Empowering AHPs in public health

Linda Hindle, Allied Health Professions Lead
Follow me on twitter @hindlelinda
Format

- Why the time is right for AHPs to feel empowered about public health
- Our collective ambition for public health
- How this is being supported at a national level
- What is required locally
Empowering AHPs in public health

PH leaders see potential of AHPs

Commissioning for prevention

Professional bodies support shift

Policy shift towards prevention

Academics are preparing workforce
The time is right for AHPs and public health
AHPs have agreed to rise to the challenge

Our Ambition

‘To be recognised as an integral part of the public health system’
Empowerment to achieve our ambition

National

context
Profile

Local

implementation
Relationships
Local leadership
National Focus

1. Engage and attract AHPs to public health
2. Sell AHP contribution to commissioners and service planners
3. Increase public health component of training
4. Improve communication
5. Focus our collective efforts to make a visible impact
Agreed Priorities

Children ready for school / early years (language development, nutrition, physical skills, emotional development, vision)

Making every contact count (particular emphasis on obesity, physical activity, smoking and alcohol)

Improving health for older adults (nutrition, falls, maintaining independence, dementia, social isolation, mobility)

Emotional wellbeing (achieving parity of esteem of emotional wellbeing in line with physical health, holistic care)
Alignment of AHP public health priorities to PHE’s 7 priorities
PHE AHP Project Boards

- Clarity about current AHP contribution
- Increasing strategic connections
- What could we do more at scale
- How we measure our impact
- How we communicate our public health role within our professions
- Communicating our role to wider stakeholders
- Influencing research
Local Focus

Promote what you do already

Can you do more

Evaluate and write up what you do

Support the priorities

Develop conversations about public health with decision makers
How – understand local priorities and pressures

- Sources of information - Joint strategic needs assessment, health and wellbeing board strategy, CCG delivery plans, DPH annual report, Health scrutiny committee reports, Health Board Plans
- Follow local organisations and leaders on twitter
- Sit in on Health and Wellbeing Board meetings
How – understand local priorities and pressures

- Sources of information - Joint strategic needs assessment, health and wellbeing board strategy, CCG delivery plans, DPH annual report, Health scrutiny committee reports, Health Board Plans
- Follow local organisations and leaders on twitter
- Sit in on Health and Wellbeing Board meetings
How – Can you do more?

• Seek and take opportunities
• Plan for the future
• Don’t assume your contribution is obvious
• Use examples of good practice from elsewhere
• Focus on re-design rather than just new money
How -Measure your impact

• Take time to plan evaluation
• Do short term data collection if necessary
• Partner with universities
How – develop conversations with decision makers

- Be helpful – solutions not problems
- Don’t assume those in leadership positions have all the answers
- Develop your elevator pitch
- Raise your profile and make connections via social media
- Attend networking opportunities
How – promote what you do already

- Most AHPs are already doing public health
- Take the time to write up what you do - this will have many uses
- Don’t assume everyone else is doing what you are doing / ‘it’s not good enough’
- Apply for awards
- Liaise with your communications teams so they have your good news stories
- Share your work via twitter
- Join in the next DH/PHE week of action
Thank-you

Linda Hindle

linda.hindle@phe.gov.uk

@hindlelinda