

11th National Allied Health Conference

Abstract

Allied Health - Realising the Potential

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In the UK, ten regulated Allied Health Professional (AHPs) groups make up the third largest healthcare practitioner workforce. There are currently 180,132 AHP registrants in the UK. The complexity of the services that this collective group delivers, means that their impact on patient care is often difficult to quantify and consequently at risk of being overlooked. There is scant evidence to support and strengthen the contribution that this key group make to patient outcomes or to economic effectiveness of service delivery. Policy makers seldom include AHPs in major debates and there is a growing concern that their contribution is disregarded and seldom valued. The distinct nature of the service that each profession delivers further complicates understanding, leading to a lack of comprehension of the current contribution and the future potential of the Allied Health workforce. Often it is only when there is a shortage of AHPs that their value becomes all too evident.

The NHS England Five Year Forward View (a shared vision across six national bodies) sets out the rationale for change and the direction of travel, in particular the new models of care: Multispecialty Community Providers and Primary and Acute Care Systems. These new models offer AHPs an opportunity to further demonstrate their contribution to patient care and cost effective services.

Organisations should re-evaluate their approach to recognising the value of AHPs. It is recommended that a) managers should be clear about the contribution to their services the collective and individual AHPs make; b) managers should ensure they employ skilled and informed AHP leaders; c) AHPs must be empowered to innovate and transform the services they deliver; d) service providers should identify gaps in the service that AHPs could effectively and efficiently fill, e) AHP service leaders must routinely collect the evidence that their services are economically viable and can make a positive contribution to organisational cost improvement plans, without affecting quality of patient care or patient outcomes and f) service managers must support their staff to gain appropriate new skills and the knowledge required to deliver different models of care e.g. independent prescribing by advanced AHP practitioners. Importantly organisations must celebrate the contribution that AHPs make to patient care and enable them to realise their potential through gathering evidence to inform quality allied health care.