

UK Allied Health Professions Public Health Strategic Framework

2019-2024



Collaborating Partners

This strategic framework is the first UK wide Allied Health Professions Public Health document, designed through collaboration with partners across England, Northern Ireland, Scotland and Wales. The strategic framework builds on previous strategic documents^{1,2} applicable to one or more nations to provide a united, collective approach to Public Health for the Allied Health Professions across all four nations.

This strategic framework was produced by:

Scottish Government

Public Health England

Allied Health Professions Federation

Welsh Government

Welsh Therapies Advisory Committee

Public Health Wales

Public Health Agency Northern Ireland

Department of Health Northern Ireland

Council for Allied Health Professions Research

Council of Deans of Health

Royal Society for Public Health

The Royal College of Speech and Language Therapists

The Institute of Osteopathy

Allied Health Professions Federation Scotland

College of Paramedics

Royal College of Occupational Therapists

The British Dietetic Association

The British Association of Art Therapists

British Association of Prosthetists and Orthotists

The College of Podiatry

British and Irish Orthoptic Society

The Society and College of Radiographers

British Association for Music Therapy

Chartered Society of Physiotherapy

The British Association of Dramatherapists

The Association for Perioperative Practice

AHPs4PH

AHP Directors Scotland Group

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Foreword

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Since the term ‘wider workforce for the public’s health’ was first defined in 2015 following the publication of the RSPH report, *Rethinking the public health workforce*³, no professional group has done more to embrace and action the term than Allied Health Professionals (AHPs). From the beginning, across the professions that make up the AHPs, there was real enthusiasm and an appetite to understand how prevention and health promotion could be integrated into their daily work. This engagement was evident from the findings of our subsequent report with PHE⁴, which looked at both the challenges and opportunities for AHPs to have a range of ‘healthy conversations’ with their patients and clients. AHPs have led the way in showing how a group of professionals with the ‘ability or opportunity to improve or protect the public’s health’ (the official definition of the wider workforce), through a trusting relationship with individuals, can extend their expertise and skills to develop a holistic approach to health and wellbeing.

AHPs were also the first group to consider their impact in public health and prevention so that they could build on their success and begin to measure the scale and scope of their role in improving health and wellbeing. They have been pioneers in using the *Everyday Interactions*⁵ tool and showing other professions not only in the health system but across broader professional groups, what it was possible to achieve.

It is therefore unsurprising to me that once again AHPs have shown foresight and leadership in producing this excellent UK wide public health strategic framework for the professions which highlights how AHPs can build on their public health role in the future. A key feature of this framework is that all four nations of the UK have worked together to produce and agree on their shared priorities; developing the workforce, demonstrating impact, increasing the profile of AHPs in public health and strategic leadership are the strands that will keep AHPs at the forefront of public health practice. The strength of this strategic framework is that it allows for flexibility based on each country’s stated goals but also enables AHPs across the UK to move forward as a unified professional entity.

It is also notable that this strategy is ambitious and focuses on the complexities of the social determinants of health and combating health inequalities. AHPs have not shied away from the difficult issues and this development of shared priorities is an exciting and progressive development. I look forward to the implementation and outcomes of this strategic framework and congratulate the leadership of the profession for their aspirations and clear purpose to improve the nation’s health and wellbeing.

Introduction

This UK strategic framework was produced jointly by the Allied Health Professions Federation (AHPF) and HSC Public Health Agency Northern Ireland, Public Health England, Scottish Government, Welsh Government and Welsh Therapies Advisory Committee. This strategic framework sets out our vision for the role of Allied Health Professionals (AHPs) in public health over the next five years, along with the goals we aim to achieve to realise the vision. It is intended to help AHPs, as well as their professional bodies and partner organisations, to further develop their role in public health, share best practice with colleagues and partners and ultimately embed preventative healthcare across all of their work. This is the first UK wide AHP public health strategy; it builds on and supersedes the previously published strategic documents for England¹ and Wales². Each nation and profession start from different positions and therefore we expect the focus for implementation will differ between each.

This strategic framework is written with input from the fifteen professions represented by one or more of the AHP Chief AHP Officers across the UK. The primary audiences are; AHPs working across health and care sectors, leaders in the organisations they work for, commissioners and educators of AHP services; however the strategic framework will be of interest and relevance to other health and care professions and may be adopted or adapted for use more widely. The strategic framework is written from the perspective of the collaborating partners, and where we have referenced “we”, this refers to the entirety of the collaborative partners.

Who Are The AHPs?

The AHPs work across all sectors related to health and wellbeing including but not limited to health, social care, education, justice, voluntary sector, housing, academia, business and private practice. They collectively make up the third largest workforce in the NHS. Chief AHP officers in each of the four nations are responsible for slightly different professions representing a total of fifteen professions. The fifteen professions included in this strategic framework are: art therapy, podiatry, clinical psychology, dietetics, drama therapy, music therapy, occupational therapy, operating department practice, orthoptics, osteopathy, paramedic practice, physiotherapy, prosthetics and orthotics, radiography (diagnostic and therapeutic) and speech and language therapy.



Strategic Context

The Allied Health Professions (AHPs) have been identified as trailblazers within the wider public health workforce agenda, demonstrating their public health contribution and profile. We have identified some excellent examples of AHP-led public health initiatives⁶ across the life course, from helping children to have the best start in life to falls prevention for older adults. We now need to progress to support and enable AHPs to improve population health and reduce inequalities and ensure that public health becomes our core way of working over the next 5 years.

Each nation of the UK has highlighted the importance of public health and prevention. All nations have a number of similar priorities; health and wellbeing in early years, supporting healthy lifestyles and self-management and parity of esteem between physical and mental health.

Below we outline the specific strategic drivers in each nation:

England

The NHS Long Term Plan⁷, published in January 2019, has given a renewed call for action across the NHS to strengthen its contribution to prevention and reducing health inequalities. This sits in a context of a system-wide vision for prevention, recognising the important role of individuals, business, communities and national government. AHPs have already been identified as professions with the skills, enthusiasm and opportunity to improve the public's health, most notably as part of the All Our Health call to action⁸ and Rethinking the Wider Public Health Workforce publications^{9,10}. AHPs themselves through the AHPs into Action Strategy¹¹ highlighted improving health and wellbeing of individuals and communities as one of the four major transformational impacts they can make. Over the past five years there has been an increased contribution to public health and prevention by AHPs in England, the next five years will build on this momentum to deepen and spread the public health role of all AHPs.

Northern Ireland

*Making Life Better 2013–2023*¹² is the ten year public health strategic framework. The framework provides direction for policies and actions to improve the health and wellbeing of people in Northern Ireland. It builds on the *Investing for Health*¹³ strategy (2002–2012) and retains a focus on the broad range of social, economic and environmental factors which influence health and wellbeing. It brings together actions at government level and provides direction for implementation at regional and local level.

*The Making Life Better (MLB)*¹² framework seeks to create the conditions for individuals and communities to take control of their own lives and move towards a vision of Northern Ireland where all people are enabled and supported in achieving their full health and wellbeing potential and to reduce inequalities in health. AHPs in Northern Ireland play an essential part in delivering the outcomes set out in MLB.

Scotland

In June 2018, the Scottish Government and COSLA agreed and published Scotland's Public Health Priorities¹⁴, following extensive engagement with a range of partners and stakeholders from across the whole system of public health, including wider public and third sectors. Setting jointly owned and agreed Public Health Priorities delivers the first of our key public health reform commitments. The aim of the reform is to improve the public's health through a whole system approach, focused on prevention and early intervention, and creating the conditions for wellbeing in our communities. A new national body, Public Health Scotland, will be established in 2019/20. It will have a key role to support and enable action to monitor progress on the Public Health Priorities at the population level, and within an approach of whole system working.

AHPs will continue to demonstrate leadership and impact with renewed effort to reduce health inequalities enable and empower people and communities to take positive action for health and wellbeing.

In December 2016 the national AHP Active and Independent Living Programme (AILP)¹⁵ was identified as one of the Scottish Government deliverables on public health in the National Health and Social Care Delivery Plan. AILP was subsequently launched in April 2017 with its vision 'to support the people of Scotland to live active, independent healthy lives by supporting them with their personal outcomes'.

Wales

Improving health is one of three key wellbeing objectives for the Welsh Government and prioritises a strong public health approach as key to a healthy society, through the delivery of quality health and social care services; promoting good health and wellbeing and building healthier communities and better environments.

A Healthier Wales¹⁶ (2018), the plan for health and social care mirrors this with a clear vision that everyone in Wales should have longer, healthier, and happier lives, and should be able to remain active and independent in their own homes, for as long as possible.

Population health and care will transform into a 'wellness' system which aims to support and anticipate health needs, to prevent illness and to reduce the impact of poor health. This whole system approach will aim to maximise value, be equitable and achieve more equal health outcomes for everyone by focusing on the needs of the population and the individual through person centred services.

The Allied Health Professions in Wales have begun their transformation journey to maximise their impact on preventing ill health and maximising health and social care outcomes. There are unique opportunities to integrate the national public health priorities into AHP leadership, service redesign and workforce development.

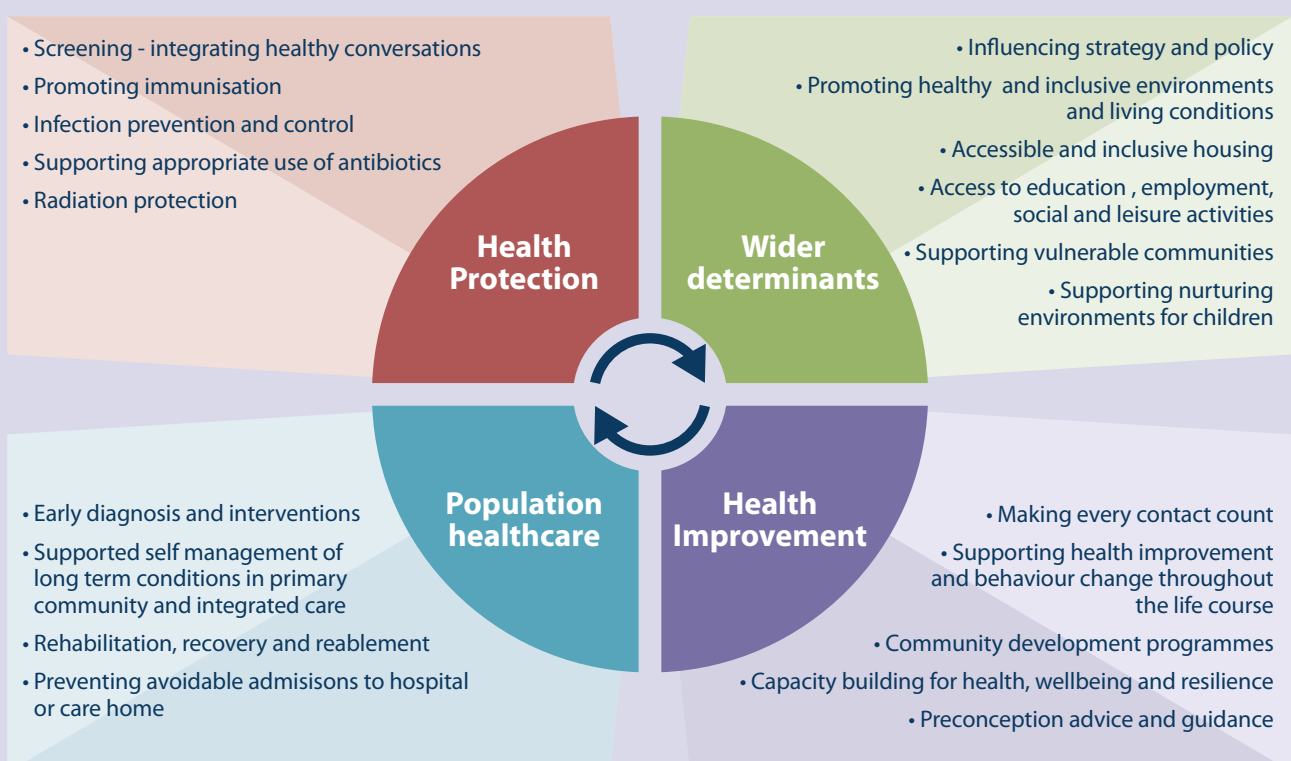
Model of Public Health for AHPs

The Faculty of Public Health define public health as the science and art of promoting and protecting health and wellbeing, preventing ill-health and prolonging life through the organised efforts of society.

AHPs contribute to public health through interventions affecting the physical, mental and social wellbeing of individuals, communities and populations.

There are a number of definitions of public health; we have used these to develop a model relevant to the roles of AHPs. This model gives examples of how AHPs may contribute to public health across four areas; this is will vary by profession and is not intended to be exhaustive.

- **Wider determinants** – also known as social determinants, are a diverse range of social, economic and environmental factors which impact on people’s health and wellbeing. Addressing the wider determinants of health and wellbeing has a key role to play in reducing health inequalities.
- **Health Improvement** - describes the work to improve the health and mental wellbeing of individuals, communities or populations through enabling and encouraging healthy lifestyle choices and developing resilience.
- **Population healthcare** – aims to maximise value, equity and good outcomes by focusing on the needs of the population and delivering person centred services across the entire health and care system.
- **Health Protection** – aims to protect the population’s health from communicable diseases and other threats, while reducing health inequalities



Our Strategic Approach

The four nations and all AHP professional bodies have supported the development of this strategic framework and will be working independently and collectively to implement its vision and goals, by:

- Focussing on all aspects of healthcare including physical and mental health.
- Working collaboratively with other innovators, professions and organisations to apply a systems leadership approach¹.
- Integrating public health priorities into other professional priorities such as leadership, service redesign and workforce development.
- Promoting the AHP contribution to public health in alignment with the current national strategic approaches and agendas in each of the four nations, as well as addressing the local context within which AHPs work.
- Identifying the areas where AHPs can make the greatest impact, recognising that this will vary for different professions. This will require a shift to a more upstream² and population approach based on need as oppose demand.
- Using our expertise and leadership to shape and support services, recognising that AHP skills can be utilised to provide quality assurance, leadership and oversight as well as direct delivery of services.
- Building on the work of AHPs across diverse populations and within vulnerable communities to ensure our actions contribute to reducing health inequalities.
- Adopting assets based personal outcomes principles within a community development approach by listening and responding to the needs of the communities we serve.
- Embedding a preventative and population health approach, which is informed by evidence of need into everything we do.
- Recognising that each profession is different, and therefore contribution and impact will vary depending on the area of public health. As a result, a broad strategy will apply to the range of professions rather than specific examples.
- Learning from good practice by AHPs and others, across the UK and internationally to evolve our practice to respond to changing needs and contexts.

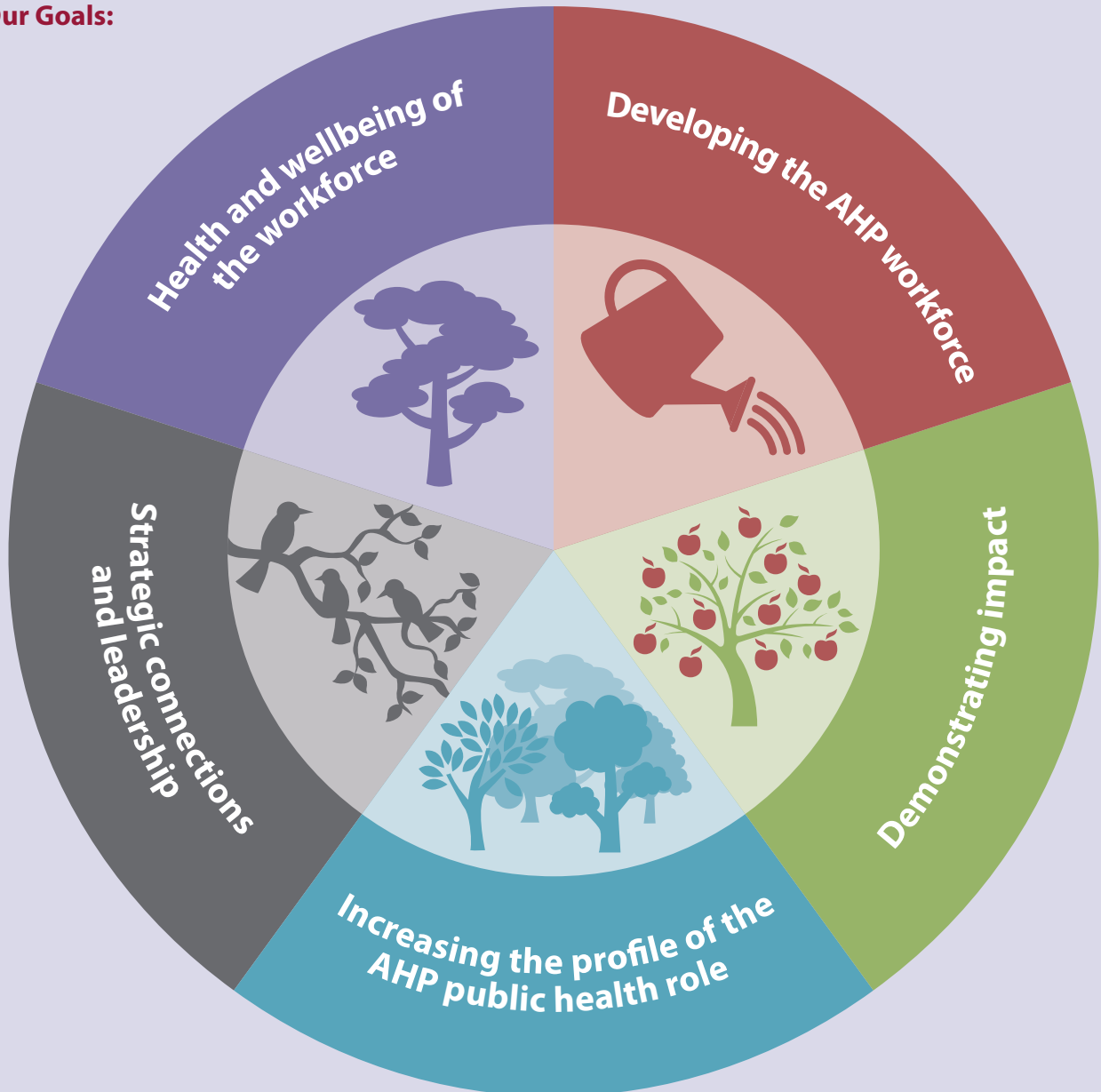
¹A system leader works with the leaders of other teams and organisations to create mutually beneficial change.

²Upstream refers to a preventative approach of intervening earlier to prevent future ill health and minimise long term demand for services

The AHP Public Health Vision

Our vision is that AHPs will improve population health, public health will be a core element of all AHP roles and the impact of AHPs on the population's health and reducing health inequalities will be increasingly recognised.

Our Goals:



Our Goals



1. **Developing the AHP workforce:** The AHP workforce will have the skills, knowledge and behaviours to promote, improve and protect the health and wellbeing of individuals, communities and populations.



2. **Demonstrating impact:** AHPs will be able to demonstrate their contribution to improved population level health outcomes through robust evaluation and research.



3. **Increasing the profile of the AHP public health role:** AHPs will be recognised as valuable public health experts through ongoing profile raising of the AHP contribution to public health.



4. **Strategic connections and leadership:** Effective relationships will exist between AHPs and system leaders at local and national levels to make best use of AHPs to improve public health and reduce health inequalities.



5. **Health and wellbeing of the workforce:** The expertise of AHPs will be used to protect and improve the health and wellbeing of the health and care workforce.



Achieving Our Goals

The four nations and all AHP professional bodies have agreed the following priority actions to achieve our goals. We will work independently and collectively to develop detailed implement plans for 2019 - 2024:

Goal 1 - Education and developing the AHP workforce

The AHP workforce will have the skills, knowledge and attributes to promote, improve and protect the health and wellbeing of individuals, communities and populations.



We will:

- Work with educational institutions, regulators, employers and professional bodies to ensure public health, prevention and reducing health inequalities are further integrated into AHP pre and post registration education, including practice based education.
- Support AHPs to champion and take ownership of new public health solutions through innovation, research and entrepreneurship, and disseminate and communicate that value widely.
- Advocate for public health competencies as a core part of all AHP job roles.
- Ensure AHPs have opportunities to develop the skills required for advanced public health roles.



Goal 2 - Demonstrating impact

AHPs will be able to demonstrate their contribution to improved population level health outcomes through robust evaluation research.



We will:

- Support increased use of tools to measure and report the impact of AHP interventions on population health and health inequalities.
- Support return on investment analysis of effective interventions backed by good evidence to demonstrate the value of AHP public health interventions.
- Advocate for public health research within the AHP research community and signpost AHPs to relevant funding opportunities to stimulate new contributions to the public health evidence base.
- Create and promote evidence to support the scaling up of effective AHP-led public health interventions and to support the shift of AHP practice to earlier and preventative interventions.
- Provide a repository of public health resources to support AHPs.

Goal 3 - Increasing the profile of the AHP public health role

AHPs will be recognised as valuable public health experts through ongoing profile-raising of AHP contribution to public health.



We will:

- Develop strong and regular messaging to AHPs and external partners about progress across all four nations.
- Promote the work of AHPs in public health through local and national conferences and in publications, planning and policy documents.
- Sponsor and promote awards to recognise how AHPs are working in partnership with others to improve the health of the public.
- Capture, disseminate and support the spread of high quality, evidence based case studies of AHP initiatives that contribute to public health and tackle health inequalities.

Goal 4 - Strategic connections and leadership

Effective relationships will exist between AHPs and system leaders to make best use of AHPs to improve public health and reduce health inequalities.



We will:

- Support AHPs to develop the leadership skills to articulate their contribution and influence the public health, preventative and early intervention agenda.
- Support AHPs to develop stronger relationships with system leaders and facilitate mechanisms to enable access to relevant AHP expertise in public and population health.
- Promote integration of AHPs across the health and social care system to increase co-production with people, partners and communities; supporting place based public health.

Goal 5 - Health and wellbeing of the workforce

The expertise of AHPs will be used to protect and improve the health and well-being of the health and care workforce.



We will:

- Ensure that the AHP workforce is encouraged and supported to protect and improve their own health and wellbeing and that of their colleagues.
- Champion AHPs as leaders in the development of initiatives that promote workplace wellbeing.
- Promote the contribution of AHPs as core members of health and wellbeing/work based services to promote health and wellbeing of employees in their workplace.

Next Steps

The collaborating partners (including professional bodies) of this document will provide strategic leadership to oversee the implementation of this strategic framework and, where appropriate, integrate actions with the work of other partner organisations. We will develop nation specific and collaborative implementation plans to embed this strategic framework across all nations and professions. Implementation plans should clearly identify how success will be measured in relation to each goal.

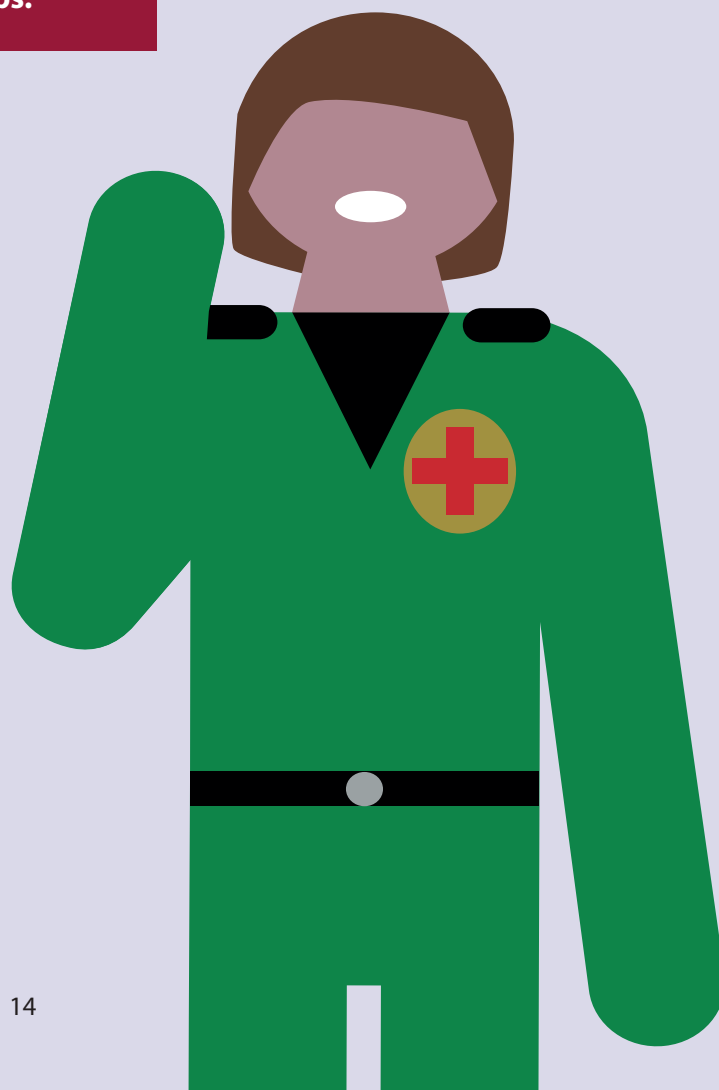
The collaborating partners commit to:

- Pledge to working together and share learning wherever and whenever it makes sense to do so, including an ongoing relationship across the four nations.
- Developing nation specific implementation plans including methods to measure success.
- Providing strategic leadership to oversee implementation of the strategic framework across professional bodies.
- Developing a suite of public health resources for AHPs.

We call on AHPs to continue to embed public health within their roles, services and partnerships.

To cite this document:

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