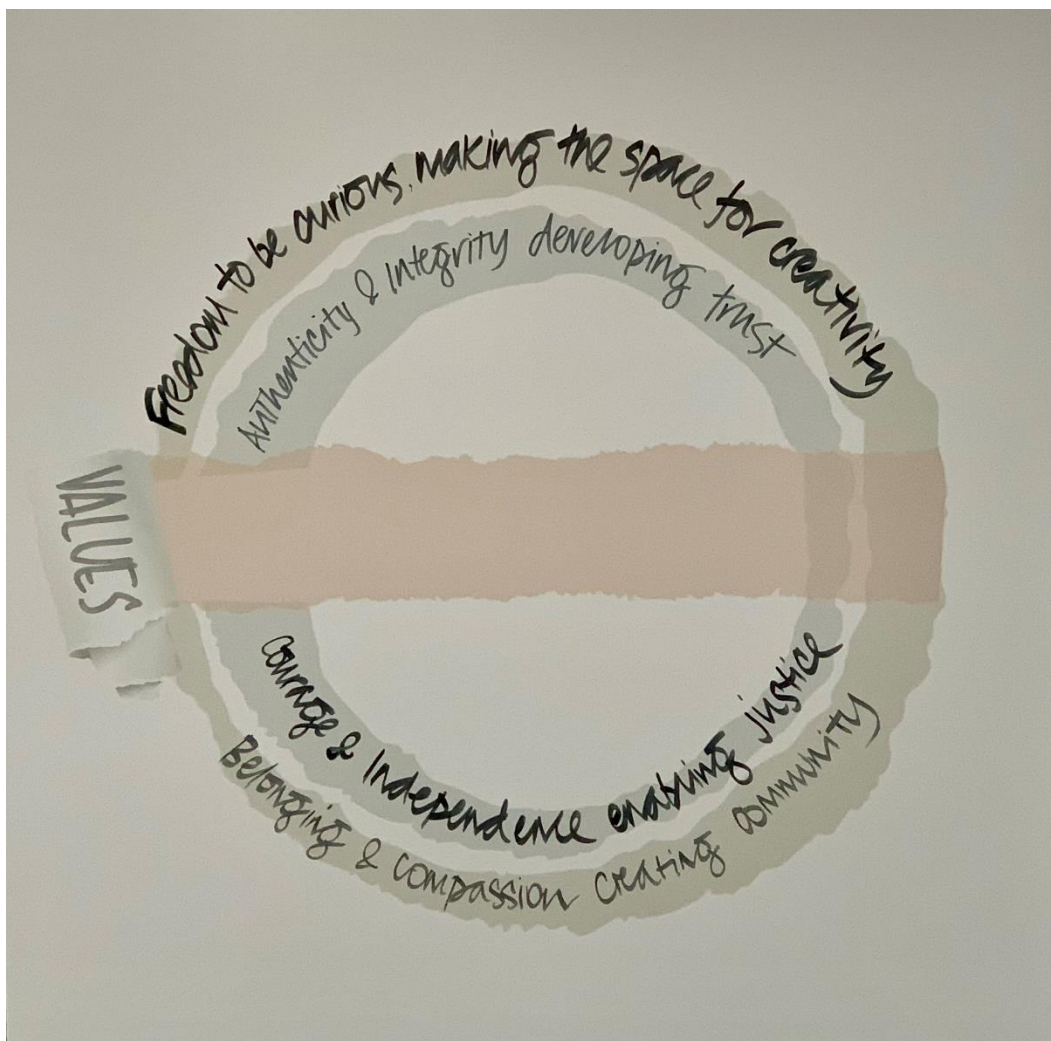


Aspire 2 A Transformational Plan for AHPs in Forth Valley 2022 – 2027



Background and Introduction

Allied Health Professions* (AHP) provide vital and valuable services to the people of Forth Valley in partnership with colleagues across Acute, Health and Social Care Partnerships, Education and the 3rd sector. AHPs deliver effective and evidence-based services underpinned by a commitment to improvement methodology and the key principles of Aspire (2017), delivering on the corporate objectives of Forth Valley Health Board, the Forth Valley Quality Strategy, the NHS Forth Valley NMAHP Strategy and the Strategic Plans for Falkirk and Clackmannanshire and Stirling HSCPs. There has been significant learning from the impact of the pandemic on service provision which will inform service design and delivery going forward.

In addition, an increasingly busy policy landscape, this plan seeks to support delivery to the National policy and legislative agenda across Children and Young People (CYP) and adult service delivery in Scotland.

The NHS Forth Valley NMAHP 5 year Strategic Enhancement Plan Year 1-5 2023/24 sets out a vision for Nurses, Midwives and Allied Health Professions in Forth Valley, and the aims of the strategy will be incorporated into the workstreams delivering to Aspire 2.

As part of the Leadership and Culture programme in Forth Valley, a review of the NMAHP Professional Leadership structures will be progressed. The creation of a strong Professional Leadership Structure across NMAHPs in Forth Valley offers an opportunity to consider the current professional leadership structure and its fitness for purpose to ensure parity of approach and infrastructure across all NMAHP services. Robust Professional Leadership across NMAHPs will ensure safe, effective and evidence-based health and care practice and provide robust governance and care assurance across services and client groups. Delivering to the core strategic imperatives for NHS Forth Valley, Falkirk and Clackmannanshire & Stirling HSCPs.

Aspire 2 sets out 6 shared core ambitions for all AHPs across professions, care groups and all parts of our organisation in Forth Valley until 2025, and the aims in the NMAHP Strategic Enhancement Plan will be incorporated into delivery to Aspire 2.

The ambitions detailed in Aspire 2 align with the strategic direction of NHS Forth Valley and the HSCPs and aim to deliver right care in the right place. The ambitions also position AHPs in Forth Valley to deliver to the full range of new and emergent policy imperatives which includes but is not limited to the Health and Social Care Safe Staffing Scotland) Act (2019), Getting it Right for Everyone (Scottish Government 2023), The AHP Education and Workforce Review (2023) and the Rehabilitation Framework (Scottish Government 2022). In addition, working towards the ambitions of Aspire 2 will support Delivery to the Forth Valley NMAHP Strategy (2023).

Our Services: A framework for provision to meet need

AHP service delivery will be designed and delivered based on the framework below (Fig 1), taking forward transformational change and moving towards a shift in the culture of practice involving a focus on early intervention and prevention. In committing to a systematic shift in culture of practice to embrace early intervention and preventative strategies in service delivery, it is recognised that for many services, current systems and models of care make it challenging to shift the balance of care. AHPs will need effective cooperation from and partnership-working with, universal services (including public health) and partners across the organisation and H&SCPs to realise this ambition.

All Professions and services will progress towards this framework of delivery over the next 3 years underpinned by a commitment to quality improvement, data collection analysis and reporting and care assurance through robust governance procedures, evidencing the impact of the ambitions of this plan for people of Forth Valley.

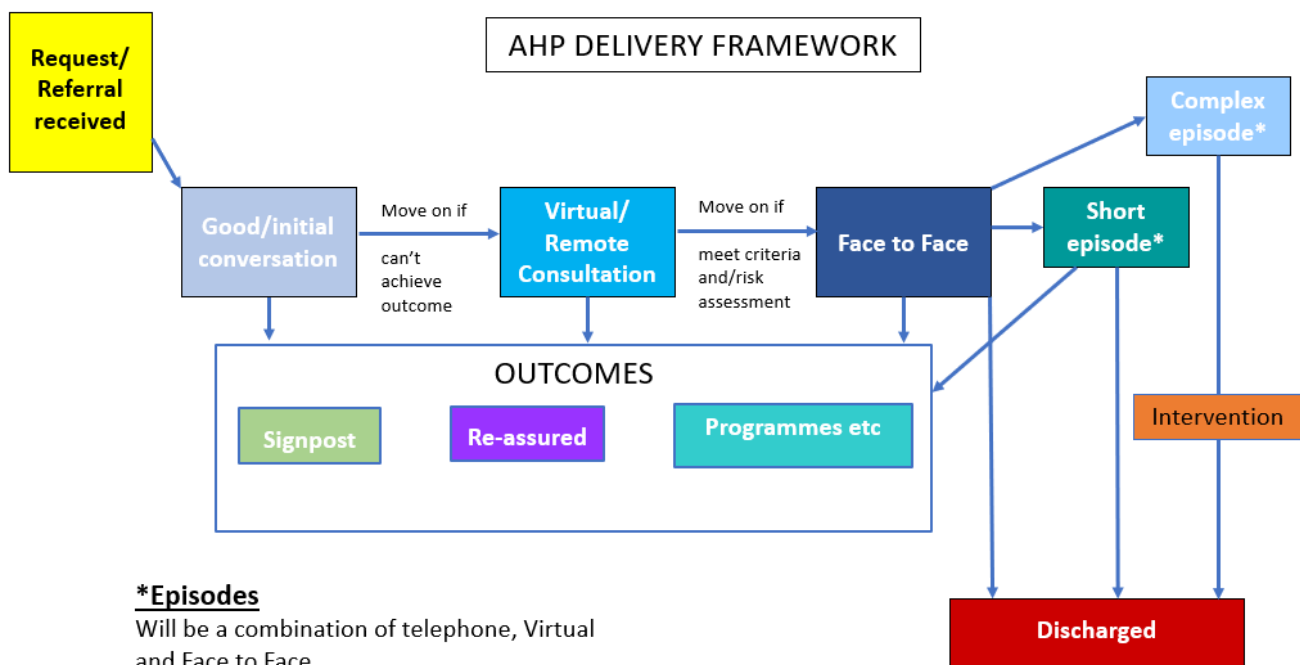


Fig 1

AHP Delivery Model

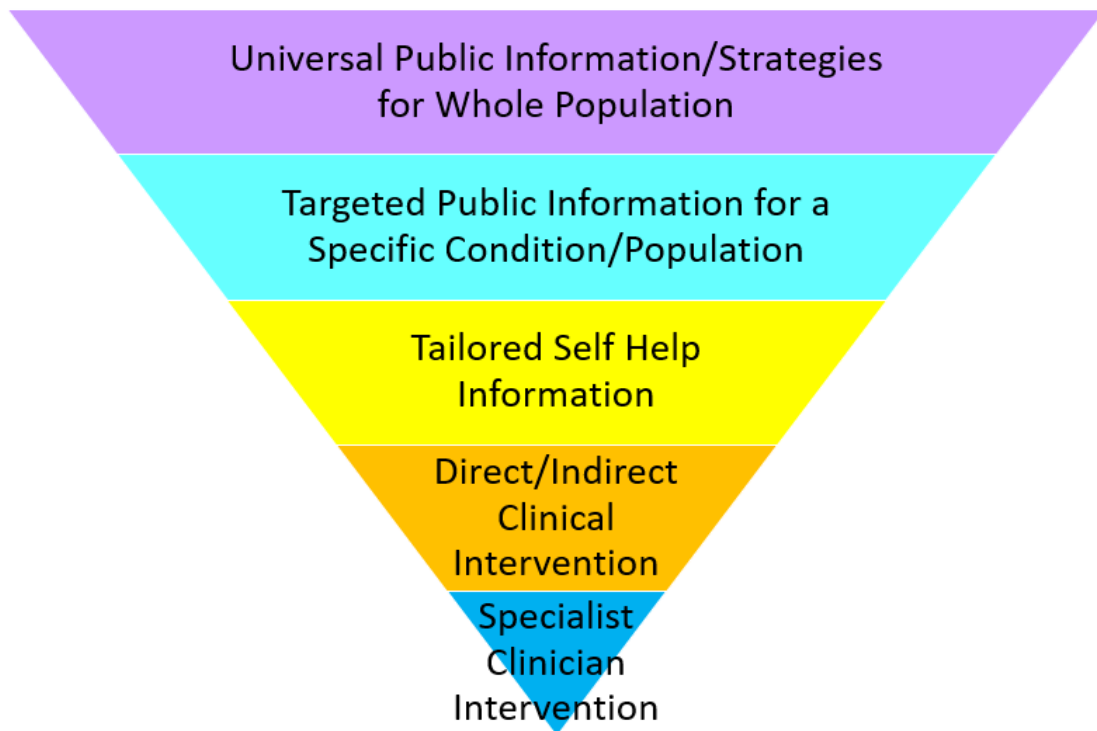


Fig 2

Figure 2 illustrates a tiered model of resourcing and access to Universal, targeted and individual levels of delivery. These levels can be defined as:

Universal level

This is for all. It recognises that a preventative approach and promoting well-being for individuals, parents, carers and families is an essential role for AHPs Universal Population based activities which support and enable communities to understand and manage their own health, wellness, and wellbeing. AHPs working at universal level will provide information and literature, direct individuals, parents, carers, families and others to the best evidence-based information available, input to activities and programmes organised by others to improve skills and confidence, work with partners to increase participation, and support the development of nurturing environments.

Targeted level

Services and provision at this level are for individuals (and their parents, families, carers and other stakeholders) who are more likely to be identified as having well-being needs. Targeted Population based activities which target a specific area of need in order to support and enable communities to understand and manage their own health, wellness, and wellbeing. Services would include specific advice, programmes, workshops and learning, and support to improve well-being.

Individual level

This level is for those people whose well-being needs cannot be fully met through universal or targeted provision, not necessarily individually delivered interventions that focus on specific need and functional outcomes relating to an identified need. It would usually involve episodes of direct or indirect intervention involving parents, carers, families and others, with the ultimate outcome of promoting self-reliance and resilience through an asset-based approach.

In order to delivery genuine access to expertise and supports for self management and wellbeing at all levels, AHP leaders and teams will need to make bold decisions about how best to utilise our current workforce resource to maximise support across the levels of service design and delivery. We will need to start discussions about how we are currently working together, what is getting in the way for people asking us for help, change the ways we think about duty of care and prioritisation and offer genuine support with communities to improve population wellbeing and reduce impact of impairment and disease. We will require to make choices about what needs to change what we must stop doing what we need to do that's new and what we need to do more of. All of these change conversations will require to be underpinned with improvement methodology and data to evidence change impact.

Structure:

Since the move to integrated partnerships, the AHP leadership across Forth Valley has continued to be provided without a review of what is working well and what needs to be developed and changed to meet peoples outcomes and offer accountability and governance. Currently the AHP Professional Leadership structure is under review and discussion across the HSCPs and NHS Forth Valley.

To reflect the complexity and diversity of the services provided across a range of age groups and contexts. The AHP Director post is supported by and has professional oversight and governance of 5 AHP Manager roles. These roles currently have a variety of titles and portfolios which require to be scoped and aligned. Critically this scoping requires to evidence workforce and workload required to deliver to implementation of the duties of the Health and Care (Scotland) Act 2019, to ensure that AHP leadership and workforce capacity is sufficient and safe to meet the duties of the Act.

The AHP leadership and workforce across NHS Forth Valley and HSCPS (Primary Care is now part of the HSCPs) are positive about the opportunities outlined in Aspire 2 to deliver new and innovative service provision that meets the needs of the people of Forth Valley. We are committed to:

- Quality Improvement methodology and evidencing the impact of change through robust data collection and analysis across our services to review our development and delivery.
- We are committed to the wellbeing of our workforce as a priority in meeting the needs of patients, carers and families and plan to support our workforce through a commitment to safe caseloads and workstreams to reduce waiting times.
- We will work to ensure compassionate and resilient leadership and culture for AHPs in Forth Valley underpinned by a commitment to values based recruitment and supportive networks for growth and development.

We are aware of the impacts of financial restraints on service development and plan through robust consideration of our communities demographics and needs to provide a workforce model and service delivery plan to prevent and reduce harm, build on community assets and provide early intervention as a starting point for accessing support at the point of need. We will work to remove barriers to access for support at the point of need and the development of robust offers for early intervention and prevention underpinned by the Public Health indicators with a focus on inequalities and population wellbeing.

We are committed to working closely with colleagues in both national and local HEIs in the Forth Valley Colleges and University of Stirling to consider new pathways into AHP practice and provide opportunities for Clinical Academic Roles for our workforce to partner in research.

Aspire 2: Our Aim

Everyone in Forth Valley requiring support from Allied Health Professions will receive that support at the point of need at the best possible place to support their outcomes and reduce impact involving commitments to early intervention and prevention and development of resources for supported self-management.

The overarching Driver for the transformational plan for AHPs in FV encompasses the shared aim, primary and secondary drivers and the change ideas and actions to achieve this aim by 2025. It is anticipated that each care group will create their own drivers to deliver to this overarching ambition. This will require that we collect analyse and report impact data evidencing change for improvement, in achieving our shared aim and ambitions for the people of Forth Valley. Aspire 2 will be facilitated by a robust implementation plan led by the Director of AHPs and Chief AHPs (prior to this we have talked about AHP Managers we might need to clarify this) with clear deliverables and evidence of impact.

Our Ambitions

Ambition 1: Engagement Rights based and person centred service design and delivery

“AHP Services in Forth Valley will actively engage with and involve the people requesting support from our services and our partners in the design and delivery of AHP supports across a tiered model of service provision, evidencing the impact of this engagement on outcomes and community assets. ”

Ambition 2: Workforce

“AHPs in Forth Valley will understand the demographic of their communities including SIMD and prevalence data to inform predicted workforce needs. Services will undertake service specifications, job planning and skill mix review to determine safe staffing and workloads. In preparation for implementation of the Health and Care Staffing (Scotland) Act (2019) ”

“AHPs in Forth Valley will be supported through a genuine commitment to their wellbeing through locally determined supports and offers including peer reflective case discussion, quality supervision, case note audit and outcomes focused case discussion and the availability of PDP evidenced education and learning opportunities.”

Safe staffing and workforce/workload work-streams cannot be achieved in silo by individual professions and will require AHPs to learn from services who have evidenced a cultural shift towards the use of specialist resources in the most impactful ways. This will change how we view workload and create new opportunities for system-wide workforce planning. As we Remobilise, Recover and Redesign, AHP workforce planning choices can only be truly understood by examining local need, our existing resource and joint planning with all our delivery partners in all settings. How we perceive each other’s role and work between professions will be key for leaders to understand the potentials of what could be possible. The trilogy of National Health and Social Care Workforce Plans [1, 2, 7] set out recommendations to support workforce plans that deliver high-quality, person-centred integrated care with the right people, in the right place, at the right time. Building on these recommendations, the Integrated Health and Social Care Workforce Plan for Scotland sets out a whole-system approach to workforce planning that puts safe, effective and high-quality integrated services at the heart of all workforce decisions (Workforce Paper NES 2021).

The Balanced System (Better Communication CiC) was commissioned by Scottish Government to undertake a baseline of workforce and workload across SLT service in CYP in Scotland (Equity for All SG 2022). Scoping services across provisions relating to the 5 strands of Environment, Family /Carer Support, Wider Workforce as well as Investigation and Intervention allows leaders to have data to inform how to maximise their workforce for greatest impact for their people and communities with the real challenge being to deliver equity of outcome not input.

Forth Valley Older Adult Services in Dementia are undertaking an improvement project as part of the Alzheimer’s Scotland initiative to provide Balanced System review of Dementia capacity in Forth Valley. This project has the potential to inform future practice across adult AHP services in Scotland.

In order to commit to this workforce ambition, AHPs must be given the ability to record and gather essential information on e -Systems that are fit for purpose. Data should be easily extracted to national repositories but remain transparent, functional, and beneficial at a local level using data collection tools and that are of minimum burden and maximum utility. Part of this challenge

includes examining the data we chose to value and collect, how we ask clinicians to gather data and the way this data is received by national repositories (NES Workforce Paper 2021).

Ambition 3: Partnership, Collaboration and Integration

“AHPs in Forth Valley will build on present collaborations and develop opportunities with AHP teams, partners across sectors and organisations and with communities, which will enable genuine collaboration to improve population and individual well-being”

Partnership-working needs to be at the heart of everything AHPs do in services for people. AHPs will create mutually beneficial partnerships with people, carers, parents and families within and between partner organisations to develop genuine collaboration and multi professional working and hubs for improved health and wellbeing outcomes.

Effective multi disciplinary working between professions across different contexts is critical to improving patient outcomes and improvement projects going forward should include a commitment to multi professional co design and collaborative working including joint learning and development and whole systems commitment to shared outcomes for patients.

People, their parents, carers and families will be supported to develop knowledge, skills and confidence to more effectively manage and make informed decisions about their health care, which will be coordinated and tailored to individual needs, with a focus on co-production and measuring the outcomes that matter to people.

Ambition 4: Community

“AHPs in Forth Valley will utilise and build on mapping of community supports in their local areas, undertaking their own mapping where necessary and develop partnerships with people and organisations to support individuals, their carers, parents and families in self- supported management and prevention of harm.”

The community ambition aims to change the focus of service delivery, with supports closer to where people live in their local communities, understanding the diverse needs of local populations and the impact of inequalities and socio-economic determinants on health and wellbeing outcomes and accessing support and help in our current systems. This ambition has as its driver a need to acknowledge inequalities in access to support for our people in Forth Valley and to collaborate with our partners in making access to help at the point of need easier and relevant. Our data shows us that up to 82% of our non-attendance at clinic appointments is by people who live in our highest areas of deprivation and these areas have our lowest levels of workforce (Equity for All 2022) It is critical in seeking to meet the needs of our whole population that we make changes to how and where we provide our knowledge expertise and supports and how we collaborate with our colleagues and partners providing community-based support. AHPs will work collaboratively and in partnership with stakeholders and communities to understand what is needed to improve well-being outcomes, agreeing specific services at universal level. Focused work will be undertaken to support and strengthen early intervention, creating a Forth Valley wide approach to support the development of targeted offers.

Socio-economic inequalities and evidence showing poorer outcomes for people and families living in poverty and with low incomes strengthens the need for the development of prevention and early intervention support. AHPs contribution to reducing the inequalities gap in Forth Valley is significant, and their role in this area needs to be promoted and valued.

Ambition 5: Early Intervention:

“AHPs in Forth Valley will test and resource early supports for people through skilling the wider workforce, provision of access to information and resources that support self management and development of early intervention roles across all professions and all age groups in order to provide the right support at the right time in the right place.”

A focus on early intervention and prevention does not diminish or replace the need for people to have access to effective, evidence-based interventions at individual case level, and this framework makes expertise at different levels accessible to meet needs at different times. Such an approach has the potential to benefit people’s health and well-being, reducing dependency on services while offering access to direct intervention when required. Many services have (or are developing) universal and targeted approaches, which complement the delivery of individual -level services. A practice shift towards resourcing and developing early and preventative interventions and service delivery across AHP services was implicit in the findings of the Commission on the Future Delivery of Public Services in Scotland, which called for a radical change in the design and delivery of services, with person centred service provision, effective partnerships and early intervention and prevention.

Evidence has emerged from the transformational change in AHP CYP services in Scotland that a commitment to resourcing early intervention universal and targeted level supports, has the potential to improve access to support at the point of need, reduce demand on individual level services and increase confidence in communities about access to support (Ready to Act in Action Scottish Government 2018). This work-stream will include scoping the current provision of early intervention and prevention offers and resources across Forth Valley.

Ambition 6: Access

“All people in Forth Valley will access AHP services as and when they need them at the appropriate level to meet their well-being needs, with services supporting self-resilience through consistent decision-making.”

The focus for people who access AHP services will be on promoting their well-being and enabling them to self-manage their challenges.

Access in this sense is broader than direct individual service provision. It also includes access to:

- information
- services in a timeous manner
- provision of support and strategies to promote self-management
- education and skills development for partners
- new ways of organising and delivering services
- flexible working (such as twilight clinics for children who are in school and evening workshops for parents, carers and families) as needed by the local population.
- Reducing access criteria to services and committing to self referral across AHP services in Forth Valley

People require responsive services that are appropriate to their needs and which they, their parents, carers and families can access in a timeous manner to request assistance and support. This requires services to adopt outcomes-focused approaches and move from deficit impairment assessed

approaches (“what's the matter?”) to a focus on what matters most and what outcomes an individual wants to achieve.

Outcomes discussions should focus on strengths and assets. The approach also requires service design and delivery focused on people’s assets, such as life experience, knowledge, skills, talents, energy and enthusiasm.

Key issues underpinning this ambition include:

- waiting list prioritisation and validation
- prioritisation of requests for assistance and caseloads on the basis of well-being and impact
- adoption of a Forth Valley wide approach to requests for assistance
- review and testing of current requests for assistance and access practices
- a mandatory requirement for services to enable self-requests for assistance
- communication to promote community understanding of the value of changes in service delivery
- understanding of how people want information to be presented and ensuring that all information is accessible, and communication is inclusive.

Ambition 7: Digital Solutions to support implementation of early intervention and prevention/Public Health

In order to effectively deliver to an early intervention and prevention ambition, and fulfil a commitment to enabling self-support, community resilience and partnership for prevention, there is an urgent need for Board support for the creation of a wellbeing portal hosting self-help resources, videos and links to evidenced based sites. This is a pre-requisite for supporting resilience in communities and the wider workforce. The impact of this digital access has been evidenced in AHP CYP services in Scotland, with the development and testing of enquiry lines, Facebook pages, Twitter accounts and You Tube channels. Without permission and support for the development of an accessible and highly visible social media presence it will be increasingly difficult for AHPs in Forth Valley to achieve an early intervention and prevention ambition for the people of Forth Valley to self-support and self-manage, prevent risk and reduce harm, for individuals carers and the wider workforce, information and resources for referrers to support their own decision making about individuals requiring support from AHPs. Without access to robust digital supports AHPs in Forth Valley will be limited in their ability to enable people to self-manage and reduce foreseeable harms eg cognitive and respiratory supports for people with Long Covid.

We will work with Board Communications services to develop supported self management resources and signposting to local available groups and offers to be hosted on the Forth Valley website.

A virtual media reference group has been re-established to oversee the AHP contribution, content and governance of resource development.

Summary

This is the outline transformational plan for AHPs in Forth Valley. It requires consideration and opportunities for discussion and planning with our HP leadership team with our partners and with the people of Forth Valley to make sure that the changes we are making are communicated in an inclusive and collaborative way.

The identification of safe AHP staffing for meeting the needs of the people of Forth Valley will be essential in ensuring delivery to this strategy in the next 2 years.

These are difficult and challenging times for our services. These ambitions represent an opportunity to truly reflect the contribution and value of AHP knowledge and the expertise of AHPs beyond and including a traditional focus on refer assess treat. These ambitions will also enable us to evidence delivery to our organisational values and strategies across Board, partnerships, education 3rd sector and communities and to demonstrate that in achieving improved outcomes for the people and communities of Forth Valley that AHPs are critical partners.

The vision will be implemented through a structured project planning process with clear deliverables outcomes and impact measures and data collection underpinned by quality Improvement. A mid-term report outlining progress, improvements and challenges will be produced in Winter 2024.

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