There are major public health challenges in the North West of England...

Compared to England:

- Smoking
- Maternal smoking
- Physical activity
- Obesity
- Drug use
NW actively engaging AHP workforce

Sue Louth, North West AHP network
Alison Farrar, HENW

• Conference 2014
• North West AHP website
• Public Health Ambassadors
• Commissioned work
  introductory workshops
  follow on workshops – early years, older people, emotional health
  evaluation
  development of resources
What we did to prepare..

- Integrated team – PH, AHP, IPL, nursing
- Engaged with PHE (North West Centre)
- Document review
- Focus groups with AHP
- National Stakeholder Group
- WeAHP chat
- Available resources/materials
The project so far...what did we do?

- 5 Full Day workshops across North west
- 9 AHP groups represented—(no orthotists, music, drama or art therapists)
- 131 AHPs from 35 trusts, 1 council and 1 university
- Student facilitators
  - PH consultants and trainees
  - Commissioners
- Real life case studies
PROGRAMME

What are our Public Health Challenges?

Wider determinants of health in AHP practice

Talking Heads: Healthy Conversations in Practice
Working with Other Agencies
AHP public health specialist
GRAB YOUR GRAN

How can AHP influence commissioning for health?

Healthy conversations in AHP practice

What can I do?
What AHPs liked...

• Behaviour change different models, theoretical background tips/questions to promote healthy conversations ideas for embedding in practice

• Wider determinants of health understanding data/scale of problem links with MECC

• PH and Commissioners understanding roles in different organisations confidence to have conversations/ get advice

• Practical role for AHP how AHPs can play a role ideas for audit wider spectrum of influence of AHP

• Networking what others are doing
Our message - **You** can make a difference!

Estimated 12,000 AHP in North West

Just one change for one person by each AHP

Will make a population difference
Five Half-day Workshops

Three themes

• Early years       Children, families and young people
• Older people
• Emotional health and wellbeing

• Focus on sharing practice, networking and identifying resources
• Engaging with other agencies
What did AHPs pledge to do?

- Completion of online courses
- Incorporation of healthy conversations into early patient contact, as appropriate

**Consider social isolation**
- Setting patients realistic expectations
- Signpost
- In-house training/share information with team
- Document lifestyles and advice
- Incorporate within preceptorship, competency frameworks, supervision and appraisals for all bandings
- Evaluate and audit

- Collaborate/liaise with other health professional, community groups, 3rd sector
- Influence senior staff and across other services
- Engage with PH/commissioners/WB boards
- Text healthy messages
- Advocate
- Incorporate into student training
- Use of notice boards, social media, resource packs for patients
- Understand PH data/JSNA
- Share positive outcomes
How will we know its had an impact?

3 Months - Change in Confidence/Attitude
Contact with Other Agencies/Teams

6 Months – Action on Pledges/Barriers
Case Studies
Development of resources

• Train the Trainer
• Other Professions
THOUGHTS FROM PH PERSPECTIVE...

PH professionals need to engage AHP workforce

Clinicians will become our healthcare PH workforce

AHP training in public health
  * integrated CPD/postgraduate academic courses
  * inculcate PH perspective undergraduate skills
  * epidemiology/needs assessment skills

AHP PH specialists/consultants
Public Health Values = AHP Values

- Health as a right
- Health Equity
- Empowerment
- Inclusiveness
THOUGHTS FROM AHP PERSPECTIVE...

Think wider than what your service offers, take some time to step out and see patient’s journey through your service from referral to discharge, and where there are opportunities to intervene.
Think about wider determinants of health that may impact your patients health e.g., housing, environment, unemployment, social groups, isolation. Patients may have bigger problems....

Source: Dahlgren and Whitehead, 1991
Take every opportunity to make a difference – however small, it’s amazing what you can change and what assumptions we make.

Don’t be afraid of time pressures. You can always pick conversations up later or signpost – you don’t have to solve everything!
And finally....

Be a Role Model!

Spread the word, deliver training, talk to other AHPs, talk to your commissioners. Literally just go online or pick up the phone and talk to them about your ideas!
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#AHPpublichealth

Anne Milston – OT
Sara Fisher – Physiotherapy
Nicola Gaskins - Physiotherapy
Heather Robinson – Radiography
Hazel Roddam – SLT
Dawne Gurbutt – IPL
Dilyse Nuttall - Health Visiting
Stephen Clayton – Public Health

Speakers, Talking Heads and Facilitators
Alison Farrar and Sue Louth for ongoing support
All the committed and enthusiastic AHPs attending the workshops