#### Who are AHPs?

The Allied Health Professions (AHPs) are the third largest workforce in the NHS. AHPs provide system-wide care to assess, treat, diagnose and discharge patients across social care, housing, education, and independent and voluntary sectors. Through adopting an holistic approach to healthcare, AHPs are able to help manage patients' care throughout the life course from birth to palliative care. Their focus is on prevention and improvement of health and wellbeing to maximise the potential for individuals to live full and active lives within their family circles, social networks, education/training and the workplace.



### SPECIAL EDITION FOR NATIONAL AHP DAY

OCTOBER 14TH 2021

**NATIONAL AHP DAY** falls every year on October 14th. #AHPsDay. The themes for this year's National AHP day are *Connect, Appreciate, Celebrate & Inspire.* 

### AHPs @UHD We are caring one team (listening to understand) open and honest (always improving) (inclusive)



**Connect.** Forming more than 10% of the UHD workforce the Allied Health Professional consist of nearly 750 AHPs from 11 of the 14 professions and scores of dedicated AHP support workers. Although there are relatively large numbers of some AHPs such as diagnostic radiographers and physiotherapists, there are only a handful or less of others including paramedics, podiatrists and osteopaths. Since coming into post earlier in 2021 as associate director of AHPs and healthcare scientists, Deborah Lane (pictured) has starting connecting with all the AHPs at UHD in person and through the AHP newsletter & intranet pages <a href="https://intranet.uhd.nhs.uk/index.php/ahps">https://intranet.uhd.nhs.uk/index.php/ahps</a>

**Appreciate.** All AHPs at UHD have all been playing a significant part in UHD's COVID response and recovery with their flexible, versatile skills. Many AHPs, including operating department practitioners (ODPs), were redeployed to care for those critically ill with COVID; some, including physiotherapists, became vaccinators; others, including orthotists and prosthetists found creative ways of continuing to support vulnerable outpatients; whilst a significant number, including therapeutic radiographers and podiatrists used their irreplaceable skills to treat those with life threatening conditions.

**Celebrate.** Congratulations to AHPs Amanda Weaver and Chris Efford (physiotherapists), seconded for 6 months from 1st October, as UHD AHP Strategic Workforce Leads to support all aspects of AHP workforce development including apprenticeships, support workforce, clinical placements, preceptorship, retention and career development, recruitment / international recruitment, and return to practice.

Congratulations also to the following AHPs who have been seconded to 6 month Dorset AHP faculty roles: Anna McHillier, physiotherapist, research project; Deborah East, therapeutic radiographer, support workforce project; Alannah Pasokhy-Holmes, paediatric occupational therapist, advanced practice project; Claire Stuckey, Dietician, early careers project and Rosanna Thurlow, critical care occupational therapist, health inequalities project.



**Inspire**. Are you inspired by all you have heard about AHPs in the NHS over recent times? Are you a trained AHP who registration with the HCPC has lapsed? Or are you an overseas trained, UK resident AHP not yet registered with the HCPC? In addition to the financial and other support provided nationally, UHD, is working in with trusts across Dorset to provide a flexible, bespoke return to work package including honorary contracts, formal and informal learning, workplace shadowing and experience. Where hard to fill AHP vacancies exist, a paid fixed term Band 4 contract may be available.

Contact <u>Deborah.Lane@uhd.nhs.uk</u> for more details of UHD opportunities. See also:

https://www.hee.nhs.uk/our-work/allied-health-professions/stimulate-demand/international-ahp-registrants-nhs

HEE website: www.hee.nhs.uk/ahp-hcs Generic Email: R2PAHP-HCS@hee.nhs.uk



# What is an Allied Health Professional?

## Click on a character to learn more

AHPs form the third larg care to people in hospita allied health profession

Diagnostic Radiographers are responsible for the accurate and safe use of X-radiation, magnetic resonance imaging, ultrasound waves and radiation-emitting radionuclides. Patient care is at their heart.

### Operating Department

**Practitioners** work alongside anaesthetists and surgeons caring for patients during operations. They provide specialist expertise before and during surgery, and also as the patient recovers from anaesthesia.



Paramedics provide care for people from birth to death, and are there for the public in times of mental and physical crisis, injury, illness and life-threatening emergencies.

Music Therapists are psychological clinicians that use music to improve mental health, self-expression and quality of life. They work across all ages with groups and individuals.





Therapeutic Radiographers provide care to patients diagnosed with cancer and safely deliver accurate radiotherapy treatment. They are responsible for patients for their whole course of treatment.

**Prosthetists** are responsible for the assessment, prescription, measurement, design, fit, supply and review of prosthetic limbs that enhance life for people of all ages.



Orthoptists specialise in diagnosing and managing eye conditions, in a wide age range of individuals, that affect eye movements, visual development or the way the eyes work together.

Dietitians help people make informed choices about their food and nutrition. They work to promote good health and prevent disease in individuals and communities



Want to know more? For further inform www.healthcareers.nhs.uk/explor gest clinical workforce in health and social care in England. They provide high quality als, communities, the independent and charitable sectors and schools. A career in the ns makes you highly employable, allows you to help people every day and gives you the flexibility to live and work anywhere.

> Occupational Therapists help people find ways to continue doing what is important to them when illness, injury, disability or ageing make ordinary tasks harder to do.

Orthotists work in different settings with people of all ages. They improve activity and reduce pain using orthoses (braces) as part of their treatment plan.



Dramatherapists use role-play, movement & storytelling to explore and support a person's mental health. Sessions can be delivered one-to-one or in a group in person or online.

How would you feel if you could not communicate or swallow safely? **Speech and Language Therapists** transform lives every day.



Osteopaths are musculoskeletal experts. They diagnose and treat a wide range of health issues, working mainly as private-practice primary care practitioners, as well as the NHS.

Physiotherapists work with people of all ages, helping improve movement and quality of life using physical and psychological techniques, including movement and exercise.



Art Therapists use art to improve people's mental health and quality of life. They work within multi-disciplinary teams within the NHS, schools, charities and many other places.

Podiatrists work with people of all ages to assess, diagnose and manage foot and lower limb problems using a broad range of knowledge and skills. They support people to live happy, healthy, independent lives.

ation including entry requirements visit e-roles/allied-health-professionals

NHS Health Education England

# DIETITIANS AT UHD

### Dietitians (yes, it is spelt with a "t"!)

'Dietitian' is the only food and nutrition title protected by law: this makes it different to other similar sounding titles like "nutritionist".

Dietitians work with:

- healthy people
- people at risk of getting an illness or disease
- people who have a medical condition
- student dietitians
- other healthcare workers
- athletes and trainers
- people working in the food industry.



At UHD, dietitians work in pretty much every area and play

a really important role in many multidisciplinary teams. Here are just a few...

#### Diabetes

As diabetes is a long term health condition we have the privilege of continuity of care, getting to know patients over many of their life experiences: young adulthood, pregnancy, parenthood and beyond. Technology in Type 1 diabetes care has grown massively in recent years; glucose sensors and insulin pumps to name a couple. As dietitians, we work alongside our medical and nursing colleagues to ensure the most up to date, bespoke and best possible provision of care while managing budgets.

#### Gastroenterology

Dietitians at UHD have a diverse and very significant role in gastroenterology including running a dietitian led coeliac service, giving advice on pharmaceutical management of pancreatic endocrine insufficiency (often working with our diabetes colleagues), irritable bowel syndrome, complex inflammatory bowel disease, liver disease and eating disorders. We are very much part of the team as you would imagine in this speciality!

### **Surgery and Nutrition Support**

We have a large input on the enhanced surgical care unit (ESCU) managing and advising on the nutritional needs of upper and lower gastrointestinal surgical patients (including bariatric surgery). This can include optimising the nutritional status of patients prior to surgery and managing nutritional issues that may result from complex surgery. We advise on the best route to provide nutrition, whether it be enteral (e.g. NG, PEG tubes), oral supplementation or parenteral nutrition (IV feeding).

### Oncology

There are many different cancers and their treatments that can impact on nutrition and the ability to eat and enjoy food. Dietitians at UHD are involved in specialist advice for a variety of cancers such as head and neck, lung, and GI cancers (such as oesophageal and pancreatic). We use our skills of translating the science into practical support.

### Stroke

Stroke patients will often experience problems with swallowing and maintaining adequate nutrition. The dietitians work as part of the MDT to ensure nutritional needs are being met, often with modified consistency diets or with tube feeding.

### The Future is challenging but bright.....

### IN OTHER NEWS...

- Congratulations to Gladys Yinusa who has been working in partnership with the dietetics team at UHD undertaking a jointly funded PHD project looking at Nutritional care and organisational culture. Her paper "Multidisciplinary Provision of Food and Nutritional Care to Hospitalized Adult In Patients: A Scoping Review" is now indexed on PubMed.
- Congratulations to Grainne Ford who has been successful in her recent application for a Health Education England fellowship(2d/wk) in population health which starts in September .

## DIAGNOSTIC RADIOGRAPHERS AT UHD

Congratulations to Natalie Furbank – apprentice radiographer yr 2 – who won the second monthly QI prize draw prize of a box of chocolates for registering a QI project – title' Can info graphics help reduce anxiety, confusion and lack of understanding of patients coming from Endoscopy to CT after an incomplete colonoscopy?'



## PODIATRY AT UHD

Hi my name is Joelle Baynham. I am currently the Lead Podiatrist for Diabetes working with the Diabetes foot Service in Outpatients in UHD. I have worked as a Podiatrist for 26 years and 20 of these have been at UHD specialising in lower limb wound care.

I enjoy helping my patients with diabetes and foot ulceration to reduce the risk of limb loss, regain their independence and improve their quality of life through managing their foot problems. I have undertaken a lot of work in quality improvement within my current role which has improved access to our specialist clinics for our local population.

Last year I gained a distinction in my Masters in Art Degree in Leading and Developing Services with Bournemouth University and in a few weeks I will be commencing a new post as Consultant Podiatrist for Diabetes Inpatients at UHD, which will look to improve specialist foot care provision for people with diabetes admitted to hospital due to their foot ulceration. I will join our current Consultant Podiatrist in Diabetes meaning that we will have two Consultant Podiatrists working within UHD, a first in the country.

# ORTHOPTISTS AT UHD

"After graduating from The University of Sheffield in 2019, I have been a qualified orthoptist at UHD for over 2 years. I joined the Royal Bournemouth Hospital Eye Unit alongside two previous course mates and have enjoyed my role ever since.

As a new graduate, I have seen a wide variety of orthoptic and ophthalmology patients during my career so far. I have really enjoyed developing my clinical skills in this time as well as diagnosing and treating patients of all ages.

In addition to my role as a full-time orthoptist, I am currently studying for a master's degree with UCL in Advanced Clinical Optometry and Ophthalmology. I am undertaking modules in Medical Retina and Ocular Emergencies. This means that once I qualify, I can see patients that a medic would have seen in the past, helping with the wider patient caseload within ophthalmology.

I am proud and thoroughly enjoy expanding my knowledge beyond the field of orthoptics. I think it is vital to adapt to the everchanging demands within healthcare. As a small allied health profession, I feel it is important that orthop-

tists continue to expand and take on additional roles in order to help promote this unique and rewarding profession."





## ORTHOPTISTS AT UHD

I am the Head Orthoptist at UHD, based on the Bournemouth site. I've been an Orthoptist for 29 years – where that time went I don't know! – and have been Head here for 17 years. Orthoptists are experts in



the assessment of vision, and the diagnosis and management of strabismus, or squint, where the eyes are misaligned. Most squints occur in childhood, and if not treated can lead to permanent reduction in vision, which can affect career choices, and certainly affect them more in later life if they develop a problem such as cataract, glaucoma or age related macular degeneration in their only good eye. Treatment in childhood is simple – patching the good eye, exercises, and the correct glasses prescription help in most cases, some go on to need surgery to re-align their eyes with a great success rate. We also assess adults who develop problems with their eyes due to general health like diabetes, hypertension, stroke and thyroid conditions, can all lead to the development of diplopia (double vision)

We therefore see all ages of patients from birth to the end of life, providing treatment and support. Orthoptists are also working in extended roles, previously performed by medical staff including the use of Botulinum toxin of lid conditions, and Intra-vitreal injections for macula degeneration.

We get great job satisfaction knowing that what we do makes a difference to our patients – its very satisfying reviewing a child who's vision has been very poor, and watching the parents reaction when it improves quickly with treatment, or reviewing a child who gets enormous benefit from wearing glasses for a previously undetected problem.

The photo shows me in my most recent new role as Granny, and yes, I have checked her eyes!

The thing I am most proud of in my role is my team – we are a small team of 7 who work extremely well together, supporting each other, and providing excellent care for our community, always flexible to assist in other areas within Ophthalmology, and within the whole hospital.

My current role within the Orthoptic team is Lead for Stroke and Neuro rehabilitation.

I am proud to lead a service that provides orthoptic care for patients admitted to the stroke service with visual problems. Stroke patients have a high incidence of visual problems following stroke including visual field loss, double vision, reduced vision and a range of perceptual visual issues. Out team review these patients both on the ward and in an outpatient setting providing treatment, advice and support for both the patient and their families.



I am also actively involved in research and am currently a principle investigator for two clinical trials; IVIS-II looking at a quality of life questionnaire spe-

cific to visual problems relating to stroke and SEARCH looking at scanning treatment options for patients with hemianopia (visual field loss) following stroke.

We are also a teaching placement site for undergraduate orthoptists which I coordinate but it's very much a team effort to inspire and nurture orthoptists of the future. I'm proud to be part of such a great team.

# OCCUPATIONAL THERAPISTS (OTS) AT UHD

Isabella Moore, Senior Occupational Therapist, has worked for Poole Hospital for a remarkable 35 years, having started as a Housekeeper in the maternity hospital, before moving across to Therapy Services as an Occupational Therapy Assistant in 1988. She has been an inspiration for her therapy colleagues and an enduring advocate for the Occupational Therapy profession.

Having developed her skills and knowledge through a progression in therapy support roles, Isabel committed to her aspiration to train as an Occupational Therapist, undertaking two NVQs and an AS Level in Human Biology, whilst working and caring for her young family. At the age of 49, Isabel joined the first cohort of the OT Degree course at Bournemouth University



and graduated in 2008, returning to Poole in her first qualified OT post. During her career Isabel was instrumental in embedding the newly established therapy service to ED, and became a long-standing and much valued member of the RACE MDT.

She also proudly represented acute Occupational Therapy colleagues on the College of OT English National Board, influencing professional policy development for the benefit of patients and professionals. For many years she was also a formidable Unison representative, tirelessly championing the best interests of her colleagues and facilitating fair and equitable service delivery. Through all this time Isabel has been our 'Work Mum', nurturing and encouraging many a new therapy staff member, and enjoying seeing our development in the process. She will be really missed by all her colleagues: Isabel says "It's wonderful being an Occupational Therapist" and it's been wonderful having her in the Therapies team for all these years.

### IN OTHER NEWS...

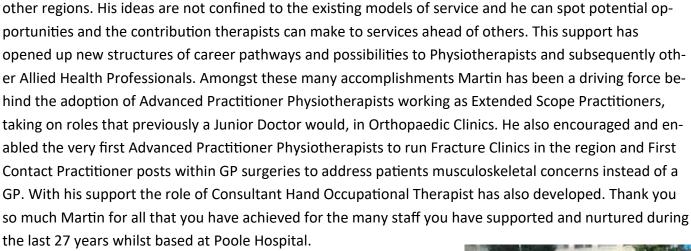
Rosie Cooper, Harriet Sturgess and Rachel Angell (senior Orthopaedic OTs) have set up a Non Weight Bearing service. After liaising with the pre-operative assessment team, they can now refer patients for a pre-op call and home visit for patients who may struggle to manage post-op. This ensures they are given all equipment pre-op and they make plans for managing at home, to reduce any delays in hospital. This has been very successful, and has reduced the number of long stayers..



Lori Sheffield (Orthopaedics OT) completed a survey of hip replacement patients looking at value of our pre-op telephone calls. This project arose because we had to change from a pre-op education class due to COVID and we are now looking at whether we will continue with personalised calls or restart the education class. We had very good feedback on the calls.

## **PHYSIOTHERAPISTS**

Happy Retirement!! Martin Hately, Outpatient Therapy Service Lead, is an inspirational leader, who has always given his Clinicians the impetus and self-belief to thrive. He has personally supported and grown circa 500 staff over the last 27 years. He is an incredibly humble individual who leads by example and is respectful of the knowledge of others. He has empowered others and given clinicians the opportunities, confidence and freedom to develop services which have improved staff development and therefore the quality of patient care delivered. Martin's unique skill is that he encourages the Occupational Therapists and Physiotherapists he supports, to work in pioneering roles, which do not yet exist in



### IN OTHER NEWS...

 Congratulations to Charlotte Meek for winning the first QI monthly prize after registering her project for improving diabetic foot care. Charlotte, physiotherapist (vascular) based at RBH, was presented with a box of chocolates by Alan Betts director of improvement and integration.

• LONG Covid-19 Clinic—Iain Hill, Consultant Physiotherapist

Long Covid-19: Signs and symptoms that develop during or following an infection consistent with covid-19 and which continue for more than four weeks and are not explained by an alternative diagnosis. Approx 10% of people develop Long Covid; health/social care workers disproportionately affected What is on offer?:

Two rehab programmes for Long-COVID: Lifestyle Education Graduated, gentle, exercise programme.

Atrophy/deconditioning Patients—One to one exercise planning/ liaise with local gym

Post-Exercise Malaise : One to one pacing and lifestyle advice

**Dysfunctional breathing clinic** 

### • Need a physio?

Our musculoskeletal physiotherapy service is specifically for Team UHD and operates clinics at Poole and RBH. Referring yourself is easy and confidential - just follow this link to submit a Physio Self Referral. Once you've been triaged, you'll be seen by a senior physiotherapist who can offer you manual treatment or health and exercise guidance and advice, whether to get you back to work or to help.





# ORTHOPAEDICS

The orthopaedic therapy team have been busy since services resumed after COVID. Aaron Bailie (senior physiotherapist) led the introduction of Day 0 mobilisation for TKRs and THRs. He liaised with the orthopaedic consultants and the nursing staff who were keen to implement this change. He also had to look at our therapy staffing and we made a change to the late shifts in order to support this service change long term. We knew that this would spread our patient contacts more evenly through the day and would assist with reducing length of stay for patients.

Ross Darch (Team Lead) and Kim Coles (senior PT) are currently writing up the implementation and results of the new day case uni knee replacement pathway for journal publication. Chris Efford (Team Lead-BPC) and Catherine Holdsworth (senior PT) are currently writing up an RCT conducted in the department around Day 0 mobilisation for journal publication. Our band 5 staff have also been involved in projects looking at developing and improving the service:

- Sam Scaratt (PT) has been monitoring of our length of stay and also looking at the number of patients we do manage to mobilise Day 0, having set ourselves a target of 65%.
- Heidi Piper (PT) looked at whether we do the little things well, and has completed an audit around equipment provision, notes and communication with nursing staff.
- Molly Marshall (PT) has been looking at the management of pain post-op and continued previous work started by Cat Renton, who had liaised with our psychology team. We are hoping from this to looking at developing some pain resources for staff and patients while they are in hospital.
- Emily Stott (PT) has reviewed some of our shoulder booklets given a recent change to one of the protocols.

Our team prides ourselves on being active members of the MDT and facilitating change along the whole patient pathway.

# SPEECH AND LANGUAGE THERAPY

Speech and Language Therapists (SLTs) support and treat patients with swallowing and communication impairments. SLTs work with both paediatric and adult populations across inpatient, outpatient and community settings but here at UHD we work with adult inpatients or as part of the early supported discharge team from the stroke ward.

At UHD, we work in a variety of different areas including respiratory, surgical, OPM, OPAU, ITU, NeuroSMART and stroke. We provide innovative patient-centred care while working closely with other AHPs including dietitians, physiotherapists and occupational therapists. We also work with radiographers to complete videofluosocopic swallow studies which are x-ray examinations of people's swallow. These studies help inform potential for swallow rehab – yes you can do exercises to improve your swallow! – and to determine whether strategies can be used to avoid food or drink modification.

We are particularly proud of our recent integration within the MDT on OPAU and the frailty pathway. This has improved our assessment response time and allowed us to provide essential information inperson, allowing for greater patient-centred care.

In stroke, we have expanded our weekend service through joint working across Poole and Bournemouth which has improved continuity of care and strengthened our links with SLT colleagues in the Trust.

Supporting patients and families to communicate with each other, to eat and drink safely, to improve quality of life and to support people to make informed decisions about their options is hugely rewarding and the impact lifelong.

## AHP SUPPORT WORKFORCE

### Think therapy

Our therapy teams have launched an innovative 'Think Therapy' training programme to give healthcare support workers the skills to support patient rehabilitation. The project is based on the idea that every member of clinical and support staff a patient comes across while in hospital should have a positive impact on their treatment.

By teaching healthcare support workers basic physical, mental and cognitive therapy methods, this allows them to support patients outside of their more formal therapy sessions, to aid their recovery and prevent deterioration. Thanks to the success of the project, further opportunities have been developed to enable student nurses to shadow therapy assistants, physiotherapists and occupational therapists at work giving patients even more access to therapy during their journey in the hospital.

Therapy assistant, Emma Sessa, is leading the project. She said: "'Think Therapy' means 'think holistically'. If every person a patient comes into contact with assisted with basic rehabilitation, it gives our patients the confidence they need to develop new habits, be independent and speed their recovery along. "We are excited to take this project further to reach more teams. Our healthcare support workers often have the most contact with our patients therefore their input and impact they can have is invaluable."



### AHP SUPPORT WORKFORCE

### Find out more about life as a hospital therapist...

"Hi, we're Tish, Leanne and Ellie, and we're the exercise leaders based at Christchurch Hospital's physiotherapy department. "Our role mainly consists of treating a range of different injuries, conditions and post-operative patients through rehabilitation, hands on therapy and running group classes. Tish and Leanne have been in the role for five years, and I've been here for two years."

"Our role allows us to meet many different people and guide them through their recovery right to the point that they are able to return to their normal activities, whether that's playing sport or taking the dog for a walk. Day to day our case load differs therapist noun: someone whose job is to treat a particular type of mental or physical illness or disability, usually with a particular type of therapy from postoperative patients to strength testing to manual therapy and much more.

"Through the pandemic, we had to completely adapt to how we work and deliver our service. While we have utilised technology to allow us to deliver advice over to patients over the phone or via a video call, we're really glad to be getting back to seeing patients face to face. The Bournemouth and Christchurch departments came together when Covid hit, so we are now one big supportive team which is great to be a part of. "It's a privilege to use our skills to treat a wide variety of patients while being part of a really supportive and encouraging team. It is so heart-warming to see people get back to full function."



# **Chief Allied Health Professions Officer (CAHPO) Awards 2021**

Hundreds of nominations were made for the following categories in these National Awards:

- CAHPO Award.
- Creative provision of placements award,
- Public Health Champion Award,
- AHP Workforce Transformation Award,
- AHP Digital practice Award,
- AHP Innovation and Delivery of Systems Award,
- AHP Research Impact Award,
- AHP Compassionate Leadership Award,

Congratulations to **Chris Efford**, from **UHD** who is one of 3 nominations to be shortlisted for the AHP digital Practice award—see further details below.

This year, the CAHPO Awards ceremony will be held virtually on AHPs' Day (the 14th of October), and livestreamed from 6:15pm - 7:45pm so everyone can be a part of celebrating the achievements of our AHP colleagues. You can view the livestream here-<u>https://www.england.nhs.uk/livestreams/</u> Tune in at 6.30pm to find out how Chris gets on!

#### CAHPO Awards 2021 | AHP digital practice award shortlist Awarded by NHSX



Christopher Bond and Michael Guard, Highly Specialist Musculoskeletal (MSK) Physiotherapists, Guy's and St Thomas' NHS Foundation Trust Validation and implementation of an automated system that disseminates, collects, analyses and reports patient reported outcome measures (PROMS) and demographic data within the integrated- MSK department at Guys and St. Thomas'.

Chris Efford, MSK Outpatients Therapy Team, University Hospitals Dorset Rapidly developing & implementing an electronic notes system providing a free digital response enabling safe, effective continuity of outpatient care by teams merged, relocated & remote working due to COVID.



#### Stephanie Mansell, Consultant respiratory Physiotherapist and Dr lain Loughran (PhD), Senior Research Manager, Royal Free London NHS Foundation Trust

ONCALLbuddy is an educational application for AHPs working in urgent and emergency respiratory areas. ONCALLbuddy provides an accessible overview of common conditions, assessment, and treatment interventions.