

# Allied Health Professionals Plan

2018 - 2021



**ALLIED HEALTH PROFESSIONS PLAN  
2018 – 2021**

# Contents

<b>Foreword</b>	<b>3</b>
<b>Introduction</b>	<b>4</b>
Our ambition	4
AHPs into Action	4
Our AHP plan	4
<b>Who we are</b>	<b>6</b>
<b>The AHP workforce</b>	<b>6</b>
<b>Our AHP career pathway</b>	<b>8</b>
<b>Well-led Commitments</b>	<b>9</b>
Commitment one: Vision and strategy	9
Commitment two: Governance and leadership	9
Implementation plan and key milestones	10
AHP governance structures	11
<b>Safety Commitments</b>	<b>11</b>
Commitment one: Supervision	11
Commitment two: Risk assessment, mitigation and safety planning	12
Implementation plan and key milestones	13
<b>Effective Commitments</b>	<b>14</b>
Commitment one: Increasing and sharing the evidence base	14
Commitment two: Workforce Development	14
Commitment three: Use of technology	15
Commitment four: Outcome measures	16
Commitment five: Safe and effective through a culture of learning	17
Implementation plan and key milestones	17
<b>Caring Commitments</b>	<b>19</b>
Commitment one: co-production with service users	19
Commitment two: The 6C's	19
Implementation plan and key milestones	20
<b>Responsive Commitments</b>	<b>21</b>
Commitment one: Access to services	21
Commitment two: Diversity and equality	22
Commitment three: Public involvement and feedback	22
Commitment four: Physical health improvement	23
Implementation plan and key milestones	24
<b>Appendices</b>	<b>25</b>
Year one action plan	26
References and acknowledgements	26

## Foreword

It is an honour to be asked to write the foreword for our own Allied Health Professional plan for Leeds and York Partnership NHS Foundation Trust.

Since joining the organisation I have been hugely impressed by the ambition, passion and commitment of all the Allied Health Professionals I have met across the Trust. The extent to which you are already embracing new ways of working and adapting your roles to meet the needs of service users is impressive.



Many of you have also sought me out for one-to-one discussions about your vision for the future for allied health professionals (AHP).

Our AHP plan has the full support of the organisation. We must support and invest in our AHP clinical and professional leadership who can then support and develop the workforce, embrace new roles and opportunities, and maximise the impact for service users, staff and our communities.

This plan is the first step in what I hope develops into an ambitious and challenging set of goals both for workforce development and evidencing the impact AHPs have.

**Dr Sara Munro**  
**Chief Executive Officer**

## Introduction

### Our ambition

We support our service users and carers, our staff and the communities we serve to live healthy and fulfilling lives. We want to achieve our personal and professional goals to live our lives free from stigma and discrimination, and to improve the lives of people with a learning disability or mental health issues.

AHPs are in an ideal position to support the delivery of this vision and ambition. The underpinning values of AHPs are to support individuals who experience challenges in their health to have fulfilling lives. They work across organisations with service users, carers and staff and are key professionals in transforming healthcare and need to be used effectively in order to maximise their potential.

### AHPs into Action

The national AHP strategy 'AHPs into Action' has been developed and identifies four impacts for AHPs to deliver.

- **Impact one** - AHPs will improve the health and wellbeing of individuals and populations.
- **Impact two** - AHPs will support and provide solutions to general practice and urgent and emergency services to address demand
- **Impact three** - AHPs will support integration, addressing historical service boundaries to reduce duplication and fragmentation.
- **Impact four** - AHPs will deliver evidence-based and informed practice to address unexplained variances in service quality and efficiency.

### Our AHP plan

The Trust's AHP plan has been developed in partnership with AHPs across the organisation. They were asked about their priorities, skills and contributions under the five CQC key headings: well-led, quality and safety, effective, caring and responsive.

Under these headings this plan captures AHP priorities, which are in alignment with the Trust strategy and the national strategy. It identifies commitments on delivery of services and implementation plans for the next three years. Each then has an implementation plan and key milestones which details how our AHPs will take action. These are broken down into short-term goals to be achieved year-on-year.

The shared principles of practice for AHPs are ideally placed to support a more innovative and responsive service, that is founded in co-production and service user led care.

The key themes for the plan are represented in the diagram on the next page.



Our commitment to leadership, innovation and best practice will help provide solutions to address demand.

Through the well-led and caring commitments of co-production, respect and use of outcome measures, we will show commitment to the individual and aim to improve the health and wellbeing of our service users.

Our commitments to increase and share the evidence base, develop our workforce and use technology will deliver on evidence-based practice and reduce variation.

We will address historical boundaries through responsive mental health and learning disability services, enabling access to services.

To achieve the Trust's vision and to maximise the valuable input AHPs can make, commitment will be needed at all levels in the organisation and from everyone. This plan provides a commitment not just for AHPs, but for their managers, leaders and for the whole organisation.

I am proud to call myself an AHP and I am committed to lead this plan so that AHPs have the impact they are capable of.

**Marie-Clare Trevett**  
**Strategic AHP lead**



## Who we are



### From left to right:

**AHP lead/Lead Clinician learning disabilities** Lyndsey Charles

**Strategic AHP lead** Marie-Clare Trevett

**AHP lead Specialist and learning disabilities services** Jennifer McIntosh

**AHP lead Leeds Care group and Healthy Living Service Manager** Claire Paul

## The AHP workforce

There are more than 150 registered AHPs working within the organisation. They work in a range of profession-specific roles, enhanced skill shared roles, leadership and management positions. They are a vital part of the workforce bringing a wide variety of evidence-based skills and improving the lives of service users and carers. They are supported by a wide variety of support staff and associate workers. They include the following professions and support staff:

**Art therapists** provide psychotherapeutic interventions which enable people to gain insight and promote the resolution of difficulties through the use of art materials.

**Associate workers** are clinical staff working in a health related clinical service that hold a qualification or equivalent experience in an appropriate field of practice.

**Dietitians** translate the science of nutrition into practical information about food. They work with people to promote nutritional wellbeing, prevent food-related problems and treat disease.

**Drama therapists** encourage people to experience their physicality, to develop an ability to express the whole range of their emotions, and to increase their insight and knowledge of themselves and others.

**Health support workers** provide care and support to service users in an environment to meet their needs, under the direction of the registered practitioner.

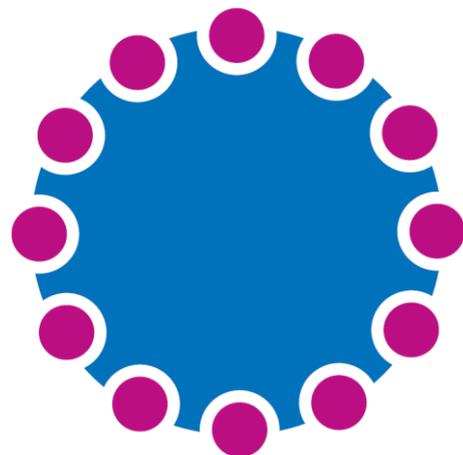
**Music therapists** facilitate interaction and development of insight into people's behaviour and emotional difficulties through music.

**Occupational therapists** assess, rehabilitate and treat people using purposeful activity and meaningful occupation to promote health and independent function.

**Physiotherapists** assess and treat people with physical problems caused by accident, ageing, disease or disability, using physical approaches to maximise the person's recovery and alleviate pain.

**Speech and language therapists** assess, diagnose and treat people with communication and swallowing difficulties.

We will build a clear career pathway with consistent AHP titles which supports the development and progression of AHPs within the organisation.



## Our AHP career pathway

At Leeds and York Partnership NHS Foundation Trust we support our AHPs to progress professionally, responding to the incredible talent in our workforce. For most of the roles below, the term AHP is not used but is replaced by the name of the specific profession.

### Entry requirements and development opportunities

### AHP roles

Completion of approved Aspiring Directors Programme	Director of Nursing and Professions
Continued Professional Development at Senior Level	Strategic AHP Lead
Post Graduate Qualification, PhD Structured Development Programme	AHP Consultant / Lead Clinician / Manager
Post Graduate Study	Inpatient or Community Manager / Professional AHP Lead
Continued Professional Development, Leadership Academy Advanced Practitioner Programme	AHP Manager / CTM / Lead AHP / Advanced AHP
Completion of Preceptorship and Edward Jenner Programme / training relevant to clinical area	Senior AHP
Completion of AHP Degree or Apprenticeship Pathway, Mandatory Practice hours and active HCPC Registration	Preceptee / AHP
GCSE in English and Maths (apprentice) A Levels in related subjects	AHP Student / Apprentice AHP
Completion of appropriate programme at Foundation Degree Level Care Certificate or Apprenticeship	Associate Practitioner
Entry Level Post	Support Worker
	Apprentice

## Well-led

### Commitment one: Vision and strategy

#### You will:

- Understand your role and responsibilities and how this fits with the Trust's vision and strategy as well as your team and service goals.
- Communicate clearly what your role and responsibilities are to your team, service and service user.

#### Your managers will:

- Be aware of the AHP plan and support you to implement it.

#### Your leaders will:

- Support the plan, recognising how AHPs can be at the heart of good-quality services while raising the AHP profile across all AHP professions.
- Establish and communicate the vision and strategy for the organisation, developing good quality services with AHPs at the centre.

### Commitment two: Governance and leadership

AHPs will be part of establishing and ensuring a clear and robust governance framework, ensuring that their authority and responsibilities are clear. They will take on leadership roles, implementing the AHPs into action priority;

#### **“AHP’s can lead change”.**

#### You will:

- Take an active role within the governance framework, including attending local clinical governance meetings, keeping up-to-date with evidence-based practice, clinical and professional supervision, observed practice, reporting incidents and learning lessons
- Take an active role in leading change and leading your profession.

#### Your managers will:

- Ensure and monitor continuous professional development as part of your role and make sure you are active members of local clinical governance and service developments.
- Will enable the AHP into action priority no. 1 ‘AHP’s can lead change’

#### Your leaders will:

- Give clear guidance to you in regard to the importance and meaning of the

governance framework within the organisation, empowering and supporting you to take an active role within this and your continuing professional development (CPD).

- Support and establish a clear and robust governance framework and leadership structure throughout the organisation which includes and involves AHPs at every level.
- Promote AHP's leadership skills and abilities.

## **Implementation plan and key milestones**

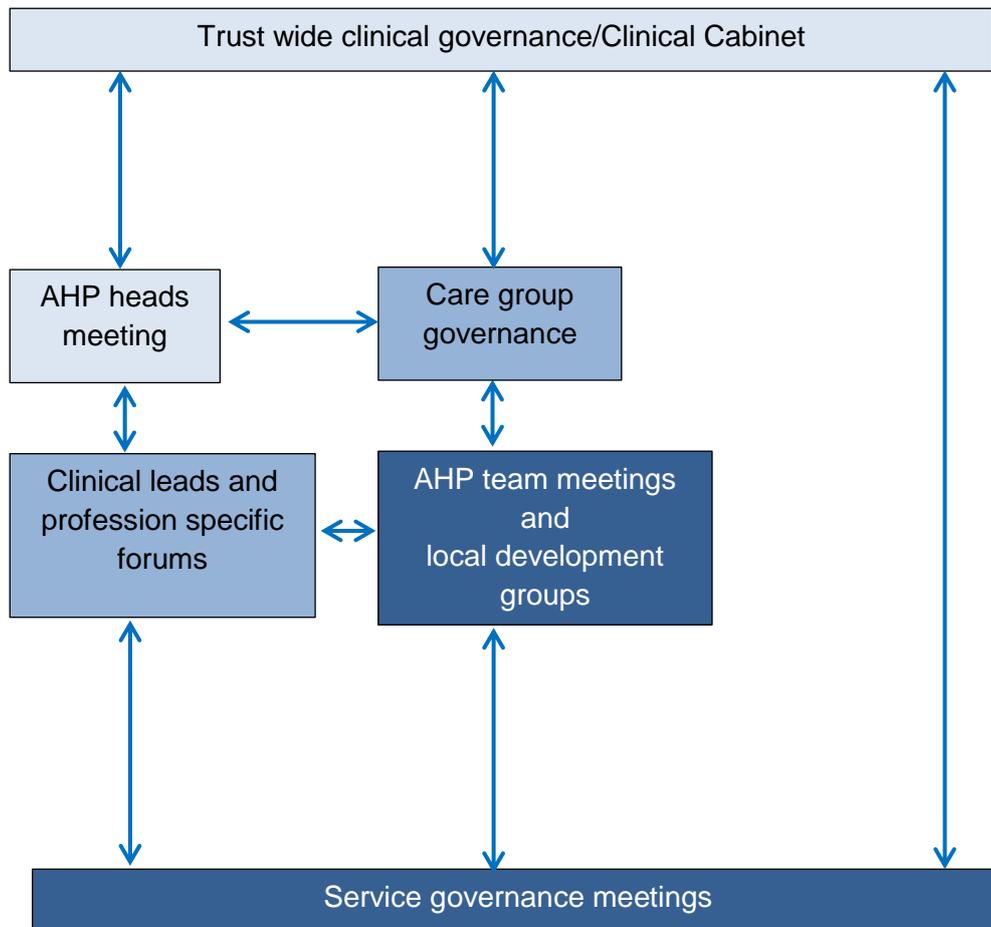
### **Year one**

- Establish clear governance structures for AHPs, linking AHP governance and development forums into service and care group governance structures. Each AHP and their manager can then identify how they input into the organisations governance structures.
- Establish an AHP Staffnet page with resource for AHPs and other staff to access best practice information. This will be governed through more robust AHP governance structures.
- Generic leadership positions will be open to AHP's.

### **Year two**

- There will be a clear leadership structure for AHPs and further development of leadership within the care groups so that each AHP and their manager, service user and carer can identify their profession specific lead.

## AHP governance structures



## Safety

### Commitment one: Supervision.

AHPs will give and receive supervision to ensure that service users and their carers receive high-quality care at all times from staff who are able to manage the personal and emotional impact of their practice. Reflecting in your practice AHP's into action commitment to care for those who care.

#### You will:

- Engage with and document your supervision, practice development, special interest groups and professional forum opportunities and activities. This should include observed practice, clinical and operational supervision, peer supervision, appraisal and reflective practice.

### **Your managers will:**

- Ensure there is sufficiently trained staff to deliver supervision and that supervision structures and networks are documented and clearly communicated.
- Allow access for staff to a range of supervision activities in line with Trust policy.
- Foster a culture of staff support, education and development through supporting access to supervision.
- Ensure the implementation of, and adherence to, the Trust supervision policy.

### **Your leaders will:**

- Foster an environment and culture of transparency, where you feel safe to disclose things that you do not know.
- Challenge those who do not release staff for supervision.
- Ensure that quality supervision is provided which sustains, supports and develops your skills, knowledge and confidence to deliver safe and effective services.
- Actively advocate and support you to access a range of supervision activities.
- Lead the development of supervision opportunities within services.

## **Commitment two: Risk assessment, mitigation and safety planning.**

AHPs will continue to deliver services that support and empower service users to make choices about how they manage their own risks. AHPs will use their unique skills and knowledge in regards to positive risk-taking, actively engaging and contributing to the development of MDT risk assessment, mitigation and safety plans.

### **You will:**

- Advocate that service users and others integral to their care are involved within the development of the service user risk assessment mitigation and safety plans.
- Conduct risk assessment in line with Trust risk training and policy.
- Ensure that the risk assessment, mitigation and safety planning is open and transparent and is carried out in partnership with the service user.
- Take responsibility to seek support and document clinical reasoning and clinical decision-making if unclear and unsure in regards to service user risk assessment
- Use your skills to reduce restrictive interventions.

### **Your managers will:**

- Ensure that your contributions to the development of service user risk assessment, mitigation and safety plans are recognised and part of MDT plans.

- Guarantee lessons learnt from incidents are shared and communicated to staff.
- Recognise the contribution you make in reducing restrictive interventions and integrate these into practice.

#### **Your leaders will:**

- Appropriately train you to carry out risk assessment and formulation and that you are competent to document your clinical reasoning and decision making.
- Ensure that appropriate risk assessment training is developed and delivered to clinical staff.

## **Implementation plan and key milestones**

### **Year one**

- Ensure clear cover arrangements for AHP's are in place in periods of leave and absence for high risk and priority work.
- Clear routes to access to speech and language therapy, physiotherapy and dietetics for every in-patient who requires it.
- Quality initiatives led by AHPs will look at improving safety including Safewards, falls work and safety huddles.
- Reduce numbers of restraint, seclusion, violence and aggression.
- Support the implementation of physical health interventions to prevent long term conditions and facilitating a holistic assessment of both physical and mental health needs.

### **Year two**

- Develop an MDT approach to the management of dysphagia, led by speech and language therapists.
- Access to a profession specific leader, who will support AHPs and their managers to identify appropriate clinical supervision and monitor its implementation.
- Establish talent management posts in a range of professions.
- Develop guidance on enteral feeding for carers following the new contract training agreements.
- Establish regional peer support network of arts therapists to support best practice.

### **Year three**

- Develop local evidence base for arts therapists, based on outcomes of interventions. This will prioritise and drive the development of arts therapies as an intervention for service users with severe and enduring mental illness or learning disability.

## Effective

### Commitment one: Increasing and sharing the evidence base

You can watch a video where four of our allied health professionals talk about the research they've carried out whilst working at Leeds and York Partnership NHS Foundation Trust (LYPFT) and the development opportunities in research that are available to all AHPs and other professionals within the Trust:

<https://www.leedsandyorkpft.nhs.uk/careers/allied-health-professionals/>

AHPs will be supported to share their skills, experience, ideas and innovations with a culture of partnership working integral to AHP service delivery. This will include developing the evidence base through involvement in research activities, ranging from participating in service development initiatives to leading on formal research projects. These will be supported by the development of positions including research roles, and improved links with universities. This will support the AHP's into action impact of delivering evidence based practice.

#### **You will:**

- Ensure your CPD and that of the colleagues you support will include research and development activities appropriate to your role.
- Use formal and informal methods to communicate and share your own skills, knowledge, expertise and experience.
- Engage with and develop internal and external networking opportunities.

#### **Your managers will:**

- Create opportunities and support staff to access, share, promote and communicate good practice across the trust.
- Will actively support you to engage in research and development opportunities appropriate to your role.
- Invest in development positions and support those wishing to engage in research and development or joint positions across educational environments.
- Develop research and development champions throughout the organisation.

#### **Your leaders will:**

- Promote opportunities for research developments as they arise.
- Encourage a culture of learning within the organisation which supports staff to engage and participate.
- Ensure parity for AHPs in regards to research and professional development.

### Commitment two: Workforce Development

AHP's into action recognises and AHP's skills can be developed further and so AHPs will be supported to continuously develop throughout their careers. This will include training and skill maintenance to develop leadership skills and enhance their roles. Through skill sharing and using their expertise when and where it matters most

to service users they will add value and minimise disruption in care. Examples of skill sharing include the development of non-medical prescribing, approved mental health practitioner, approved clinicians and associate and advanced practitioner roles. We will also support apprenticeship schemes to train AHPs of the future.

**You will:**

- Maintain professional registration by having an active role in CPD, developing new innovative ways of working to improve clinical practice.
- Continue to balance your profession specific roles with those of leadership and shared skills, in line with your professional scope of practice, ensuring that service users' needs are at the heart of the decision-making.

**Your managers will:**

- Respect the balance of profession specific and shared skills and work with your leaders to develop this understanding. They will support you to develop and progress into leadership and enhanced roles.
- Have an inclusive approach to the development of AHPs skills recognising your role in developing new and innovative ways of working.
- Remove barriers ensuring access to training, compliance with indemnity requirements and appropriate governance arrangements.
- Support the development of an apprenticeship route to train the AHPs of the future.

**Your leaders will:**

- Provide professional advice regarding the development of leadership and shared skills, supporting your development into these positions. This will include identifying appropriate training and maintenance of skills, advising on compliance with indemnity requirements and appropriate governance arrangements.
- Encourage a culture of continuous learning, improvement and innovation within the organisation and a clearly defined leadership and career structure for AHPs.
- Work with partners to develop appropriate AHP apprenticeship training routes in the organisation and across the city.

### **Commitment three: Use of technology**

In line with the AHP's into action priority to utilise information and technology AHPs will embrace new and digital technologies to support engagement from service users in their care and treatment. They will provide interventions using the most appropriate media, whilst being aware of digital exclusion and empowering service users. This will include the use of social media, teleconferencing, and self-help materials.

**You will:**

- Be flexible in the technology used with service users and develop your practice in relation to new technologies.
- Routinely utilise digital technology such as telemedicine or telecare to improve service user health outcomes.

**Your managers will:**

- Allocate resources to the development and implementation of new technologies.

**Your leaders will:**

- Enable opportunities for the use of new technologies in the work place.
- Ensure that guidance on use of new technologies is enabling and supportive to practice.

**Commitment four: Outcome measures.**

AHP's into action prioritises the need to evaluate improve and evidence the impact of AHP's contributions. In order to this the clinical effectiveness of the interventions provided by AHPs and the experience of service users accessing AHP services, Patient Rated Outcome Measures (PROMs), Clinician Rated Outcome Measures (CROMs) and Patient Rated Experience Measures (PREMs) will form part of routine clinical practice.

**You will:**

- Be clear about the outcome measures that are used within your service and the clinical reasoning for their use.
- Have confidence in the administration of service identified tools and that you can explain their use to service users and carers.

**Your managers will:**

- Ensure the use of outcome measure data is used to raise the profile of AHP services and demonstrate that they are effective.
- Enable staff to be trained, competent and given the necessary tools to be able to use outcome measures within their clinical practice.
- Guarantee that outcome measure data for the service is accurate and that this data is communicated to and understood by the staff in the team.
- Put systems and processes in place for collecting outcome measure data and for disseminating results to services and teams.
- Manage the information flow of outcome measure data to stakeholders by ensuring that reporting mechanisms are in place.

### **Your leaders will:**

- Ensure that outcome measures used within the service are applicable and appropriate for use and are completed by staff within service standards.

## **Commitment five: Safe and effective through a culture of learning**

The culture of the organisation is a product of our values, attitudes, behaviours and competencies. To implement and achieve our plans, service users as well as their family and carers, must be at the heart of everything we do.

### **You will:**

- Be open to new ways of working and acknowledge where you don't have knowledge or need to improve.
- Support a culture where people feel safe to reflect, identify weaknesses and build upon their strengths to enable learning.

### **Your managers will:**

- Implement evidence-based improvements, recognise where they don't have knowledge and be supportive where improvements need to be made.
- Build a culture where people feel safe to reflect, identify weaknesses and build upon their strengths to enable learning.

### **Your leaders will:**

- Seek out new ways of working, utilise your knowledge and build upon your strengths supporting where improvements need to be made.
- Build a culture where people feel safe to reflect, identify weaknesses and build upon their strengths to enable learning.

## **Implementation plan and key milestones**

### **Year one**

- Extension of AHP rotations for occupational therapists and dietetics including learning disability rotations.
- Dietitian-only prescribing of supplements to promote best practice and food-based nutrition.
- Develop the use of digital technologies through engagement in a citywide digital practitioner project.
- Research activity will be considered in all new and reviewed job descriptions.
- AHPs will be supported to engage in national research studies.
- Posts will be established in a range of professions, with a focus on specific service developments or research.
- Reward excellence by having a learner and mentor of the year.

Career opportunities for AHPs will be supported including:

- Internships.
- Continued and extended teaching at universities.
- Dietitians supported to train in supplementary prescribing.
- Profession specific and generic leadership positions.
- Clinical fellowship positions.
- In-house and multi-agency secondments for experienced staff.
- Coaching training.

## **Year two**

- As part of the health and care partnership workforce projects there will be a number of developments including:
  - Citywide rotations in a number of professions.
  - Joint training across professions and organisations.
  - Joint preceptorship sessions across professions and organisations.
  - Promotion of the professional principles of co-production through Occupational Therapy Week, Dietitian's Week and a variety of physiotherapy promotional activities.
  - Establish a physiotherapy rotation across appropriate services and organisations.
- AHPs will continue to use generic outcome measures, but will be able to use appropriate AHP specific outcome measures. These will be identified and agreed through governance structures and agreed measures will be accessible on the AHP Staffnet page with guidance on their use.
- Competency frameworks for support staff will be developed and implemented including development opportunities.
- Training for universities to support students in their transition into practice.

## **Year three**

- Offer service users access to interventions via digital media where it supports the aims of care and suits the service user.
- Develop an educational lead role to support apprentices and learners in practice.
- Develop apprenticeships for AHPs alongside partners in the city.
- Develop specialist practitioner and consultancy roles including approved clinician, non-medical prescribing and approved mental health professional.
- Offer all support staff on completion of an associate practitioner course related to AHP practice an appropriate position in the organisation.
- Establish alternative pathways to mental health practitioner roles with local universities.
- Establish dietitians as care programme approach co-ordinators.

## Caring

### Commitment one: co-production with service users

AHPs will continue to work with service users and carers as partners in their care. They will show commitment to the individual and will involve service users in decisions about their care and jointly develop care plans and lead on principles of co-production at every opportunity.

#### **You will:**

- Understand what working in partnership with service users and carers means in practice and to deliver this consistently in your work.
- Respond constructively to feedback in this area and to engage with processes including clinical supervision, reflective practice, observed practice and clinical audits to support this way of working.
- Keep your knowledge up-to-date regarding working effectively with people who may not have capacity to make their own decisions.

#### **Your managers will:**

- Support you and the wider team to engage with processes that support good practice in this area and challenge practice that does not meet this expectation when required.
- Enable you to access suitable training opportunities. To embed service improvement processes such as the Triangle of Care locally to support practice development.
- Support you to take the lead on co-production initiatives.

#### **Your leaders will:**

- Advocate and support working in partnership with service users as a priority across services and the AHP workforce.
- Promote empowerment, enablement, self-determination and self-management as fundamental approaches of AHPs.
- Champion examples of innovative ways AHPs put this into practice.

### Commitment two: The 6C's

AHP's will practice with the 6C's underpinning their practice. They will help service users feel comfortable and safe during their contact with services. They will treat everyone with respect and dignity and have the authority and responsibility to take action wherever there are concerns about care.

#### **You will:**

- Understand and practice with the 6C's at the heart of what you do.
- Take responsibility for providing safety and comfort to service users in your work.

- Ensure you understand what ‘comfort’ and ‘dignity’ means to individual service users and to work with them, their carers and team members to achieve this.
- Take action where there are concerns about service user safety, respect and dignity. Following guidelines, policies and procedures you will ensure service users are safe, whilst working with positive risks when appropriate.
- Maintain self-awareness and be open to formal and informal feedback about your individual interactions and communication. This will ensure professional growth and positively demonstrate the trust values, even in challenging circumstances.
- Value diversity, take what others have to say seriously and be honest about what you can and cannot do.
- Under the Duty of Candour you will report circumstances of concern and be open and honest about your own practice.

#### **Your managers will:**

- Promote the 6C’s within the service, including supporting the implementation of service improvement processes in this area.
- Support you to access appropriate training and development opportunities. For example, observed practice, dementia friends.

#### **Your leaders will:**

- Promote the 6C’s as fundamental to AHP practice across the Trust.
- Challenge the stigma around mental health and learning disabilities.

## **Implementation plan and key milestones**

### **Year one**

- AHPs will engage in observed practice to get feedback on their practice.
- AHPs will co-produce care plans with service users.
- AHPs will contribute to and take a lead on recovery and discovery college projects as appropriate. For example, food and mood sessions.
- Governance structures will support the evidence base for the interventions offered, ensuring these are based on best practice.
- Cross professional preceptorship activities developing closer MDT working, for the benefit of service user experience.

### **Year two**

- Involve AHPs in joint development sessions and promoting of principles of co-production as part of pan Leeds workforce project championing AHP approaches to care.
- Through clear leadership and governance structures service users and the AHP working with them will be able to identify profession specific leaders and raise issues.

- Re-establish a lived experience network of staff to offer support and help develop support for a future workforce.
- Embed the Triangle of Care in every team achieving level two.

### **Year three**

- Develop roles that utilise lived experience including peer support, personal wellbeing practitioners, care navigators and mentors.
- Enable staff to utilise their personal skills within work time to enhance service users care. For example using pets as therapy, gardening and engaging with service users where English is not the first language.

## **Responsive**

### **Commitment one: Access to services**

AHPs will support the AHP's into action impact to address historical service boundaries and the commitment to keep care close to home. They will work where service users can access the care they need, and the treatment they require, in a timely way. They will listen and respond to the individual and communities they serve by delivering person-centred care that meets their needs. AHPs will work in 'place-based' way, offering their expertise around the service users' needs and not around services, to maximise the contribution they make.

#### **You will:**

- Prioritise the needs of the service user and their community while working flexibly, efficiently and effectively.
- Routinely work across organisational boundaries with key stakeholders and partner organisations.
- Identify and take steps to reduce health inequalities by informing how services are planned and developed.

#### **Your manager will:**

- Ensure fair access to the AHP workforce, so you can respond to service user needs in a timely and appropriate way.
- Listen and act on the relevant information supplied by AHPs about the needs of the local population and individual service users.
- Support you to access key stakeholders, attend relevant training and voice the needs of the local community and its service users.
- Develop flexible 'portfolio' posts as opposed to fragmented, multiple or composite posts for AHPs to enable service users to access your services when and where they need it.

### **Your leaders will:**

- Identify and promote areas where AHPs can make the greatest impact, recognising that this will vary for each of the different AHP professions.
- Empower AHPs to influence future development of services in which they work, to offer an added value contribution and reduce health inequalities.
- Work with partners to establish the best use of AHP services and not be limited by organisational boundaries.

## **Commitment two: Diversity and equality**

AHPs will take account of the needs of different people, especially those in vulnerable circumstances.

### **You will:**

- Work across diverse populations with vulnerable individuals to ensure your actions contribute to reducing health inequalities, supporting individuals to be self-managing and promote the parity of esteem agenda.
- Design and deliver improvements to health and wellbeing and reducing health inequalities.

### **Your managers will:**

- Recognise that AHPs are an integral part of the workforce.
- Use your expertise and leadership to shape and support services, recognising that your skills can be utilised to provide quality assurance, leadership and oversight as well as the direct delivery of services.
- Give you authority to design and deliver improvements.

### **Your leaders will:**

- Empower you to influence the future development of the services in which they work to offer an added value contribution to reducing health inequalities.

## **Commitment three: Public involvement and feedback**

AHPs will listen and respond to the feedback from service users and their carers to improve the quality of care provided. Ensuring people who use the service, the public and staff are engaged and involved.

### **You will:**

- Listen and actively respond to service users' needs. Ensuring your professional views are heard by being an active member of the delivery of your services.
- Support service users or carers to give feedback and your responses must demonstrate that lessons have been learnt.

**Your Manager will:**

- Actively engage and listen to AHPs and service users to ensure their views are reflected in the planning and delivery of services and shaping a culture of clear lines of communication.
- Be open and honest and ensure service users and carers know how to easily give feedback.
- Share learning from complaints across the whole organisation and be able to demonstrate the lessons learnt.

**Your leaders will:**

- Promote the values of the individual AHP professions and those of the regulatory body, the Health and Care Professions Council.
- Operate a culture which promotes openness and honesty among staff. Supporting anyone who makes a mistake and seeks to learn as a result.

**Commitment four: Physical health improvement**

AHPs will use their physical health and dual training to support the understanding of the complex relationship between mental and physical health and wellbeing. They will practise holistically and promote this approach among service users and staff. They will support the AHP's into action commitment to improve the health and wellbeing of individuals and populations.

**You will:**

- Work with service users in a way which recognises the physical health implications of their mental health needs and programme of care
- Embrace opportunities to receive training to maintain physical health knowledge and skills.
- Work collaboratively and inclusively, across organisational boundaries to improve access to healthcare based on individual need.

**Your manager will:**

- Promote the positive impact the AHP workforce has on the physical health and wellbeing of service users.
- Seek and listen to your suggestions about how to improve the approach to physical health needs of service users.
- Support you with your personal development to ensure we enable an appropriately skilled workforce in relation to the physical health agenda.

**Your leaders will:**

- Recognise and support the AHP contribution in promoting the physical health and wellbeing of service users.
- Support and promote an ethos of working across organisational boundaries.

- Collaborate with senior leaders across partner organisations to promote the integration of mental and physical healthcare.

## Implementation plan and key milestones

### Year one

- Develop a dietetic pathway for mental health service users across the city in partnership with Leeds Community Healthcare NHS Trust.
- Implement an acuity tool in learning disability teams to ensure responsive access to AHPs.
- Contribute to physical health developments.
- Include AHP feedback and lessons learnt in governance structures.
- Contribute to the development of referral pathways in the community. For example, podiatry, physiotherapy, speech and language therapy and tissue viability.

### Year two

- Develop closer links with physical health providers, working in the context of health and care partnerships, to improve information on access to physical health interventions promoting social inclusion.
- Engage with new models of care locally to agree less fragmented approaches to care delivery
- Year three
- Work with partners across the city to maintain and develop physical health skills as part of pan Leeds workforce project.

## Appendix

### Year one action plan

Theme	Action	Evidence	Responsible person	Completion date		
<b>Well-led Commitments</b>	Establish clear governance and leadership structures	Terms of reference for AHP governance structures with identified leads	Care groups – AHP leads	September 2018		
			SaLT – Strategic AHP lead			
			Dietetics – Trustwide lead			
			Physiotherapy – Physio care group leads			
<b>Safety commitments</b>	Ensure service users can access AHP's	Clear cover arrangements in place in AHP staffnet page for each AHP profession and service user feedback	Strategic AHP lead	September 2018		
			AHP's leading safety initiatives	Safety huddles led by AHP's	LD AHP lead	September 2018
<b>Effective commitments</b>	Develop posts focussed on increasing the evidence base and best practice.	AHP's in research positions	Strategic AHP lead	October 2018		
			Mixed rotation established	Rotation manager	August 2019	
			Establish Dietitian only supplement prescribing	Agreed and implemented guidance on supplement use	Lead Dietitian	April 2019
<b>Caring commitments</b>	AHP's to engage in observed practice	Showcase of observed practice	AHP leads	October 2018		
			AHP's delivering co-produced initiatives	Showcase of co-production	Lead OT's in LD, Forensics and In-patients	October 2018
			Joint preceptorship sessions	Reviewed and refreshed preceptorship package	Preceptorship lead	January 2019
<b>Responsive commitments</b>	Develop clear dietetic pathway for Leeds service users	Identified point of access available on AHP staffnet page	Healthy living service manager and Lead Dietitian	April 2019		
			Implement LD acuity tool	Acuity tool driving availability of LD AHP's	LD AHP lead	December 2018

## References

AHP's into Action available at:

<https://www.england.nhs.uk/ourwork/qual-clin-lead/ahp/>

COT extended scope of practice briefing March 2013

CQC how we inspect and regulate available at:

<http://www.cqc.org.uk/content/how-we-inspect-and-regulate-guide-providers>

Facing the facts shaping the future: A draft health and care workforce strategy for England to 2027 for consultation available at:

<https://www.hee.nhs.uk/our-work/planning-commissioning/workforce-strategy>

HCPC 'the professions' available at:

<http://www.hcpcuk.co.uk/aboutregistration/professions/>

HCPC continuing professional development available at:

<http://www.hcpcuk.co.uk/registrants/cpd/>

Leeds Mental health framework available at:

[www.leedsnorthccg.nhs.uk/publications/mental-health-framework-2014-2017/](http://www.leedsnorthccg.nhs.uk/publications/mental-health-framework-2014-2017/)

Stepping forward to 2020/21 The mental health workforce plan for England available at:

[https://www.hee.nhs.uk/sites/default/files/documents/CCS0717505185-1\\_FYFV%20Mental%20health%20workforce%20plan%20for%20England\\_v5%283%29.pdf](https://www.hee.nhs.uk/sites/default/files/documents/CCS0717505185-1_FYFV%20Mental%20health%20workforce%20plan%20for%20England_v5%283%29.pdf)

The five year forward view for mental health available at:

<https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>

West Yorkshire and Harrogate Sustainability Transformation plan available at:

<http://staffnet/Pages/News/2016/West-Yorkshire-and-Harrogate-STP.aspx>

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