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*King's Fund***PAMS****and****Public Health**A Bulletin for the Professions  
Allied to Medicine

By

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This bulletin is based on ideas developed from two seminars for Professions Allied to Medicine<sup>1</sup> organised by the King's Fund in the Autumn of 1997, as part of the work commissioned by the NHS Executive. It looks at the actual and potential contributions of the Professions Allied to Medicine to public health

Public health has been defined as:

*"the science and art of preventing disease, prolonging life and promoting health through the organised efforts of society."*

*Public Health in England: The report of the committee of inquiry into the future development of the public health function. Department of Health (1988)*

Public health within the NHS contributes to:

- commissioning, including needs assessment, quality specification and evaluation of services
- health promotion
- clinical effectiveness/evidence-based practice
- involving lay people in health issues

*PAMs can be involved in each of these areas, although they may not always be explicitly aware of the public health dimension of their work.*

## WHAT DO PROFESSIONS ALLIED TO MEDICINE DO IN RELATION TO PUBLIC HEALTH?

### Input to Commissioning

The closeness of PAMs to patients can provide information on needs which can be an invaluable complement to the scientific and epidemiological data used in public health.

Whilst they are rarely involved in a direct way in commissioning health services at a health authority or GP commissioning level, they are employed by a few health authorities to be involved in service reviews and other aspects of health authority work. [See Getting involved and making a difference - purchasing and Professions Allied to Medicine. Department of Health. April 1997].

<sup>1</sup>The following professions were invited to take part: podiatrists, physiotherapists, occupational therapists, speech and language therapists, clinical psychologists and dietitians. It should be noted that some dietitians are specifically employed as community dietitians, where their work with communities and their public health role is more explicit. It should also be noted that speech and language therapists are not actually PAMs, but they have many characteristics in common with PAMs.

*In one health authority, the clinical psychologist has been asked to carry out a review of Elderly Mentally Infirm (EMI) services across the three boroughs in the health authority, to look at issues of service mix, equity of access and co-ordination of services across agencies. He has looked at population data, rate of occurrence of mental health problems in the elderly, current provision and the elements of an ideal service. He is now leading borough by borough meetings of all stakeholders, discussing the findings of the review and working to create a common view of pressure points and action plans to address them.*

*Source: Laurence Moulin, Clinical Psychologist, Ealing, Hammersmith and Hounslow Health Authority.*

*Many speech and language therapists are now working with groups of people like teachers, sales people, telephonists, singers and actors, all of whom need to keep their voices healthy, yet at the same time expect them to cope with constant strain and over-use.*

*While there are many courses which teach vocal techniques and presentation skills, they tend to teach how to speak effectively. They all too often fail to teach how to speak efficiently. Speech therapists can help people identify everyday factors that can affect their voices, such as pollution, smoking, alcohol, air conditioning and so on, and to recognise the demands that are placed on their voices, such as speaking above background noise or talking for long periods with little opportunity to rest. Speech and language therapists can help people spot the early signs of vocal stress and misuse and show them how to take immediate steps to put things right and prevent the development of chronic problems. Through early intervention, speech and language therapists can reduce time off work, the need for voice therapy and/or surgery*

*Source: Pippa Tomlinson, speech and language therapy manager, Royal Hampshire County Hospital.*

There is some indication that involving the Professions Allied to Medicine in commissioning roles can help to ensure that the concerns of all the Professions Allied to Medicine, and not just their own profession, are represented in commissioning decisions.

## HEALTH PROMOTION

Many of the Professions Allied to Medicine undertake educational work, not only aimed at individuals, but at the wider community. Examples include:

### Cook and eat initiatives

Dietitians play a part in educating groups, based in schools, communities, housing estates etc. Dietitians apply their skills to educate and encourage healthy food choices and cooking methods that promote good health.

### Education

Like all PAMs, speech and language therapists are involved in educational work. Examples include work with teenage mothers to underline the importance of communicating with their babies and children, work with key workers of people with learning disabilities and with parents of children with disabilities. Effective voice use can

also be taught to people who are likely to put their voices under strain.

Physiotherapists and occupational therapists teach safe lifting and handling techniques in a variety of settings, such as industrial workplaces, care settings where nurses and others are required to lift patients, and in patients' own homes.

Podiatrists also favour an educational role, giving talks in schools and clubs and assisting the community to understand what can keep feet healthy, including the choice of appropriate shoes.

Professions Allied to Medicine can also play a significant part in educating colleagues, particularly in the Primary Health Care Team. Dietitians, for example, can provide the scientific knowledge about nutrition that is needed by nurses, GPs and others who see patients on a regular basis. Psychologists can also share their knowledge of treatments for psychological disorders in an accessible form with a range of colleagues.

### Healthy lifestyles

The Professions Allied to Medicine play a considerable role in encouraging and enabling healthy lifestyles, both through encouraging and enabling healthy choices for individuals and by making a contribution to the development of social policies which may support healthier lifestyles.

*Clinical psychologists in South Bedfordshire have been developing methods to tackle the rising demand for effective therapies for anxiety, depression and obsessive compulsive disorder in general practice. They have developed a system called Assisted Bibliotherapy, where a supervised but otherwise unqualified worker attends general practices to offer straightforward cognitive therapies in a written form. They discuss the content of a series of weekly information and homework sheets, which are presented in a written form, checking on progress and ensuring understanding. The approach has demonstrated its effectiveness on simple standardised measures.*

*Source: Peter Morris, Clinical Director, Child and Family Service, South Bedfordshire Community Health Care Trust.*

The work of physiotherapists can be used to illustrate involvement in public health. In addition to work with individuals, physiotherapists work in schools, leisure settings, such as sports clubs and gymnasias, advising on safe exercise, and on the treatment and prevention of injury. Physiotherapists may also be involved with "exercise on prescription" schemes. In industry, both physiotherapists and occupational therapists are involved in ergonomics, advising on design issues that impact on health, and facilitating a healthier working environment.

Occupational therapy, at home, in school and at work, provides an interesting perspective on how work with individuals and broader "public health" activities interweave and overlap. Occupational therapy may take place at home, at school, in prison, in residential care or at work. For example, in cardiac rehabilitation, helping an individual to be active is also linked to choosing a healthy lifestyle, as well as a broader context of trying to influence employment opportunities and legislation relevant to people who have health problems or disabilities.

### Screening

Concern for the health of populations as well as individual health is evident in the actual and potential role of the Professions Allied to Medicine in health screening. The work of podiatrists in screening diabetics is one example, which aims to impact significantly in reducing amputations among a vulnerable population.

## CLINICAL EFFECTIVENESS/EVIDENCE-BASED PRACTICE

PAMs can contribute to evidence-based practice, and are involved in developing guidelines on a wide range of issues, including the effectiveness of podiatric surgery, the management of sports injuries and the appropriateness of treatments for individuals.

## INVOLVING LAY PEOPLE IN PUBLIC HEALTH ISSUES

Public health is not simply a matter for experts and health professionals. Progress towards a healthier society depends on individuals and communities to be more involved in health matters. The Professions Allied to Medicine contribute to this approach in a number of ways, some of which transcend narrow professional boundaries.

### Community development for health

One example of community development is the involvement of dietitians to encourage the cultivation of allotments on common land for growing vegetables. The role of the dietitian is not

*During National Back Pain Week in 1997, the Chartered Society of Physiotherapists set up a web site specifically to give advice about back pain. It covered "how to prevent back pain" and "what to do". Members of the public with access to the Internet were able to access information to promote their own health and prevent possible long term disability caused by avoidable back problems. The web site was such a success that the Society will be extending it to cover a whole range of advisory services for the general public. The web site can be found on <http://www.csphysio.org.uk>.*

Source: Judy Mead, Senior Professional Adviser, The Chartered Society of Physiotherapy.

*Back Education Group - In this group training programmes for people with newly diagnosed back pain were jointly run by an occupational therapist and physiotherapist. The programme included ergonomic advice, lifestyle review to accommodate posture, movement and lifting, relaxation techniques, exercise programmes and using local Leisure Centre facilities to maintain fitness.*

Source: P. O'Hara, Occupational Therapist, Cirencester Hospital NHS Trust.

*The Association of Chartered Physiotherapists in Sports Medicine has developed a clinical guideline, based on the best available evidence, for the management of sports injuries during the first 72 hours. It is based on a regime known as PRICE - protection, rest, ice, compression and elevation. The guideline is designed for the use of sports coaches and others likely to be dealing with immediate injuries at sports venues. More importantly, information is being developed for the general public, so that they can take steps to help themselves to deal with non-serious injuries, aiding speedier recovery, saving the health service resources and avoiding lost days through sickness absence. Materials will be developed in collaboration with the Health Information Quality Centre in Winchester.*

Source: Judy Mead, Senior Professional Adviser, The Chartered Society of Physiotherapy

just that of a food expert, but also a community development role in encouraging and supporting a community to take action for access to healthier food in general. The actual involvement of people in starting and maintaining allotments may be as health promoting as the consumption of what is grown by the allotment gardeners.

For some communities, access to healthy food is limited by availability of shops or transport, or by poor options within the local shops, and dietitians have become involved with food co-ops.



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## Advocacy

Professions Allied to Medicine also contribute to public health by acting as advocates for the needs of the people with whom they work. As well as raising the awareness of national and local statutory and voluntary agencies on the service needs of people, Professions Allied to Medicine

paradigm for understanding health and illness, and this can limit the value that is ascribed to the knowledge and opinions of other professions. The approach of many PAMs does not fit easily into the traditional model of western medicine, and their practice can sometimes be undervalued by clinicians and managers.

*In Leeds, dietitians were involved in a project to highlight and secure the long term viability of allotments. The project aimed to raise awareness of the contribution that gardening could make to overall health (including improved nutrition and the achievement of a target of eating five fruit and vegetable portions per day, exercise, stress reduction and social contacts).*

*The dietitian's role included:*

- *highlighting existing healthful activities*
- *facilitating inter-agency work to try to protect existing assets*
- *to help increase the uptake of empty allotments*
- *to work with Officers and members of the Council and the Leeds Gardeners Federation in order to improve access to people on low incomes, for example, through reduced rents and equipment loans.*

*While the project did not succeed in all its aims, contacts were not wasted, and have led to success in other projects. Local Agenda 21 issues are now developing, and this may help to highlight the project again*

*Source: Carolyn Hull, Community Dietitian, Leeds Community and Mental Health Services Trust.*

*Drawing on the experience of community dietitians in Bolton, community dietitians in Leeds worked on a community development project on an inner city estate which resulted in the setting up and operation by the community of a fruit and vegetable co-op.*

*Leeds City Council commissioned work on needs assessment, which, amongst other issues, raised the problems for residents on low incomes being able to afford to eat a healthy diet. The community dietitian worked with other agencies and people living on the state to set up a food co-op, run by local people, with the support of workers to sell quality fresh fruit and vegetables on a no-profit basis. A grant was sought from the Council for equipment for this project. This met a need because of the lack of supply from local shops, combined with transport difficulties.*

*By December 1997, the co-op had been running for 8 months, with approximately 120 members, and between 20-30 family orders per week*

*Evaluation is in progress, and other groups may start up as a result of this work.*

*Source: Carolyn Hull, Community Dietitian, Leeds Community and Mental Health Services Trust.*

may also be active, mainly through their professional organisations, in trying to influence legislation that affects disabled people.

One example of advocacy is the work of podiatrists who have worked with single homeless people who had difficulty in registering with GPs. Occupational therapists working with people with learning disabilities are also advocates for "normalisation". Professions Allied to Medicine may also advocate the needs of vulnerable people in both national and international fora and the media.

## OBSTACLES AND OPPORTUNITIES FOR PAMS IN PUBLIC HEALTH

### OBSTACLES

#### The medical model

The medical model is seen by many lay and professional people as the most powerful

### Lack of understanding of the role of Professions Allied to Medicine

The role of each of the Professions Allied to Medicine, and the contribution that collectively they can make to public health is poorly understood by professional colleagues, media and the general public. The title "Professions Allied to Medicine" may impede an understanding of their fuller contribution.

### Problems of resources, investment and re-investment

Work with individual patients is at the centre of what the Professions Allied to Medicine do, and is seen as their primary function. The pressure on resources makes it difficult for them to offer adequate time to developing other areas of work. The dilemma is that Professions Allied to Medicine might need to disinvest from some of their individually focused work if they are to reinvest their time in public health-related

activity. However, the acceptability of doing this when there are already lengthy waits for services such as community clinic physiotherapy, occupational therapy assessments or podiatry, is questionable.

### **Training and professional development issues**

If public health is to be a more central aspect of the role of Professions Allied to Medicine, changes need to be made to professional education at undergraduate and post graduate levels, and issues of access to public health training need to be addressed more widely<sup>2</sup>. The main points of concern are:

- basic training does not equip Professions Allied to Medicine to work effectively on public health
- Professions Allied to Medicine have insufficient opportunity to undertake post-registration training, which may reflect problems of funding and of time to attend training

Separate training for all the Professions Allied to Medicine might be enhanced by more opportunities both for joint training, where appropriate, between the Professions Allied to Medicine and for training that included both Professions Allied to Medicine and other medical and paramedical specialities. This may be particularly relevant after qualification.

### **Research issues**

The Department of Health's Research and Development strategy recognises the importance of research on all topics relating to health and social care, including those relating to the work of the Professions Allied to Medicine. The Department of Health and the NHS support substantial bodies of such research. The Department also recognises the need to ensure that those with a clinical understanding of the work of the Professions Allied to Medicine are able to play a full part in the research effort. A number of research training awards go to members of the Professions Allied to Medicine.

However, in spite of existing research opportunities, knowledge of what is available does not always percolate to those who need to know, in a timely manner. The difficulties for PAMs, as clinical specialists, in finding time to write research proposals may also cause them to be disadvantaged in obtaining research funding when they are in competition with colleagues in more academic settings.

In addition, PAMs need opportunities to

develop their skills in synthesising existing research, for example, in critical appraisal skills and doing the research for systematic reviews, which help to build a clearer picture of which treatments are effective and which are not.

## **OPPORTUNITIES**

### **Focus on inequalities**

The government's new emphasis on looking at the impact of inequalities on health might open the way to valuing the wider role of the Professions Allied to Medicine, including their contribution to public health.

### **Contributing to evidence-based practice**

As NHS services become more grounded in clinical effectiveness and more evidence-based, the contribution of Professions Allied to Medicine to the research base and to debates about clinical effectiveness needs to be utilised fully. Their expertise on qualitative issues should be noted in addition to their contribution to quantitative measures of outcome.

### **Closeness to the community**

Professions Allied to Medicine often work intensively with patients over a period of time, so their knowledge of needs (both met and unmet) is considerable, and could be utilised more fully. Professions Allied to Medicine also see the problems at the interface between different sectors within the NHS and between the NHS and local authority services, and they are often competent to advise on these issues. Professions Allied to Medicine also have useful links with local statutory and voluntary agencies.

### **Making better use of the collective expertise of the Professions Allied to Medicine**

While each of the professions has a unique perspective, they also share some professional values, goals and a number of broad priorities. Greater inter-professional liaison and a deeper multi-disciplinary focus might enable one professional to raise issues at Board level or at other important fora on behalf of all the Professions Allied to Medicine.

### **Networking**

Professions Allied to Medicine can increase their effectiveness, their skill base, their status and their ability to influence public health and public policy by meeting together in networks that transcend agencies and professional boundaries.

<sup>2</sup>This theme is further explored in relation to a range of public health specialists in *Developing public health in the NHS – the multi-disciplinary contribution* by Levenson R, Joule N and Russell J. King's Fund. 1997.

## NEXT STEPS

It is important to remember that the majority of PAMs are employed by NHS Trusts whose remit is in the provision of health care, rather than an explicit public health role. In practice, this means that most PAMs will spend most of their time in delivering a service to individual patients, rather than in activities that are obviously and directly related to public health. However, many aspects of the PAMs' service delivery roles can also feed in to public health analysis and action, while some of the work of PAMs contributes directly to the health of populations as well as of individuals.

A second contextual factor is the new emphasis on tackling health inequalities through a national contract for better health, as described in the Green Paper *Our Healthier Nation*<sup>3</sup>. The key role given to Health Authorities to lead local alliances in developing Health Improvement Programmes may open the door to many new ways of promoting collaborative action between those with an explicit public health function and those in other parts of the NHS and beyond.

### Improved partnerships for health

- It is important to recognise, value and support an inclusive approach to public health that utilises the perspective of medical, paramedical, social science and lay perspectives.
- The opportunities afforded by the White<sup>4</sup> and Green Papers should be taken as an opportunity to utilise the perspectives of Professions Allied to Medicine, especially on the impact of inequality on health and on the impact of disability and long term medical conditions.
- Health Authorities should ensure that PAMs are encouraged to make an effective contribution to commissioning in the Primary Care Groups that are described in the White Paper *The New NHS*. In order for this to take place, appropriate investment will need to be made in supporting and evaluating multi-disciplinary involvement in commissioning, to include PAMs.

### Understanding the roles of the Professions Allied to Medicine

- The Department of Health should work with

appropriate professional bodies and the media to develop a programme to improve the understanding of the contribution of the Professions Allied to Medicine. This should be aimed at all sectors of the NHS, colleagues in the local government, business and voluntary sectors, and at the general public.

- Chief Executives and Chairs of Health Authorities and NHS Trusts should consider how they can contribute to an increased awareness of and participation by Professions Allied to Medicine within the NHS at Board level. This may have implications for training and induction for both executive and non-executive directors.

### Education, training and research

- There should be improved access to public health-related training for Professions Allied to Medicine at both undergraduate and post-graduate levels.
- Research and development directors should review their practices to ensure that Professions Allied to Medicine are able to make a full contribution to research. This may involve targeting information about research opportunities at PAMs, and assisting them in acquiring the skills that are required to obtain research funding and to undertake research at appropriate levels.
- Regional research and development directors should monitor the uptake of research funds by PAMs in order to ensure that PAMs are being enabled to contribute fully to research and development.

### Information and communication

Local Health Improvement Programmes should utilise the Professions Allied to Medicine as a way of liaising with the public.

There should be investment in the support for and development of formal and informal networks to enable Professions Allied to Medicine to develop their contribution to public health.

Work within the NHS on improving information systems should ensure that information from PAMs that is relevant to public health can be shared and compared across all professions and disciplines.

## PAMS AND PUBLIC HEALTH - DEVELOPING A NETWORK

Are you a PAM with an interest in public health?

Would you like to meet other PAMs with similar interests?

Would you like to attend seminars to discuss how to develop your public health activities?

If so please contact Pat Tawn at the King's Fund on 0171-307 2672 or e-mail: [ptawn@keh.org.uk](mailto:ptawn@keh.org.uk) and give her your contact details so that we can send you information about two seminars in the autumn.

<sup>3</sup>Our Healthier Nation, - A contract for health. Consultation Paper. Cm. 3852. HMSO. London February 1998.

<sup>4</sup>The new NHS - modern - dependable. Cm 3807 HMSO. December 1997.