

**Title**

Sub-title

**Application Form**

**Summer 2023**



****

**Application for Cohort 6 of the AHP Careers Fellowship Scheme**

**Commencing April 2024**

**Key Messages and Timelines for the AHP Careers Fellowship Scheme**

An AHP Fellowship will fund your release from practice for up to 2.0 days per week over 10 to 12 months (or it could fund additional hours if you currently work part time). You will be part of a cohort of Fellows participating in a learning programme and leading on a work-based project.

**Your work-based project should be something that…**you want to do, feel enthusiastic about and can evidence needs to be done

* you’ve already discussed with, and sought buy in from, others who will need to be involved e.g. colleagues, your team, line manager, service heads and relevant others
* is team, service, organisation or region wide. We’ll also consider national projects
* can be achieved over 10 to 12 months
* is innovative, is about change and development and/or building on learning, not simply a continuation or expansion of existing service delivery and
* contributes to local or national strategy and priorities.

The Scheme is open to work-based project proposals that meet any local or national priority and which demonstrate a clear career development opportunity for the applicant. This year we are particularly interested in ideas that in some way address one of the following three themes:

1. **Sustainability**
2. **Mental Health and wellbeing**
3. **Public health and Inequalities**

More information about these themes and other potential topics is available from Question 6 of the Frequently Asked Questions (FAQs) & Guidance.

**NB** If a project focuses on a digital solution to benefit people, then please apply to the *Digital Health and Care Leadership Programme (DLP)* for more specialist support. The next Cohort commences in January 2024. [Register interest to apply to DLP here.](https://learn.nes.nhs.scot/52831) As DLP supports digital solutions/ projects, these types of projects will not be progressed through the Fellowship Scheme.

A group of people sitting at a table

Description automatically generated

**Fellowship Timeline for 2023/ 2024/ 2025**

**Applications close**

**17 October 2023**

**Notification mid Dec 2023**

**April 2024 Induction session and**

**projects start**

**May 2024 to March 2025 - series of online workshops and face-to-face sessions**

**June 2025 Learning and sharing event**

**Jan 2024 -late March 2024**

**Preparation for work-based project as required**

**Work-based projects start during April 2024 and completed in agreed timeframe (min 10 months and max 12) months)**

**Overview of the Fellowship and Application Process**

Please read the notes below **before** completing your application form. The online module [Writing Great Applications for Learning and Development Opportunities](https://learn.nes.nhs.scot/68357) may be helpful to plan your application content.

1. An AHP Careers Fellowship is made up of two parts:
2. **a learning programme** - equivalent to approximately 5 days in total delivered via MS Teams with some opportunity for face-to-face workshops, with learning mentorship provided by the NES AHP Team.
3. **a work-based project** lead by you and delivered in your own team, service, locality, organisation or region (over a 10 to 12-month period), with mentorship from someone that you identify that understands the topic area and will be able to support both progress of the project and your development.
4. The AHP Careers Fellowship Scheme (AHPCFS) is open to AHP staff working in the public sector in Scotland. This encompasses AHPs, AHP Healthcare Support Workers (HCSW) and AHP Assistant Practitioners employed in NHSScotland or Local Authorities in Scotland. **Please see the AHP Careers Fellowship Scheme page on the NES website for a list of Allied Health Professions that are included in the scheme**. [https://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/the-ahp-careers-Fellowship-scheme.aspx](https://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/the-ahp-careers-fellowship-scheme.aspx)
5. If you are an AHP working within the Third or Independent Sectors, and further or higher education, you can apply for a Fellowship if your proposed project is in partnership with health and social care AHP colleagues/organisations and where there is anticipated benefit to people using/delivering health and social care services.
6. If your application is successful, you will be part of a cohort of Fellows. You will be expected to attend the learning programme sessions and be released to undertake your work-based project. The learning programme will be delivered via online workshops or sessions and may have face to face days.
7. The Fellowship will support release of your time/capacity (or for additional hours if you are part time) **for up to 2 days per week for a 10 to 12-month period, starting in April 2024.** This is to participate in the learning programme and to undertake your work-based project.
8. In your application please be clear about the number of days per week you are requesting (up to 2.0) and for how long (between a minimum of 10 months and maximum 12 months). This will depend on your individual circumstances, your own learning needs and the nature and scope of your work-based project. It may be adjusted following discussion at the review panel, and in consultation with you, your line manager and your AHP Director.
9. All applications to the AHP Careers Fellowship Scheme must be supported by:

* Your direct line manager, and
* Your relevant service manager and budget holder, and
* Your AHP Director or other Director/Associate Director (if you are employed by a local authority).

**We therefore strongly recommend that you discuss your application with all of the above people prior to completing this form.**

1. Decisions and recommendations about your application are made by a Review Panel. We may contact you during November if the review panel needs more information or has points it wants to clarify. We will let you know if your application has been successful or not by mid December 2023.
2. Remember that the AHP Careers Fellowship Scheme is a development opportunity for individuals. The Review Panel therefore base their decisions on both:

* the learning outcomes and development opportunity for you **and**
* on the relevance and potential impact of your proposed project

This means that we don’t accept ‘project only’ applications where the Fellow who will do the work is to be identified later.

1. The application form asks you to describe the learning outcomes you anticipate for yourself if you are awarded a Fellowship and the benefits for service. For more advice about writing applications see the [Writing Great Applications module on Turas Learn](https://learn.nes.nhs.scot/68357). (you must sign into Turas to access the link)
2. Your proposed work-based project must be something which contributes to a local or national strategy and priorities.
3. The Fellowship can support reasonable travel within Scotland where it is clearly required for the delivery of your work-based project and/or to attend the workshops.
4. The Fellowship funding **cannot** be used for

* capital funding, equipment, software or licences
* to support applications related to pre-registration AHP programmes
* international travel

1. Please see the **FAQs and Guidance** on the AHP Careers Fellowship Scheme page of the NES website for more information. [https://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/the-ahp-careers-Fellowship-scheme.aspx](https://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/the-ahp-careers-fellowship-scheme.aspx)

A white background with black dots

Description automatically generated

**FOR ALL APPLICANTS**

**Before you start filling in the form discuss your proposed project with the people who will be involved and/or who it will impact. This might include your own team and/or other teams/services and should definitely include your line managers, service leads and AHP Director or other Director/Associate Director. Make sure they are on board, supportive of your idea and willing to work with you (as appropriate to your project)**

**Your application must be supported by:**

1. **your own line manager, and**
2. **your service manager and budget holder, and**
3. **your AHP Director (if you work in the NHS, an integrated health and social care team) OR a Director/Associate Director level senior manager (if you work in a Local Authority)**

Seeking support for your application from the people listed above is vital and can make a huge difference to your proposed Fellowship successfully progressing or not. Organisation structures, budget holding, and line management arrangements vary across health and social care. For some of you obtaining the support you need may only require you to speak to one or two people (because they hold several of the roles listed above). For others it may mean seeking support from 3 or 4 different people. For this reason, we advise that you start the process early.

All parts of the application form need to be completed prior to submission. The application consists of four parts:

**Part 1:**This should be completed by **you**

**Part 2:**This should be completed by **your line manager**. It confirms their approval and support for your application

**Part 3:**This should be completed by the **service manager/budget holder** to confirm their support and agreement to release you to undertake your Fellowship (this person may or may not be the same person as your line manager)

**Part 4:**This should be completed by your **AHP Director or other Director/Associate Director**

**Submit your fully completed and approved application by 12.00 (noon) on Tuesday 17th October 2023.** This application is for AHP Careers Fellowship funding ONLY.

|  |  |
| --- | --- |
| http://www.ico.gov.uk/cms/ResourceImages/lock.jpg | **Data Protection:** NES uses the personal data you provide for purposes associated with administering the AHP Careers Fellowship Scheme. NES will add your details to our database and share your work contact details with other participants in the Scheme through the Alumni network or other channels as deemed appropriate. If you would prefer us not to share your contact details, please contact [AHP.Fellowships@nes.scot.nhs.uk](mailto:AHP.Fellowships@nes.scot.nhs.uk) For more information see <https://www.nes.scot.nhs.uk/legal-and-site-information/privacy/> Personal data will be retained in line with our records retention policies. |

# AHP CAREERS FELLOWSHIP – APPLICATION FORM

### PART 1 – To be completed by you (in discussion with your line manager)

1. **Applicant details**

|  |  |  |
| --- | --- | --- |
| **Your Name** | **Job Title** | **Your e-mail** |
|  |  |  |
| **Profession (or AHP group you most closely align with)** | **HCPC number (if appropriate)** | **Telephone contact number (mobile if possible)** |
|  |  |  |
| **Employer** | **Work Address** | **Work setting** |
|  |  | Remote  Rural  Urban |
| **What are your main areas of practice?** | | |
| Mental Health  Learning Disability  Child Health  Adult Health | Social Work  Outpatient  School  Health Centre | Voluntary Organisation  Community  Acute Hospital  Other, please specify: |
| **Your Career Stage** | | |
| Level 2 Support Worker  Level 3 Senior Support Worker  Level 4 Assistant Practitioner | Level 5 Practitioner  Level 6 Senior Practitioner  Level 7 Advanced Practitioner | Level 8 Consultant Practitioner  Level 9 More senior  Not applicable |

Please note;

1. We understand that your project may involve your whole team (or a group of people) to varying degrees but we will still need you to be the primary applicant. If successful the Fellowship will be awarded to you, you will participate in the learning programme and we will consider you to be the project lead.
2. We will consider projects that are jointly **led by** **up to two people.** In this case please submit separate application forms and indicate here who your co lead is       (before applying for a joint project please see FAQ on website for more information on joint/shared work-based projects)
3. Remember, if you are not an NHSScotland or Local Authority employee your application must be submitted in partnership with NHSScotland or Local Authority AHP colleagues and supported by one of the AHP Directors/Leads.
4. **What is your intended work-based project?**

Title of project:

One-line summary/ purpose of project:

Overview of project: provide detail about background, state if there is previous related work or if this is a new idea, clarify need for project, and briefly outline potential stages of your project and what will be done (400 words max) (see Question 5 of **FAQs & Guidance**):

Who will be your local mentor to support you in this project?

What is the timescale for your project?

Project start: April 2024

No. of days per week:

Project complete by:

Total time in months:

(minimum 10 months and max 12 months)

1. **How will your work-based project contribute to a local or national strategy or priority (250 words max)?** Explain how your project supports a local or national strategy/ priority. Clarify which aspect of the local or national strategy/ priority your project supports (see Question 6 of **FAQs & Guidance**).

1. **Consider your work-based project within the context of public health, which domains or priorities might your project support?**

The UK AHP Strategic Framework for Public Health sets out four broad domains where AHPs often support Public Health: reducing the impact of wider (social) determinants on inequalities, Health Improvement, Population Healthcare, and Health Protection. There are also six public health priority areas identified for all of Scotland where AHPs can contribute. Indicate below which domains and/or which Scottish Public Health Priorities your project may support (see Question 7 of **FAQs & Guidance**). Select all that apply below by placing an X.

|  |  |
| --- | --- |
| **Public Health Domain/ Priority area for Public Health in Scotland** | **Response** |
| Addressing wider determinants of health and wellbeing to reduce inequalities |  |
| Health Improvement e.g. supporting behaviour change, capacity building for resilience |  |
| Population healthcare e.g. universal services, rehabilitation, recovery and reablement |  |
| Health Protection e.g. screening, health checks, radiation protection |  |
| A Scotland where we stay in vibrant, healthy and safe places and communities |  |
| A Scotland where we flourish in our early years |  |
| A Scotland where we have good mental health and wellbeing |  |
| A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs |  |
| A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all |  |
| A Scotland where we eat well, have a healthy weight and are physically active |  |
| I am not sure |  |
| None of the above |  |

1. **Please outline your learning outcomes for your Fellowship.**

This question strongly influences the Panel’s decision about your application, so it is worth investing time into making sure your outcomes are clear and thorough. For anticipated outcomes for self, refer to the Four Pillars of Practice in the [NES NMAHP Development Framework](https://www.nmahpdevelopmentframework.nes.scot.nhs.uk/) (see Question 10 of **FAQs & Guidance**) (300 words max)

|  |  |
| --- | --- |
| **Anticipated learning outcomes for self (please indicate outcome for self in each pillar)** | **What evidence will I have that tells me I have achieved/am achieving this?** |
| **Leadership Pillar** |  |
| **Clinical Practice Pillar** |  |
| **Facilitating Learning Pillar** |  |
| **Research/evaluation/service improvement Pillar** |  |

1. **How will being an AHP Fellow provide a career development opportunity for you?** Explain how you will benefit from the Fellowship to enhance your practice and future career (200 words max)

1. **How will others benefit from your project?**

During the learning and development programme, as part of the Fellowship, there will be sessions to discuss and plan the impact outcomes of your project. For now, we are interested in what you perceive to be the benefits of your project and for whom e.g. service, staff, public, or other partners (250 words max)

|  |  |
| --- | --- |
| **Anticipated benefits for service**  *Please add lines as required* | **What evidence will I have to show this has happened/is happening?** |
|  |  |
|  |  |
|  |  |

1. **Please confirm that your Fellowship application has been agreed with your Line Manager via your appraisal and your PDP (or an equivalent review/personal development process).**

I confirm  I do not confirm

1. **Please include relevant extract from PDP or equivalent review/ development process**

1. **Please detail all costs required for your Fellowship. Include description of item, cost and overall total e.g. release of capacity, travel, accommodation, training of others etc. Remember we can’t fund hardware, software or licences**

|  |  |
| --- | --- |
| **Description** | **Cost £** |
| *For example;*   1. *days per week for 12 months @ AfC Band 6 mid point*   *Travel to workshops (2 days @ £10 per day)* | *For example*  *15,975*  *20.00* |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total** |  |

Please add lines as necessary

1. **Finance department contact details**

Organisation:

Name:

Email address:

Postal address:

1. **Please provide details of any additional sources of funding contributing to the overall costs (if any)**

1. **Please note that if your application is successful, you will be required to provide regular learning reports outlining your learning experience and outcomes. We publish some of the best examples of learning reports to assist future participants.  Do you agree to your learning report being published?**

I agree

I do not agree

1. **Where did you find out about AHP Careers Fellowship Scheme? (e.g. email from colleague/Line Manager, Twitter, a previous Fellow, Practice Education Lead etc)**

1. **We are always looking to review and improve the Fellowship application process and the guidance offered. Would you be willing for your contact details to be used by a NES representative to gain feedback from you about the application process and guidance?**

Yes, I agree to be contacted

No, I do not agree to be contacted

**Please note that if your application is successful, you will be required to take action to ensure that your work-based project promotes equality and diversity in relation to protected characteristics as a minimum.**

Part 2 of application is below

### WHAT NEXT?

### *The next step is to ask your line manager to complete Part 2 of this form below*.

### PART 2 – to be completed by your Line Manager

1. **Line Manager’s details**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| Job Title: |  |
| Employer: |  |
| Tel No: |  |
| E-mail: |  |

1. **I confirm that this careers Fellowship learning opportunity links to the applicant’s appraisal and PDP (or equivalent).** I confirm

1. **Why do you support this application?**

1. **Please confirm your commitment to providing appropriate areas and tools for applicant to complete this Fellowship, e.g. rooms and access to computer/equipment**

1. **The applicant has described their learning outcomes. How will you support the applicant to achieve these?**

1. **How will you support the applicant to use their learning from this Fellowship in other areas of their work?**

1. **Please confirm that you will provide feedback (if requested) in relation to the applicant’s progress**. I confirm
2. **Have you ensured that there is equality of opportunity for this applicant to apply in the following areas:**

**Full and part-time staff**

**Support workers and registered staff**

**Race**

**Disability**

**Gender**

**Age**

**Sexual orientation**

**Religion and belief**

1. **Where did you find out about AHP Careers Fellowship? (e.g. email from colleague/Line Manager, Twitter, a previous Fellow, Practice Education Lead etc)**

Part 3 of application form is below.

### WHAT NEXT?

### The next step is to ask your service manager and budget holder to confirm their support by completing Part 3 of this form below. Depending on your circumstances your line manager from Part 2 of this form might also be the service manager and/or the budget holder …or it may be three different people. You will need to ensure the appropriate person/people sign the form agreeing to your application

### PART 3 – to be completed by your service manager and budget holder

**Service Manager’s details**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| Job Title: |  |
| Employer: |  |
| Tel No: |  |
| E-mail: |  |

|  |  |
| --- | --- |
| Please confirm that you support this application | I confirm |
| If this application is successful, you would be required to enter into an agreement with NES in relation to its arrangements, undertakings and responsibilities. Please confirm that you would be willing to do this | I confirm |
| Please confirm that you have discussed this application with relevant staff and if successful the applicant will be released from current practice, or given increased capacity, to undertake the Fellowship (as described in Part 1 of this form) | I confirm |

**Budget holder’s details**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| Job Title: |  |
| Employer: |  |
| Tel No: |  |
| E-mail: |  |

|  |  |
| --- | --- |
| Please confirm that you support this application | I confirm |
| If this application is successful, please confirm that   * the applicant will be released from current practice, or given increased capacity, for this Fellowship (as described in Part 1 of this form) * the Fellowship will commence in April 2024 * the Fellowship can be done within the requested budget | I confirm  I confirm  I confirm |

### WHAT NEXT?

**The next step is to ask your AHP Director (if you are based in the NHS, integrated team) or a relevant Director/Associate Director within your Local Authority to confirm their support by completing Part 4 of this form below.**

### PART 4 – to be completed by your AHP Director or Local Authority Director/ Associate Director

|  |  |
| --- | --- |
| Full Name: |  |
| Job Title: |  |
| Employer: |  |
| Tel No: |  |
| E-mail: |  |

1. **Please confirm whether you do or do not support this application.**

I support this application

I do not support his application

Note to applicant; we cannot progress any application that is not supported by your AHP Director or your Local Authority Director/Associate Director (as appropriate). Please **do not** submit an unsupported application to us.

1. **Please state why you do, or do not, support this application (bearing in mind that all applications should demonstrate how they will contribute to local or national strategy or priorities)?**

|  |
| --- |
|  |

1. **If funded, how will this Fellowship:**
2. Contribute to improving outcomes and/or experience of people using AHP services, and/or
3. Improve staff experience, and/or
4. Support AHP service development or improvement

|  |
| --- |
|  |

1. **Resources requested**

Do you consider the time and money being requested in the application to be proportionate and reasonable to undertake the work required for the project to be delivered as described?

**Time Yes/No**

**Money** **Yes/No**  
Please add any relevant comments or suggested adjustments here

|  |
| --- |
|  |

1. **Priority**

We usually receive more applications that we can fund therefore your view on the importance of this proposed Fellowship project is helpful for the Review Panel’s decision making. We ask you to please indicate your priority for allocation of funding for this application:

Very Important       

Important 

Desirable

If you wish add strength to your priority classification, please add detail here:

|  |
| --- |
|  |

### WHAT NEXT?

Save a copy of your completed application form for your own records.

E-mail this completed application form to [ahp.Fellowships@nes.scot.nhs.uk](mailto:ahp.fellowships@nes.scot.nhs.uk) by the **closing date of 12.00 (noon) on Tuesday 17th October 2023.**

**Please be aware that applications received after the closing date will not be considered.**

Both you and your line manager will receive an e-mail confirming receipt of the funding application.

A white background with black dots

Description automatically generated