



A strategy to develop the capacity, impact and profile of allied health professionals in public health 2015-2018

Strategy from the Allied Health Professionals Federation supported by Public Health England



Introduction

This joint strategy was produced by the Allied Health Professions Federation (AHPF) with the support of Public Health England (PHE). It sets out our vision for the role of allied health professionals (AHPs) in public health. It details how we intend to implement that strategy, the goals we have set out to achieve and how we will measure our success.

It is intended to help AHPs, as well as their professional bodies and partner organisations, to further develop their leadership in public health, share best practice with colleagues and partners and ultimately embed preventative healthcare across all their work.

Strategic context

In April 2014, the allied health professions (AHPs) agreed a collective ambition to be recognised as an integral part of the public health workforce. Since then we have developed our public health contribution and profile and have seen some excellent examples of AHP-led public health initiatives across the life course, from falls prevention for older adults to helping children to have the best start in life. We now need to maintain this momentum and spread good practice throughout our professions so that our approach to public health becomes our core way of working for the future.

Recent policy documents such as the NHS England Five-Year Forward View and Public Health England's (PHE) Evidence into Action highlight the national imperative to focus on a preventative approach to achieve improved population health and well-being, as well as minimise long term demand for services and ensure health and social care costs remain affordable. They also demonstrate the vital role that prevention has to play in tackling widening health inequalities.

Reports by the Centre for Workforce Intelligence and Royal Society for Public Health have highlighted that AHPs have the enthusiasm, expertise and opportunity to make a significant difference to health and wellbeing over the next few years. AHPs are proud to be early adopters of the preventative approach and have an opportunity to work with other early adopter colleagues such as fire and rescue services, community pharmacy teams, midwives and the housing sector to further develop our contribution by addressing public health issues across the system.

This strategy has been developed jointly by the AHP Federation, the representative group of the 12 AHP professional bodies and PHE. There has been wide engagement with the 12 professional bodies and wider partner organisations and stakeholders as part of this work.

Who are the AHPs?

The AHPs include 12 professions regulated by the Health and Care Professions Council (HCPC), which collectively make up the third largest workforce in the NHS. They work across a range of sectors including health, social care, education, academia, voluntary and private sectors across the life course. The 12 professions include physiotherapists, occupational therapists, podiatrists, dietitians, speech and language therapists, paramedics, radiographers, orthoptists, prosthetists and orthotists, art therapists, music therapists and dramatherapists.

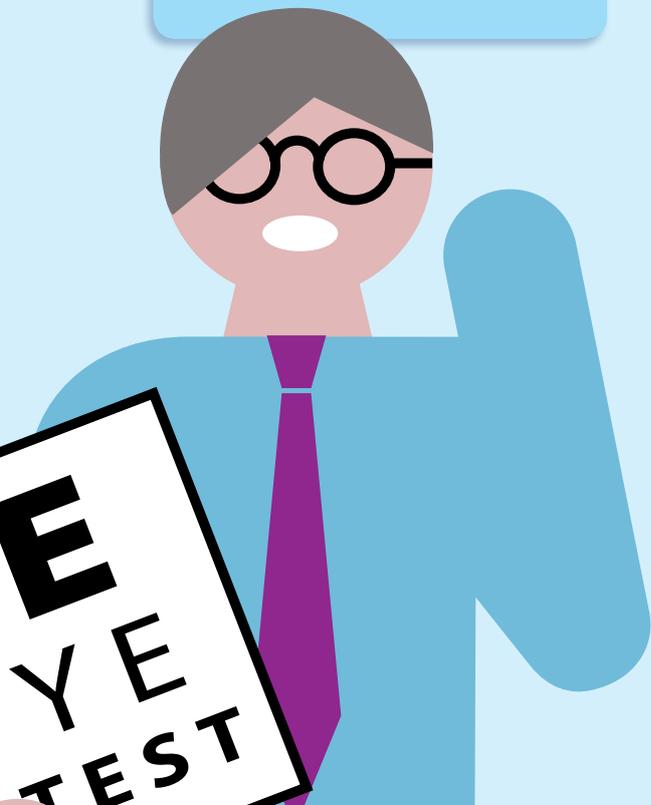
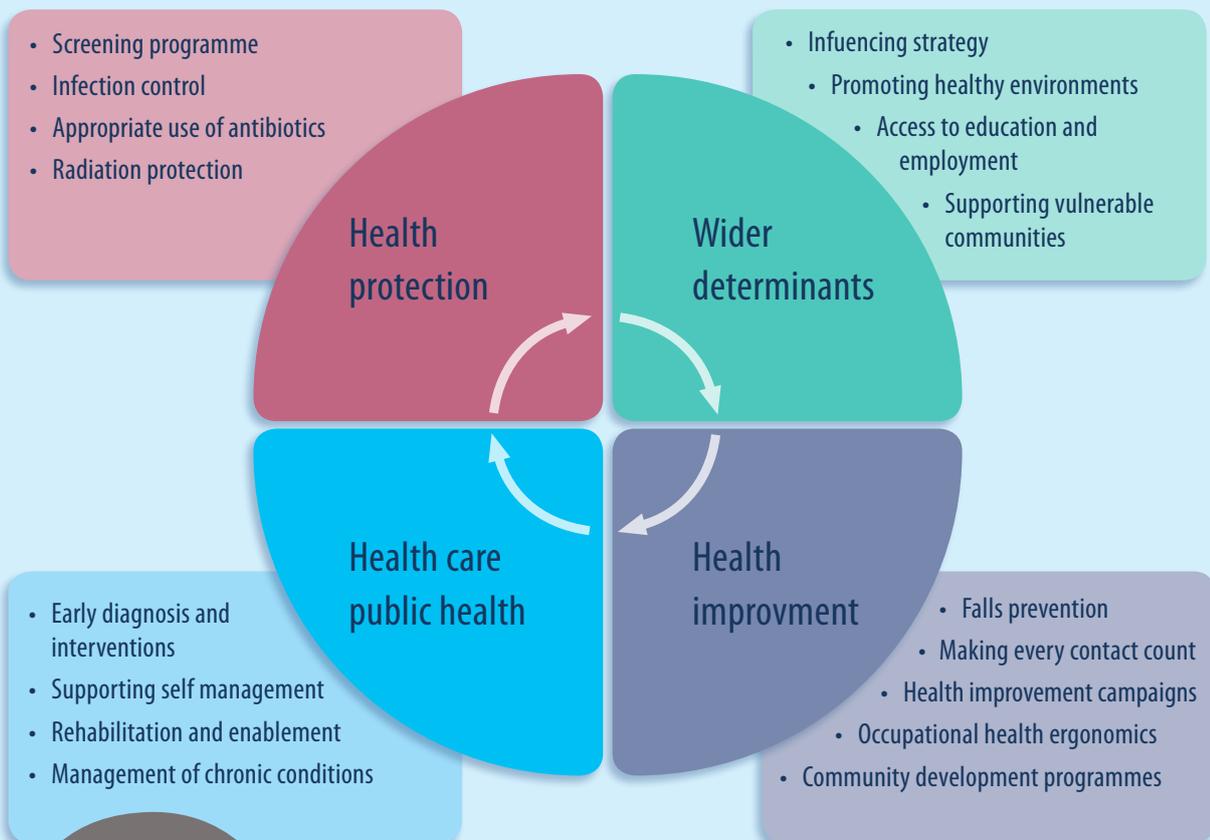


Definition of public health for AHPs

Public health is the science and art of promoting and protecting health and well-being, preventing ill-health and prolonging life through the organised efforts of society¹. AHPs contribute to this through their work on physical, mental and social health with individuals, communities and populations across the 4 domains of public health (Figure 1). Our actions contribute to primary, secondary and tertiary prevention.

Figure 1 **AHP contributions across the 4 domains of public health**

Note: this figure is intended to provide examples of some of the ways AHPs can contribute to public health across the 4 domains rather than an exhaustive list of examples



1. Faculty of public health

The AHP public health vision

Our vision is for AHPs to be recognised as an integral part of the public health workforce, with responsibility for designing and delivering improvements to health and well-being and reducing health inequalities.

Our goals

1. The future AHP workforce will be fully equipped with the skills, knowledge and attributes to promote the health and wellbeing of individuals, communities and populations.
2. AHPs will be able to demonstrate their impact on population level outcomes through robust evaluation and research methods.
3. AHPs will be a go-to public health provider of choice.
4. The excellent relationships that exist between AHPs and strategic public health leaders at local, regional, national and international levels will be fully utilised.
5. Effective leadership at every level will support AHPs to be an integral part of the public health workforce.

Our strategic approach

The 12 AHP professional bodies have supported the development of this strategy and will be working independently and collectively to implement its vision and goals, taking the following approach:

- AHPs will work collaboratively with other early adopters, professions and organisations to apply a systems leadership approach.
- Public health priorities will be integrated into other professional priorities such as leadership, service redesign and workforce development.
- Our approach to promoting the AHP contribution to public health will align to the current national strategic approach and agendas, as well as addressing the local context within which AHPs work.
- We will identify the areas where AHPs can make the greatest impact, recognising that this will vary for different professions. This may require a shift to a more upstream approach².
- We will use our expertise and leadership to shape and support services, recognising that AHP skills may be utilised to provide quality assurance, leadership and oversight as well as direct delivery of services.
- We will build on the work of AHPs across diverse populations and within vulnerable communities to ensure our actions contribute to reducing health inequalities.
- We will strive to use the principles of an assets-based community development approach by listening and responding to the needs of the communities we serve and using a person / community-centred approach in our interventions.
- We will embed a preventative attitude and approach into everything we do.
- We recognise 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.
- We will learn from good practice by AHPs and others at home and internationally to evolve our practice to respond to changing needs and contexts.

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



Achieving our goals: our commitments

Goal 1 The future AHP workforce will be fully equipped with the skills, knowledge and attributes to promote the health and wellbeing of individuals, communities and populations.

We³ will:

- Work with educational institutions to ensure public health, prevention and reducing health inequalities are further integrated into AHP pre and post registration education, including practice placements.
- Develop opportunities for AHPs to continue their professional development in public health and ensure these opportunities are well promoted and accessible. This may include the development of new courses, secondment opportunities and increased public health content at conferences.
- Promote recognition of public health expertise within the allied health professions and support the development of career pathways in public health for AHPs.
- Support AHPs to champion and take ownership of new public health solutions through innovation, research and entrepreneurship, and promote examples of AHPs who are doing so.
- Ensure that this strategy and its relevance to their day to day work are adequately communicated to AHPs.

Goal 2 AHPs will be able to demonstrate their impact on population level outcomes through robust evaluation and research methods.

We will:

- Develop tools to measure the impact of AHP interventions on population health and health inequalities.
- Commission return on investment analysis of effective interventions backed by good evidence to demonstrate the value of AHP public health interventions.
- Raise awareness of the need 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 upstream.
- Disseminate examples of good practice, innovation and research in public health by AHPs via professional conferences, publication in peer reviewed journals and the Council for Allied Health Professions Research, for example.

Goal 3 AHPs will be a go-to public health provider of choice.

We will:

- Develop strong and regular messaging to AHPs and external partners about our progress, including updates and achievements.
- Promote the work of AHPs in public health at local, national and international conferences and in publications and policy documents to encourage critical debate and information sharing.
- Sponsor and promote awards to recognise the public health contribution of AHPs.
- Capture and disseminate good quality case studies of AHP initiatives that contribute to public health and tackle health inequalities.



Goal 4 The excellent relationships that exist between AHPs and strategic public health leaders at local, regional, national and international levels will be fully utilised.

We will:

- Lobby for an increased number of AHPs on relevant local, national and international strategic groups, providing opportunities to increase the influence of AHPs in public health policy, strategies and services.
- Support AHP leaders to develop stronger relationships with public health leaders at a local level.
- Support the establishment of local AHP advisory networks for public health.
- Support the positioning and championing of AHPs as leaders in the development of workplace well-being.

Goal 5 Effective leadership at every level will support AHPs to be an integral part of the public health workforce.

We will:

- Empower AHPs to influence the future development of the services in which they work to offer an added value contribution to public health and reducing health inequalities.
- Develop an AHP public health community of practice to support learning, relationship building, collaboration, problem solving and sharing.
- Equip AHPs to provide leadership to influence public health strategy and delivery.

Implementation: what can you do?

The AHP Federation and PHE will provide strategic leadership to oversee the implementation of this strategy and, where appropriate, integrate actions with the work of other partner organisations. The 12 AHP professional bodies will develop implementation plans to embed this strategy within their own profession.

We encourage individual AHPs to develop the public health component of their role and share this with colleagues and partners.

We call on partner organisations that have supported the public health journey of AHPs so far to continue to support AHPs to embed prevention within their practice and research.



Measuring success

Goal	What does success look like?	How can we measure it?	What is the target?
1. The future AHP workforce will be fully equipped with the skills, knowledge and attributes needed to promote the health and wellbeing of individuals, communities and populations.	An increased proportion of AHP undergraduate courses are excelling in public health education.	Survey AHP undergraduate programme course directors	The number of courses confident that they have a strong public health component to increase from 28% to 50% by end of 2017.
2. AHPs will be able to demonstrate their impact on population level outcomes through robust evaluation and research methods.	There is a growing evidence base to demonstrate the impact of AHPs on public health	Conduct a literature review	Published evidence of AHP impact on a minimum of 2 additional public health priorities (compared to the baseline evidence mapping report 2015)
3. AHPs will be a go-to public health provider of choice.	AHPs are able to show how they add value to public health.	Collate and publish robust case studies and return on investment figures	A minimum of 50 case studies by March 2017
4. The excellent relationships that exist between AHPs and strategic public health leaders at local, regional, national and international levels will be fully utilised.	There is evidence that AHPs are engaged strategically in shaping the public health agenda at local and national level.	Collect and publish examples of involvement and impact	A minimum of 10 case studies by March 2017
5. Effective leadership at every level will support AHPs to be an integral part of the public health workforce.	AHPs believe that public health is part of their role and can describe how they contribute to it.	Collect survey data at conferences and via online channels	50% of AHPs agree that public health is part of their role by 2017

Acknowledgements

AHPF and PHE would like to thank the following organisations for their support in the development of this strategy.



Please direct comments or questions about this strategy to Linda Hindle, Lead, Allied Health Professional, Public Health England

