

Allied Health Professionals Deliver Public Health

Handbook of Profession Specific Descriptors for Public Health



Developed in collaboration with
Office for Health Improvement and Disparities and **NHS England**

Allied Health Professionals deliver

Handbook of Profession Specific Descriptors for Public Health

Kanar Ahmed (AHP Public Health Clinical Advisor, Office for Health Improvement and Disparities)

Laura Charlesworth (Independent)

Dr Nicky Eddison (Consultant Orthotist/Associate Professor, Staffordshire University and The Royal Wolverhampton NHS Trust)

Alice Faux-Nightingale (Research associate, Staffordshire University)

Dr Aoife Healy (Associate Professor, Staffordshire University)

Linda Hindle (Deputy Chief AHP Officer for England and National Engagement Lead for Police, Fire and Ambulance Services, Office for Health Improvement and Disparities)

Katrina Kennedy (Associate Director of Allied Health Professionals, Hampshire Hospitals NHS Foundation Trust)

Enza Leone (Research associate, Staffordshire University)

Professor Nachiappan Chockalingam (Staffordshire University)

Carolyn Royse (Lead Orthotist, Orthotics service manager, public health fellow, Dorset County Hospital NHS Foundation Trust)

With thanks to the public health representatives from the 14 Allied Health Professional bodies for their contributions.

Introduction

This handbook contains profession specific descriptors for each of the Allied Health Professions (AHPs) and includes the support workforce in relation to their role in public health.

The Allied Health Professions in public health work programme have provided a number of resources and tools to enable AHPs to be leaders in public health within the wider public health workforce. Many of these resources can be located at the Allied Health Professions public health [hub](#).

As explained in the [UK AHP Public Health Strategic Framework \(2019-2024\)](#), the AHPs work across all sectors related to health and wellbeing including but not limited to health, social care, education, justice, voluntary sector, housing, academia, business and private practice and they collectively make up the third largest workforce in the NHS. The AHP professions include within this handbook are: art therapy, podiatry, dietetics, drama therapy, music therapy, occupational therapy, operating department practice, orthoptics, osteopathy, paramedic practice, physiotherapy, prosthetics and orthotics, radiography (diagnostic and therapeutic) and speech and language therapy. This document also makes reference to AHP support workers, who are perfectly placed to support patients and the public to improve their health and wellbeing and reduce health inequalities. They spend a significant amount of time with and develop a relationship with patients and their local community knowledge gives increased credibility.

This document has been developed to help AHP teams and their employers to understand what we mean by the wider determinants of health, health improvement, population health care, health protection and health inequalities. It will highlight where and how AHP support worker roles can influence and improve the public's health and encourage the reader to reflect on their current and potential roles and responsibilities.

The initial phase of this research was commissioned by Public Health England and Health Education England. Staffordshire University were selected to develop profession-specific descriptors relating to public health for Allied Health Professionals and the support workforce¹. The research team aimed to interview one public health lead for each Allied Health Profession to represent the registered workforce, and one individual from each profession to represent the support workforce. The information gathered via the interviews was supplemented with information received via an online survey which was open to all UK Allied Health Professionals and support workers to provide examples of how their profession contributes to public health. The survey was open from June 2021 to March 2022 and was shared widely across social media platforms.

A second phase of this research was undertaken by Laura Charlesworth and Katrina Kennedy² to undertake additional desktop research to demonstrate the breadth of case study examples across the Allied Health Professions.

¹ The research team; Dr Nicky Eddison, Alice Faux-Nightingale (Research associate, Staffordshire University), Dr Aoife Healy (Associate Professor, Staffordshire University), Enza Leone (Research associate, Staffordshire University), Carolyn Royse (Lead Orthotist/Orthotics service manager, public health fellow, Dorset County Hospital NHS Foundation Trust) and Professor Nachiappan Chockalingam (Staffordshire University).

² Laura Charlesworth (Independent), Katrina Kennedy (Associate Director of Allied Health Professionals, Hampshire Hospitals NHS Foundation Trust)

Contents

Page

2	Introduction
3	Contents
4	Model of Public health for AHP
6	Art Therapy
9	Dietetics
13	Dramatherapy
16	Music therapy
19	Occupational Therapy
23	Operational Department Practitioners
26	Orthoptist
29	Osteopathy
31	Paramedic
34	Physiotherapy
37	Podiatry
39	Prosthetist and Orthotist
43	Radiography
46	Speech and Language Therapy

Model of public health for AHPs

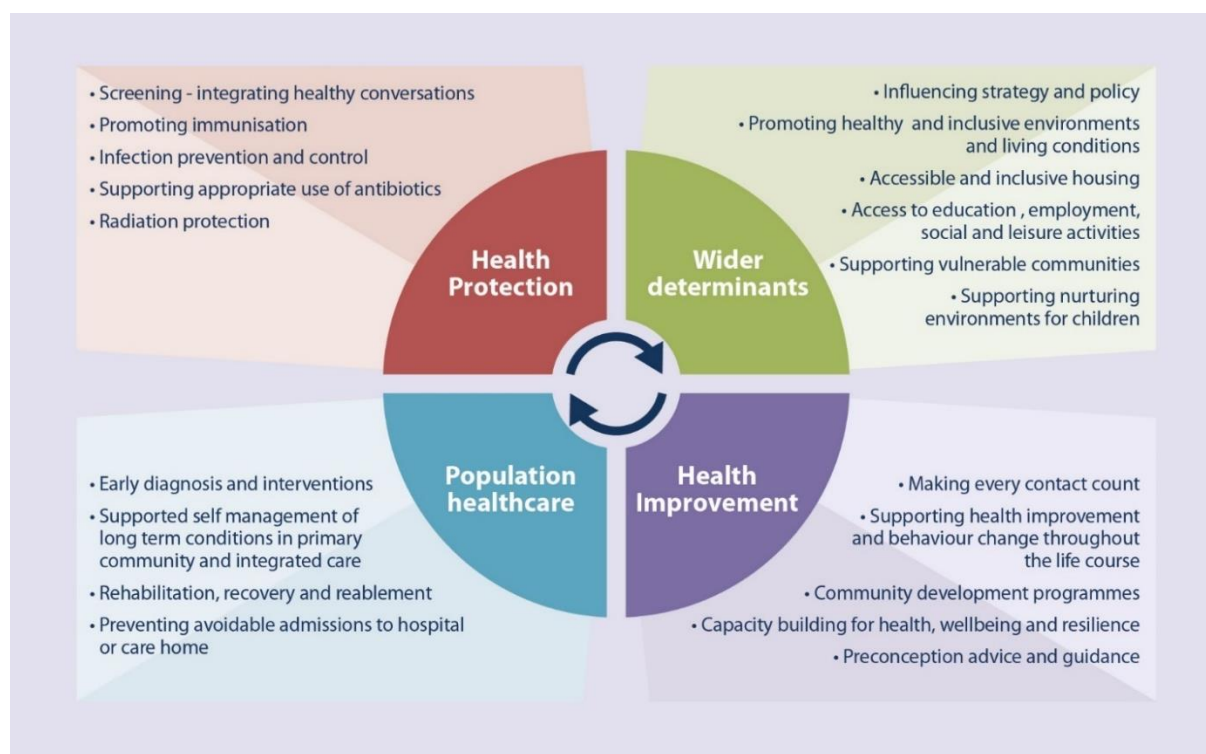
The format of the descriptors within this document is based on the model of public health for AHPs contained within the [UK AHP Public Health Strategic Framework](#) and explained below.

The Faculty of Public Health define public health as the science and art of promoting and protecting health and wellbeing, preventing ill-health and prolonging life through the organised efforts of society.

AHPs contribute to public health through interventions affecting the physical, mental and social wellbeing of individuals, communities and populations.

There are a number of definitions of public health; we have used these to develop a model relevant to the roles of AHPs. This model gives examples of how AHPs may contribute to public health across four areas; this will vary by profession and is not intended to be exhaustive.

- **Wider determinants** – also known as social determinants, are a diverse range of social, economic, and environmental factors which impact on people’s health and wellbeing. Addressing the wider determinants of health and wellbeing has a key role to play in reducing health inequalities.
- **Health Improvement** - describes the work to improve the health and mental wellbeing of individuals, communities or populations through enabling and encouraging healthy lifestyle choices and developing resilience.
- **Population healthcare** – Population healthcare is concerned with maximising the population benefits of healthcare by prioritizing available resources, by preventing diseases and by improving health-related outcomes through design, access, utilisation and evaluation of effective and efficient healthcare interventions and pathways of care.
- **Health Protection** – aims to protect the population’s health from communicable diseases and other threats, while reducing health inequalities



These descriptors provide a range of examples of the different ways each AHP profession engages in public health. The list is not intended to be exhaustive. Many examples will span more than one area of public health practice so for the purpose of simplicity these have been positioned in the most obvious domain.

Art Therapy - Profession specific descriptor for registered professionals

Art Therapists use non-verbal psychological therapy to support people to make changes in their lives, which can improve both mental and physical wellbeing. The person accessing arts therapies can: explore choices through artwork, trial a different version of themselves in role-play, find their voice with musical improvisation and learn to listen to their physical needs through movement. Arts therapists have a range of transferrable skills which can be activated in leadership roles to support the equally complex agenda of public health.

Wider Determinants

Art Therapists work across a range of sectors. This can include work with housing, education, the charity sector, mental health, and various community-based settings. Through working in this diverse range of sectors, Art Therapists work across organisations to improve the lives of people of all ages using their services. For example, Art Therapists have demonstrated that leading parent-infant art therapy targeted at families vulnerable to poor attachment relationships and who may be facing multiple deprivations and mental health difficulties can be highly effective. Through the Art Therapy session, positive parent-infant interactions are observed whilst giving therapeutic support to parental wellbeing, encouraging attuned responsive parenting, and increasing behaviours which build secure attachments.

Art Therapists can also take on the role of social prescribing. Examples of this include supporting individuals with severe mental illness to be discharged from inpatient settings. Working one to one to identify where and how individuals might access wider support following discharge has proved valuable to understanding and meeting the needs of individuals post discharge. Art Therapists can also be key to actively signpost through knowledge of local social groups, using the opportunity if an individual has engaged well in art therapy, to look for further community-based art groups (e.g., creative charity, creative arts, charities) to support the individual further.

On a day-to-day basis, Art Therapists think deeply about what might be going on in a service user's internal world, asking important questions such as "what are they going to do for the rest of the week now? What's their sleep hygiene? What's their routine". This approach considers the wider determinants in routine practice.

Health Improvement

Art Therapists contribute to health improvement, they consider how to make moments with service users meaningful in terms of the long-term effects on their life, by bringing in elements of psychoeducation, but also bringing elements of thinking about their own psychological and physical well-being. For example, Children and Adolescent Mental Health (CAMHs) inpatient services for children and adolescents, therapeutic placements for children in care adoption, and support services are all very specific services that Art Therapists work indirectly with for health improvement.

Art Therapists work across the life course. This includes maternity and perinatal parent-infant mental health. Art therapists use artmaking to explore emotional difficulties such as anxiety in

pregnancy or postnatal depression. Focused on improving relationships between parents and their babies.

Art Therapists also have a wider role in health improvement. Through service user interactions, they can have a diverse range of conversations to support health and wellbeing. Some examples of the role of Art Therapists in health improvement include; educating about sexual health and safety, self-harm, suicide prevention and reduction of infection, offering training on how to clean self-harm wounds properly, dangers of paracetamol overdose and sepsis.

Population Healthcare

Art Therapists play a key role in child and adolescent mental health services working with education provision, including education for fostered and adopted children or children with special guardianship orders. Art therapists have also a role within social care. Working with adult populations who've experienced trauma, with adults with eating disorders and personality disorders, people at high risk of mental health and people with anxiety and depression.

Art Therapists work in schools and can work with children who are adopted and who are struggling with social, emotional, and mental health wellbeing. Art Therapists can work with the schools and their settings around the impact on children and developmental trauma, not necessarily just from an Art Therapy perspective, but more psychoeducation.

Health Protection

During the pandemic, Art Therapists played an extended role in supporting conversations around infection prevention and COVID-19-19 vaccination. Art Therapists are also involved in ensuring that hospitals follow policies regarding yellow bracelets after treatment, talking to clients about wearing sunscreen, talking about phone use, and thinking about social stories and flu jabs.

Art Therapists have contributed to thinking about vaccine hesitancy, opening those conversations around fears about the vaccine, the pandemic, infection prevention, and vaccination becoming compulsory.

Art Therapists promoted a vaccination program for young gay, bisexual men, and transgender groups, who are 15 and above. Some of the people they collaborate with are working with many young people that are presenting in these populations.

Art Therapy - Wider Reading and Case Study Examples

<h3>Health Protection</h3>	<h3>Wider Determinants</h3> <ul style="list-style-type: none">• Using social prescribing within art therapy sessions as part of discharge planning• Art therapy in a range of gallery-based arts interventions for the wellbeing of parents and infants• Art Therapy – AHP as Prescriber – Social Prescribing
<h3>Population Healthcare</h3> <ul style="list-style-type: none">• Arts therapy leadership activates creative resources which promote individual, team, and community growth in mental health settings	<h3>Health Improvement</h3> <ul style="list-style-type: none">• The added value of art therapy practice within maternity and perinatal parent-infant mental health• Art Psychotherapy in the community. Addressing health inequalities through Social Prescribing - an Asset Based Community Development (ABCD) approach• Nourishing the soul: Art therapy with EMDR for the treatment of PTSD and bulimia in an adult mental health service

Dietetics - Profession specific descriptor for registered professionals and support workers

As experts in nutrition, the dietetic workforce understand that good diet and nutrition plays a significant role in the prevention of many of the long-term conditions that impact on the lives of an ever-increasing number of people and are costly to health and care services. But diet is not the only factor contributing to the increasing prevalence of long-term conditions such as diabetes, obesity, cancer, respiratory disease and malnutrition. The dietetic workforce is already talking to people in their care about other parts of their lifestyle that contribute to the development of ill-health such as physical activity, smoking, alcohol consumption and loneliness, and are able to support people where mental health may be impacting their eating habits. Dietitians recognise the role of nutrition and skills relating to food growing and food preparation in social prescribing, which supports the wellbeing, knowledge development of the people accessing services.

Wider Determinants

Dietitians play a key role in addressing the wider determinants of health. The dietetic workforce considers the additional factors that might impact on nutrition from the perspective of an individual or community, including identification of contributory factors impacting on nutritional health, known as the social determinants of health. Dietitians understand that the unjust gap in health equity is caused by the environment in which we are born, grow, live, work and age, leading to an avoidable reduction on quality and length of life. Dietitians are committed to supporting those living in food poverty, identifying and working to reduce barriers to accessing food and empowering individuals to prepare balanced meals including when sourcing food via food banks, as well as undertaking research and advocacy work to tackle the root causes of poverty.

Working strategically to consider environmental factors associated with dietetic practice through the [One Blue Dot](#) campaign through to the development of diet sheets to support dietitians and dietetic support workers to focus on sustainable diets. The dietetic workforce is key to support vulnerable populations, through initiatives such as a Dietitian-led training course for support workers to address the nutritional needs of the people they support when working with adults with a learning disability.

Dietitians also support maternal and infant nutrition. They work with health visiting services, social services, young families' teams, oral health teams and other professionals, and the public to provide information about how to introduce complementary feeding, correct portion sizes for children, safe formula feeding, and wider areas associated with infant nutrition and health. Dietitians also support initiatives to improve breastfeeding rates. Working in partnership with voluntary sector organisations (*The Breastfeeding network*), the community and public health, to provide group sessions for breastfeeding parents and to provide information about the benefits of breastfeeding.

Dietitians play a key role in paediatric health, ensuring children have the best start in life which we know is important when considering the first 4 years of a child's life have a significant impact on future health and life chances. There are many initiatives and good practices relating

to dietitians and paediatric health, including work taking place by Dietitians to increase the uptake of universal children's vitamins, particularly for vulnerable or deprived communities.

Dietitians are involved in policy development, critique and implementation, for example tailored food nutrition and hydration policies for organisations such as care or nursing homes and the interpretation of local, regional or national policies pertaining to Nutrition and Dietetics.

The dietetic workforce also has a role associated with the factors affecting food supply and consumption patterns and their health and environmental implications. This includes reducing greenhouse gas emissions and food waste.

Health Improvement

The dietetic workforce integrates Making Every Contact Count (MECC) within their daily practice. This includes using consultation opportunities to talk to service users about smoking cessation, alcohol consumption levels and signpost to other services as needed. Further examples where Dietitians are supporting health improvement through behaviour change includes the role of Dietitians in the delivery of cardiac rehabilitation talks about healthy eating, helping service users who have had a cardiac event learn how to eat healthier to try to prevent further cardiac events in the future. In addition, Dietitians and dietetic support workers signpost people to other services for example, Improving Access to Psychological Therapy (IAPT), citizens' advice, and other services, ensuring access to wider support to improve health and mental wellbeing.

Dietitians play an important role within the community, for example leading programmes to provide information on diabetes or food allergies. This can often be undertaken as group sessions, also building a community around people who are newly diagnosed with their condition, establishing a social support network for individuals to help with the social and psychological elements associated with their dietary needs which supports the emotional wellbeing of the populations who attend the sessions. Dietitians also address Health inequalities by working with a diverse range of vulnerable groups to address food insecurity.

Population Healthcare

Dietitians work across the life course supporting maternal health and early feeding through to end-of-life care. Their work can focus on early interventions to prevent health issues, such as working across education teams in local authorities, particularly early years, to provide advice for early years establishments about healthy food and drink practices. Educating on the nutritional requirements for children under 5 years old and why they're different to other age groups, environmental aspects of promoting good health and eating environments and habits can reduce childhood obesity. When considering population level healthy eating, Dietitians work with departments in local authorities including facilities, catering, leisure, community learning and development teams (all-around adult education). They work with planning: involving fast-food outlets in the area, working with them around licenses; encouraging businesses to adopt healthier cooking practices. They also work with environmental health officers.

The dietetic workforce also supports self-management of groups of people with long term conditions. For example, dietitians and dietetic support workers host support groups to educate

and promote the management of long-term conditions: *The Desmond Program* for people with type 2 diabetes, and similar groups for type 1 diabetes, cow's milk allergies and coeliac disease. Group education sessions are hosted in the community for specific populations. These can provide dietary advice and guidance for the groups, for example, culturally specific food models. Dietitians have recently started to work within long COVID-19 clinics, providing nutrition support and supporting other professionals with their care, to support the health and wellbeing of people with long COVID-19.

Dietitians have an important role in support the health and wellbeing of the care home population. Dietetic teams deliver care in care homes to monitor the diet and nutritional needs of the residents. This can prevent avoidable admissions to hospital and prevent possible (long-term) complications associated with malnutrition or as a result of diabetes. Furthermore, dietetic teams train staff in care homes to manage the residents' nutrition and hydration, e.g., the Food First approach and food fortification. Working with people to support their dietary and nutritional needs can prevent secondary conditions and the need for further health care e.g., reducing the risk of falls, and supporting skin integrity. Dietitians use the Malnutrition Universal Screening Tools (MUST), and train care home staff and acute staff to use these tools, to highlight malnutrition and the risk of malnutrition in this population.

Dietitians often work with public health departments within a council or government departments such as the Department for Environment, Food and Rural Affairs or the Office for Health Improvement and Disparities.

Health Protection

Dietitians offer food hygiene advice including in cancer services and in pregnancy to prevent foodborne infections. Dietitians have a role in the media, ensuring accurate evidenced based messages regarding health and nutrition are shared with the public on media platforms reaching a wide audience.

Dietetics - Wider Reading and Case Study Examples

Health Protection

Wider Determinants

- Eating Well for Adults with a Learning Disability – a dietitian-led training course for support workers in addressing the nutritional needs of the people they support
- Disease Prevention in South Asian Community Through Healthy Eating Awareness via social media
- A Nutrition Education and Cooking Intervention in a UK Foodbank
- Nutrition Skills for Life@NSFL: Providing quality assured nutrition skills training for community workers and support for the

development of community food and health initiatives

- Slow cooking for communities

Population Healthcare

- Developing a Foodtalk Game as a nutrition and health training tool for early years staff
- An Impact Evaluation Report on the 'Healthy Little Eaters' nutrition education cooking programme in Children's Centres in Brent

Health Improvement

- Dietitian-led intensive lifestyle intervention programme for children identified as overweight or obese by NCMP in the London Borough of Brent: an overview
- Impact and retained behaviour change following participation in Cook and Eat Well courses in Southwark Children's Centres
- Preparing patients to recover more quickly - "Prehabilitation" for major abdominal cancer surgery
- Dietetics – Refer to a link worker Social Prescribing

Dramatherapy - Profession specific descriptor for registered professionals

Dramatherapists work across a wide range of settings, using a non-direct psychological approach and at times, non-verbal to support people to communicate, make change and improve mental and physical well-being. Although any population can benefit from dramatherapy interventions it can be particularly beneficial when working with people who have psychosis, Autism, learning disabilities, dementia, physical/sexual abuse, PTSD and mental illness. Dramatherapists are both clinicians and artists, who draw on their knowledge of theatre and therapy to use as mediums for psychological therapy. Dramatherapists can be found in many varying settings such as schools, in-patient, community mental health teams, social care, secure care, prisons and the voluntary sector where they can influence the health and wellbeing of individuals, carers and their teams. Dramatherapists have a range of transferrable skills which can be activated in leadership roles, public health and research.

Wider Determinants

Dramatherapists work across a range of sectors, including housing, education, the charity sector, mental health, and various community-based settings. Through working in this diverse range of sectors, Dramatherapists work across organisations to improve the lives of people of all ages using services. For example, dramatherapists have led on developing transition groups in line with policy changes, for people with learning disabilities leaving hospital after long-term admissions. The Get Going group was developed to help support inpatients make the transition back to their community. The group allows individuals to discuss the community they will be moving into whilst providing them with social links which they can use as they make that transition into an independent life.

Dramatherapists can promote wider health education and improve health literacy through their work. One example of this is through the running of book groups for people with learning disabilities, using Books Beyond Words, which tell stories through pictures and role-play. This programme gives participants a better understanding of how to access healthcare services they may require, what to expect while they are there, and encourages greater engagement with necessary routine health checks.

Dramatherapists often support staff, such as nurses, students and support workers in supervision, training and de-briefs. The inclusion of support workers in Dramatherapy sessions alongside people with learning difficulties has proven advantageous. It enables support workers to develop friendships and greater social interactions for themselves and the people with learning disabilities through the use of play, story-telling and communication which improves their relationships.

Dramatherapists are adaptable and creative, an example of this is the role of Dramatherapists working with individuals with learning difficulties where iPads were provided to allow individuals to join sessions from home during the pandemic. In addition to participating in the programme, people with learning difficulties further developed their digital literacy which enabled them to maintain social links with their friends and family at other times.

Dramatherapists are involved with wider policy and guideline development. They are represented on the learning disability senate, contribute to national and NICE guidelines where relevant and develop and support patient and public involvement groups with initiatives such as performance-based story telling of lived experiences. By sharing evidence to guide the policies for groups that they work with, for example, policies about the emotional wellbeing of young people in education

dramatherapists actively make changes around policy and practice for the vulnerable groups they work with.

Dramatherapists can also take on the role of social prescribing. Examples of this include supporting individuals with severe mental illness to be discharged from inpatient settings. Working one to one to identify where and how individuals might access wider support following discharge and actively signposting people through their knowledge of local social groups, to support individuals further.

Health Improvement

Dramatherapists have a role that includes making referrals to other Allied Health Professionals (AHPs) or health services to ensure that service users receive the health and care that they need. Working across a range of settings, Dramatherapists working in hospitals may have access to several community activities or recovery colleges to which they can signpost their service users as they transition into community living.

Dramatherapists may include diagnostic screening as part of their work with service users, for example, Autism or anxiety disorders such as obsessive-compulsive disorder screening, to ensure that they can access appropriate healthcare and support to meet their needs and promote good health and quality of life.

Dramatherapists have a social prescribing mindset and in addition to signposting to clinical services, they will also socially prescribe to community groups that are available in the local area to help address social isolation or other non-medical concerns.

Population Healthcare

Dramatherapists can work with vulnerable populations, for example, people with learning disabilities, or inpatients on psychiatric wards, who may not have the language/communication to express how they're feeling, and through therapy can support them to share their thoughts and feelings with others. They can provide psychological therapy and social interventions to support people who may find it difficult to access other forms of therapy.

Dramatherapists can work in prisons, conducting group therapy to support offenders in learning social skills such as empathy and understanding the impact of their offending. They can also work with individuals who experience long term illnesses or disabilities to support them with their condition and with the impact of their long-term rehabilitation.

Dramatherapy is well suited to working with children and young people due to the use of play, performance, role play and story-telling. Dramatherapists can play a key role in child and adolescent mental health services working with education provision, including education for fostered and adopted children or children with special guardianship orders. Dramatherapists often work in schools with children who are adopted and/or those who are struggling with social, emotional, and mental health wellbeing.

Health Protection

Dramatherapy can promote a greater understanding and practice of social skills such empathy, friendship building, turn-taking etc. which can support people in interacting with society, promoting health and wellbeing through social interactions (reduction of loneliness), relationships, and integration with their community.

During the pandemic, Dramatherapists used Books Beyond Words to discuss COVID-19 and the vaccine with service users to explain the situation to people with learning difficulties.

Dramatherapy - Wider Reading and Case Study Examples

Health Protection	Wider Determinants <ul style="list-style-type: none">• The Get Going Group: dramatherapy for people with learning disabilities and mental ill health• Books beyond words
Population Healthcare	Health Improvement

Music Therapy - Profession specific descriptor for registered professionals

Music Therapists draw upon the innate qualities of music to support people of all ages and abilities and at all stages of life; from helping newborn babies develop healthy bonds with their parents, to offering vital, sensitive and compassionate palliative care at the end of life. Central to how Music Therapy works is the therapeutic relationship that is established and developed, through engagement in live musical interaction and play between a therapist and client. A wide range of musical styles and instruments can be used, including the voice, and the music is often improvised. Using music in this way enables clients to create their own unique musical language in which to explore and connect with the world and express themselves.

Wider Determinants

Music Therapists work across a range of sectors and ages. This can include working with newborn babies to end of life care. Through working with diverse populations, Music Therapists work across organisations to improve the lives of people of all ages using their services. For example, Music Therapists can work with new-born and very young babies to form healthy bonds with their parents, which is important given the significance of the first 1000 days of a child's life. Through Music Therapy sessions, positive parent-child interactions are observed whilst giving therapeutic support to parental wellbeing, encouraging attuned responsive parenting, and increasing behaviours which build secure attachments.

Music Therapists provide support for marginalised communities, for example, a group was established for people from the LGBTQ+ community to enable them to find their voice - metaphorically and physically - through voice work. This also supported and promoted identity work for the people who took part and built resilience and wellbeing within that community.

Music Therapists can also take on the role of social prescribing. For example, a social prescribing project co-ordinated by a Patient Participation Group where General Practitioners can refer patients and carers to the group. The group aims to support memory and reminiscence through music, have a positive impact on mood, provide opportunities for participation and reduce social isolation and provide cognitive stimulation and challenge through musical activities.

Health Improvement

Making Every Contact Count (MECC) is a prominent element of Music Therapy, and Music Therapists include healthy conversations with service users as part of the appointment, using any concerns to signpost people to other services which may be relevant. Music Therapists have a social prescribing mindset and in addition to signposting to clinical services, they will also socially prescribe to community groups that are available in the local area to help address social isolation or other non-medical concerns.

Population Healthcare

Music Therapists can be involved with the provision of community services and groups which provide support and therapy to support the needs of a variety of conditions and provide a social network that can also be of support and contribute towards the overall wellbeing of the participants for example, a mental health jamming group, which offers support to people with mental health needs, community choirs, stroke choirs, aphasia groups, parkinson's groups, and dementia singing groups. These groups can also contribute to preventing hospital admissions and reducing the use of medication by supporting the participants and providing them with strategies that they can use to manage their condition.

Music Therapists also work in the psychological domain to develop attachment and family bonds such as in cases of adoption or disability. By using music with children who may have attachment disorders, for example, autistic children, Music Therapists can develop the children's relationships with their family through nonverbal musical relationships established by playing instruments together. These relationships form part of a nurturing environment for children.

Music Therapists working in special schools and providing mental health therapy in mainstream schools can provide access to education, support nurturing environments for children, and promote the development of relationships between children and their peers. These may also be able to engage with education better because music therapists have found a way for a teacher to understand how to better support the child or how to meaningfully engage with them.

Health Protection

Music Therapy - Wider Reading and Case Study Examples

Health Protection	Wider Determinants <ul style="list-style-type: none">• Music Therapy – AHPs promoting, growing and developing Social Prescribing
Population Healthcare	Health Improvement <ul style="list-style-type: none">• What is the impact of a Neurologic Music Therapy service on an inpatient acute Stroke Unit?• Evaluating the Impact of Music Therapy for Children with Dementia• The impact of early intervention specialist music therapy for patients' rehabilitation, recovery, and wellbeing on a major trauma ward

Occupational Therapy - Profession specific descriptor for registered professionals and support workers

An Occupational therapist helps people of all ages overcome challenges completing everyday tasks or activities – “occupations”. Occupational therapists see beyond diagnoses and limitations to hopes and aspirations. They look at relationships between the activities people do every day – their occupations – alongside the challenges they face and their environment. Then, they create a plan of goals and adjustments with the person targeted at achieving a specific set of activities. The plan is practical, realistic, and personal to the individual, to help them achieve the breakthroughs needed to elevate their everyday life. This support can give people a renewed sense of purpose. It can also open new opportunities and change the way people feel about the future.

Wider Determinants

Occupational therapists and support workers can support employment, vocational rehabilitation, and facilitating individuals with health and disability issues to gain and stay in work. They do this through increased awareness of work as a health outcome, being aware of the impact good work has on good health (bad work on bad health), facilitating discussions with employers and employees to develop health in work plans. Occupational therapists can complete the Statement of Fitness to Work (Fit note) and make recommendations through the AHP Health and Work report to support employees to remain at or return to work, with adjustments when needed. Occupational therapy support workers also provide AHP health and work reports to support reasonable accommodations in the workplace, assisting the employer and employee to develop well in work plans.

Occupational therapists support people with issues relating to factors such as health or digital literacy, poor housing, financial difficulties or safeguarding concerns through referral processes or signposting to the appropriate agencies and resources.

Occupational therapists carry out assessments of people's fitness to drive for people who need or want to get back to driving, allowing them to access work, education and their local community. Occupational therapists in the fire service carry out risk assessments for the environment and support the fire service in providing services for people who are at increased risk of fire and poor health outcomes.

Occupational therapists also work with families and schools advising on strategies, modifications and adaptations to equip children and young people to realise their developmental and educational potential.

Health Improvement

Occupational Therapists and support workers routinely utilise the Make Every Contact Count (MECC) approach, encouraging behaviour change and the adoption of health occupations. Occupational Therapists also practice social prescribing where they refer people to a range of local, non-clinical services to address people's needs in a holistic way and support people to take greater control of their own health.

Occupational therapists support people to participate in daily life through rehabilitation, assistive equipment or adapting the home. They contribute to housing adaptation work, for individuals and for social care and housing managers. They work as part of building complexes or wider building projects, supporting vulnerable communities, by ensuring the buildings are suitable and enabling environments.

Occupational therapists are leading the development of local networks to connect people to the voluntary sector for support with their physical and mental health. In some areas, clinicians use databases of online tools and available services locally, embedded into a clinical template to make referral and signposting quicker and simpler.

Occupational therapists work in or provide in reach to prison services. They work in partnership with prison services to identify and address people's health, care and environmental needs, as well as risk factors, particularly for those with additional needs due to mental or physical ill-health or learning disabilities.

Population Healthcare

Occupational therapy support workers work with a variety of people supporting people's recovery following illness, surgery and short periods of rehabilitation. Occupational therapy support workers can provide support and information about where people can access community services such as friendship groups, meal service providers, pendant alarms, falls prevention, day center and leisure activities, and can provide further details about the management of long-term health conditions.

They may prevent hospital readmission by providing call back services for people who have been discharged from hospital and providing rehabilitation for adults after hospital admission for falls or general health decline. They help people to achieve their goals at regaining independence previously had before illness or admission.

Occupational therapists assess and provide early intervention for developmental delays in children and young people. As well as design and deliver rehabilitation, recovery and reablement services for populations spanning the life course. They consider people in the context of their physical and social environments and help them identify solutions that reduce or remove barriers to participation in their homes and communities.

Occupational therapists work in older peoples mental health services providing evidenced based interventions designed to equip people with mild to-moderate dementia and their carers with the ability to continue to participate in daily life.

Transition teams in social care often include occupational therapists, helping people transitioning between services, for example, NHS involvement, social care involvement or education involvement.

Health Protection

Occupational therapy contributes to health protection by working with populations to make informed choices that protect their health and wellbeing.

This includes helping marginalised and disadvantaged groups understand the impact of their choices around immunisations, accessing screening services, habits that help and hinder infection prevention and control. As part of multiprofessional services occupational therapists help multi-agency teams understand the contextual needs of populations, such as cultural norms, socio-economic drivers and levels of hesitancy and escalate trends to central data and intelligence sources to help show shared areas of where interventions are working well and where they are working less well.

Occupational therapists carry out preventative checks to reduce the need for additional health services or admissions to hospital. Part of this involves screening for preventative measures which could be put in place. This might involve providing equipment to prevent infection, for example by providing pressure relieving equipment for pressure sores.

Occupational Therapists – Wider Reading and Case Study Examples

<h3>Health Protection</h3> <ul style="list-style-type: none">Occupational therapy leadership within the Fire Service to reduce fire risk and address health and wellbeing in vulnerable communities	<h3>Wider Determinants</h3> <ul style="list-style-type: none">Addressing occupational deprivation as a way to reduce health inequalitiesOccupational therapy has a sustainability action plan to promote greener practice and contribute to wider healthOccupational Therapy report on health equityOccupational Therapy – Social Prescribing Active SignpostingOccupational Therapy Children – Social Prescribing Active Signposting
<h3>Population Healthcare</h3> <ul style="list-style-type: none">Occupational Therapists work with condition specific charities to provide treatment and support for people and their carersProvision of Therapeutic Boxing for Psychiatric Intensive Care UnitUnlocking the potential of children and young people https://www.rcot.co.uk/occupational-therapy-children-and-young-people	<h3>Health Improvement</h3> <ul style="list-style-type: none">Occupational Therapy and Social PrescribingHousing adaptations reportSport for Confidence and Stay Connected: Creating an online physical activity service <p>Sport for Confidence (2023) <i>Hardwiring Physical Activity into Health & Social Care</i> https://www.sportforconfidence.com/our-services/prevention-enablement-model/</p>

- Occupational Therapy Community 360
Social Prescribing
- Occupational Therapy – AHP Prescriber
Social Prescribing

Operating Department Practitioners - Profession specific descriptor for registered professionals and support workers

Operating Department Practitioners are specialist Allied Health Professionals (AHP) involved in the planning and delivery of perioperative care. They are primarily employed in surgical operating departments but may also work directly within or further their training to facilitate working within a variety of acute clinical settings. These include pre-operative assessment, emergency departments, critical care units, endoscopy suites, interventional radiology, cardiac catheter suites, obstetric theatres and reproductive medicine.

Wider Determinants

Operating Department Practitioners are very aware of wider determinants of health and health inequality, they work with patients from wide range of backgrounds including significant health inequalities but treat everyone the same within the perioperative environment, there are no specific schemes for different communities or populations.

Operating Department Practitioners are often involved in developing standards and policies within Trusts for Operating Department Practitioners to comply to and which keep everyone in the operating department safe.

Health Improvement

Operating Department Practitioners in preoperative assessment clinics have conversations with patients to provide wider health advice in preparation for surgery, for example using publications developed by the [Royal College of Anaesthetists](#).

Population Healthcare

Operating Department Practitioners engage in public health initiatives, sharing information about public health work through social media and newsletters. They also run ODP awareness social media campaigns such as the #notallODPswearscrubs campaign through Twitter and Facebook.

From the moment that the patient arrives in the anaesthetic room, the Operating Department Practitioners plays an important role in putting the patient at ease and providing emotional support. Going to theatre can be a very daunting experience for patients, Operating Department Practitioners work with patients to reassure and provide comfort during a very stressful period. They can also provide this emotional support for patients during the operation if the patient is conscious during the event, for example, if they have had a spinal anaesthetic or a local block.

Health Protection

Operating Department Practitioners may work in Occupational Health departments, providing wider support and advice about working conditions and working environment to support the health of the workforce.

Operating Department Practitioners have been used as vaccinators during the COVID-19 pandemic.

Operating Department Practitioners protect the health of staff and patients during surgery. They ensure that everyone avoids burns from electro surgical machines or other equipment hazards and they receive laser training to protect staff and patients from laser danger. For example, requiring staff to use eye protection sunglasses and other PPE while lasers are being used, the same with radiation safety in theatres with Xray machines.

Operating Department Practitioners are also responsible for checking anaesthetic machinery, to ensure it is functioning properly and ensuring that emergency equipment is available if needed, to make sure that patients are kept safe while they undergo surgery.

Operating Department Practitioners focus on infection prevention and control to protect health of patients undergoing surgery. The Scrub Practitioners during surgery are responsible for maintaining the sterile field during surgery and are responsible for any instruments or consumables that are needed for the surgery and making sure that they are sterile for the surgery. This is crucial to avoid contamination and risk of infection to the patient.

Operating Department Practitioners protect staff health, for example, associated with the risks of heavy lifting or prolonged standing periods, or other risk of back injury. All Operating Department Practitioners are given manual handling training at university level and are re-educated at a Trust level every year.

Operating Department Practitioner – Wider Reading and Case Study Examples

<p>Health Protection</p> <ul style="list-style-type: none">• Royal College of Anaesthetists – COVID-19-19	<p>Wider Determinants</p> <ul style="list-style-type: none">• Inequalities in Health Alliance
--	--

Population Healthcare

- Prevention and Perioperative care

Health Improvement

- Perioperative Optimisation Case Studies

Orthoptists- Profession specific descriptor for registered professionals and support workers

As experts in eye function and movement, Orthoptists are ideally placed to make a significant impact on the health and wellbeing of the population. The focus is on Making Every Contact Count (MECC) healthy behaviour conversation and highlighting the negative effects of risky behaviours on eye health. The Orthoptist workforce have a role in public health and support this through conversations with people in their care about other parts of their lifestyle that contribute to the development of ill-health such as physical activity, smoking, alcohol consumption and loneliness.

Wider Determinants

Orthoptists play a key role in addressing the wider determinants of health. Working strategically to contribute to the [PHE falls consensus statement](#), to support and encourage effective commissioning and the spreading of good practice to ensure older people are able to live without fear of falling and injury. Orthoptists also play a key role in paediatric health, ensuring children have the best start in life which we know is important when considering the first 4 years of a child's life have a significant impact on future health and life chances. There are many initiatives and good practices relating to orthoptist and paediatric health, including work taking place by orthoptist assistants working with school nurses to ensure timely provision of glasses and patches.

By treating problems with vision, Orthoptists promote access to education, social activities, play, and work. They work with teachers, and educational services for sensory impairment to ensure that any children with visual impairments can meaningfully engage with the curriculum and their peers. Research has been carried out which stated that teachers noticed huge improvements in how children who received treatment were able to relate to peers and were better able to focus on their work. Other research has shown that by screening children aged 4-5 for visual problems and treating any issues, Orthoptists were able to contribute to improved confidence and learning in children.

Health Improvement

The Orthoptist workforce integrates Making Every Contact Count (MECC) within their daily practice. This includes using consultation opportunities to talk to service users about smoking cessation, alcohol consumption levels and signpost to other services as needed. Further examples where Orthoptists are supporting health improvement through behaviour change includes the role of Orthoptists in the delivery of falls rehabilitation talks about maintaining and checking sight, helping service users who have had a fall to prevent further events in the future. In addition, Orthoptists and their support workers can signpost people or socially prescribe individuals to other services as needed for example, Improving Access to Psychological Therapy (IAPT), or citizens' advice, and other services, ensuring access to wider support to improve health and mental wellbeing.

Population Healthcare

Orthoptists were instrumental in the development of [Vision Screening materials and guidance](#) for 4-5 year old children in England. Vision screening for 4 to 5-year-olds is part of the healthy child programme, and the new materials summarise best practice for commissioners and those who carry out the tests, including school nurses, to ensure orthoptic-led screening is of a consistent high-quality and equitable across schools.

Orthoptists host clinics in the community so that they are accessible to patients. This supports vulnerable communities and ensures that as many children are screened and treated during their critical period which minimises vision problems during later life.

Orthoptists liaise with educational services, and voluntary sector charities with low vision services or who are related to the key populations that the orthoptists work with, for example local liaison officers can be employed by charities to deliver services in local area.

Health Protection

Orthoptists often pick up signs and symptoms in the early detection of cancer or illness. Orthoptists are able to identify problems in patients before they realise, they have a problem, enabling them to receive treatment before any significant symptoms or secondary conditions develop.

Orthoptists – Wider Reading and Case Study Examples

[Public Health - British and Irish Orthoptic Society](#)

Health Protection

Wider Determinants

- [Domiciliary Orthoptic Assessments for patients unable to attend the Hospital Eye Service after a stroke or who have a neurological disorder](#)
- [Visual processing difficulties assessment in children in Warrington, Widnes and Halton - a holistic approach](#)
- [Improving access to eye care for adults with learning disabilities in South Devon](#)

Population Healthcare

- [The Orthoptic visual processing difficulties \(VPD\) clinic during COVID-19-19 lockdown. The affectivity of telephone consultation implementation rather than face to face visits](#)

Health Improvement

- [Preceptorship Public Health Initiative: New Graduates](#)
- [The evolution of the Orthoptists role in supporting patients with Idiopathic Intracranial Hypertension](#)
- [Implementing a public-health style questionnaire into the Orthoptic case history: A prospective case report](#)
- [Orthoptists – Refer to a link worker Social Prescribing](#)

Osteopathy - Profession specific descriptor for registered professionals and support workers

Osteopaths care for people of all ages and believe that everyone can benefit from a whole-person approach to health. As highly trained Allied Health Professionals (AHPs), Osteopaths evaluate, diagnose and manage physiology associated with the entire musculoskeletal system and its relationship with other systems in the body. They design and provide a package of care that is tailored to individual needs, including manual therapy, rehabilitation exercises, screening and general health advice.

Wider Determinants

Osteopaths specialising in paediatric care work with children to support them with their needs and in doing so, promote the best start in life for the child and support wider access to education, social activities, and other areas of life.

Health Improvement

Osteopaths include Making Every Contact Count (MECC) in their practice. Part of the philosophy of Osteopathy is to consider the general health of an individual and so osteopaths will talk about the general health of a person as part of a consultation. They often talk to service users about health topics like weight management, the importance of physical activity, smoking cessation, stress management, and sleep hygiene. They promote general good health while equipping service users with the information they need to manage their health and condition beyond the work done during therapy. As part of this, they practice social prescribing and will refer service users to other campaigns which might benefit their health e.g., NHS campaigns and 'Couch to 5k'.

Nutrition training is included in the Osteopathy undergraduate course and in postgraduate training, thus, Osteopaths can provide information about accessing suitable nutrition to promote good general health.

Population Healthcare

Osteopaths are involved with the delivery of *Arthritis Action*, a self-management initiative where Osteopaths and Physiotherapists provide public health and self-management advice to people living with the symptoms of arthritis. The scheme includes the importance of physical activity, and weight management, motivating participants to self-manage their condition, and providing support in managing psychosocial factors associated with arthritis. Similar work takes place with *Age Concern* to provide health support for this population.

The Institute of Osteopathy regularly runs public health awareness events (for example, smoking awareness), to raise awareness of certain conditions.

Health Protection

In response to the COVID-19-19 pandemic, many Osteopaths have worked within the COVID-19-19 vaccination teams.

Osteopaths can help screen for several conditions as part of their practice. Osteoporosis is screened for while discussing a service user's case history, this is particularly relevant for service users who fit relevant characteristics e.g., female, early menopause, low weight, smoker. Osteopaths encourage service users to use the "*Fracture Risk Assessment Tool*" (FRAX) which can help them to identify their likelihood of developing a fracture, supporting those at a higher risk by allowing them to identify lifestyle changes etc. to minimise the risk of fracture (and associated hospital admissions) in the future.

Osteopathy – Wider Reading and Case Study Examples

Health Protection	Wider Determinants <ul style="list-style-type: none">• Osteopathy and active signposting – social prescribing• Osteopathy – AHPs promoting, growing and developing social prescribing
Population Healthcare	Health Improvement <ul style="list-style-type: none">• Improving access to better care for people with hip and/or knee pain: An AHP-led service in Primary Care• Osteopathy – physical activity social prescribing

Paramedic - Profession specific descriptor for registered professionals and support workers

Paramedics are registered healthcare professionals who have a unique role that crosses healthcare, public health, social care, and public safety, they work autonomously and within multidisciplinary team to providing care in a range of situations. Most well-known for working within Ambulance Services providing immediate and emergency care in response to 999 calls made by the public, Paramedics now also work in other areas of healthcare, for example GP practices, community services, hospital emergency departments and police custody suites.

Wider Determinants

Paramedics in the ambulance service are often the first and only healthcare professional that people in the hard-to-reach group accessed in time of crisis. Paramedics are increasingly aware of the wider factors and inequalities which contribute to the reasons why people call the paramedics in the first place e.g., social isolation, poverty, deprivation. For example, Paramedics work with St John Ambulance to increase accessibility of healthcare and first aid information in some hard-to-reach population such as people who are homeless.

Paramedics can work as disability assessors, where they would typically be subcontracted by the Department of Work and Pensions. In these roles they can look at how they can accommodate individual needs and support them long term from a welfare perspective. This might be support with a living environment, accessing employment/education, or supporting access to universal credit or disability allowance.

Health Improvement

Paramedics integrate Making Every Contact Count (MECC) into practice. They can talk to patients about smoking cessation, alcohol, social isolation and refer to the appropriate services. They are also able to provide further information and guidance specific to the situation they are called out to for example, the importance of not using mobile phones while driving, or speed limits in the area, drug usage and locations to access safer drugs.

Paramedics may be involved with primary care appointments in GPs, managing conditions and treating urgent presentations. They can also work with patients to support them in managing long term chronic conditions.

A copy of the Paramedic's report is sent on to GPs and can draw their attention to key details about the patient or suggest referrals to other services. Furthermore, Paramedics working in primary care also contribute towards health improvement by providing direct health promotion and behaviour change advice as well as signposting/referring individuals to local health improvement services, such as health improvement coaches or substance misuse services.

Paramedics have been involved with public CPR training, and training for the public in how to access and use the public access defibrillators to improve the survival of people who experience out-of-hospital cardiac arrests.

Population Healthcare

Paramedics act as a gateway and provide access to healthcare. In some cases, they may be the only health care professional that some communities see because they are less likely to access healthcare services prior to the emergency stages for example, homeless populations, some diverse communities/migrant groups who may be used to paying for healthcare, women in refuges who may not want to leave the refuge for their own safety or deprived communities who are more likely to have unmanaged long-term conditions.

Paramedics have been involved with public health campaigns. For example, posters on the sides of ambulances educating the public about heart attacks, stroke symptoms, appropriate use of health services such as 111.

Paramedics are often employed to provide medical coverage at events like festivals or football matches or with the provision of first aid and healthcare in industry, for example, supporting staff on oil rigs with chronic and acute healthcare cases. Paramedics treat patients in the home which can contribute towards preventing avoidable admissions to hospitals.

Paramedics also provide healthcare in remote locations such as coastal or rural communities where it might be difficult for people to access alternative healthcare providers to improve healthcare access to these communities.

Health Protection

Some paramedics have been involved directly with the COVID-19-19 vaccination programme by providing the vaccination in the local or large COVID-19-19 vaccination centres.

Paramedics give infection control advice to patients and family as part of their clinical management. This has been particularly relevant during the COVID-19-19 pandemic where they have talked to people about the importance of washing hands, wearing masks, and have given vaccine advice.

Paramedics are not specifically involved in screening programmes, however Paramedics in primary care often provide support to various national screening programs by collecting baseline clinical information of the patient for NHS Health check, arranging blood and other pathology samples.

Paramedics in Ambulance Services are involved in emergency planning and direct response to natural and man-made disasters such as extreme weather events, flooding, industrial accidents or terrorist attacks. This often involves working with multi-agency team to develop major incident plans as well as major incident exercises to support the preparation of the health service disaster responses.

Paramedic – Wider Reading and Case Study Examples

Health Protection	Wider Determinants <ul style="list-style-type: none">• Paramedic – AHP Prescriber Social Prescribing• https://www.paramedicpractice.com/opinion/article/a-paramedic-in-public-health (PDF) Public Health and Paramedics: What does it mean for me? (researchgate.net)
Population Healthcare <ul style="list-style-type: none">• Public Health and Paramedics: What does it mean for me?	Health Improvement <ul style="list-style-type: none">• Paramedic – Refer to a link worker Social Prescribing

Physiotherapy - Profession specific descriptor for registered professionals and support workers

As experts in movement, the Physiotherapy workforce understand that physical activity plays a significant role in the prevention of many of the long-term conditions that are costly to health and care services and impact on the lives of an ever-increasing number of people. But physical activity is not the only factor contributing to the increasing prevalence of long-term conditions such as diabetes, obesity, cancer, respiratory disease and malnutrition. The Physiotherapy workforce is already talking to people in their care about other parts of their lifestyle that contribute to the development of ill-health such as physical activity, smoking, alcohol consumption and loneliness.

Wider Determinants

Physiotherapists play a key role in addressing the wider determinants of health.

Physiotherapy can contribute to policy making, for example, they are currently involved with changes to community rehabilitation which have occurred in response to health inequalities within the population. Physiotherapists have been looking at barriers to rehabilitation and working to help people access Physiotherapy services by overcoming those barriers and making it easier for communities to access services e.g., providing Physiotherapy services in gyms and leisure centres, and encouraging people to self-manage conditions, particularly long-term conditions, where appropriate.

Physiotherapy support workers can work with deprived groups e.g., asylum seekers to support them in accessing healthcare facilities, identifying the level of treatment they are entitled to and ensuring they get it, signposting them to places to access funding for necessary equipment, and accessing toys if needed for broader health and wellbeing.

Physiotherapists work closely with marginalised groups e.g., people with learning disabilities, who experience health inequity and restricted access to services. There are Physiotherapists who specialise in working with these groups to ensure that they are best placed to meet the health and wellbeing needs of their patients.

Physiotherapists work with population specific charities to provide condition specific support those groups and their families e.g. spina bifida charities, to provide support to families. They can also support with things like charity applications for better wheelchair to promote better access to better quality of life/activities/education as needed.

Physiotherapists can help people access, stay in, and return to employment. They can do this both through supporting individuals with their unique needs, and by working in occupational health settings, doing assessments of buildings and working environments.

Physiotherapists are also able to provide support and advice about wider health conditions and use this advice to prevent conditions leading to secondary problems, potentially also reducing hospital admissions associated with those secondary problems. This is particularly important for people with longer term conditions/developmental problems, Physiotherapists can help with

postural issues, for example, by supporting the way that they stand, and provide equipment to make sure that they're able to participate in and enjoy life.

Health Improvement

Physiotherapists encourage patients to engage with wider healthy living activities such as increased physical activity levels, to promote general good health and wellbeing. Studies show that Physiotherapists are trusted by the public to impart advice about physical activity and healthy lifestyle.

Motivational interviewing and health coaching are integrated into Physiotherapy training and these skills give Physiotherapists the capacity to support patients in improving their health wellbeing and resilience. Physiotherapists encourage health improvement through behaviour change and motivate them to engage with long-term healthy living behaviours.

Physiotherapists integrate Making Every Contact Count (MECC) into practice with patients about wider health elements e.g., smoking cessation. As part of this they can also encourage patients to attend any national screening services. E.g., local population drive on 75+ health check. Physiotherapy support workers often check things like weight and blood pressure while the patients are waiting to go into an appointment. In some areas there are also databases of online tools, local healthcare, voluntary community and social care providers which have been embedded into a clinical template to make it easy to see where patients can be referred onto in the area.

Physiotherapists have recently started to work within long COVID-19 clinics, providing activity pacing support and supporting other professionals with their care, to support the health and wellbeing of people with long COVID-19.

Population Healthcare

The Physiotherapy workforce supports self-management of individuals with long term conditions. For example, Physiotherapy support workers host support groups to educate and promote the management of long-term conditions. Group education sessions are hosted in the community for specific populations. These can provide falls advice and guidance for the groups.

Physiotherapists have an important role in the care home setting. Physiotherapists and their support workers deliver care in care homes to monitor and improve the respiratory and mobility issues of the residents. This can prevent avoidable admissions to hospital and prevent possible (long-term) complications associated with deterioration and deconditioning in this population. Active Hospitals' is a scheme to improve levels of activity within hospitals which prevents deconditioning in patients (particularly the elderly population) while they're in hospital, prevents the loss of muscle mass and loss of independent function. <https://movingmedicine.ac.uk/active-hospitals>

Health Protection

Physiotherapists have been deployed in vaccination hubs to support the timely roll out of immunisation against COVID-19 and Influenza.

Infection prevention and control is a key part of a Physiotherapist support worker's role and they will ensure that all equipment is sanitised. This has become especially relevant during COVID-19.

Physiotherapist support workers work with patients who have just been given new orthotics and talk to them about the health and safety of the device including cleaning, safety, and the need to build tolerance.

Physiotherapy – Wider Reading and Case Study Examples

[Get me started | The Chartered Society of Physiotherapy \(csp.org.uk\)](https://www.csp.org.uk)

<p>Health Protection</p>	<p>Wider Determinants</p> <ul style="list-style-type: none"> • Annual Physiotherapy Review Project – Working to create an efficient, patient centred and cost-effective service to those with profound and multiple learning disabilities in the community • Physiotherapy Pulmonary Rehabilitation – Social Prescribing Active Signposting • Physiotherapy – AHP as Prescriber – Social Prescribing • Physiotherapy – AHPs promoting, growing and developing social prescribing
<p>Population Healthcare</p> <ul style="list-style-type: none"> • Sport for Confidence and Stay Connected: Creating an online physical activity service • Collaborative cross agency service delivery to address public health issues within an MSK setting: evaluation of the 'Healthy Mind, Health Body' project 	<p>Health Improvement</p> <ul style="list-style-type: none"> • MECC Ready • Making Every Contact Count' to promote smoking cessation: What is the impact of AHPs routinely giving brief advice to patients who smoke on a vascular ward? • Physiotherapy back pain – Social Prescribing Active Signposting • Physiotherapy physical activity – Social Prescribing Active Signposting

Podiatry- Profession specific descriptor for registered professionals and support workers

A Podiatrist's primary aim is to improve the mobility, independence and quality of life for their patients. They have an important role in the whole patient journey. Although Podiatrists specialise in the foot, ankle and leg, they lead the patient care through the whole journey including prevention, diagnosis and treatment.

Wider Determinants

Podiatrists design and deliver care for specific population, for example "forgotten feet", a foot care service to the homeless, socially isolated and vulnerable people. Podiatrists work alongside a wider team, including homeless charities to access individuals in need of care, The main objective is to alleviate pain and suffering.

Safeguarding (supporting vulnerable communities) is a significant part of a Podiatrist and Podiatry support worker's work. This often involves partnerships with other agencies e.g., Occupational Therapists and GPs to ensure service users are safe and aware of the procedures which they are about to undergo, but also includes monitoring of general service user health or being aware of other signs of poor self-management or neglect when carrying out domiciliary visits or following up on missed appointments to see if the service user is at risk.

Health Improvement

Podiatrists incorporate Make Every Contact Count (MECC) into practice. They don't just focus on feet but look at the service user holistically and talk about their wider health and lifestyle to identify other areas that may benefit from intervention. MECC checks are integrated into assessment clinics.

Podiatry support workers provide information about smoking cessation, they give information leaflets about health areas such as pressure ulcer prevention, and guidance for chairs/seating within the home. They also offer footwear advice for people who contact the clinic and have footwear brochures that signpost service users to good manufacturers for appropriate footwear. Podiatry teams also signpost service users to wider services that might be of benefit such as weight management programmes, smoking cessation schemes, fall prevention teams, local counselling services for long term conditions, and orthopaedic services for specific needs.

Podiatrists also adopt social prescribing, utilising community services to enhance the service user's health and wellbeing.

Population Healthcare

Podiatrists are trained to assess, diagnose, treat, prevent and rehabilitate complications of the feet, ankles and associated structures. With an ageing population, with people living longer and experiencing multi-medical conditions there is an associated demand for podiatry services and a critical role in the prevention and rehabilitation of complications of the feet.

Health Protection

Podiatrists were called to work as vaccinators for the COVID-19-19 vaccine.

Podiatry – Wider Reading and Case Study Examples

Health Protection	Wider Determinants <ul style="list-style-type: none">• Forgotten Feet – Helping Homeless Feet
Population Healthcare	Health Improvement <ul style="list-style-type: none">• Saving more lives and limbs: applying a cardiac rehabilitation model of structured exercise to symptomatic peripheral arterial disease• MSK Toolkit – Case Studies

Prosthetists and Orthotists- Profession specific descriptor for registered professionals and support workers

Prosthetists provide gait analysis and engineering solutions to patients with limb loss. They treat patients with congenital loss as well as loss due to diabetes, reduced vascularity, infection and trauma. They play a significant role in supporting the health and wellbeing of individuals and in rehabilitation, usually working closely with Physiotherapists and Occupational Therapists as part of multidisciplinary amputee rehabilitation teams. Orthotists provide gait analysis and engineering solutions to patients with problems of the neuro, muscular and skeletal systems. They design and provide orthoses that modify the structural or functional characteristics of the patient's neuro-muscular and skeletal systems enabling patients to mobilise, eliminate gait deviations, reduce falls, reduce pain, prevent and facilitate healing of ulcers. They treat patients with a wide range of conditions including diabetes, arthritis, cerebral palsy, stroke, spina bifida, scoliosis, MSK, sports injuries and trauma. They play a significant role in supporting the health and wellbeing of individuals and in rehabilitation, usually working closely with Physiotherapists and Occupational Therapists as part of multidisciplinary teams such as within the diabetic foot team or neuro-rehabilitation team.

Wider Determinants

Orthotists have embedded telehealth into their practice, reducing the footfall through the hospital, reducing the carbon footprint of the service, which also improves the air quality in the local population and aims to contribute to the government's Net Zero targets and helps reduce air pollution.

The provision of a prosthesis or orthosis can be the difference between independent living and being dependent on others for basic care. Prosthetists and Orthotists enable people to live an independent life by providing an upper limb prosthesis enabling the person to prepare food independently and take charge of their hygiene and self-care requirements. Providing a lower limb orthosis to people with neurological disorders enables them to continue being ambulant, allowing them to partake in social activities and opens new employment opportunities which would not be accessible otherwise.

The provision of prosthetic and orthotic devices supports children's access to education and other associated activities. Prosthetists and Orthotists can also carry out appointments in a school setting for children with special educational needs and disabilities where they see the child and educate their teachers and support workers about their needs so that the child doesn't miss time at school. People with learning disabilities have poorer physical and mental health, and barriers to healthcare stop people with a learning disability from getting good quality healthcare. Treating the child in their school setting, educating the teaching/support staff about the child's physical needs and their orthosis/prosthesis, and working as part of the multi-disciplinary team within the school all help reduce this health inequality.

People with a learning disability have worse physical health than people without a learning disability. The provision of a prosthesis/orthosis improves mobility and increases independent accessibility to a wider variety of health settings, also enabling them to live independently in a wider range of housing accommodations and increases mobility, protecting against pathologies associated with sedentary lifestyles.

Health Improvement

Prosthetists and Orthotists work in multi-disciplinary teams enabling them to refer service users directly to the correct service reducing the delay in treatment. They also work closely with other professionals to ensure the service user has the best outcome. This ensures the service user is not only treated for their prosthetic/orthotic needs but also for needs outside of the initial referral and is able to reach allied services efficiently and effectively.

Prosthetists and Orthotists provide advice and signposting about wider health areas like advice about physical activity, weight loss, and ways to keep well. Prosthetists and Orthotists take a person-centred approach to their work and often work with service users over their lifetime. This puts them in a unique position, allowing them to follow a service user throughout their life journey and build long-lasting relationships. These relationships allow them to better understand their needs and to recognise changes in behaviour, demeanour and personality which are key to recognising safeguarding issues, mental health issues and disorders which impact memory and personality.

Making Every Contact Count (MECC) is key to prosthetic and orthotic consultations. Prosthetists and Orthotists regularly offer information about physical and mental health and wellbeing. They work with service users throughout their lives; thus, they are uniquely placed to have conversations about wider health and wellbeing areas and signpost service users to useful services.

Limb loss impacts a person's self-image and self-confidence; prostheses enable amputees to take part in society. Specialist adaptations are made to prosthetic and orthotic devices to support service users with their lifestyle, e.g., a prosthetic partial hand to use during prayer enables people to take part in religious activities that give meaning to their lives, which is incredibly important for mental health. Special torque controls on prosthetic legs allow users to play golf, and orthoses/adaptions enable children to learn, move or play sports, allowing them to take part in social activities, which is important for their self-esteem, self-image and well-being but also keeps them active which improves their physical health.

Many Prosthetists and Orthotists give talks to support groups and charities (e.g., support groups for people with rheumatoid arthritis, diabetes, or limb loss charities), where they share information about their services and the help they can offer, educating people on their health condition. These talks help to inform people about the support they can access and how they might benefit from them. Educating groups of people with specific conditions allows them to make informed choices about their health and encourages self-management. For example, educating diabetic users on daily foot health checks, and the importance of appropriate footwear to prevent ulcerations, infections, amputations, and hospital admissions.

Orthotics support workers can provide leaflets and wider health information to service users who come to the clinic, allowing them to access healthcare services beyond their initial needs. Common information given out refers to weight management or smoking cessation, and mental health support.

Orthotics support workers are part of wider research projects that investigate the benefits of orthoses to service user groups, for example, the benefit of knee braces for people on the waiting

list for orthopaedic surgery. Orthotics support workers also provide shoe advice and insoles for hospital staff who need them to reduce pain while walking and allow them to work comfortably.

Population Healthcare

Prosthetists and Orthotists help educate people on health issues, contributing to health prevention. For example, educating school children on the effects of poorly fitting footwear on foot health. They also contribute to educational programmes on the effect of foot biomechanics on lower back pain, enabling people to seek conservative treatment and preventing potential long-term issues. This support enables people to remain in work, continue being active and contribute to their communities.

Health Protection

In response to the COVID-19-19 pandemic, Prosthetists and Orthotists started actively giving service users advice about vaccinations.

In response to COVID-19-19, orthotic support workers integrated additional cleaning between each service user to protect staff and service users.

Prosthetists and Orthotists also provide screening programmes, e.g., for neuropathy detecting foot health issues before they become acute and require hospital admission. This is a standardised procedure for all service users who present with diabetes.

Prosthetists and Orthotists – Wider Reading and Case Study Examples

Health Protection	Wider Determinants
-------------------	--------------------

Population Healthcare

- Improving the quality of orthotics services in England

Health Improvement

Radiography - Profession specific descriptor for registered professionals and support workers

Diagnostic and Therapeutic Radiographers, and the Radiography Support Worker workforce have a significant role in Improving the public's health. They play an integral role in health protection, health improvement and population health and can contribute significantly to reducing health inequalities. Imaging and Radiotherapy professionals aspire to be at the heart of a healthier nation.

Wider Determinants

The Radiography workforce can support individuals to access health care services through the introduction of community diagnostic centres or 'one stop shops'. These hubs are housed in the community, away from hospitals, so that individuals can receive lifesaving checks close to their homes. Through the introduction of the community diagnostic centres, the Radiography workforce is also supporting the contribution to the NHS's Net Zero ambitions by providing multiple tests at one visit, reducing the number of patient journeys and helping to cut carbon emissions and air pollution.

Radiographers are undertaking work to transform cancer care for the LGBTQ2+ community by improving research, resources, and support for patients, families, caregivers, and healthcare professionals.

Health Improvement

Sonographers are well placed to provide very brief advice on topics such as smoking cessation when undertaking dating and anomaly scans during pregnancy. There are further opportunities for sonographers undertaking fertility assessment investigations or follicle tracking prior to In Vitro Fertilisation (IVF).

Radiographers integrate Making Every Contact Count (MECC) into their practice and have conversations with service users about areas of health that they can offer advice with, or signpost them to appropriate services e.g., smoking cessation. Where radiographers aren't in direct contact with service users, they can refer to other services or suggest areas for further support that the service user may benefit from.

Research undertaken by Radiographers with Occupational Therapists and Physiotherapists, investigates fall prevention. This leads to better support for service users particularly elderly service users who are a fall risk. Radiographers are in a good position to identify risks of falls, and if they find that they are seeing service users repeatedly for falls-related injuries, they can refer directly to the Physiotherapy and Occupational Therapy services to reduce falls in future. This supports the wider health of the service user and minimises the use of health services.

Therapeutic Radiographers work with Dietitians to make sure that service users can access suitable nutrition, this could be beneficial for people with head or neck cancers who may need an alternative diet or those with long term pelvic radiation who may have cases of severe diarrhoea which requires specific nutritional needs.

Population Healthcare

The Diagnostic Radiography workforce delivers much of the imaging breast screening and aortic aneurysm screening programmes and support people in attending the screening, deliver public health messages as part of their health promotion work and support people by signposting to other services such as smoking cessation or weight management. In prenatal screening, they also have the opportunity to signpost smoking/alcohol/weight management services as well as supporting mental health. Therapeutic Radiography support workers also signpost people for health improvements during their radiotherapy cancer treatments including mental wellbeing and psychological support

Radiography projects are working to increase the numbers of early diagnoses, and access to early diagnosis, for groups who traditionally may struggle to access healthcare services, thus reducing health inequalities, for example, the homeless community, Romany community and service users with learning disabilities, to try and ensure that they are diagnosed at early stages and able to access treatment when necessary.

Radiographers can also utilise social media for example, Diagnostic Radiographers are utilising Facebook to improve uptake in Breast Screening through health adverts and promotions to raise awareness about the importance of regular screening, and to increase the uptake of appointments. Therapeutic Radiographers have also designed a podcast series (@rad__chat) to educate and inform individuals on a range of oncology-based topics. The podcast is split into core themes including, people living with and beyond cancer and Equality, Diversity and Inclusion.

Radiographers are involved with several screening programs. They run national screening programs for breast screening, cervical screening, bowel cancer screening, and dual-energy X-ray absorptiometry (DEXA) scans to spot osteopenia and osteoporosis, which can support service users by preventing fragility fractures. Screening can include mobile services which go out into the community to increase access to the service, e.g., for breast screening programmes, which increase access for populations who may find it difficult to access clinics or other healthcare settings. Radiographers in local areas run lung cancer screening programmes in areas with deprived communities with a high risk of lung cancer. This can be in connection with social care services in the area.

Radiographers also lead initiatives to improve the professions health and wellbeing. Through the Radiate programme a series of online seminars and workshops have been designed for Radiographers to engage with. Originally set up due to the pandemic, it has been very successful and is now ongoing.

Health Protection

All radiographers are given training in radiation protection to ensure that doses of radiation are delivered safely, which protects the health of service users and staff and the environment. Radiographers incorporate safety checks into practice to check for pregnancy with everyone of childbearing age to avoid irradiating a foetus or avoiding developmental problems for the foetus.

Radiography - Wider Reading and Case Study Examples

Health Protection

- Patient safety in medical imaging

Wider Determinants

- Transforming cancer care for the LGBTQ2+ community
- Social Prescribing: The Cultivation of Community Referral in Clinical Imaging and Radiotherapy

Population Healthcare

- Rad Chat - The first therapeutic radiographer led oncology podcast.
- Utilising Facebook to improve uptake in Breast Screening

Health Improvement

- Stopping smoking in pregnancy: A briefing for maternity care providers
- Radiography Health Improvement – Social Prescribing Active Signposting
- Therapeutic radiographers' delivery of health behaviour change advice to those living with and beyond cancer: A qualitative study

Speech and Language Therapists - Profession specific descriptor for registered professionals and support workers

Speech and language therapists (SLTs) provide life-improving interventions, support and care for children and adults who have difficulties with communication, eating, drinking or swallowing. SLTs assess and treat speech, language and communication problems in people of all ages to help them communicate better. They also assess, treat and develop personalised plans to support people who have eating, drinking and swallowing problems. Using specialist skills, SLTs work directly with clients and their carers and provide them with tailored support. They also work closely with teachers and other health professionals.

Wider Determinants

SLTs work across all age groups, health settings and in education and social care. They are uniquely placed to provide interventions that make a difference to the health and wellbeing of people at local level, and to co-ordinate with other healthcare providers; addressing health inequalities and undertaking a range of prevention work particularly as part of multi-disciplinary teams.

SLTs work to support children and young people who are at greater risk of speech, language and communication needs (SLCN) which may impact on their educational achievement as well as their emotional wellbeing and mental health and future life chances. This includes children and young people who live in areas of social disadvantage, as well as children and young people who are in touch with the social care system or the justice system. Speech and language therapy is delivered through collaborative working, supporting the child within the context of the home, early years and educational settings, and the wider community by working closely with and/or training other people involved.

SLTs also support babies and children who have feeding, swallowing and SLCN as part of another condition, for example children born with cerebral palsy and Down's Syndrome, to ensure that they have the best start to life and throughout childhood.

SLTs have a key role as part of the integrated early years workforce, contributing specialist knowledge and skills regarding children's speech, language and communication to enable universal approaches to supporting speech, language and communication development for all children, such as delivering public health messages to expectant families and new parents. They also support early identification of children in need of additional help, by providing training to other professionals such as health visiting teams and early year practitioners.

SLTs support adults with SLCN including those who fall between the gaps for example between learning disability and mental health services as well, assessing and treating communication disorders to facilitate success in education as well as entering and returning to employment (such as a person that has developed aphasia post stroke) as protective factors for health.

Health Improvement

SLTs enable people to improve their health by allowing individuals to maintain and maximise their speech, language, communication and swallowing abilities when their health conditions compromise them, for example people with communication difficulties post stroke, people with a learning disability or people who have dementia

SLTs enable individuals to access life opportunities and to make healthy choices by providing supportive communication strategies and aids and supporting people to self-manage conditions and rehabilitation by providing personalised programmes and exercises.

SLTs Make Every Contact Count (MECC) by promoting healthy life choices to people with communication needs by ensuring that clients with speech, language and communication needs (SLCN) are able to be informed about health services through accessible information and inclusive communication strategies (for example through symbols, or through using strategies to support understanding).

SLTs recognise the importance of their broader role in health promotion and as part of multi-disciplinary teams, particularly where people with SLCN are vulnerable. For example, SLTs ensure effective communication with people with a learning disability who also have other health issues – this might range from developing bespoke pain management plans, explaining swallowing screening for cancer patients or transplants for those with coronary heart disease.

Population Healthcare

SLTs have a broad role in raising awareness of speech, language and communication needs (SLCN) across the health and care system. Raising awareness of need and promoting reasonable adjustments, accessible information and inclusive communication environments has benefits across the population. The training they provide as well as campaigns and initiatives developed by RCSLT such as 'Communication Access UK' help people with SLCN access health services, education and employment. In addition, inclusive communication environments help with mental wellbeing, creating a sense of belonging.

SLTs train health and care professionals, service users and carers in signs of dysphagia and strategies to support with safe and enjoyable eating and drinking, across the lifespan. This helps to ensure people are meeting their nutritional requirements, can benefit from the potential psychosocial benefits of participating in mealtimes and avoid dysphagia related poor health outcomes.

Health Protection

Some SLTs have been involved directly with the COVID-19-19 vaccination programme by providing the vaccination in local or larger COVID-19-19 vaccination centres.

SLTs provide training around inclusive communication environments, reasonable adjustments and accessible information. Therefore, Speech and Language Therapists have a key role in supporting people with speech, language and communication needs to understand information and make informed choices around screening, immunisation and public health messages.

Speech and Language Therapy - Wider Reading and Case Study Examples

<p>Health Protection</p> <ul style="list-style-type: none"> • Help Kids Talk – a community-wide initiative that aims to give every child the best start in life by prioritising speech, language and communication development • Dysphagia Friendly Care Homes: Improving the early identification and management of eating, drinking and swallowing disorders (dysphagia) in 12 North Derbyshire care homes 	<p>Wider Determinants</p> <ul style="list-style-type: none"> • The development of Chatting Time Series (including Changing time is Chatting Time and Anytime is Chatting Time) – a suite of resources that support parents to interact with their babies and young children throughout the day • Early Years Communication and Language Pathway in Manchester • Communication first: people experiencing street homelessness • Speech and Language Therapy – AHPs promoting, growing and developing social prescribing
<p>Population Healthcare</p>	<p>Health Improvement</p> <ul style="list-style-type: none"> • Clinical outcomes of patients referred to Speech and Language Therapy with Chronic Cough (CC) • Enabling adults with learning disabilities to understand their health recommendations • Speech and Language Therapy – AHP Prescriber – Social Prescribing