

AHPs into Action

Realising the value of the Allied Health Professionals workforce

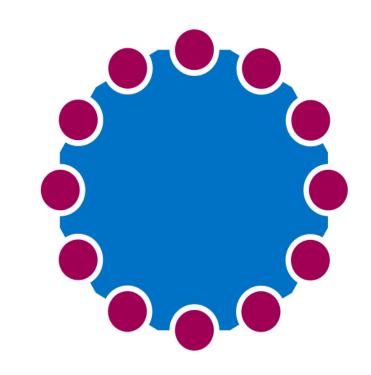
#AHPsintoAction

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@NaomiMcVey



The AHP community in England [Ing

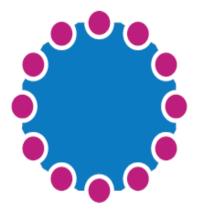




#StrongerTogether







Allied Health Professions into Action

Using Allied Health Professionals to transform health, care and wellbeing.

2016/17 - 2020/21

#AHPsintoAction

Launched 17th January 2017





Developing AHPs into Action





A mandate for change....





Co-produced using a triangulation of data & evidence



Patient and public engagement



"As a patient I am pleased to see the recognition of individual and population/community wellbeing as this is interlinked. There is huge potential for AHP to become strong bridge builders between healthcare and patients/citizens/communities helping to renegotiate the relationship between citizens and health/healthcare, e.g. implementing shared decision and co-production approaches, promoting self-care and education, being the pioneers of using digital as an enabler etc"

Anon: July 2016. Direct quotes; contributed to phase two of AHP online workshop

AHPs into Action

Using Allied Health Professionals to transform health, care and wellbeing.



impact of the effective and efficient use of AHPs for people and populations.

- 1 Improve the health and well-being of individuals and populations.
- Support and provide solutions to general practice and urgent and emergency services to address demand.
- 3 Support integration, addressing historical service boundaries to reduce duplication and fragmentation.
- Deliver evidence based/informed practice to address unexplained variances in service quality and efficiency.

Commitment to the way services are delivered.

- 1 Commitment to the individual.
- Commitment to keep care close to home.
- Commitment to the health and well-being of populations.
- 4 Commitment to care for those who care.

Priorities to meet the challenges of changing care needs.

- AHPs can lead change.
- 2 AHPs skills can be further developed.
- AHPs evaluate, improve and evidence the impact of their contribution.
- 4 AHPs can utilise information & technology.



Over 50+ case studies... and more on the way

Challenges STPs must address Questions taken directly from Annex 1, NHS England, Delivering the Five Year Forward View: NHS planning guidance 2016/17 - 2020/21.	AHPs innovative solutions to support general practice and urgent and emergency services to address demand	
What is your plan for sustainable general practice and wider primary care? How will you improve primary care infrastructure?	MSK first contact practitioner. Management of irritable bowel syndrome. Direct Access Physiotherapy Service. First point of contact care for people with MSK related conditions. Physiotherapy - changing the face of primary care.	
What are your plans to adopt new models of out of hospital care, e.g. Primary and Acute Care Systems (PACS)?	Community paramedics keeping people out of hospital. Virtual Orthopaedic Fracture Clinic. Dysphagia management improves quality of life and reduces medical complications and death.	



Implementing AHPs into Action: priorities





Workforce

'The workforce requirements of this strategy will lead to the first AHP focussed national workforce plan for England...'



Facing the Facts, Shaping the Future

A draft health and care workforce strategy for England to 2027



For consultation





Regionally and locally

- 'AHPs into Action' is a tool to enable system leaders to focus attention on areas where they should be considering the transformative role of AHPs and the support needed to achieve change
- AHPs and System Leaders, in collaboration with their Local Workforce Action Board (LWAB) should review organisational strategies against the impacts and part 1 and the framework in part 2





A framework to support local decision makers - utilise the potential of AHPs. #AHPsintoAction



Focusing on the priority actions and guided by the commitments made, the framework below provides a structure to develop a local plan of delivery. Boards, STPs, Higher Education Institutions (HEIs) and academics should review their strategies against the framework. The challenge questions in the sixteen boxes below are offered to guide thinking when developing that local plan.

guided by the commitments made.						
Priority actions		Commitment to the individual	Commitment to keep care closer to home	Commitment to the health and wellbeing of populations	Commitment to care for those who care	
	AHPs can lead change	How can we make better use of AHPs as autonomous clinicians and as part of multidisciplinary teams (MDT) to improve access to appropriate care?	Are we using AHPs to provide services in different settings closer to home? Such as in GP surgeries, care homes, community outreach services and other non-acute settings? Are the recovery, reablement and rehabilitation skills of AHPs being used to address quality of life and employability?	Are we using the unique skills of all appropriate AHP professions in an integrated way to respond to local public health challenges and to prevent ill-health? Are AHP services supported to re-design their offer to focus on prevention?	Are we using the specialist skills of AHPs to ensure the health and wellbeing of colleagues whilst also ensuring an environment is provided that makes people feel healthy, happy and well?	
	AHPs skills can be further developed	How are AHPs supported in enhancing their unique skills within integrated teams, share skills and to acquire wider skills to support other parts of the system, or to reduce duplication?	How are AHPs involved in developing new care models? Are plans which need staff to work differently, in different roles, in different settings and at different times of the day, developed with AHPs?	Is the AHP contribution to local public health and prevention intervention explicit and encouraged? This may involve identifying what AHPs do well now whilst also developing the workforce where there is potential to enhance the AHP contribution.	Are you delivering and/or offering inter- professional education and practice (both at undergraduate and postgraduate)? Do you have a commitment to the development of both clinical and non-clinical skills amongst the AHP workforce?	
	AHPs evaluate, improve and evidence the impact of their contribution	Do you ensure information/data is collected which demonstrates the quality and cost effectiveness of the care delivered by AHPs? This should include inputs (workforce measurement), outputs (workload measurement) and outcome measurement.	Is there a commitment to work towards a uniform data set which collectively and consistently measures the value of AHP care at an individual and population level?	How are AHPs supported to contribute to, share and respond to local, regional and national evidence regarding public health and prevention?	Are you collecting evidence about the care AHPs provide, to their colleagues and to carers?	
	AHPs can utilise information and technology	How are you enabling AHPs to use information and technology to reduce unexplained variance across services?	Are AHPs being encouraged to develop and utilise information and technology to ensure people can self- care and, when required, access and receive care close to home?	Is population level data shared with AHPs to enable them to consider how to address needs and how the application and/or use of technology could enhance the health and wellbeing of the local communities?	Do AHPs have access to technology to enable the sharing best practice across professions?	



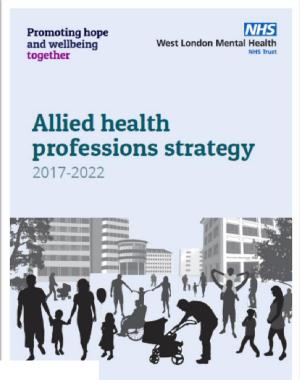
Priority One AHPs can lead change

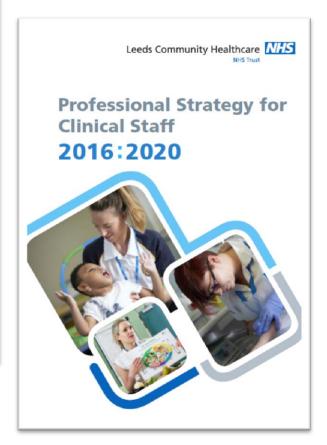
'AHPs should be represented in the decision making processes for STPs to ensure they have a strong voice in the redesign of health, social and the wider care system'

Local AHP involvement & strategies developed since AHPs into Action









Newly emerging roles - Director of AHPs/Therapies







Job Reference: 333-C-HQ-0286

Employer: Central and North West London NHS Foundation Trust

Department: Senior Management

Location: Stephenson House, 75 Hampstead Road, London NW1 2PL, London

Salary: £72,987 - £88,839 pa inc

Job Reference: CORP-119-17

Director of Therapie

Employer: Tees, Esk and We Department: Flatts Lane Cerl Location: Middlesbrough

Salary: £79,415 to £100,431

CNWL NHS Foundation Trust offers a generous relocation package to successful candidates - su eligibility assessment

Following structural changes within the Trust, we are seeking to appoint a highly motivated and d senior allied health professional (AHP) or psychologist for the newly created post of Director of Tr

As an enthusiastic and innovative clinician the post holder will provide professional leadership to and psychologists across the Trust. They will be a key senior leader in driving improvements in th and efficiency of clinical practice across the full range of therapies.

We are one of the largest specialist memar nearm and

disabilities trusts in the country, with an annual income of £320m and a workforce of some 6,700 staff operating from around 160 sites in Durham, Teesside, North Yorkshire and York and Selby. We provide a range inpatient and community services to 2m people living in County Durham, the Tees Valley, Scarborough, Whitby, Ryedale, Harrogate, Hambleton and Richmondshire. We also provide additional specialist services to other parts of Northern England.

South Staffordshire and Shropshire Healthcare WHS



A Keele University Teaching Trust

Director of Allied Health Professionals

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Location - Stafford

Are you an Allied Health **Professional**

who is ready for a high profile role providing senior strategic influence and professional leadership within a highly successful and innovative NHS organisation?

We are looking for an Allied Health Professional with a track record of successful clinical and professional leadership within the NHS, with flexibility to work in a clinical setting or research/academia and lead on delivery of trust wide initiatives.

With a real passion for working in co production with our service users, carers and families in pursuit of the perfect patient experience.

Closing Date: 01/09/2017 Interview Date: 28/09/2017

Contact Name:

Tim Cate Telephone:

01642 283634



Priority Two AHPs skills can be further developed

"AHPs are developing wider skills which complement their specialisms and provide flexibility"



AHPs into Action recommendation: assess workforce using the guidance.

State of readiness for future care

Unique selling point.

What can members of your profession do that no one else can do?

Extending skills and knowledge to improve service efficiency and outcomes.

What tasks / roles do other professionals perform that members of your profession could do?

Values and Behaviour

Enhancing the skills of others to improve outcomes.

What skills and knowledge can members of your profession develop in others? (with safe delegation and training).

Shared skills / knowledge.

What are the generic skills and competencies that your profession and other professions have which can enhance patient experience?

AHPs at Essex Partnership University NHS FT using the tool to support Bedfordshire, Luton and Milton Keynes STP







NHS England

Multi-professional framework for advanced clinical practice in England



"New solutions are required to deliver healthcare to meet the changing needs of the population. This will need new ways of working, new roles and new behaviours." 'for the first time, a national definition and framework of what Advanced Clinical Practice is and what the requirements for entry are...

This resource will facilitate transformation of the workforce by promoting inter-professional working, across traditional professional boundaries'

https://hee.nhs.uk/our-work/developing-ourworkforce/advanced-clinical-practice/multiprofessional-framework-advanced-clinicalpractice-england



"There needs to be routine collection of consistent and comprehensive data on the impact of AHPs on the quality of care to individuals and populations."

CAHPO Awards



AHP Quality Improvement 2018 (NHS Improvement)

AHP Leader 2018 (HEE)

NICE into Action 2018 (NICE)

AHP Student innovation 2018 (NHS Employers)

AHP Support Worker of the Year 2018 (PHE)

AHP Digital Practice 2018 (NHS Digital)



Nominations open until the 29th
March 2018
Awards ceremony 19th June 2018
Royal College of Physician,
London

www.england.nhs.uk 22



Priority Four AHPs can utilise information and technology

Developing a blueprint for the digitisation of AHP services. Moving from strategy to framework.

A blueprint for the digitisation of



AHP Services

Create a network of digitally mature AHP services which support high quality care with digital technology

A digitally literate and digitally empowered AHP workforce

> Demonstrate how to transform care with digital technology

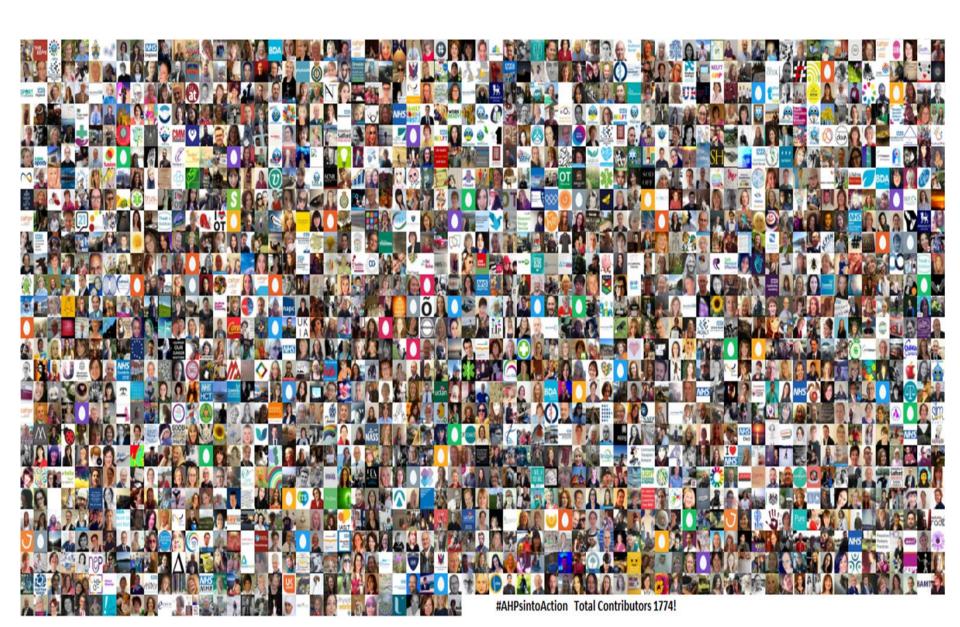
Shared learning between AHP services, greater collaboration across clinical specialties and increased awareness of wider digitisation and data agenda's

A set of best practice blueprints that can be adopted by other AHP services

Improved efficiency, productivity and quality through optimising working practices

#AHPsintoAction: A social movement





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How can AHPs into Action help you?

How are you engaging AHPs in local structures & decision making?

How are AHPs enabled to share innovation and best practice across organisations and localities?

How well do you understand local AHP workforce supply & retention? (challenges and solutions?



Thank you

"I honestly believe that if all AHPs in England were used effectively, it would signal the total transformation of health and social care which we desperately need. We save lives, we rebuild lives and we do it all at a fraction of the cost of other colleagues. We understand the medical but crucially, we understand the social determinants of health -education, poverty, housing, stigma".

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