Consultation on the NHS Grampian Allied Health Professions Implementation Plan

Introduction

This consultation document has been developed in response to the National Delivery Plan for the Allied Health Professions in Scotland, 2012–2015: “AHPs as Agents of Change in Health and Social Care”.

NHS boards and local authorities are required to work collaboratively to develop a local implementation plan identifying how they intend to deliver and evidence the outcomes of the National Delivery Plan. The AHP Chief Health Professions Officer will lead annual reviews of the local implementation plans to monitor progress locally and to support delivery nationally.

NHS Grampian’s Healthfit 2020 vision provides the picture for future healthcare delivery across Grampian. The final implementation plan must reflect how AHPs will support NHS Grampian’s Healthfit 2020 and ensure AHP activity is embedded into priority workstreams demonstrating the contribution that AHPs make to person centred, safe and effective care.

Allied Health Professions (AHPs)

AHPs are a distinct group of practitioners who apply their expertise to diagnose, treat and rehabilitate people across health, education and social care. They work with a range of technical and support staff to deliver direct patient care and provide rehabilitation, self-management, enabling and health improvement interventions. The AHP group consists of physiotherapists, occupational therapists (OTs), dietitians, speech and language therapists, radiographers, podiatrists, prosthetists and orthotists, orthoptists and arts therapists.

Consultation Purpose and Process

The draft Grampian plan reflects how actions from the AHP National Delivery Plan are to be progressed locally but we want to consult further on:

- the overall approach of the local Grampian AHP Implementation plan
- the key actions – are they achievable, are there any significant gaps that need to be addressed, do they connect effectively with work already in progress in Grampian, do they go far enough to support Grampian’s priorities?
- prioritisation to support local implementation.

The process will include engaging with a broad range of key stakeholders during the consultation period which will run until Friday 31st May 2013.
Responding to this Consultation

As well as attending key groups and committees, we are inviting written and email responses to this consultation by 31st May 2013.
Please write or email comments to

Rosie Gauld
Summerfield House
2 Eday Road
ABERDEEN
AB15 6RE

Email: rosie.gauld@nhs.net

Handling your response

All respondents should be aware that NHS Grampian is subject to the provisions of the Freedom of Information (Scotland) Act 2002 and would have to consider any request made to it under the Act for information relating to responses made to this consultation.

What happens next?

Following the closing date, all responses will be analysed and considered along with any other available evidence to inform the final NHS Grampian AHP Implementation Plan which will be completed by July 2013.

This document is also available in large print and other formats and languages on request. Please call NHS Grampian Corporate Communications on 01224 551116 or (01224) 552245.

AHPs as Agents of Change in Health and Social Care

National AHP strategic vision

AHPs will work increasingly to transform well-being and recovery, promoting prevention, earlier diagnosis and reducing unnecessary referrals and admissions to hospital and care by working “upstream” and supporting early years development to strengthen user and carer capabilities and assets in the communities they serve.

This National Delivery Plan will help to maximise AHPs’ contribution and effectiveness by:

- empowering strong professional leadership.
- enabling the development of integrated teams across health and social care services to support continuous improvement.
- developing innovative new models of care and fully utilising innovation in health technology.
- creating added value beyond health and delivering excellent outcomes for people who use services, their families and carers.
- providing effective, efficient solutions to the challenges of delivering national policies within a reducing financial envelope.
strengthening partnerships with the third and independent sectors and other agencies.

The Delivery Plan applies to all AHPs in Scotland, which will be particularly important as the new health and social care partnerships (HSCPs) emerge. It has evolved following a process of national consultation which provided strong support for the vision and direction of travel of the National Delivery Plan from a wide range of stakeholders.

**Extract from National Plan Executive Summary**

“Scotland's AHPs are already working at the leading edge of a paradigmatic shift in the public sector towards enablement and personalisation, promoting an asset-based approach, self-management, resilience and independent living and preventing over-reliance on hospitals and professional intervention.

AHPs’ expertise in rehabilitation and enablement will be key to supporting the vision of health and social care integration and delivering on the nationally agreed outcomes for integration.

Reducing inappropriate admissions and unnecessary care costs are key to affordable and sustainable services in the future. AHP interventions can significantly reduce unnecessary admissions to hospital and diminish dependency on care services, resulting in significant savings in health and social care.

As first-point-of-contact practitioners, AHPs also make a vital contribution to faster diagnostics and earlier interventions in primary care. They work closely with general practitioners and community teams to provide alternative pathways to secondary care referral and prevent admissions in areas such as falls prevention and musculoskeletal services.

AHPs have a key contribution to make to the wider public health agenda, improving health and well-being by, for example, promoting physical activity and healthy nutrition, providing cancer prevention and vocational rehabilitation services, and enabling children to get the best possible start in life and achieve their full potential.

AHP directors and AHP leaders, working across health and social care, will be key to enhancing the AHP contribution to the joint planning and delivery of services, particularly for those with complex needs, long-term conditions, dementia and for children and young people.

This National Delivery Plan for the Allied Health Professions in Scotland calls for AHPs to be more visible, accountable and impact orientated. It aligns the AHP focus on delivery with the nationally agreed outcomes for integration, currently in development, and reflects the context of health and social care integration. Better measurement, data collection and e-health will be required to support AHPs in contributing to the delivery of these national outcomes, to underpin improvement and to strengthen efficiency and productivity.

Modern, innovative and flexible working practices (including exploiting technology) and implementation of *Releasing Time to Care* and other improvement methodologies will be key to efficient and effective service delivery built around the needs of people who use services and to releasing capacity within existing resources.

**Key Actions from NHS Grampian Implementation Plan**

The National Delivery Plan focuses on six key areas. Grampian’s actions based on the AHP National Delivery Plan key areas are outlined below. A detailed action plan is being developed.

NHS Grampian – Caring… Listening… Improving
1. Professional leadership to drive innovation and delivery

Excerpt from the National Delivery Plan for AHPs in Scotland

AHPs have a significant leadership role to play in the integration of health and social care service delivery. The output will be “enabling” services that support people in their own homes and communities through teams that are shaped to work in a truly integrated way. AHPs, with their expertise in enablement and rehabilitation, can bring a fresh perspective to the integration agenda.

Grampian’s local AHP implementation plan actions based on the AHP National Delivery Plan recommended actions.

1.1 AHP leadership roles with key partners will work together to strengthen and embed professional leadership and governance infrastructure for AHPs working across health and social care to enhance integrated service delivery and outcomes for people who use services.

1.2 AHP leadership roles will provide professional leadership to strengthen the development of “enabling” services, including rehabilitation and reablement, across health and social care.

1.3 AHP capacity and capability in leadership and quality improvement methodologies will be developed to improve the quality of care within agreed priority areas.

2. Reshaping care and enabling independent living

Excerpt from the National Delivery Plan for AHPs in Scotland

Scotland's AHPs can and should make a significant contribution to reducing unnecessary hospital referrals and admissions and to preventing over-reliance on professional interventions in the future. AHPs are strongly placed to support self-management and enablement and drive integration at the point of care. They can be pivotal in creating a paradigm shift away from professional dependency towards resilience and an asset-based approach that builds personal capabilities and community resilience.

Grampian’s local AHP implementation plan actions based on the AHP National Delivery Plan recommended actions.

2.1 AHP support will be established within emergency admission services, in line with best practice for emergency care to prevent unnecessary admissions to hospital.

2.2 AHPs will proactively support the Falls Leads to implement integrated falls and fracture care pathways to reduce falls-related admissions to hospital in the over 65s by 20%.

2.3 AHP leadership roles will proactively work to maximise the AHP contribution to achieving delayed discharge targets and reduce overall length of stay in hospital to support the delivery of the legal treatment time guarantee.

2.4 AHPs will work to support older people and those with disability and complex needs to live independently in their own home/homely setting for as long as possible, delaying or reducing admissions into institutional care.
2.5 AHP leadership roles will work with key partners to reconfigure “enabling” services, such as rehabilitation and reablement, to deliver best value and enhance care experiences for people who use services and their families and carers.

2.6 AHP leadership roles will work in partnership with Alzheimer Scotland to ensure the multisectoral delivery of early intervention and post-diagnostic support for people with dementia and their families and carers, in line with the national commitment.

2.7 AHP leadership roles will work with key partners in care organisations, voluntary services and older people’s groups to implement the National Personal Footcare Guidelines to be published in 2013.

3. Improving health and well-being

Excerpt from the National Delivery Plan for AHPs in Scotland

AHPs are fully committed to improving the health and well-being of the people of Scotland. Improving health is often integral to their specific role: many are involved in health screening, health promotion, public health, social inclusion and participation initiatives and in advising individuals, family members and carers who access their services.

Grampian’s local AHP implementation plan actions based on the AHP National Delivery Plan recommended actions.

3.1 AHP leadership roles will work with primary care leads, GPs and across NHS Grampian to support enhanced pathways in primary care which maximise AHP expertise as first-point-of-contact practitioners to improve the care experience and reduce unnecessary referrals to secondary and unscheduled care.

3.2 AHP leadership roles will work in partnership with the third and private sectors, as well as other agencies, to enhance community capacity building and support early interventions as part of the implementation of the asset-based model and redesigning “enabling” services.

3.3 AHPs will ask people who use their services about their work status as an essential component of their consultation and will initiate support to individuals to enable them to remain in or return to work.

3.4 AHPs will use each consultation as an opportunity to improve overall health and well-being with people who use their services, focusing on issues such as physical activity, nutrition and mental well-being, and including signposting to relevant resources.

4. Supporting early years

Excerpt from the National Delivery Plan for AHPs in Scotland

AHPs have a significant responsibility in relation to services for children and ensuring that children have the best possible start in life. AHPs within children and young people’s services focus upon maximising a child’s potential, which is embedded in the Getting it Right for Every Child principles and the Early Years Framework. The AHP approach must therefore be comprehensive and holistic to facilitate social and health outcomes: essential to this is working in partnership with parents, families, education partners and other health care professionals and ensuring early and consistent access to AHPs within multidisciplinary teams.
Grampian’s local AHP implementation plan action based on the AHP National Delivery Plan recommended action.

4.1 AHP leadership roles will work with the AHP lead for Combined Child Health and key partners in social care to develop a transformational children and young people’s service plan to meet the evolving needs of this care group and to provide an equitable and sustainable national model that reflects the early years agenda and the move towards integration of health and social care.

5. Maximising workforce engagement and development

*Excerpt from the National Delivery Plan for AHPs in Scotland*

The AHP workforce has a significant role to play in the delivery of quality services that meet people’s needs within modern health and social care services. There are many instances in which AHPs have been pivotal to service redesign and the achievement of performance targets. Examples include AHP-led musculoskeletal services, radiographer reporting of diagnostic imaging, and podiatric surgery being undertaken by consultant podiatrists as part of an integrated orthopaedic team.

Grampian’s local AHP implementation plan actions based on the AHP National Delivery Plan recommended actions.

5.1 AHP leadership roles will drive modern and productive working practices and undertake a review of existing working practices with a view to promoting efficiency, productivity and flexibility, with implementation of findings. This will include implementation of the recommendations in the Releasing Time to Care Stocktake Report.

5.2 AHP leadership roles will work within local planning arrangements to develop and drive implementation of a robust plan for delivering the shift towards increased AHP community-based activity.

5.3 AHP leadership roles will work in partnership with analytic and research colleagues to grow the health economic base for AHP interventions across health and social care services.

5.4.1 A collaborative approach, with all key players, will work together to progress reporting nationally on a standardised measure of musculoskeletal plain image reporting undertaken by radiographers.

5.4.2 Work with strategic planners to develop and implement a regional/local plan to ensure effective use of reporting radiographers in their NHS board, driving sustainable multi professional team delivery of diagnostic imaging services.

5.5 The AHP Associate Director, MSK Lead and Podiatry Leads will work with strategic planning and clinical leaders to explore, develop and implement a sustainable regional model of podiatric surgery integrated within orthopaedic services.

5.6 AHP leadership roles will lead innovation and improvement in the quality of their services, underpinned by data gathered from people who use services, their families and carers, to improve outcomes and demonstrate service impact.

6. Driving improvement: delivering sustainable quality

*Excerpt from the National Delivery Plan for AHPs in Scotland*
AHPs have a significant contribution to make to quality improvement and to preventative spending as part of the delivery of safe, effective and person-centred services across health and social care and are committed to the delivery of the quality ambitions as set out in the Healthcare Quality Strategy for NHSScotland.

Grampian’s local AHP implementation plan actions based on the AHP National Delivery Plan recommended actions.

6.1 AHPs will monitor the quality of AHP service delivery, including user experience, by implementing the national data set and using quality measures/dashboard agreed for national and local reporting, particularly in relation to the nationally agreed outcomes for integration of health and social care services.

6.2.1 AHP leadership roles will drive the delivery of AHP waiting times within 18 weeks from referral to treatment, inclusive of all AHP professions and specialties (except diagnostic and therapy radiographers).

6.2.2 NHS boards will be expected to deliver a maximum wait of no more than 4 weeks for AHP musculoskeletal treatment within the same period.

6.3 AHP leadership roles will drive the expansion of self referral to all therapeutic AHP services (not diagnostic) as the primary route of access.

6.4 AHP leadership roles will work collaboratively to significantly increase the utilisation of telecare and telerehabilitation as an integral approach to “enabling” services development. Pulmonary rehabilitation will be rolled out as an exemplar model.