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This document has been produced across the four nations with advisory group representation from England, Northern Ireland, Scotland and Wales.

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1. Foreword

In recent years, the Allied Health Professions (AHPs) have turned their ambition to be recognised as an integral part of the public health workforce into positive action. Collectively, AHPs have developed their public health contribution and profile, resulting in some excellent examples of AHP-led public health initiatives across the life course, from helping children have the best start in life to falls prevention for older adults. We now need to maintain this momentum and continue spreading good practice throughout our professions so that our approach to prevention and population health becomes our core way of working for the future.

Higher education institutions (HEIs) are well placed to drive forward the prevention agenda for AHPs; influencing the future workforce’s knowledge, understanding and application of public health in practice, and developing the current workforce through continuing professional development opportunities.

It is important to recognise that the responsibility for developing learners’ knowledge and skills within public health doesn’t sit exclusively with HEIs. Professional bodies and the regulator have a role in setting and monitoring standards and therefore have a significant contribution to make. Practice educators also play a part in enabling learners to develop and refine prevention and behaviour change skills in the field.

The recommendations in this paper were originally developed through a process of consultation and consensus building across the four UK home nations in 2017. This version has been reviewed and updated to ensure the recommendations remain current and relevant. They outline what we believe provides a best practice approach to both the mapping of current public health content in pre-registration programmes, and the development of future content. The recommendations are intended as a reference guide to support a systematic approach to public health knowledge and skills development across the AHP workforce.

These recommendations provide a framework that is applicable across all the allied health professions, setting clear direction and support in order to drive innovation for embedding public health within education, practice and settings. In essence, this guidance is about underpinning AHP curricula with ‘what it takes’ to facilitate, support and empower sustainable changes in the populations we work with; ensuring learners are enabled to develop the skills and knowledge to drive positive behaviour change, improve health and wellbeing and reduce inequalities.

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2. Acknowledgements

The revised guidance document was co-produced between Public Health England, Lead Allied Health Professions Representatives across England, Northern Ireland, Scotland and Wales, and the Council of Deans of Health.

The revised guidance document was authored by Laura Charlesworth (University of Lincoln) and Linda Hindle (Public Health England), with support from an advisory group including:

- Katherine Baker, Northumbria University, Council of Deans of Health member representative
- Lyndsey Barrett, Sport For Confidence
- Fiona Browne, Director of Education, Standards and Development, General Osteopathic Council
- Paul Chapman, Health Education England
- Dr Anne Coufopoulos, University College Birmingham, Council of Deans of Health representative
- Anya de Iongh, AHP Student Social Prescribing Champion Scheme
- Fiona Browne, Director of Education, Standards and Development, General Osteopathic Council
- Paul Chapman, Health Education England
- Dr Anne Coufopoulos, University College Birmingham, Council of Deans of Health representative
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- Anya de Iongh, AHP Student Social Prescribing Champion Scheme

Please see Appendix A for the original guidance document authors and advisory group members.
3. Background

The Allied Health Professions (AHPs) have been identified as trailblazers within the wider public health workforce, demonstrating their public health contribution and profile, and with each nation of the UK highlighting the importance of public health and prevention (1,2,3,4,5). The importance of public health, prevention and reducing health inequalities has been further emphasised by the COVID-19 pandemic and AHPs have been instrumental in the response to the immediate and long-term impact of the global pandemic.

A whole system approach to public health as ‘everyone’s business’ recognises the influence of the wider public health workforce, including AHPs, in embedding prevention in health and social care (6) and creating a stronger social movement for health (7,8). AHPs, who cover a diverse range of professional staff working across a variety of settings and organisations, have agreed a collective ambition to be recognised as an integral part of the public health workforce (1).

The current and future AHP workforce need the skills, knowledge, and attributes to promote, improve and protect the health and wellbeing of individuals, communities and populations that will enable them to further contribute to improved population health outcomes (1).

This document provides updated best practice guidance to inform the inclusion of public health content within pre-registration curricula for the AHP workforce. It was originally developed in response to a request by professional bodies and higher education institutions (HEIs), to support them in the development of their profession specific curricula and in reviewing and developing programmes for AHPs and has been updated to reflect the ongoing progress of AHPs in relation to public health.

This guidance was originally produced in collaboration across the four home nations; England, Scotland, Wales and Northern Ireland; and developed through consultation with parties with a direct interest in the development and provision of AHP curricula, including: Health Education England (HEE), Public Health England (PHE), Scottish Government, Welsh Government, Public Health Agency Northern Ireland, AHP Professional Bodies, Health and Care Professions Council (HCPC), and the Council of Deans of Health (CoDH) representing HEIs. The guidance has been updated following the same approach, with the support of an advisory group.

The recommendations contained in this guidance document have a focus on the future workforce and development of pre-registration AHP programmes. Supporting and developing the existing workforce is of equal importance, and the recommendations are also applicable and transferrable to the provision of post registration education and continuing professional development opportunities. AHP support workers also make a significant contribution to improving and protecting the public’s health. This guidance can also be utilised to inform their development, skills, and knowledge to work alongside AHPs improving public health.
4. A Model of Public Health for AHPs

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

There are several definitions of public health; these definitions have been used to develop a model relevant to the roles of AHPs (1). 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 choices and developing resilience.
- Population healthcare – aims to maximise value, equity, and good outcomes by focusing on the needs of the population and delivering person centred services across the entire health and care system.
- Health Protection – aims to protect the population’s health from communicable diseases and other threats, while reducing health inequalities.

For a comprehensive public health glossary (10) please click here.
5. Recommendations

Determining the content of pre-registration programmes is complex, involving a range of stakeholders, and there will be differing priorities, needs and processes for each professional group and in each of the four home nations.

The following recommendations therefore aim to offer generic guidance, whilst providing a framework for a best practice approach to both the mapping of current public health content, and the development of future content.

5.1. Recommendation 1

All AHP pre-registration programmes should include prevention and public health content to enable learners to understand the contribution they can make to improving the public’s health and reducing health inequalities. The Public Health Knowledge and Skills Framework (11) provides an architecture to describe the generic activities and functions undertaken by the public health workforce, including AHPs.

5.2. Recommendation 2

Programme and course designers should include prevention and public health throughout curricula rather than as a stand-alone module. Prevention is integral to everything AHPs do, therefore its inclusion in practice and education should be embedded rather than an additional task.

5.3. Recommendation 3

Programme and course designers should include health inequalities within curricula to enable learners to understand the contribution they can make to reducing health inequalities, including the association between health inequalities and marginalised communities. The King’s Fund framework: My role in tackling health inequalities: a framework for allied health professionals (13) provides some structure for this.

5.4. Recommendation 4

Curricula should aim to address the following components of public health:

i. The impact and burden of disease
ii. Prevention, population health and public health data
iii. The wider determinants of health, with a view to reducing health inequalities
iv. Health improvement
v. Health protection
vi. Healthcare public health: delivering sustainable and effective health care services
vii. Enabling health, wellbeing, and independence
viii. Health and wellbeing across the life-course
ix. Place-based approaches, strengthening community action, community development and asset-based approaches
x. Links between public health and environmental sustainability
5.5. Recommendation 5

The All our Health Framework (13) public health strategy for Wales (14), Public Health Scotland’s Strategic Plan (5) and priorities or Making Life Better framework, Northern Ireland (15) should be used as a tool to inform programme content development and learning outcomes for population health topics such as obesity, cardiovascular disease prevention and physical activity.

5.6. Recommendation 6

Curricula and programmes are structured to enable learners to develop the skills and knowledge to facilitate behaviour change in the context of personalised care using evidence-based approaches such as making every contact count (MECC) (16) or the health promoting health service (17), motivational interviewing and supporting self-management. The personalised care curriculum is a useful tool intended to support personalised care conversations, including behaviour change and social prescribing conversations from prevention through to specialist practice (18).

5.7. Recommendation 7

Curricula and programmes include evidence-based approaches and practice in relation to public health. This should include knowledge and application of critical appraisal of different approaches and their value and impact, with an emphasis on continuous improvement in relation to practice and development.

5.8. Recommendation 8

Programmes should consider the evolving role of health and social care in relation to public health, including access to and the use of appropriate technology, telehealth etc to promote health and how students are prepared with appropriate knowledge and skills to meet the needs of all groups.

5.9. Recommendation 9

Interdisciplinary educational opportunities should be created where possible to support learners to understand a collaborative and whole system approach to prevention and population health, developing insight and leadership capability beyond their profession.

5.10. Recommendation 10

Opportunities to build on public health knowledge and skills are created during practice placements (19), e.g. by practicing approaches such as MECC (16) or the health promoting health service (17), engaging with social prescribing (20), undertaking health improvement projects or through public health practice learning opportunities.

5.11. Recommendation 11

Learners are encouraged to demonstrate leadership and act as change agents to influence learning in practice within the current workforce, advocating an approach to population health and prevention that underpins their day-to-day role.
5.12. Recommendation 12

Professional bodies develop and provide specific guidance on the public health knowledge and skills required for their own professional context, for example radiographers may require an additional focus on radiation protection, dietitians on population health nutrition, occupational therapists on work and health.

5.13. Recommendation 13

Learning around prevention and population health should be assessed as part of existing assessment processes.

5.14. Recommendation 14

The Public Health Quality Assurance Framework can be used as a guidance document to assess the public health content of curricula and support action planning to further embed public health and prevention. Although produced by Health Education England, this document provides useful guidance for HEIs in all four nations. This can be used as a self-assessment tool by HEIs developing curricula and as a guiding framework for professional bodies undertaking quality assurance (21).
There are several frameworks and toolkits that have been referenced in the development of this document. The table below highlights which are relevant in each of the four home nations:

<table>
<thead>
<tr>
<th>Supporting document</th>
<th>England</th>
<th>Scotland</th>
<th>Wales</th>
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<tbody>
<tr>
<td><strong>Allied Health Professions Strategy for England – Due to be launched Spring 2022</strong></td>
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<tr>
<td><strong>Allied Health Professions Framework for Wales</strong>: 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 (3).</td>
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<tr>
<td><strong>A Healthier Wales</strong>: This plan sets out a long-term future vision of a ‘whole system approach to health and social care’, which is focussed on health and wellbeing, and on preventing illness (22).</td>
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<tr>
<td><strong>Public Health Strategy for Wales</strong>: This document sets out the long-term strategy for Wales, reflecting the United Nations 2030 Agenda for Sustainable Development and its 17 Sustainable Development Goals (14).</td>
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<tr>
<td><strong>The National Performance Framework for Scotland</strong>: The framework measures Scotland’s progress against the National Outcomes. To do this, it uses ‘National Indicators’. These indicators give a measure of national wellbeing. They include a range of economic, social and environmental indicators (23).</td>
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<tr>
<td><strong>Public Health Scotland Strategic Plan</strong>: The plan builds on the engagement and the evidence gathered throughout public health reform. It is a three-year rolling plan which will be reviewed regularly, drawing on evidence and listening to partners (5).</td>
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**Scotland's public health priorities**: This document outlines the public health priorities for Scotland. There are 6 key priorities explained alongside next steps (24).


**UK Allied Health Professions Public Health Strategic Framework**: This strategic framework sets out a vision for the role of Allied Health Professionals in public health over the next five years. It is intended to help AHPs, as well as their professional bodies and partner organisations, to further develop their role in public health, share best practice with colleagues and partners and ultimately embed preventative healthcare across all of their work (1).

**Driving forward social prescribing: A framework for Allied Health Professionals**: this framework is designed to support Allied Health Professionals (AHPs) to increase their social prescribing and to create a vision of social prescribing for AHPs. Although developed in England, this document could be useful across all nations (20).

**My role in tackling health inequalities: A framework for allied health professionals**: This framework aims to help individuals to consider their own unique contribution to tackling health inequalities and to help maximise this through a series of lenses and questions. Although developed in England, this document could be useful across all nations (12).

**Maximising Population Health and Prevention in curricula**: The toolkit to maximise population health and prevention in curricula aims to support educators of all regulated health and care professionals, to maximise population health and prevention-learning in their respective pre-registration curricula (25).
**Public Health Skills & Knowledge Framework:** the revised PHSKF describes functional areas in which an individual, team, organisation, or professional group operates in order to deliver public health outcomes (11). There is also a published PHSKF user guide (26) and a tool for line managers (27).

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**Public Health Quality Assurance Framework:** The framework is a structured self-assessment benchmark and action planning tool, enabling HEIs to assess the current content of public health within their curricula and plan for future inclusion by describing a broad good practice approach to foundation level public health education. Although produced by Health Education England, this framework could be useful across all nations (21).

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**All Our Health:** a framework of evidence to guide healthcare professionals in preventing illness, protecting health and promoting wellbeing. All Our Health is a call to action for all healthcare professionals to use their skills and relationships to maximise their impact on avoidable illness, health protection and promotion of wellbeing and resilience (13).

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**The Population Wellbeing Portal:** a central location for free training and education resources relating to the health and wellbeing of the public (28).

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**The Health Promoting Health Service** This service is a settings-based health promotion approach which aims to support the development of a health promoting culture and embed effective health improvement practice within NHS Scotland (17).

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**Making Every Contact / Communication Count:** MECC is an approach to behaviour change that uses the millions of day-to-day interactions that organisations and individuals have with other people to support them in making positive changes to their physical and mental health and wellbeing (16).

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Further resources for MECC can be accessed via the e-learning for health website (29).

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<tr>
<td>Public Mental Health leadership and workforce development framework: a framework to inform and influence the development of public health leadership and the workforce in relation to mental health. (30)</td>
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<tr>
<td>Mental Health Strategy 2017-2027: The Scottish Government’s approach to mental health from 2017 to 2027 – a 10-year vision (31).</td>
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<tr>
<td>Mental Health Strategy 2021-2031: This Strategy is person centred, takes a whole life approach and a whole system focus and the key aim is to ensure long term improved outcomes for people’s mental health in Northern Ireland (32).</td>
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<td>Together for Mental Health: Sets out ambitions for improving mental health and a vision for 21st century mental health services, covering people of all ages in Wales (33). The 2019-2022 delivery plan was reviewed in response to COVID 19 (34).</td>
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<tr>
<td>The personalised care curriculum: The personalised care curriculum sets out a structured educational framework to assist health and care professionals in the delivery of personalised care. The purpose of the curriculum is to embody the values, behaviours and capabilities needed to deliver a streamlined and unified approach to personalised care. Although developed in England, the content of this document is applicable across all nations (18).</td>
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<tr>
<td>Public Health Glossary of Terminology: Developed by Health Education England to support consistent use of terminology in relation to public health (10).</td>
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<tr>
<td>Working for Equity: The Role of Health Professionals: This report launches a programme of activities to tackle health inequalities through action by health professionals on the social determinants of health. It draws on many examples of inspiring and excellent practice which demonstrate what can be done. The report describes areas where greater action is necessary and possible (35).</td>
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</table>
7. Other Useful Tools and Resources

This section includes links to other work which is relevant to developing pre-registration curricula either because it sets a policy context or provides examples of work in a specific area of public health. All resources are applicable to one or more UK nations.

* resources that might be of particular use for design of teaching, learning and assessment materials.

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<tr>
<th><strong>Making Life Better</strong>: is a whole system strategic framework for public health in Northern Ireland spanning 10 years from 2013-2023 (15).</th>
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<tr>
<td><strong>Expanding public health placements to AHP students</strong>: This report documents findings from research to identify the barriers preventing AHP students from accessing public health practice learning opportunities and provides a series of recommendations (36). *</td>
</tr>
<tr>
<td><strong>Supporting the Development of Placements for Allied Health Professional Students in Public Health Settings</strong>: the aim of these toolkits is to help support the development practice-based learning opportunities within the public health arena for AHP students. The toolkits are intended for use by organisations that operate within the public health arena, AHP students, and education institutions that provide education and training for AHP students (19).</td>
</tr>
<tr>
<td><strong>Programme for government 2021 to 2026: Well-being statement</strong>: the Well-being statement sets out how our well-being objectives meet our statutory duty under the Well-being of Future Generations (Wales) Act 2015 (37).</td>
</tr>
<tr>
<td><strong>Well-being of future generations (Wales) Act 2015</strong>: the Well-being of Future Generations (Wales) Act is about improving the social, economic, environmental and cultural well-being of Wales. To make sure we are all working towards the same vision, the Act puts in place seven well-being goals (38).</td>
</tr>
<tr>
<td><strong>Systems not Structures</strong>: a report produced by an Expert Panel, led by Professor Bengoa and tasked with considering the best configuration of Health and Social Care Services in Northern Ireland (39).</td>
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<tr>
<td><strong>Health and Work Champions - promoting the health benefits of employment</strong>: a programme to increase the emphasis on the positive association between good work and health and wellbeing and the role of health care professionals (40).</td>
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<tr>
<td><strong>Everybody active, everyday – what works, the evidence</strong>: a document setting out the evidence base for what works to get people active at a population-scale (41).</td>
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<tr>
<td><strong>Childhood Obesity a Plan for Action</strong>: a plan to significantly reduce England’s rate of childhood obesity within the next ten years (42).</td>
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</tbody>
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Tackling obesity: empowering adults and children to live healthier lives: sets out the actions the government will take to tackle obesity and help adults and children to live healthier lives (43).

Healthy weight strategy (Healthy Weight Healthy Wales): the long-term strategy to prevent and reduce obesity (44).

A Healthier Future: Scotland’s Diet & Healthy Weight Delivery Plan: sets out how to work with partners and public and private sector to help people make healthier choices about food. Recognising the specific need to tackle weight-related issues at an early stage, this delivery plan also has an ambition to halve child obesity in Scotland by 2030 (45).

Public Health Outcomes Framework Wales. This tool provides data analysis, evidence finding and knowledge management to support decision makers and the public with health information (46).

Embedding Public Health into Clinical Services programme. This programme is intended to support leaders and service managers to guide their teams through the process of re-designing services to support prevention but also contains a 5-step toolkit that can be used to consider public health improvements (47). *

Improving the health of the public by 2040: a document laying out recommendations for a strategic response to complex health challenges, and opportunities to secure improvement of the public’s health (48).

The Allied Health Professions Public Health Hub: the Allied Health Professions hub has a wealth of resources to support all Allied Health Professionals across the UK, including a number of case studies and reports (49). *

Broader determinants of health: Future trends: including Dalgren and Whitehead model. A Kings Fund article exploring how the complex interaction between individual characteristics, lifestyle and the physical, social and economic environment is changing, and how that will affect future trends in health (50). *

A movement for movement resources: to support the inclusion of physical activity into health care professional pre-reg curricula (51). *

Public Health England Fingertips: repository of population and public health indicators (52). *

Making it easier: a health literacy action plan 2017-2025: Making it Easier sets out an action plan for improving health literacy in Scotland (53).

Health Equity in England: The Marmot review 10 years on (54).
8. References


    https://healtheducationengland.sharepoint.com/:x/g/Comms/Digital/EXjsdbNI-RxLm-5cpn50GiYB9Fijs47wKqB3vUJnxw3mlw?time=qyhr369O2Ug


   https://www.gov.uk/government/publications/making-every-contact-count-mecc-practical-resources

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   https://www.knowledge.scot.nhs.uk/home/portals-and-topics/health-improvement/hphs.aspx


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https://phw.nhs.wales/services-and-teams/observatory/

https://www.e-lfh.org.uk/programmes/embedding-public-health-into-clinical-services/

https://acmedsci.ac.uk/file-download/41399-5807581429f81.pdf


9. Appendices

Appendix A - Original guidance document authors and advisory group members
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- Hollie French, Health and Care Professions Council
- Beverley Harden, Health Education England
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