

## **AHPF strategy for 2013-14**

### **Operational plan**

30<sup>th</sup> May 2013

### **Outcomes**

The AHPF would like to see:

**AHPs** as strong clinical leaders

**AHPs** in positions of power

For these outcomes to happen AHPs need to have the confidence and desire to act as strong clinical leaders and secondly they need to have a health and care environment that expects and welcomes AHPs as decision making leaders.

Supporting these outcomes there needs to be a shared approach that incorporates uniprofessional activity from the Professional Bodies together with a shared message from and on behalf of the AHPF.

This document also recognises the changes in the health and care environment that effectively splits the policy decisions led by the ministerial team and the Department of Health from the delivery of health and care led by NHS England, commissioned locally and delivered by the service provider organisations.

A key role for the AHPF is to help prepare the health and care environment, making it more receptive to AHP clinical leadership opportunities.

## **AHPF activity to support the outcomes**

### **1. Supporting and providing leadership to AHPs**

#### **a. Provide leadership to AHPs**

##### *i. Provide a speaker or discussion panel member to 4 primarily AHP conferences*

- 1. Identify specific conferences (PH by end June 2013, Board agreement July 2013)*
- 2. Arrange speaking opportunities (PH by end July 2013)*
- 3. Identify most appropriate AHPF/Professional Body speaker (PH by end July 2013)*
- 4. Write presentations and supporting materials (PH one week in advance of identified opportunity)*
- 5. Deliver presentation or discussion (whoever identified)*

##### *ii. Provide a speaker or discussion panel member to 2 primarily non-AHP conferences*

- 1. Identify specific conferences (PH by end June 2013, Board agreement July 2013)*
- 2. Arrange speaking opportunities (PH by end July 2013)*
- 3. Identify most appropriate AHPF/Professional Body speaker (PH by end July 2013)*
- 4. Write presentations and supporting materials (PH one week in advance of identified opportunity)*
- 5. Deliver presentation or discussion (whoever identified)*

#### **b. Support local AHP networks**

- i. Create a standard 'network guidelines' package (by end June)*
- ii. Identify and hold appropriate network support information (ongoing)*
- iii. Support requests on an ad-hoc reactive basis (VK as required)*

2. Influencing the ministerial team and the political agenda

a. Seek to influence Dan Poulter and the remainder of the ministerial team using a topic based approach

*i. Prepare and deliver 4 office based meetings*

1. *Identify and agree dates with Dan Poulter team (PH end April 13)*
2. *Identify topic areas (PH end April 13, Board agreement May 13)*
3. *Identify lead Professional Body (PH end April 13, Board agreement May 13)*
4. *Provide support to lead Professional Body as requested (PH)*
5. *Co-ordinate process including any required follow up (PH)*

*ii. Prepare and deliver 4 visit based meetings*

1. *Identify and agree dates with Dan Poulter team (lead CEO immediately following each office based meeting)*
2. *Provide support to lead professional body as requested (PH)*
3. *Co-ordinate process including any required follow up (lead CEO)*

b. Seek to influence the larger political agenda

*i. Attend and have input into at least one party conference*

1. *Identify 3 strategic partners with whom to input into fringe meeting discussions/round tables/etc (PH end June 13, Board agreement July 13)*
2. *Develop briefing materials (PH)*
3. *Attend and deliver agreed presentations/input (AG and LAB)*
4. *Coordinate bookings and required resources (PH)*

*ii. Seek to influence party manifestos*

1. *Develop a plan to influence the wording of party manifestoes (Derek Munn, RCSLT)*
2. *Implement the manifesto influencing plan (DM)*

### 3. Raising the profile of the AHP brand

#### a. Primary focus

1. *Create stakeholder mapping resource (PH end April, then monthly updates)*
2. *Develop draft influencing plan including specific activity, identified influencing leads and timelines (PH end April, Board agreement May 13)*
3. *Finalise influencing plan (PH end May, Board agreement – by email – end May 13)*
4. *Write position statements to provide the core messages for the influencing campaign (PH end June, Board agreement July 13)*
  - a. *Initial message to be developed around the AHP role in the care of the elderly*
  - b. *There will need to be a suite of messages, the order of development to be identified by the Board*
5. *Deliver influencing plan (as identified within the plan)*
6. *Coordinate and report on influencing plan progress (PH monthly)*

#### b. Secondary focus on other key bodies

##### *i. Maintain involvement with a view to influence specific networks and key groups*

1. *NAHPIST (LAB)*
2. *Integrated Clinical Commissioning Community (PH)*
3. *HCIC (LAB)*
4. *PRSB (LAB)*
5. *PAB (LAB)*
6. *Inclusion Health Board (PH)*

##### *ii. Develop the relationship with potential strategic partners*

1. *RCGP (AG)*
2. *AoMRC*
3. *RCN*

#### **Maintenance activity**

- *Support 6 Board meetings*
- *Provide financial reporting and overview (AB)*
- *Maintain the website*
- *Provide overarching support to Fitness for Work Reporting project*
- *Maintain overview of AHPF Scotland and AHPFNI*