

Literature Search results

Research question or topic:

National and Regional (England/ N Ireland/ Scotland/ Wales)
AHP leadership documents

Name of person/ team requesting search:

Carrie Biddle, South West Region AHP Leadership Fellow

Completed by: Liz Jordan, HEE Knowledge Management Team

Date: 03/12/2019 (Updated 11/02/20)

Contents

Search headlines	2
Complete numbered list of results with links	3
Appendix	17
Sources and Databases Searched	17
Search Strategy	17
Help accessing articles or papers	18
HEE Knowledge Management team contact details	19

Search headlines

Allied health professionals (AHPs) are the third-largest clinical workforce in the NHS. Their practice is integral to most clinical pathways, and “they work across organisational boundaries, providing solution-focused, goal-centred care to support patients’ independence” [\[24\]](#).

NHS Improvement has reported there is a wide variation in the way AHPs are led across England. It has found evidence that in trusts where there is a chief AHP leader with strategic responsibility, there was more significant improvement activity, and AHPs had a higher profile [\[24\]](#).

The literature search identified the following key documents for AHP leadership within the NHS:

- Allied Health Professions into Action [\[1\]](#)
- Clinicians moving into senior leadership: barriers and enablers for clinicians moving into senior leadership roles within the NHS [\[2\]](#)
- Clinical Leadership – a framework for action: a guide for senior leaders on developing professional diversity at board level [\[3\]](#)
- Developing People – Improving Care: a national framework for action on improvement and leadership development in NHS-funded services [\[5\]](#)
- Developing workforce safeguards: supporting providers to deliver high quality care through safe and effective staffing [\[6\]](#)
- Interim NHS People Plan [\[7\]](#)
- NHS Long Term Plan [\[8\]](#)

The search also identified several resources to help develop AHP leaders, including the Developing allied health professional leaders – an interactive guide for clinicians and trust boards [\[25\]](#) and Investing in chief allied health professionals: insights from trust executives [\[26\]](#).

Please find the literature search results listed below in the table. The table has been split into following sections:

- Key drivers for AHP Leadership [\[1-8\]](#)
- AHP Strategic Documents for Health and Social Care [\[9-20\]](#)
- AHP Leadership in Educational/Academia/Research [\[21-23\]](#)
- Additional AHP Leadership Resources [\[24-39\]](#)
- Leadership in Public Services [\[40-41\]](#)
- Leadership in Social Care [\[42\]](#)

As part of the literature search, I also searched the Healthcare Care Databases Advanced Search, but I did not identify any relevant results. Details of the search strategy can be found on page 10 of this document.

Complete numbered list of results with links

	Citation	Abstract/ key themes	Link
Key Drivers for AHP Leadership			
1	<p>Allied Health Professions into Action</p> <p>NHS England January 2017</p>	<p>AHPs into Action describes how they can support the delivery of Sustainability and Transformation Partnerships. It is a resource to inform, support and inspire AHPs, leaders and decision makers across the health and care system, offering:</p> <ul style="list-style-type: none"> • A clear view of the potential of AHPs • Over 50 examples of innovative AHP practice • A framework to help develop local delivery plans. <p>The framework was produced using national policy priorities, current evidence, engagement with senior leaders, and crowdsourcing the views of patients, carers, the public, and health and care staff. Over 16,000 contributions were submitted through our online workshop in 2016.</p>	Link
2	<p>Clinicians moving into senior leadership: barriers and enablers for clinicians moving into senior leadership roles within the NHS</p> <p>Department of Health and Social Care November 2018</p>	<p>This report sets out the findings of a review carried out by the Faculty of Medical Leadership and Management (FMLM) into how we can increase the numbers of clinical professionals taking up the most senior leadership roles in the NHS.</p>	Link
3	<p>Clinical Leadership – a framework for action: a guide for senior leaders on developing professional diversity at board level</p> <p>NHS Improvement 2019</p>	<p>Building on clinical leadership work by professional and national NHS bodies, NHS England, NHS Improvement, NHS Leadership Academy and NHS Providers are working together to respond to the 2018 recommendations. Our particular focus is increasing the number of people with clinical backgrounds involved in strategic leadership. Traditionally, doctors and nurses have a seat at the provider board table. However, there are a host of other clinicians – allied health professionals (AHPs), pharmacists, healthcare scientists, midwives, psychologists – who also have great leadership contributions to make but, because of career structures or expectations, may be less able to find their way to strategic roles that maximise their contribution.</p>	Link

<p>4</p>	<p>Clinical Leadership – a framework for action: case studies compendium</p> <p>NHS Improvement 2019</p>	<p>This compendium of case studies illustrates the range of experiences clinicians — from physiotherapist to GP to consultant clinical scientist — have had in their journeys to senior leadership roles.</p>	<p>Link</p>
<p>5</p>	<p>Developing People – Improving Care: a national framework for action on improvement and leadership development in NHS-funded services</p> <p>National Improvement and Leadership Development Board 2016</p>	<p>The framework focuses on helping NHS and social care staff to develop four critical capabilities:</p> <ul style="list-style-type: none"> • systems leadership for staff who are working with partners in other local services on ‘joining up’ local health and care systems for their communities • established quality improvement methods that draw on staff and service users’ knowledge and experience to improve service quality and efficiency • inclusive and compassionate leadership, so that all staff are listened to, understood and supported, and that leaders at every level of the health system truly reflect the talents and diversity of people working in the system and the communities they serve • talent management to support NHS-funded services to fill senior current vacancies and future leadership pipelines with the right numbers of diverse, appropriately developed people 	<p>Link</p>
<p>6</p>	<p>Developing workforce safeguards: supporting providers to deliver high quality care through safe and effective staffing</p> <p>NHS Improvement October 2018</p>	<p>This document is designed to help trusts manage common workforce problems. It contains new recommendations to support them in making informed, safe and sustainable workforce decisions, and identifies examples of best practice in the NHS. It was developed with sector leaders and frontline staff and builds on the National Quality Board’s (NQB) guidance.</p> <p>By implementing this document’s recommendations and strong, effective governance, boards can be assured that their workforce decisions will promote patient safety and so comply with the Care Quality Commission’s (CQC) fundamental standards, our Use of Resources assessment and the board’s statutory duties. We recognise that further work is necessary to develop a consistent approach to safe staffing levels across all clinical workforce groups.</p>	<p>Link</p>

		We particularly need to develop evidence-based tools for assessing the impact of variations in acuity and dependency on medical, allied health professional (AHP) and other non-nursing clinical staff groups.	
7	Interim NHS People Plan June 2019	This interim People Plan lays the foundations we need to make this a reality. We begin with how to make the NHS the best place to work and how creating a better leadership culture is critical to that change. We have approached this work by modelling the changes we want to see, working collaboratively as a multiprofessional and multidisciplinary team. We have worked from the outset on the basis that multiprofessional clinical teams will be the foundation of the future workforce, rather than treating the workforce as a group of separate professions.	Link
8	NHS Long Term Plan NHS England January 2019	We will also do more to nurture the next generation of leaders by more systematically identifying, developing and supporting those with the capability and ambition to reach the most senior levels of the service. The national workforce group will look at options for improving the NHS leadership pipeline. This will build on the recent Kerr and Kark reviews. It will include: <ul style="list-style-type: none"> • a systematic regional and local approach for identifying, assessing, developing, deploying and supporting talent, to be in place from early 2019 • proposals to ensure that more senior clinicians take on executive leadership roles building on the recent Faculty of Medical Leadership and Management report on clinical leadership • expansion of the NHS graduate management training scheme, and support for graduates from the scheme, while also identifying high-potential clinicians and others to receive career support to enable progression to the most senior levels of the service • a consideration of the potential benefits and operation of a professional registration scheme for senior NHS leaders, similar to those used in other sectors of the economy and amongst other NHS professionals, which would recognise the role of NHS management and help the NHS attract and retain the best people for the most challenging jobs • measures to support transitions from other sectors into senior leadership positions in the NHS. 	Link

AHP Strategic Documents for Health and Social Care			
9	<p>NIHR CRN Allied Health Professionals Strategy 2018-2020</p> <p>National Institute for Health Research June 2019</p>	<p>Allied Health Professionals (AHPs) represent the third largest professional workforce in health and social care — their contributions are critical to the development and delivery of high quality, patient centred clinical research. The National Institute for Health Research (NIHR) has a mission “to provide a health research system in which the NHS supports outstanding individuals, working in world class facilities, conducting leading edge research which is focused on the needs of patients and the public”.</p> <p>To achieve this, the NIHR aims to attract, develop and retain the best research professionals to conduct people based research — core to this is realising the potential of Allied Health Professionals.</p>	Link
10	<p>Allied Health Professionals Strategy 2017-20</p> <p>NHS Scotland 2017</p>	<p>The Golden Jubilee Foundation (GJF) has an ambitious 2020 vision to be ‘Leading Quality, Research and Innovation’ on behalf of NHS Scotland. Key objectives to support delivery of this include building a culture of continuous improvement, with innovation, research and improvement at its core.</p> <p>The GJF, AHP Strategy aligns with this vision and supports staff to test their ideas and think creatively. It also supports the Board’s clear ambition to develop our workforce through the Golden Jubilee Foundation Leadership Framework which identifies the benefits of staff who are: ‘Empowered through personal development to think and act differently, to achieve the highest quality of care, a truly person-centred approach’.</p>	Link
11	<p>AHPs as agents of change in health and social care. The National Delivery Plan for the Allied Health Professions in Scotland, 2012-1015</p> <p>The Scottish Government 2012</p>	<p>As of March 2012, there were approximately 10 000 AHPs working in acute and primary care settings across NHS Scotland. There were also around 500 AHP practitioners in social care, predominantly occupational therapists who, despite comprising only 1% of the total social care workforce, addressed 35% of all adult referrals. AHP directors and AHP leaders, working across health and social care, will be key to enhancing the AHP contribution to the joint planning and delivery of services, particularly for those with complex needs, long-term conditions, dementia and for children and young people. This National Delivery Plan for the Allied Health Professions in Scotland calls for AHPs to be more visible, accountable and impact orientated. It aligns the AHP focus on delivery</p>	Link

		with the nationally agreed outcomes for integration, currently in development, and reflects the context of health and social care integration.	
12	<p>Allied Health Professions Co-creating Wellbeing with the People of Scotland: The Active and Independent Living Programme in Scotland</p> <p>Healthier Scotland, Scottish Government 2017</p>	<p>Allied health professionals (AHPs) in health and social care in Scotland are making a significant contribution to driving service improvement and sustainability across community and acute sectors. Working as integral parts of multidisciplinary teams in multi-agency arrangements and focusing on people's personal outcomes, they provide preventative interventions in areas such as supported self-management, diagnostic, therapeutic, rehabilitation and enablement services. As such, they will be key to supporting delivery of The Scottish Government's plan for transforming health and social care services in Scotland.</p> <p>The breadth and depth of AHP skills and their reach across people's lives, communities and organisations makes them ideally placed to lead and support services towards a greater focus on prevention and early intervention. They also contribute to supporting people to live independently in their local communities and consequently reduce dependence on health and social care services.</p> <p>AHPs have embraced the concept of co-production and delivering personal-outcomes approaches. Increasingly, they are shifting their focus to an earlier stage in a person's health and wellbeing journey, away from traditional models of provision in hospitals to where people live their daily lives. AHPs locally and nationally are extending their ambitions and improvement skills towards approaches that will also deliver the wider prevention, early intervention and enablement agendas set out in the Health and Social Care Delivery Plan.</p>	Link
13	<p>ASPIRE Allied Health Professions Supporting and Promoting Improvement, Rehabilitation and Enabling Others</p> <p>NHS Forth Valley</p>	<p>The four components of the AHP Model of Service Delivery are:</p> <ol style="list-style-type: none"> 1. AHP service delivery 2. Measuring impact 3. Workforce planning and workforce development 4. Care assurance arrangements for safe, effective person centred services supported by contemporary professional leadership 	Link

	2017		
14	<p>Modernising Allied Health Professions' Careers in Wales A post registration framework</p> <p>NHS Wales 2016</p>	<p>The Post Registration Framework is not intended as a detailed blueprint for an individual's future, but rather it sets our ambitions and expectations for the AHP workforce. Following the principles set out in this framework will deliver real benefits for the people of Wales by improving the outcomes, skills and working practices of the professionals delivering those services. I have great pleasure in endorsing this framework and I expect it to be a key reference document for AHPs. It contributes to what is already happening within the AHP workforce, describes both the development of AHPs and their increasing role at the centre of service delivery and change. This document supports and encourages their leadership in promoting aspirational thinking and challenging assumptions about how health care should be delivered.</p>	
15	<p>Allied Health Professions Framework for Wales: looking forward together</p> <p>Welsh Government November 2019</p>	<p>This framework sets out the strategic response to A Healthier Wales (2018) from the Allied Health Professions. It describes the challenges that need to be addressed, the value that Allied Health Professionals (AHPs) offer and the actions needed to help maximise their value and impact. Professions must be utilised more effectively to inspire and enable people to lead healthier lives, be more easily and directly accessible, and work at the top of their ability with visible and transformational leadership.</p>	Link
16	<p>Leadership</p> <p>Health Education and Improvement Wales (HEIW) 2019</p>	<p>The role of leadership in contributing to the success of a Healthier Wales cannot be overstated. We need leaders who will ensure a culture of well-being, continuous improvement, openness and that psychological safety thrives within our workforce and organizations.</p> <p>NYHW has a leading role in delivering the leadership agenda on a once for Wales basis and in line with the ambition to transform the healthcare workforce in Wales.</p> <p>NYHW's Annual Plan 2019 - 20 sets out initial projects to drive the leadership agenda forward.</p> <p>In line with the Workforce Strategy for Health and Social Care, develop a leadership strategy for health and social care in Wales, in partnership with</p>	Link

		<p>social care Wales and Academic Wales:</p> <ul style="list-style-type: none"> • Implement a succession planning and talent management framework for NHS Wales • Map leadership and management resources and identify priority programs for health and care • Implement digital leadership portal and alumni network(s) 	
<p>17</p>	<p>UK Allied Health Professions Public Health Strategic Framework 2019-2024</p> <p>Allied Health Professions Federation 2019</p>	<p>The four nations and all AHP professional bodies have supported the development of this strategic framework and will be working independently and collectively to implement its vision and goals, by:</p> <ul style="list-style-type: none"> • Focussing on all aspects of healthcare including physical and mental health. • Working collaboratively with other innovators, professions and organisations to apply a systems leadership approach. • Integrating public health priorities into other professional priorities such as leadership, service redesign and workforce development. • Promoting the AHP contribution to public health in alignment with the current national strategic approaches and agendas in each of the four nations, as well as addressing the local context within which AHPs work. • Identifying the areas where AHPs can make the greatest impact, recognising that this will vary for different professions. This will require a shift to a more upstream and population approach based on need as oppose demand. • Using our expertise and leadership to shape and support services, recognising that AHP skills can be utilised to provide quality assurance, leadership and oversight as well as direct delivery of services. • Building on the work of AHPs across diverse populations and within vulnerable communities to ensure our actions contribute to reducing health inequalities. • Adopting assets based personal outcomes principles within a community development approach by listening and responding to the needs of the communities we serve. • Embedding a preventative and population health approach, which is informed by evidence of need into everything we do. 	<p>Link</p>

		<ul style="list-style-type: none"> • Recognising that each profession is different, and therefore contribution and impact will vary depending on the area of public health. As a result, a broad strategy will apply to the range of professions rather than specific examples. • Learning from good practice by AHPs and others, across the UK and internationally to evolve our practice to respond to changing needs and contexts. 	
<p>18</p>	<p>Shadow Integrated Care System: AHP Strategy (Draft)</p> <p>Health and Care Working Together in South Yorkshire and Bassetlaw 2018</p>	<p>The ICS puts greater emphasis on healthy lives, living well and prevention as being core and central to all that we do. AHPs are in a strong position to deliver on the public health agenda, being present across all care settings with many AHP services having the potential to further develop in primary and community care, to support the mental and physical health of the populations we serve.</p> <p>Many AHPs provide expertise in rehabilitation from the point of registration and bring a different perspective to the planning and delivery of services. They are uniquely placed to utilise and further maximise their expertise in enabling approaches “To actively link with AHP colleagues across the ICS when considering changes to pathways to ensure equity and encourage joint working” through providing rehabilitation, reablement and leadership across health, care and wellbeing services as well as driving integrated care approaches at the point of delivery.</p>	<p>Link</p>
<p>19</p>	<p>Greater Manchester Allied Health Professions Strategy 2019-2022</p> <p>Greater Manchester Health and Social Care Partnership 2019</p>	<p>Aims of our strategy:</p> <ul style="list-style-type: none"> • Inspire the GM population to embark on AHP careers to promote diversity and optimise retention to stimulate growth of the workforce • Ensure we have a sustainable supply of AHPs to deliver safe and effective care and for AHPs to provide solutions to other workforce challenges in the system • For AHPs to support the development and delivery of high-quality integrated care that is responsive and close to home • Scope GM AHP leadership and promote the benefits AHP leadership brings to organisations and the system • To ensure that AHPs are utilised effectively and to their maximum potential in GM 	<p>Link</p>

20	<p>Allied Health Professional Strategy 2017-2022</p> <p>Northumberland Tyne and Wear NHS Foundation Trust 2017</p>	<p>NTW Operates on a Collective Leadership structure aligning services to localities and having collective leadership teams, to support devolution. Twelve Associate AHP Directors are embedded into these new structures, supported by a Director of AHP and Psychological Services, ensuring that AHPs directly influence service delivery and transformation, thereby realising the potential of AHPs to “contribute a wealth of knowledge and skills and play important roles in strategic development, service redesign, new ways of working and service management” (NTW Restructure, April 2017. p.9). The revised 2017 NTW leadership structures: acknowledges the centrality of their contribution and an opportunity to realise their transformational potential.</p>	<p>Link</p>
<p>AHP Leadership – Educational/Academia/Research</p>			
21	<p>Allied Health Professions Leadership in Academia: opportunities, challenges and current positioning</p> <p>UWE, HEE, and Council of Deans Health September 2019</p>	<p>The aim of this research was to gain a deeper understanding of the perceptions of key stakeholders in relation to the current extent of Allied Health Professionals (AHPs) in leadership roles within academia. The researchers undertook an exploration of the potential barriers, challenges and opportunities that exist for AHPs to undertake leadership roles within higher education and used the findings to offer recommendations for the future.</p>	<p>Link</p>
22	<p>AHP leadership in academia: opportunities, challenges and current positioning</p> <p>Studies in Higher Education Vivien Gibbs & Marc Griffiths February 2020</p>	<p>The aim of this research was to gain a deeper understanding of the perceptions of key stakeholders in relation to the current extent of Allied Health Professionals in leadership roles within academia. The researchers undertook an exploration of the potential barriers, challenges and opportunities that exist for AHPs to undertake leadership roles within higher education and used the findings to offer recommendations for the future. Several themes emerged from the study, the primary ones relating to lack of confidence, a lack of motivation amongst AHPs to aspire to senior leadership roles, with a preference instead to focus on gaining clinical and research expertise rather than leadership skills. In addition, fewer opportunities appear to exist for AHPs to progress into senior leadership roles outside of the AHP sphere, due to a number of reasons which are explored in more depth in this report.</p>	<p>Link *abstract only</p>
23	<p>National Institute for Health Research Clinical Research</p>	<p>Allied Health Professionals (AHPs) represent the third largest professional workforce in health and social care — their contributions are critical to the</p>	<p>Link</p>

	<p>Network Allied Health Professionals Strategy 2018-2020</p> <p>National Institute for Health Research May 2019</p>	<p>development and delivery of high quality, patient centred clinical research. The National Institute for Health Research (NIHR) has a mission “to provide a health research system in which the NHS supports outstanding individuals, working in world class facilities, conducting leading edge research which is focused on the needs of patients and the public”.</p> <p>To achieve this, the NIHR aims to attract, develop and retain the best research professionals to conduct people based research — core to this is realising the potential of Allied Health Professionals.</p> <p>“We want Allied Health Professionals to blaze a trail in research, develop as visible leaders and strengthen their impact across the health and research system.”</p>	
Additional Resources			
24	<p>Allied health professionals (AHPs) – professional leadership</p> <p>NHS Improvement July 2019</p>	<p>This collection of resources highlight the benefit and impact of AHP leadership at all levels.</p>	Link
25	<p>Developing allied health professional leaders – an interactive guide for clinicians and trust boards</p> <p>NHS England October 2019</p>	<p>This is an interactive guide for trust boards and clinicians to support professional development opportunities and possibilities for allied health professionals (AHPs). It will be useful for:</p> <ul style="list-style-type: none"> • AHPs with leadership aspirations • those supporting the development of future AHP leaders • those developing AHP leadership capacity and capability in their organisation and system • those supporting appraisal processes • career coaching conversations <p>It sets out:</p> <ul style="list-style-type: none"> • trust board insights and expectations about senior AHP leadership <p>key components of AHP leadership development</p>	Link
26	<p>Investing in chief allied health professionals: insights from trust executives</p>	<p>This guide describes insights and evidence from NHS trust executives, and its primary audience is intended to be board members and AHPs within trusts. However, the findings will also interest commissioners and other system</p>	Link

	NHS England and NHS Improvement July 2019	leaders who recognise the potential of the chief AHP role to lead and deliver transformation across sustainability and transformation partnerships and integrated care systems.	
27	Leadership of allied health professionals in trusts; what exists and what matters NHS Improvement June 2018	Our report describes evidence from NHS providers, and its primary audience is intended to be board members and AHPs within those trusts. However, the findings will also be of interest to commissioners and other system leaders, recognising AHPs' potential for leading and delivering transformation in sustainability and transformation partnerships and integrated care systems.	Link
28	Allied Health Professions' Leadership in NHS Trusts in England: Understanding what exists and what matters Kingston University March 2018	This report sets out findings in relation to two key questions: 1. What organisational leadership governance structures exist for Allied Health Professional (AHP) service provision and what is the impact of them for the quality and productivity of care delivery in NHS provider organisations in England? 2. What are the characteristics, key skills and attributes, of effective AHP leaders, and how are these gained through professional development during an AHPs career?	Link
29	Leadership in interprofessional health and social care teams: a literature review Smith, T., Fowler-Davis, S. Leadership in Health Services 2018	The purpose of this study is to review evidence on the nature of effective leadership in interprofessional health and social care teams. Twenty-eight papers were reviewed and contributed to the framework for interprofessional leadership. Twelve themes emerged from the literature, the themes were: facilitate shared leadership; transformation and change; personal qualities; goal alignment; creativity and innovation; communication; team-building; leadership clarity; direction setting; external liaison; skill mix and diversity; clinical and contextual expertise. The discussion includes some comparative analysis with theories and themes in team management and team leadership.	Link

AHP Leadership

30	Chief AHPs' Virtual Network	For AHPs currently working as the 'go-to/lead' AHP within your organisation or ICS/STP Contact nhsi.ahpteam@nhs.net for access.	Link
31	AHPs into action – our first year January 2018	Joanne Fillingham shares progress made one year on from the launch of AHPs into Action.	Link
32	Realising the potential of allied health professions July 2017	Blog post from Joanne Fillingham on the King's Fund website.	Link
33	Why leadership is crucial to us and patients Caroline Poole June 2018	The Professional Head of AHPs at NHS Improvement reflects on the main findings of a new study: We always suspected that leadership of the Allied Health Professionals (AHPs) in trusts varies hugely and is highly complex. Now we have proof: research commissioned by NHS Improvement from Kingston University found, for example, that 43 senior AHP job descriptions contained 41 different job titles. Little wonder that confusion reigns when trying to find the 'go-to' person in a trust or wider health system.	Link
34	Why we must invest now in professionally diverse leadership February 2019	Stuart Palma, Professional Head of Allied Health Professions at NHS Improvement, reflects on the importance of investing in professionally diverse leadership teams.	Link
35	Building our workforce of the future Suzanne Rastrick June 2019	The Chief Allied Health Professions Officer looks at the NHS Interim People Plan and what it means for allied health professionals.	Link
36	Strong leadership of allied health professions key to transforming NHS, according to study by	"We found 41 different job titles across the 43 AHP leadership job roles in Trusts in England. This variation can lead to confusion and makes it very difficult to find the go-to person leading AHPs in a Trust," Ms Harding	Link

	<p>Kingston University and St George's, University of London</p> <p>Kingston University, London July 2018</p>	<p>explained.</p> <p>"Our research showed that where the role of AHP leader was graded at a higher level, with more strategic responsibility and fewer steps between it and the board, the contribution of the AHP workforce was more visible. This enabled Trust boards to better use the workforce to address transformation challenges in the NHS," she said.</p>	
<p>37</p>	<p>Policy Statement - Professional Leadership</p> <p>The Association of UK Dietitians Published Date: May 2016 Revised Date: May 2019</p>	<p>The British Dietetic Association (BDA) considers that professional leadership is essential within any health and social care organisation to generate an environment within the professional grouping where the delivery of high quality services, centred around the patient is paramount. Professional leadership also drives service improvement and development and generate new business opportunities. The leadership for the nutrition and dietetic services should be provided by a registered dietitian in a designated professional lead role.</p>	<p>Link</p>
<p>38</p>	<p>Allied Health Professions Federation Scotland submission to the Health and Sport Committee</p>	<p>There are over 13,000 allied health professionals in NHS Scotland, who are qualified to assess, diagnose and treat patients across a very wide range of conditions. However, it is a common experience across the allied health professions that there is not sufficient awareness of the contribution that allied health professions can make nor their potential to transform services. Allied health professions have continued to make the case for inclusion alongside medicine and nursing as the essential third health professional group that can be harnessed to devise and deliver improved services. However, allied health professions remain underrepresented in decision making in the NHS. As of January 2018:</p> <ul style="list-style-type: none"> • AHPs are not directly represented on the Director General’s Health and Social Care Management Board. • Scottish Government has no AHP Directorate – (AHPs are part of the Chief Nursing Officer Directorate to whom the Chief Health Professions Officer reports). • Not one of the geographical NHS Boards has an AHP Director - where AHPs are mentioned in Board memberships - they are represented by a nurse. • Not one of the special NHS Boards has an AHP Director on it – where 	<p>Link</p>

		<p>AHPs are mentioned in Board memberships - they are represented by a nurse.</p> <ul style="list-style-type: none"> • Only 9 / 32 Integrated Joint Boards (covering only 2 health board areas) has an AHP Director at the table. 	
39	<p>Leadership saves lives: Knowledge Hub</p> <p>Developed by Bodleian Health Care Libraries</p>	<p>The blog aims to be a source of and a signpost to information on leadership, talent management, coaching to name a few.</p> <p>Information is sourced on a regular basis from a number of high profile organisations, such as the King’s Fund, the Health Foundation, Harvard Business Review and the Ashridge and Henley Business Schools. Alerts have also been set up on two healthcare management databases – Health Business Elite and Health Management Information Consortium , the results of these searches providing pointers to freely available articles, articles which may be available to those with an NHS OpenAthens login, and articles which need to be purchased or ordered via a local health library.</p>	Link
Leadership – Public Services			
40	<p>Better Public Services: Report by the Public Services Leadership Taskforce</p> <p>National Leadership Centre October 2018</p>	<p>This report sets out the recommendations of the Public Services Leadership Taskforce.</p> <p>The taskforce has held detailed discussions about the potential for the leaders of our public services to transform the productivity and outcomes of the services they lead. As well as reviewing a wide range of research, we commissioned a series of interviews with current and recent top leaders, to find out what they think we should learn from their experience of -the most senior roles in public life.</p> <p>Our research suggests that the success of our public services depends, at least in part, on effective and collaborative leaders who can form strong partnerships across organisational boundaries. In this report, we set out how the new Centre for Public Services Leadership could create a programme and professional network for the emerging top leaders of our public services, to enhance the effectiveness of their collaborative leadership. Our recommendations are high-level because we know that getting the programme right will take time and need thorough user research.</p>	Link
41	OECD Recommendation on Public	The Recommendation helps equip public workforces with the skills, leadership	Link

	<p>Service Leadership and Capability</p> <p>Organisation for Economic Co-operation and Development 2019</p>	<p>and people management systems needed to tackle today’s and tomorrow’s public governance challenges.</p> <p>The Recommendation promotes a highly professional administration based on merit, transparency, accountability and the rule of law. Building on this foundation, it aims to improve the ways of organising and managing public employees to encourage proactive collaboration and innovation in the design and delivery of public policies and services. It recommends that Adherents embed these values and principles in the strategic management of human resources so that government ministries and agencies have a workforce with the capabilities needed now and in the future.</p> <p>Finally, the Recommendation places a heavy onus on public service leaders, who require the mandate, competencies, and conditions necessary to provide impartial evidence informed advice and speak truth to power.</p>	
Leadership – Social Care			
42	<p>The Leadership Qualities Framework: for adult social care</p> <p>The National Skills Academy 2014</p>	<p>The framework is designed to focus on the values and behaviours that provide the foundations of leadership, using research undertaken by the Skills Academy with managers, practitioners, people who need care and support and their advocates. It also includes contributions from health services to drive integrated approaches to care and support.</p>	<p>Link</p>

Appendix

Sources and Databases Searched

Healthcare Databases Advanced Search (HDAS) was used to search the following databases: Medline, Amed, BNI, CINAHL, EMBASE, EMCARE, HMIC, and PsycINFO. Google was also used to search for grey literature.

Search Strategy

The search strategy from the Healthcare Databases Advanced Search is embedded below:



The following search terms were used in Google:

[Leadership AND Allied Health Professionals](#) (3/12/19)

[Leadership AND Allied Health Professionals AND strategy](#) (3/12/19)

[Leadership AND Allied Health Professionals AND policy](#) (3/12/19)

["allied health professional" AND leadership AND "private practice"](#) (10/02/20)

["allied health professional" AND leadership AND education](#) (10/02/20)

["allied health professional" AND leadership AND "social care"](#) (10/02/20)

["allied health professional" AND leadership AND "public services"](#) (10/02/20)

[leadership AND "private practice" AND UK](#) (10/02/20)

[leadership AND education AND UK](#) (10/02/20)

[leadership AND "social care" AND UK](#) (10/02/20)

[leadership AND "public services" AND UK](#) (10/02/20)

Help accessing articles or papers

Where a report/ journal article or resource is freely available the link or PDF has been provided. If an NHS OpenAthens account is required this has been indicated. If you do not have an OpenAthens account you can [self-register here](#). If you need help accessing an article, or have any other questions, contact the Knowledge Management team for support (see below).

HEE Knowledge Management team contact details

You can contact the HEE Knowledge Management team on KnowledgeManagement@hee.nhs.uk