



Sonia Kumar MP
Member of Parliament for Dudley
House of Commons, London SW1A 0AA
Tel: 01384885959

Rt Hon Wes Streeting MP
Department of Health and Social Care
39 Victoria Street
London
SW1H 0EU
United Kingdom

23rd January 2026

RE: Allied Health Professionals

Dear Secretary of State,

We welcome your commitment to revise the NHS Long Term Workforce Plan, particularly the planned shift toward a transformational approach that looks beyond legacy staffing models to create a more integrated, future-ready health service. This will build on the advancement of having the first comprehensive, national, long-term workforce plan in 2023.

To meet the ambitions of the 10 Year Health Plan, the workforce plan must secure a sustainable Allied Health Professions (AHP) pipeline, drive forward AHP strategic and clinical leadership and enable AHPs to work to their full scope across hospitals, communities and neighbourhoods to deliver better patient care. Access to AHPs across the UK is inconsistent, creating significant inequalities in both employment opportunities and patient care. This highlights the need for a unified national approach to workforce planning and service provision to ensure that everyone, regardless of location, can access the expertise of AHPs.

AHPs represent the third largest clinical workforce in the NHS and are essential to delivering safe, effective, and cost-efficient care across the health system. AHPs bring unique expertise, innovation, and leadership to patient care, prevention, early intervention and rehabilitation. They are essential to the shift from hospital to community and neighbourhoods, reducing waiting lists, preventing hospital admissions and delayed discharge, and enabling people to live and work independently.

There are 14 registered Allied Health Professions ^(see footnote), all of which are degree-level, professionally autonomous practitioners. As degree-level professionals, many are educated to Masters level, bringing highly specialised skills and autonomous clinical decision-making capabilities to the NHS. Registered AHPs work alongside AHP support workers who contribute significantly to deliver rehabilitation and other areas of care.

Allied Health Professions are not an add-on to our healthcare system—they are essential practitioners. The financial case is clear: investment in allied health delivers returns measured in hundreds of millions of pounds in prevented costs and improved population health.

However, they remain under-recognised in strategic planning and workforce development discussions.

Recommendations for Strategic Action

We respectfully recommend that the Department should:

1. Recognise AHPs as a strategic priority in workforce planning with equivalent status to nursing and medical workforce expansion and ensure AHP staffing levels are considered as part of local workforce planning.
2. Support strong AHP leadership and accountability including retention of the Chief Allied Health Professions Officer (CAHPO) role in the Department.
3. Adopt a competency, population need led rather than profession based approach to workforce planning and strategic and clinical leadership.
4. Increase workforce capacity by expanding and upskilling AHP support workers to maximise their training and development on a par with nursing associates.
5. Ensure consistent funding and training for advanced and consultant level AHP roles which are proven to deliver measurable improvements in access, productivity, and patient experience.
6. Establish robust workforce monitoring and tracking specific to each of the 14 AHP professions to enable responsive planning.
7. Commission evidence reviews on the return on investment of specific AHP interventions to demonstrate the financial case for expansion within systems facing budget constraints.
8. Embed AHPs into system-wide prevention strategies addressing major health conditions including musculoskeletal disorders, dementia, cancer, diabetes, cardiovascular disease, stroke, respiratory disease and mental ill-health.
9. Protect and invest in the academic and clinical educator workforce to sustain programme quality, supervision, CPD and research.

Allied Health Professionals provide cost-efficient evidence-based care that keeps people as independent as possible and out of hospital.

We urge you to ensure the AHP pipeline is a strategic priority in this refresh so that the attention given to doctors and nurses is matched by a commitment to expanding our allied health workforce and utilising its full scope of practice to improve patient care.

We would welcome the opportunity to meet alongside representatives of the 14 AHPs to explore how we can work together to strengthen the AHP workforce.

Yours Sincerely,

British and Irish Orthoptics Society

British Association for Music Therapy

British Association of Dramatherapists

College of Operating Department Practitioners

College of Paramedics

Institute of Osteopathy

Royal College of Occupational Therapists

Royal College of Speech and Language Therapists

Society and College of Radiographers

The British Association of Art Therapists

The British Association of Prosthetics and Orthotics

The British Dietetic Association

The Chartered Society of Physiotherapy

The Royal College of Podiatry

**Sonia Kumar
Member of Parliament for Dudley**

**Antonia Bance
Member of Parliament for Tipton and
Wednesbury**

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Member of Parliament for Hackney North
and Stoke Newington**

**Gurinder Josan
Member of Parliament for Smethwick**

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Harlington**

**Rachael Maskell
Member of Parliament for York Central**

The Rt Hon The Lord Lansley

**Kevin McKenna
Member of Parliament for Sittingbourne
and Sheppey**

Danny Beales

sonia.kumar.mp@parliament.uk

Member of Parliament for Uxbridge and South Ruislip

Alex Ballinger
Member of Parliament for Halesowen

Alison Bennett
Member of Parliament for Mid Sussex

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Member of Parliament for Ashford**

**Mark Sowards
Member of Parliament for Leeds South West and Morley**

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Member of Parliament for Stoke-on-Trent Central**

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Member of Parliament for Bootle**

**Peter Swallow
Member of Parliament for Bracknell**

**Richard Quigley
Member of Parliament for Isle of Wight West**

**Dawn Butler
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