The *State of the Nation,* published in September 2025, summarised findings from **the largest evaluation of maternity services in the world**.
- The College's Maternity Safety Independent Advisory Group continued to provide us with **independent expertise and advice to improve maternity safety and care**. The group, established in 2023, is made up of professionals with knowledge and expertise of current best practice in maternity safety as well as people with lived experience.
- Our Women's Network continued to play a vital role in what we do. Most members are women with personal experience of maternity or gynaecological services so their guidance helps ensure **we're patient-centred**. Members have acted as lay examiners, sat on College committees and presented at our events, including World Congress. Overall, patient involvement was embedded in College-wide initiatives and research projects, including the PREM and NMPA projects mentioned above.
- Our Avoiding Brain Injury in Childbirth (ABC) programme is being introduced across England, **helping staff better identify signs that a baby is in distress during labour so they can act quickly**. This follows a successful pilot across 12 maternity units in England which addressed two key contributors to avoidable brain injury: recognising and responding to fetal deterioration in labour and managing impacted fetal head during caesarean birth. The pilot was delivered in collaboration with the Royal College of Midwives and The Healthcare Improvement Studies (THIS) Institute at the University of Cambridge.
- Along with the Royal College of Midwives, we hosted a maternity safety summit to support NHS trusts and local integrated care boards to **address the safety crisis facing maternity and neonatal care**. Delegates heard from the Secretary of State for Health and Care about the forthcoming maternity review and plans for supporting services to improve.
- Women who are non-English speakers should have access to free professional interpreters at all of their maternity appointments. This was one of the guidelines we set for NHS providers and commissioners to **ensure equitable, safe maternity care for non-English speakers.** The *Cross-Cultural Communication and Language Support: Standards for Maternity Care and Women's Health* was published in December to help plan how services can close gaps in equity.

Raising awareness of women's health

- Our press work **positioned the College as the voice of the O&G profession** on critical issues such as gynaecology waiting lists, gaps in women's health, workforce challenges, reproductive rights and maternity safety. We shared 49 press releases and statements and managed over 400 media enquiries to achieve over 3,500 pieces of coverage across broadcast, national and regional news media.

Improving women's sexual, reproductive and maternal health globally

- We **advocated for key issues affecting women's health and rights on the global stage.** In March 2025, we participated in the 69th session of the United Nations (UN) Commission on the Status of Women (CSW69) in New York and in May the College took part in the 78th World Health Assembly (WHA) in Geneva**.**

- Our **Essential Gynaecological Skills training**, which covers topics such as cervical cancer, emergency gynaecology, and violence against women, **was included in the government of Nigeria's Safe Motherhood Strategy**. Government representatives from six states across Nigeria said they wanted to introduce the training in their state level training plans.

  We continued to work with the Africa Center of Excellence for Population Health and Policy and the Society of Gynaecology and Obstetrics of Nigeria to deliver the Gynaecological Health Matters (GHM) programme in Nigeria. Essential Gynaecological Skills training is a key part of GHM.

  The programme trained 20 expert trainers and 180 healthcare providers in Kano and Abuja states and led to the Government validating and adopting training materials from the College. Some 99% of trainees said they were satisfied with the training and 84% showed a measurable improvement in their knowledge.

- The College **expanded** its **global work to end FGM/C** by strengthening training for doctors in Egypt, developing new partnerships in South and Southeast Asia, and expanding training to equip doctors with advocacy and influencing skills.

  The advocacy and influencing training will be introduced in new regions of Egypt and adapted for other countries with high rates of medicalised FGM/C. Working with Equality Now, ARROW, Orchid Project and Asia Network, the College also delivered the first analysis of medicalised FGM/C across South and Southeast Asia. This provides evidence and clear recommendations to **prevent harm to girls in healthcare settings.**

Influencing policy, speaking up and taking action to improve women's healthcare

- Our research found that just 5% of women think the UK government is treating women's health as a priority. Some 46% found accessing women's health services 'difficult' or 'very difficult'. The College used these findings to write **an open letter to the UK Government on International Women's Day, co-signed by** 48 other organisations, calling for women's health to finally be prioritised.

- We **successfully campaigned for women to be removed from the criminal law related to abortion in England and Wales**. Working with partners, we gathered the support of hundreds of MPs who voted so women would no longer be subject to years-long investigations, criminal charges, and custodial sentences for ending their own pregnancy, and kept the issue high on the media agenda across 2025.

  The College welcomed this milestone as we have campaigned for decriminalisation since 2017. We're now focused on ensuring the House of Lords supports the amendment so abortion is recognised as essential healthcare and regulated like any other medical procedure.

- **The UK Government's 10 Year Health Plan highlighted women's health hubs as an example of how to deliver effective** local care, following our detailed response to their call for evidence. We urged commitment to women's health hubs as a proven way to improve access to care, efficiency and prevent conditions, securing 500+ media articles across 2025 amplifying our campaign.

  We also called for fully funded, safely staffed maternity services, and investment in gynaecology, hospital buildings, digital infrastructure and research. These priorities were reinforced in our Women's Health Manifesto, setting out clear actions we wanted from the 10 Year Health Plan.

- **The UK Government announced a review of the Women's Health Strategy for England** following calls from the College to refresh the strategy three years after its initial publication. The College published an analysis of progress on the 2022 Women's Health Strategy, noting some improvements but highlighting key gaps. We are continuing to work with the Department of Health and Social Care to make sure it targets the areas most in need of progress.

- Since the launch of our *Waiting for a Way Forward* report in November 2024, the College has continued to **make the case for tackling gynaecology waiting lists in the media and with policymakers.** We have maintained our interactive data dashboard on gynaecology waiting lists**,** which has informed tailored briefings for MPs about waiting lists in their area ahead of debates on women's health in Parliament**.** As a result of our work, the UK Government announced **an increase in funding for gynaecology** in the *Elective Care Plan* in January 2025.

- **Parliamentary committees reviewed the evidence we submitted to inquiries** on the early years sector, obesity, reproductive health, FGM/C and inequalities in women's health. The College also briefed MPs and Peers on key debates and legislation, including the Women's Health Strategy for England, maternity services and the Tobacco and Vapes Bill.

Case study: "More women and girls in Nigeria were satisfied with their gynaecological healthcare after the GHM programme"

Sam Agwu has been the UK clinical lead of our GHM programme in Nigeria since 2024. He is a consultant gynaecologist with NHS Professionals working in Worcestershire Acute Hospitals NHS Trust, an honorary visiting clinical professor at the University of Nigeria and a fellow of the Royal College of Obstetricians and Gynaecologists.

He is also the International Representative of the Sub-Saharan African region on the RCOG Council. Sam is passionate about improving global women's health and explains how introducing our Essential Gynaecological Skills training in Nigeria is helping to do this.

"How would you want your wife, sister or mother to feel after they saw a health professional for a gynaecological matter? That's a question we encouraged the 30 consultant obstetricians and gynaecologists, senior nurses, midwifery officers, senior medical officers and community health officers to ask the non-specialist health professionals that they trained.

"We emphasised to the expert trainers from three states in Nigeria that patients require dignity and you must approach them with non-judgment. This is important because stigma stops women coming forward. It's why we also identified and trained 36 Gender, Equality and Social Inclusion Champions as part of the GHM programme. They go back to their communities to advocate for the provision of safe, private, dedicated places where women can be seen to check their gynaecological health. Then their dignity and confidentiality can be maintained at the point of contact

"After our expert trainers trained 180 healthcare professionals that work directly with patients, more women and girls said they were satisfied with their care. The number who were 'very satisfied' increased from 22% to 32%.

Improving clinicians' knowledge and confidence

"Women in Nigeria are diagnosed too late for gynaecological conditions including cervical cancer. Gynaecological morbidity and mortality is widespread and under prioritised.

"Preventable conditions include obstetrics fistulas, untreated abnormal uterine bleeding, untreated sexually transmitted infections and complications from unsafe abortions. All contribute to morbidity and lost years for women and girls.

"Before our four-day training, gynaecological assessments were inconsistent. Health professionals had poor knowledge and a lack of adequate skills. They also took limited patient histories. We found that consultants were practicing with their last formal education as continuing training isn't standard. Similarly, community health officers didn't have adequate understanding of basic anatomy.

"But programme participants said their knowledge and confidence increased from 50% to 69%. Initial results show that community health services are referring patients earlier and intervening when they can.

National ownership of the programme across Nigeria

"It's fantastic that the government of Nigeria took parts of the training to strengthen their Safe Motherhood Strategy. And that government officials from the six states in Nigeria want to replicate what we've done. This shows national ownership and presents a clear pathway to scaling up the training.

"The College is a global leader in women's health so has a huge responsibility, as well as expertise, to strengthen global health care systems. Programmes like GHM help to reduce preventable illnesses, promote gender equality and build resilient healthcare systems."

Case study: Avoiding brain injury in childbirth

Dr Andrew Demetri, a clinical fellow of the Royal College of Obstetricians and Gynaecologists, helped design a training programme for the 12 maternity units that took part in the pilot ABC programme. Here, he talks about some of the tools and resources which were tested during the pilot – which we led on with partners – and that are being introduced across England to make maternity care safer.

"When the ABC programme was being developed, a diverse group of patients shared their experiences of childbirth. They said that during an emergency, there was silence in the room. The clinicians didn't explain what was happening to them or their babies.

"We listened to this feedback and developed resources to support clinicians. The aim is to help them understand what women and their birth partners want to know during labour and in an emergency. The resources encourage clinicians to think about how they communicate, including using clear terminology.

Training clinicians

"I helped design a train the trainer programme to show the 12 maternity units, which took part in the pilot, how to use the tools and protocols and then train their staff – including obstetricians, midwives and anaesthetists. This involved developing a set of training resources, including the communications resources I mentioned. We observed the maternity units training their clinicians so we could fine-tune the resources.

"When the pilot finished in April 2025, NHS England launched the ABC programme. The College then ran train-the-trainer events to train 15 regional Patient Safety Collaborative (PSC) teams to make sure the ABC programme is consistently delivered. The PSCs will train trainers from the hospital trusts in each of their regions in 2026, and they will then deliver training for staff in each of their units.

Making maternity care safer

"For a number of years, there wasn't a strict evidence base for how to manage an impacted fetal head in a caesarean birth. The ABC programme gives clinicians evidence-based approaches to help them manage this type of emergency.

"There are also different schools of thoughts on how to monitor a baby during labour. The programme removes this debate by focusing on the holistic picture. Rather than just relying on fetal monitoring, we created a tool that helps clinicians to incorporate other risk factors into their assessments. For example, if a mother is on a hormone drip.

"NHS England will measure how many people have been trained to use the tools and approaches. Then, further down the line, the hope is that they will be able to measure the clinical improvement and impact this is having on women and their families. The aim of training clinicians is to reduce some of the poor outcomes and trauma associated with these emergencies."

Looking to the future

In 2026, we will:

- **Use our consultative status with the UN Economic and Social Council to prioritise neglected reproductive and maternal health issues globally.** We will do this by building relationships with UN agencies, civil society organisations, advocacy networks, and others aligned with our goals for women's health and gender equality.
- **Secure funding for programmes** on gynaecological health, combatting FGM/C**.**
- **Capitalise on the expertise and power of our network of obstetricians and gynaecologists in low-income countries** to promote access to high-quality health services for women and girls.

- Continue to work with partners to **ensure the House of Lords supports the decriminalisation of abortion for women so it becomes law** in 2026.
- **Publish a policy position statement** on digital transformation in the NHS, filling a knowledge gap in UK government policy around the digital needs of women and the O&G profession.
- **Campaign for women's health hubs and action on gynaecology waiting lists**, including maintaining the College's Elective Recovery Tracker and analysing data to provide expert commentary on waiting lists. We will create opportunities for professionals working in hubs to share their insights and experiences.
- Demonstrate continued visible professional leadership on maternity safety and ensure the College's expertise informs national maternity policy, including via the PRCOG's membership of the national maternity taskforce chaired by the Secretary of State.

Becoming more resilient and accessible

Goal three: We will become more resilient, accessible and influential through the delivery of a comprehensive digital transformation programme to ensure our research, educational and clinical products have benefit globally and drive up standards in women's health.

Our impact highlights

Improving members' online experience and reaching more people

- We are **reaching more members with the information they need** by providing them with clinical guidance, patient information, educational resources and courses on our website. There were 5.2 million visits to our website in 2025, which was a 20% increase compared to 2024.
- This year, we carried out further work to deliver a new customer relationship management (CRM) system to improve services for our members. This is **making it easier for members to manage their RCOG membership online.**
- We **made our online learning platform RCOG Learning more engaging for members** by making our courses easier to find and adding more interactive elements. We also launched new resources on topics such as maternal vaccinations in pregnancy and haemolytic disease of the fetus and newborn. Now in its third year, RCOG Learning has over 28,000 visitors and a learner satisfaction rating of 6.06 out of 7.

Championing digital learning for all

- We supported 64 trusted external organisations and individuals to run franchise courses in person**,** in the UK and worldwide, reaching a further 894 clinicians. Franchise courses are College branded courses that can be run locally.

  This is **helping more O&G professionals to benefit from our high-quality training.** It helps us develop strong regional partnerships and deliver quality education worldwide.

- Our ongoing webinar programme continued to keep O&G professionals up to date on key topics. During April and May, over 16,000 people registered to watch our webinar 'Prediction and Prevention of Pre-eclampsia' – the most popular event in College history. **Average registrations for our free webinar programme reached 3,833 in 2025, a 159% increase compared to 2024.**

- We launched new online refresher training modules for examiners, including modules on unconscious bias and differential attainment. These are **equipping examiners with up-to-date training to maintain consistency, fairness, and inclusivity when they examine the MRCOG Part 3**. The online format of the modules is allowing examiners worldwide to complete the training.

- Our Green-top Guidelines provide clinicians with recommendations to help them make decisions about appropriate treatment for specific conditions. We carried out research with UK and international members and **redesigned the Green-top Guideline webpages with a new clinical categorisation approach to make it easier to access and navigate**. This work increased page views by 8% and boosted engagement with the content by 61%.

- This year, we **provided Members with the knowledge to better treat women and girls affected by birth trauma**, **hirsutism (excessive hair growth) and heavy menstrual bleeding**. We did this by redeveloping eight CPD resources to make them more engaging for Members. They now include audio, video and interactive elements, as well as tasks for Members to reflect on their learning. The resources cover topics that clinicians will encounter in practice.

Promoting careers in O&G

- Medical students and foundation doctors received information about specialising in O&G at a virtual careers day that we hosted in May 2025. The event was for SAS doctors, LED and doctors moving to live and work in the UK. The **aim was to help doctors make important decisions about their careers**. Over 400 delegates registered and the content was made available for those not able to join on the day.

- Our **dedicated hub for IMGs helps them settle into UK practice.** This is a section of our website designed for IMGs exploring their career options in O&G in the UK. We reviewed and updated web links in the hub to make sure people can find information easily and promoted the content in our Supporting our Doctors portfolio.
- In October 2025, we supported the annual SAS Week to **promote the roles of SAS doctors and LED**. We published content on our website to raise awareness of the different roles and **encourage more people to train in O&G.**

Looking to the future

In 2026, we will:

- **Review our course portfolio** to make sure we are offering the right balance of in-person and virtual training. This will help to meet Members' needs and address areas where wait times to enrol on courses are long.
- **Continue to focus on looking after members' personal information** by investing in advance cyber protection tools and services. These will help to keep our members' information secure.
- **Complete evaluation of our Training ePortfolio**. We will share findings with trainees and professionals who develop the training courses. The findings will be used to inform our training, making sure we focus on learners' needs.
- **Explore how Artificial Intelligence (AI) can make the Green-top Guidelines easier to access on our website**. The aim is to improve the online experience for people who use the guidelines and allow both clinicians and the public to access key relevant information.
- **Develop the RCOG Learning platform by updating existing resources and publishing new content that is aligned with our priorities**.
  This includes: developing new resources about special interest training; creating webinars about our work to improve surgical skills training for O&G professionals; and updating exam questions to support candidates with their revision.
- **Streamline and improve members' experience** of managing their membership online by launching and developing of our new customer relationship management system (CRM).

Securing our finances, reducing our carbon footprint

Goal four: We will ensure our financial and environmental sustainability through delivery of all of our objectives and contribute to a significantly reduced carbon footprint.

Our impact highlights

Delivering low carbon, equitable care

- **Multidisciplinary teams from our Green Maternity Challenge presented their work and shared their successes and challenges with more than 100 delegates at a conference in March**. The Green Maternity Challenge ended in 2025. As part of the initiative, nine multidisciplinary teams across the UK received training and mentoring to develop, deliver and measure the impact of carbon cutting initiatives in maternity care within their trusts.
- We **shared eight evidence-based recommendations to help maternity teams and leaders reduce carbon emissions in maternity care while improving safety, experience, and equity for women, birthing people and their families.** Recommendations in the *Green Maternity Report* include: streamlining outpatient care; reducing travel; minimising waste during labour and birth; and making sure women receive the right care first time to improve outcomes and sustainability. The report was developed from insights and learning from the Green Maternity Challenge.

Reducing our carbon footprint

- The College, as an organisation, continued to work on **limiting contributions to the climate and ecological crisis.** This year, we:
    - Made changes to our Union Street office so that our energy consumption is environmentally sustainable, with electricity powered by green energy.
    - Continued to benefit from our 108 solar panels.
    - Installed three ‘farmstands’ which grow herbs and salads for staff and tenants who also received accompanying recipe suggestions. This reduced our need for fresh deliveries and added to the plants which thrive in our cafe area.

- We engaged 3,657 delegates through a blended model of 20 in-person, 23 virtual, and 5 hybrid educational courses and events**.** With 66% of participants attending virtually, we **maximised accessibility while reducing travel-related carbon emissions for our events** as well as overall costs, contributing to a smaller organisational carbon footprint.

Working collaboratively, inclusively and sustainably to improve care

- We are **working with other women's health organisations and like-minded local organisations to transform women's health and reproductive care**. We now share our head office with 16 women's health organisations, with two joining in 2025. This makes collaboration easier, especially as, this year, we released meeting rooms and break out facilities for our tenants, helping to manage costs for their organisations.

1. We earned a second consecutive Silver Talent Inclusion and Diversity Evaluation (TIDE) award from the Employers Network for Equality and Inclusion. TIDE measures how well an organisation is **cultivating a positive and inclusive culture** across different categories. The College's score increased from 74% in 2024 to 76%. This puts us in the top third of participating organisations and the top 20% of charities.

- We completed key actions under our 2021–2025 Equality, Diversity and Inclusion (EDI) action plan, **making the College a more inclusive and representative place to work**. This included:
    - Delivering EDI and wellbeing events to build understanding of diversity; strengthening mental health support through Mental Health First Aiders and mindfulness training.
    - Launching inclusion passports to support staff with disabilities.
    - Introducing mandatory active bystander training alongside a revised anti-bullying and harassment policy.
    - Taking part in Leonard Cheshire's Change 100 scheme to support disabled students and graduates.
    - Achieving Disability Confident Employer status, recognising our progress in improving accessibility.
    - Preparing a diversity profile of our workforce to be published in early 2026. This contains key demographic characteristics, like ethnicity and disability. Creating the profile will allow us to monitor the

diversity of our workforce to make sure it reflects our members and the women and girls they serve.

- We **developed a new organisational strategy that will shape our work from 2025 to 2030**. This period of time will mark a defining chapter for the College as we approach our centenary and reaffirm our commitment to advancing the health and rights of women and girls worldwide.

Case study: "Sustainable maternity care saves money and time and is better for women"

Maddie de Vicq is a registrar in Taunton and our Clinical Fellow for Sustainability. She led our Green Maternity Challenge project which involved nine multidisciplinary teams across the UK receiving training to develop carbon cutting initiatives in maternity care. Maddie shares the impact of the project.

"Making maternity care more sustainable saves money and time and it's better for women and their families. This was a powerful finding from the Green Maternity Challenge which engaged maternity teams who are now actively sharing the impact of their work.

"For example, Meg Wilson, a consultant obstetrician from the Whittington NHS Hospital Trust who took part in the project, shared her team's learnings at a British Intrapartum Care Society conference. This helped others to generate their own ideas. She spoke about how the trust introduced hybrid in-person and video midwife and obstetrician consultations to avoid duplicate appointments**.** The option to do in-person midwife appointments with the consultant obstetrician joining via video got unanimous support from women who didn't have to travel to two appointments.

"In total, the nine challenge groups projected savings of £860,669 and 101,263 kgCO2e* annually.

Improving care by co-designing projects with women

"We recruited 10 women with lived experience to guide the project. They were amazingly engaged, helping to choose the multidisciplinary teams, having open meetings with them and judging who was highly commended.

"We learned that many of the biggest sources of waste in maternity care are the biggest frustrations for women too. If you co-design sustainability projects with women, you can improve care as well. That could be having blood pressure monitoring or IV fluids for severe nausea or vomiting at home. Cutting carbon emissions isn't just about reducing plastics and recycling.

“The Green Maternity Conference showcased the work from the teams who took part in the challenge. I spoke at World Congress about the project with members of our lived experience group. Raising awareness is important because we need increased engagement from clinical staff about this issue.

Looking at clinical problems with a sustainability lens

“It's really hard not to think about the future of the planet when you're helping babies into the world.

“The College produced the Green Maternity Report to inspire clinicians to look at what they could do in their own environment to reduce carbon emissions. It has been used to put pressure on politicians to support its recommendations.

“Lessons from the teams that took part in the Green Maternity Challenge are transferable. Clinicians could take any clinical problem in their service and look at it through a sustainability lens. Sustainability should be a consideration in all quality improvement.”

* This is a standard unit used to measure the total impact of greenhouse gases on the climate by expressing them as if they were all carbon dioxide.

Looking to the future

- Boost efficiency by **putting our technology strategy into action** and using artificial intelligence more.
- **Put a smart buildings strategy into action at Union Street**, making sure systems controlling heating, cooling and lighting can be monitored remotely and react to changing weather conditions.
- **Develop a new EDI plan** that aligns with our new strategy to make sure we prioritise this as an organisation.
- **Launch a new learning and development programme** for leaders, managers and new starters, providing all staff with mandatory and core learning to deliver on our new strategy.

Our new strategy: 2025 to 2030

As we work towards our centenary in 2030, we’ve set out a new strategy that reaffirms our commitment to advancing the health and rights of women and girls worldwide.

Our strategy for 2025 to 2030 sets out a bold vision: to be a global force for progress, a thriving home for the O&G profession, and a powerful advocate for the wellbeing and rights of women and girls everywhere. Our aim is that by 2030, we’ll be recognised not only as a global leader in clinical standards and education, but as a driving force for innovation, advocacy and social justice in women’s health.

During this strategy period, we will use our voice to shape policies, strengthen systems, and champion equity, wherever it is needed. We will also make sure that we embed the voices and experiences of women in all we do.

We will work towards three strategic goals:

One: Creating a thriving and inclusive home for the O&G profession, strengthening and supporting our membership while expanding our global community.

We need more O&G professionals practising around the world, who are trained to the highest possible standards. To achieve this, we will look at how we attract the future generation of O&G professionals to the specialty and deepen engagement with existing and new doctors in training. It is important that we strengthen the connection with our members by providing long-term, lifetime value to them at different stages of their careers. Part of this work will involve collecting data to deepen our understanding of the needs of the O&G workforce.

Two: Shaping the future of the global O&G profession through the pursuit of excellence and innovation, setting the highest standards and driving quality in education and training.

To sustain the O&G workforce and meet future healthcare needs, we must make sure there is equitable access to training. We must also adapt to increasing demands for flexible and part-time working to encourage doctors to choose O&G as a specialty. To expand our membership globally, we will work to address the recognition of the MRCOG qualification outside of the UK. This will involve looking at how we can use our new, successful accreditation programme in lower income countries.

Leveraging our influence and global reach to achieve meaningful improvement for the O&G profession and the women we serve.

Within the UK, we will continue to advocate for improving women's health and the O&G workforce to drive significant policy change. Globally, we must strengthen our leadership role to respond to changes in healthcare. This includes looking at how we tackle the impact of the climate and ecological crisis on women's sexual and reproductive health and rights globally. We will: support our members to provide more sustainable care to women and

girls; advocate for change at a national level; and limit our own contributions to the climate and ecological crisis.

RCOG Council

RCOG Council is responsible for furthering the College's mission and for setting its long-term priorities and goals. Council establishes and oversees the clinical, educational, professional, academic and ethical activities of the College. It is chaired by the President and meets six times a year. RCOG Council comprises:

- 6 RCOG Officers
- 33 elected regional Fellows and Members
- The Chair and Vice Chair of the Trainees' Committee
- Chair of the Academic Board
- Women's Voice Lead and the Vice Chair of the RCOG Women's Network
- President of the College of Sexual and Reproductive Healthcare
- SAS and LED Lead

RCOG Officers in 2025

Professor Ranee Thakar
President

Professor Hassan Shehata
Senior and Global Health Vice President

Dr Laura Hipple
Vice President for Membership and Workforce

Professor Asma Khalil
Vice President for Academia and Strategy

Mrs Geeta Kumar
Vice President for Clinical Quality

Mr Ian Scudamore
Vice President for Education

RCOG Officers from December 2025

Dr Alison Wright
President

Dr Sherif Abdel-Fattah
Vice President for Global Health

Dr Jenny Barber
Vice President for Clinical Quality

Mr Sujeewa Fernando
Vice President for Workforce

Mr Andrew Leather
Senior and Membership Vice President

Miss Melanie Kate Tipples
Vice President for Education

Our Board of Trustees in 2025

- Baroness Tessa Blackstone, Chair
- Prof Ranee Thakar, President
- Prof Hassan Shehata, Senior Vice President
- Mrs Geeta Kumar, Vice President
- Alistair Campbell, RCOG Council representative
- Steve Thornton, RCOG Fellow
- John Heathcote, RCOG Member
- Leila Pilgrim, Trustee
- Roy Clarke, Trustee
- Noah Franklin, Trustee

Our Board of Trustees in 2026

- Baroness Tessa Blackstone, Chair
- Dr Alison Wright, President
- Mr Andy Leather, Senior Vice President
- Mr Sherif Abdel-Fatteh, Vice President

- Steve Thornton, RCOG Fellow
- John Heathcote, RCOG Member
- Alastair McKelvey, RCOG Council Representative
- Leila Pilgrim, Trustee
- Roy Clarke, Trustee
- Noah Franklin, Trustee

Benefits for members

Our aim is to improve the standard of care delivered to women, encourage the study of O&G, and advance the science behind the practice.

Membership fees pay for the guidance, education programmes and support networks we provide for doctors, as well as our campaigns, policy and global work. Member benefits include access to:

- **RCOG Learning**, which offers digital learning content, podcasts, audio series and videos from experts in the field.
- **The Obstetrician & Gynaecologist (TOG) journal** which contains high-quality, peer-reviewed articles.
- Our **library and reading rooms.**
- **Clinical evidence-based guidance and best practice** to help clinicians deliver high-quality care and improve their practice.
- A **CPD programme and ePortfolio**, an online tool for practitioners to record their learning. This supports Members' revalidation appraisal with the GMC as well as their lifelong learning.
- **Wellbeing and mental health resources and support**.
- **Volunteering opportunities** which support Members' career development and put them at the forefront of vital work to improve women's global healthcare and health rights. This allows Members to help shape the College's priorities.
- **Tailored communications** on the latest news, clinical publications and campaigns.
- A range of **discounts on books, journal subscriptions and society memberships.**
- **IRCs** for non UK Members. These liaise with and support Members and trainees in their region.

Discover more at rcog.org.uk/membership

Find out more

The Royal College of Obstetricians and Gynaecologists works to improve women's healthcare across the world. We're committed to developing the accessibility and quality of education, training and assessments for doctors wishing to specialise in Obstetrics and Gynaecology (O&G).

Contact us

Visit: rcog.org.uk

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London
SE1 1SZ

Registered charity number: 213280

Find us on social media

Facebook: Royal College of Obstetricians and Gynaecologists RCOG

LinkedIn: Royal College of Obstetricians and Gynaecologists | RCOG

Instagram: @the.rcog

A note on language

Within this impact report the terms 'woman' and 'women's health' are used. However, it is important to acknowledge that it is not only people who identify as women for whom it is necessary to access women's health and reproductive services in order to maintain their gynaecological health and reproductive wellbeing.

Gynaecological and obstetric services and delivery of care must therefore be appropriate, inclusive and sensitive to the needs of those individuals whose gender identity does not align with the sex they were assigned at birth.