

Mid and South Essex Integrated Care System



Mid and South Essex Allied Health Professionals (AHPs) Strategy

"We must unleash the energy, insight and brilliance of AHPs" Simon Stevens, CEO NHS England 2019

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Section 1

Background, Forward, Strategy Ambitions, Intent and Purpose



Background

Following the statutory arrangement of an Integrated Care System (ICS), Allied Health Professionals (AHPs) in Mid and South Essex have embraced the opportunity this provides to contribute to the collective ambition for the health and wellbeing of our residents.

During the last eighteen months, AHPs in Mid and South Essex ICS have developed an AHP Council which brings together AHP leaders from local providers across the system. The purpose of the AHP Council is to ensure a strategic system wide approach to service priorities by working in collaboration to support the quality, operational delivery, and financial priorities of the ICS.

As outlined in the NHS People Plan, an AHP Faculty has also been developed in the last year to drive supply, retention, careers, education, and training specifically for AHPs. The AHP Faculty is a cross system party of representatives from health, social care, education, voluntary organisations and different AHP professional backgrounds. The function of the AHP Faculty is to act as an operational workforce sub-group of the AHP Council and as a delivery arm for the Health Education England priorities.

National guidance from NHS England (Allied Health Professionals within Integrated Care Systems) provides detailed guidance on the AHP system architecture. This provides a mechanism in which the AHP Council can report on operational delivery into the System People Board and the System Quality Group. These governance structures, which support wider system architecture, must be recognised, and backed to ensure each system truly benefits from the transformational potential of the AHP workforce.

The development of a Mid and South Essex AHP Strategy is a significant strategic development for the AHP Council. The strategy has brought together the collective AHP leadership and will provide a framework for all AHPs to support the ambitions and priorities of the ICS.

Foreword - Anthony McKeever Chief Executive Officer, Mid and South Essex Integrated Care Board

On my first day as Chief Executive in MSE, the first person I met had started their career as an AHP before taking on a system leadership role. That individual is continuing to make a significant impact to patient care – the work of the AHP Council have done in developing our AHP strategy will give every AHP a chance to influence how our system develops – I hope you take the opportunity to get involved.

Foreword - Dr Ronan Fenton System Medical Director, Mid and South Essex Integrated Care Board

AHPs lead and support new ways of working, improve flow, keep care closer to home and improve the health and wellbeing of individuals and populations we serve. This diverse group of professionals are uniquely skilled and placed to help transform our system to deliver integration, truly personalised care, and distributed leadership.

The launch of the first Mid and South Essex ICS AHP Strategy will provide the strategic framework for AHPs to help the ICS deliver on the ambition to improve population health, tackle unequal access to services, experience, and outcomes, and enhance productivity, effectiveness, and value for money.

This strategy will enable AHPs to demonstrate their value and maximise their impact by working in partnership and collaboration across a system, and with people in the local communities, to deliver the improvements our residents and the AHP workforce strive towards.

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Foreword – Scott Baker

Director of Allied Health Professionals, Mid and South Essex Integrated Care Board and MSE AHP Council Chair On behalf of the MSE AHP Council

This strategy is the framework to support every AHP in our system realise their potential and help them understand how much their contribution is valued.

This strategy was based upon the principles of co-production and inclusivity – it is for the whole AHP community including students, pre-registration apprentices, assistant practitioners, support workers and registered professionals. It is reflective of the unique way in how AHPs work across pathways and different sectors and the significant role we can achieve in our collective ambitions.

We encourage all AHPs to take time and consider how we can all achieve our potential by becoming a unified AHP voice that is uniquely placed to empower citizens and lead integration across our system.



Summary

AHPs are the third largest clinical workforce in the NHS comprised of 14 professions working across the spectrum of health and care, education, academia, research, criminal justice system, voluntary and private sectors.

The strategy was co-designed through multiple approaches including questionnaires, focus groups and workshops to maximise the contributions of the entire AHP workforce.

The aims of the strategy were be concise, easy to understand, and meaningful to every AHP regardless of role or setting. The concept of action statements were developed to enable the strategy to become impactful to every AHP thereby maximising their value in their workplace or community.

Strategy Ambition

The ambition is clear; for every AHP to become activated enabling our workforce to become the epicentre of our focus and our commitment to helping the Integrated Care System deliver on its four principles;



14 Allied Health Professionals roles

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AHP Strategy

The intent of the AHP strategy is to enable the workforce to become the embodiment of four fundamental principles:



The purpose of the AHP Strategy is to become a unified AHP voice that is uniquely placed to empower citizens and lead integration across our system.

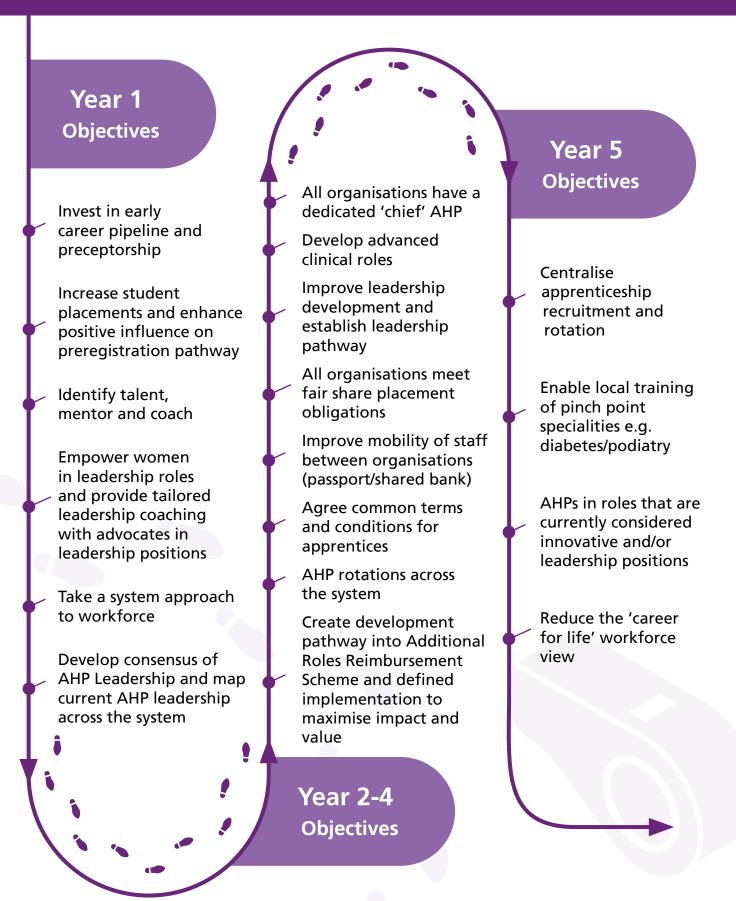


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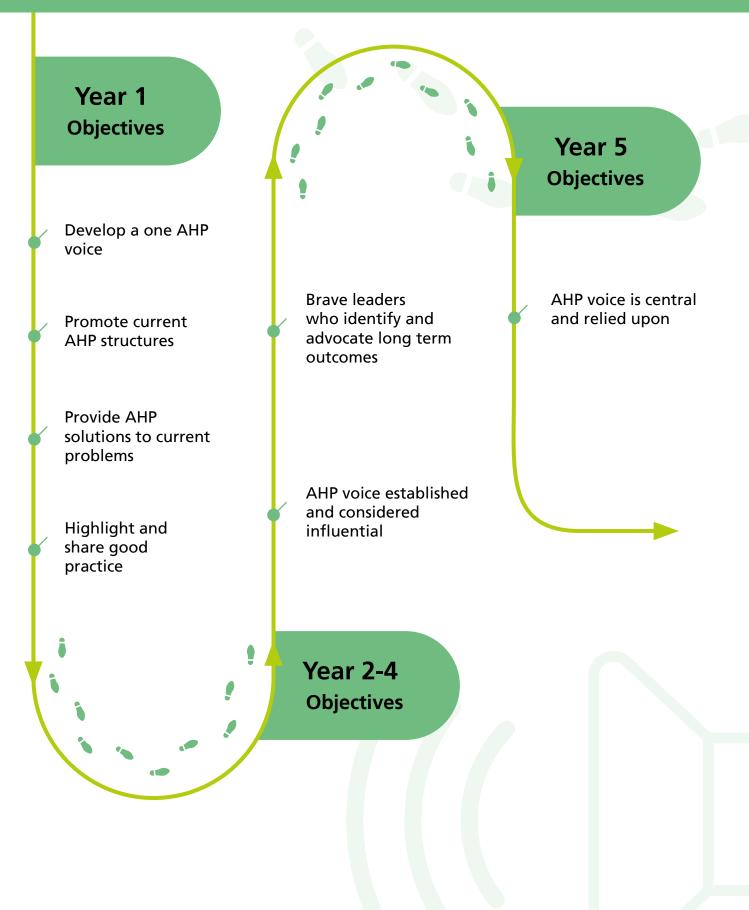
Section 2 AHP Priorities and Objectives

AHP Priorities and Objectives

To create a workforce that feels valued

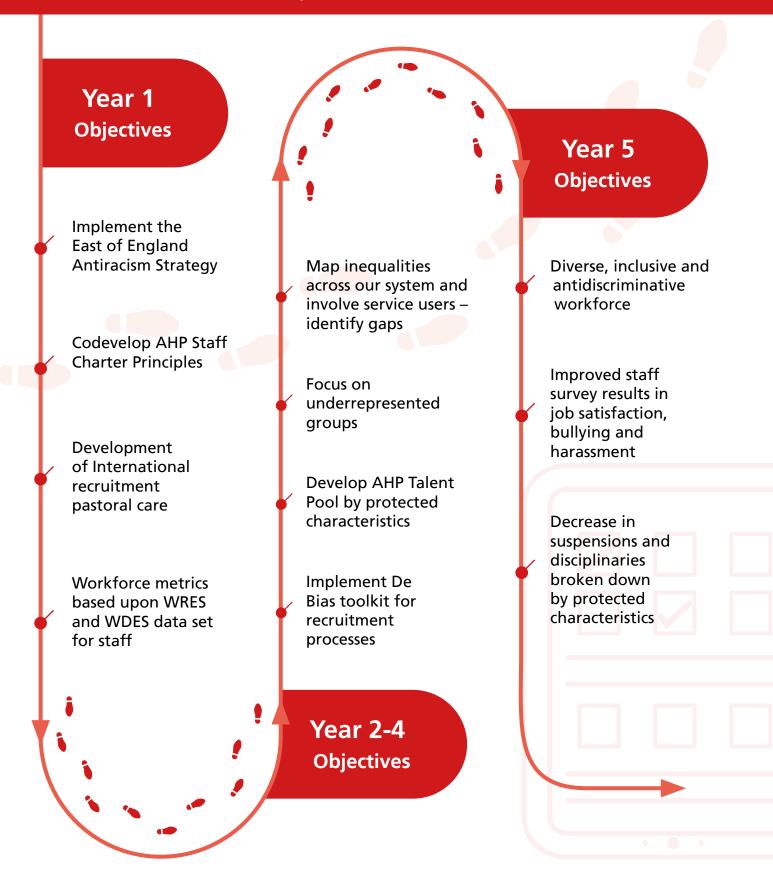


Become a unified voice



AHP Priorities and Objectives continued

Commit to social justice and antidiscrimination



Promote integration, collaboration and co-production

Year 1 Objectives

Increase the viewing rights to IT systems across the ICS (initially on Systm1)

Develop model to prevent deconditioning (during illness)

Develop AHP health coaching skills

Develop a rehabilitation strategy

All AHPs to self-critique their current practice and look for opportunities to increase scope or reduce duplication and stop 'low value added' activities

Mapping of services across system (including non-healthcare) and aligning them across the Partner organisations

Enshrine preventative principles in all AHP work

Resource positioned closer to home and more responsive

Develop shared patient record across the system

Year 2-4 Objectives Year 5 Objectives

Services are delivered where they are needed in a way that is accessible to users

Records and data that is truly integrated

Identify and set-up opportunities for collective education/ prevention/treatment in community or asset based-groups

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Section 3 AHP Action Statements



AHP Action Statements continued

Action Statement

"Putting the AHP workforce front and centre and saying we're unashamedly going to prioritise your experience."

TO CREATE A WORKFORCE THAT FEELS VALUED



What does good look like?

Demonstrate, celebrate and showcase the value of AHP services and careers.

Reignite the passion in colleagues by allowing time for discussion and planning regarding career progression and service development.

Actively seek opportunity, either formally or informally to develop leadership skills knowledge and experience.

How can I demonstrate this in my role?

Celebrating success and sharing innovation.

Engage with your team members to make them fully part of the decision-making process regarding professional development, staff wellbeing and what they enjoy about their job.

Employ distributed leadership by giving staff opportunities to focus on projects which are important to them and improves the outcomes and experience of people in Mid and South Essex.

Which system principle does this support?

Enhancing productivity and value for money.

Helping the NHS to support broader social and economic development.

Mid and South Essex Allied Health Professionals (AHPs) Strategy

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Action Statement

"Coming together as 14 different professionals groups to make things better as one unified voice."

BECOME A UNIFIED VOICE



What does good look like?

Making sure that we do have a unified voice across both professional and organisational boundaries.

Collective representation of all the AHP professionals rather than siloed professions.

How can I demonstrate this in my role?

AHP voice established and considered valuable.

Brave leaders who identify and advocate long term outcomes.

Which system principle does this support?

Improving outcomes in population health and health care.

Helping the NHS to support broader social and economic development.

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AHP Action Statements continued

Action Statement

"AHPs need to commit to social justice and antidiscrimination for our workforce and those we serve."

COMMIT TO SOCIAL JUSTICE AND ANTIDISCRIMINATION



What does good look like?

Actively reduce inequalities in the workforce and our local communities by proactive challenge, advocacy and collaboration.

Understand the social determinants and health and care needs of our local population.

How can I demonstrate this in my role?

Display behaviours consistent with fairness, psychological safety, and inclusivity.

Raise awareness and promote action to address health inequalities that you encounter at a individual, service or a community level.

Which system principle does this support?

Tackling inequalities in outcomes, experience and access.

Improving outcomes in population health and health care.

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Action Statement

"True integration is when you stop the barriers and you just do the best for that person."

PROMOTE INTEGRATION, COLLABORATION AND CO-PRODUCTION



What does good look like?

Make changes across the whole pathway rather than everybody doing their individual aspect.

Collaboration and coproduction for a person to have a seamless service across social care and health services.

Work more strategically to integrate delivery between hospital and community services.

How can I demonstrate this in my role?

Stop differentiating between what is health, what is social care, and wrap around the individual and their needs.

Improve joined up care across the entire system and by sharing good practice.

Challenge criteria driven care being a barrier to integration, collaboration and coproduction – drive the conversation to a needs based approach.

Which system principle does this support?

Improving outcomes in population health and health care.

Enhancing productivity and value for money.