Supporting system change—Jargon Buster

September 2019
System Change – Jargon Buster

Introduction

As with many other industries and sectors, the health and care system uses numerous abbreviations and terminology that can be confusing. Ongoing improvement plans and changes at a national, regional and local level, have meant that different parts of the system are sometimes using the same words or abbreviations to refer to quite different things.

In response, the Social Partnership Forum (SPF) has produced this simple to use jargon buster and guide on system change for staff and their representatives working across the NHS and wider health and care system. It has been adapted from a glossary of terms produced by the North East streamlining programme. It is intended for people who already have a good working knowledge of the system, but who might want to understand the new terminology, or system improvement plans.

It is recognised that terminology and plans are constantly evolving and to ensure this guide is kept up to date, it will be reviewed on a quarterly basis with links to other useful resources being provided.

It should be noted that this guide does not set out to answer questions about specific changes that might affect certain organisations, staff, or groups of staff and their representatives.

Further useful resources include:

1. The [NHS Confederation’s acronym buster](#)
2. NHS England’s [understanding the NHS jargon buster](#)
3. NHS England’s [Next Steps on the NHS Five Year Forward View](#)
4. NHS England and NHS Improvement’s [Refreshing NHS Plans for 2018/19](#)
5. [NHS Long Term Plan (LTP)](#) to improve care for patients over the next ten years
6. The [Interim NHS People Plan](#) sets out how staff will be supported to deliver the LTP.
Overview of planned system changes

• The health and social care system is under unprecedented pressure. Members of the SPF acknowledge the pressures that staff are working under and the tough times the system is facing and recognise the great job that staff are doing. People are living longer, and are increasingly living with one or more complex long-term conditions, which increases demand. At the same time, gaps are appearing in the workforce and this further exacerbates the pressures.

• In response, as part of the Five Year Forward View (FYFV), NHS England launched a national initiative to enable better, more sustainable services for local populations. New care models, including vanguards, integrated pioneer sites and primary care homes (PCH) tested approaches for shifting the focus away from service and disease-led decisions about how health and care is delivered to population health and demand-led decisions.

• As part of the FYFV, sustainability and transformation plans were developed, these set out how local partners intend to work together to address the triple aim - improved health and wellbeing, transformed quality of care delivery, and sustainable finances, now and in coming years. The STPs are being taken forward by sustainability and transformation partnerships (STPs) and integrated care systems (ICSs), formerly accountable care systems (ACSs).

• STPs and ICSs seek to develop new models of care so that health and care services are more joined up. This involves a move away from traditional organisational and professional boundaries to establish place-based systems of care in which healthcare, social care, voluntary, charitable sectors collaborate with each other to address the challenges and improve the health of the populations they serve.

• The Next Steps on the NHS FYFV (published 31 March 2017) reviewed progress made since the launch of the NHS FYFV in October 2014 and set out a series of practical and realistic steps for the NHS to deliver a better, more joined-up and more responsive NHS in England.

• Refreshing NHS Plans for 2018/19 was published by NHS England and NHS Improvement in February 2018 and includes the progress STPs and ICSs were expected to make in 2018/19.

• The NHS LTP, published January 2019, features information on ‘a new way of working’ including: the ambition for the establishment of ICSs across England by April 2021 and an NHS England and NHS Improvement shared operating model and how their new regional structure will support locally driven initiatives.

• The Interim NHS People Plan, which was published in June 2019, sets out a vision for people who work for the NHS, to enable them to deliver the NHS LTP and actions for 2019/20. The development of the full People Plan is being led by workstreams looking at making the NHS the best place to work, improving leadership culture, addressing the shortage of nurses, releasing time for care, workforce redesign, securing current and future supply of staff and a new operating model for the workforce.
## Terminology used in reference to system change

<table>
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<tr>
<th><strong>Acute care</strong></th>
<th>Acute care is the treatment of patients with short-term but serious conditions.</th>
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<tr>
<td><strong>ALBs</strong> &lt;br&gt;Arm’s Length Bodies</td>
<td>Arm’s Length Bodies regulate the health and social care system, establish national standards, protect patients and the public, and provide central services to the NHS. They share in managing, or overseeing, the use of resources across the NHS, public health and social care.</td>
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<td><strong>BHP</strong> &lt;br&gt;Better Health Partners</td>
<td>BHPs are NHS organisations working together to ensure that services are delivered to patients in a coordinated way. NHS organisations who treat patients (such as acute hospitals or mental health trusts), referred to as providers, work with commissioners of services (Clinical Commissioning Groups) who make funding decisions.</td>
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<td><strong>CCG</strong> &lt;br&gt;Clinical Commissioning Groups</td>
<td>The NHS Clinical Commissioners (NHSCC) website defines CCGs as “...clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area.” &lt;br&gt;See the NHSCC website for more information on CCGs.</td>
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<td><strong>Community care</strong></td>
<td>Most community healthcare takes place in people’s homes and includes supporting patients to manage long-term conditions and treating those who are seriously ill with complex conditions. &lt;br&gt;Teams of nurses and therapists typically coordinate care, working with other professions including GPs and social care. &lt;br&gt;NHS community care services can be provided by community trusts, acute trusts, mental health trusts and community interest companies and social enterprises.</td>
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<tr>
<td><strong>CQC</strong> &lt;br&gt;Care Quality Commission</td>
<td>The CQC is an arm’s length body (ALB) of the Department of Health and Social Care (DHSC). It is responsible for regulating the performance of all health and social care providers, both public and private. This may include hospitals, GP surgeries, dental practices and care homes. The CQC’s role is to ensure that services are safe and effective and that they provide high-quality care. Inspectors of services have a background knowledge and experience of the service which they inspect. &lt;br&gt;As set out in the LTP, there will be a greater emphasis by the CQC on system-wide quality in its regulatory activity, so that providers are held to account for what they are doing to improve quality across their local area. &lt;br&gt;The SPF engages with the CQC through its strategic group to enable social partners to inform and support the work of the CQC where it impacts on the workforce. &lt;br&gt;For more information on the CQC, see its website.</td>
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<tr>
<td><strong>CSUs</strong> &lt;br&gt;Commissioning Support Units</td>
<td>CSUs provide a wide range of commissioning support services that enable clinical commissioners to focus their clinical expertise and leadership in securing the best outcomes for patients and driving up quality of NHS patient services. &lt;br&gt;This includes transformational change – such as overseeing the reconfiguration of local services – as well as transactional support – including IT, HR and business intelligence – to a range of customers including CCGs, acute trusts, NHS England and NHS Improvement and local government.</td>
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| **DHSC**  
**Department of Health and Social Care** | The Department of Health and Social Care, formerly Department of Health, lead, shape and fund health and social care in England. DHSC is a ministerial department, supported by arm’s length bodies, and other agencies and public bodies.  
For more information see the DHSC [website](#). |
|---|---|
| **Devolution** | Devolution of powers and funds from central government to local government has emerged as one of the Government’s flagship policies.  
The Spending Review 2015 set out a clear commitment around furthering health and social care integration across the country by 2020. Devolution is seen as an important enabler for this. It is one of a range of enablers leading to more place-based commissioning and joined up care pathways, designed to support and improve the integration of care for people, and empowering patients and local communities.  
Devolution offers the potential for a stronger model of local shared accountability to underpin integrated commissioning and provision of health and care services across different delivery partners, not just statutory health and care services. |
| **EDC**  
**Equality and Diversity Council** | The Equality and Diversity Council (EDC) works to bring people and organisations together to realise a vision for a personal, fair and diverse health and care system, where everyone counts and the values of the NHS Constitution are brought to life. The Council provides visible leadership on equality and health inequalities issues across the health and social care. Its purpose is to shape the future of health and social care from an equality, health inequalities and human rights perspective and to improve the access, experiences, health outcomes and quality of care for all who use and deliver health and care services. The council is co-chaired by Simon Stevens and Joan Saddler.  
See the NHS England [website](#) for more information on the EDC. |
| **EDS versions 1, 2 & 3**  
**Equality Delivery System** | The EDS is a toolkit and framework for assessing how NHS organisations are performing regarding equality, diversity and human rights; how they can improve; and how they get to where they want to be.  
The Equality and Diversity Council (EDC) is currently leading on the development of the EDS3. |
| **EIA**  
**Equality Impact Assessment** | Under the Race Relations Act (2000), Disability Discrimination Act (2005) and Equality Act (2006), all public sector organisations need to undertake impact assessments in relation to those considered to have protected characteristics under the legislation, e.g. race, disability, gender, new and existing policies and procedures. |
| **ESR**  
**Electronic Staff Record** | This is a national database used by most NHS trusts in England and Wales to hold staff data. The functions are interlinked and specific to HR, training, occupational health and payroll.  
There are electronic interfaces (how systems talk to one another to share information) between Electronic Record System (ESR) and other electronic systems, such as NHS Jobs. ESR can provide reports to organisations but is only as effective as the information being stored in it. Some organisations are familiar with its functionality (what it can do) where as others use limited fields, either due to a lack of training or awareness. |
### ESR Oracle Learning Management (OLM) eLearning

The OLM is integrated into the ESR as a module and is used to create course links, course records and user tracking reports. Such reports show course usage, success rates and a variety of other data sets useful for administration purposes. The development of the system is a joint initiative between the ESR programme, DHSC, NHS Connecting for Health, Skills for Health - Core Learning Unit and eLearning for Healthcare.

[How to access OLM eLearning](#)

### Funding

There are many funding mechanisms that cover the flow of money in the NHS. Primary care is funded by NHS England and NHS Improvement. Care delivered by acute, mental health, ambulance and community care providers is commissioned and paid for by CCGs or NHS England and NHS Improvement specialisation commissioners (for rarer conditions). The national tariff sets the framework (and in some but not all instances) the prices to be used when commissioning healthcare.

In addition to the national tariff, there is also the sustainability and transformation fund which is paid to providers on the achievement of certain key targets. NHS England and NHS Improvement are currently working on new ways of commissioning and delivering care such as use of integrated budgets.

### HEE Health Education England

HEE is a national arm’s length body of the DHSC that supports the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.

See HEE’s [website](#) for more information.

### Healthwatch England

Healthwatch England was established as an independent consumer champion for health and social care. It also provides a leadership support role for the local Healthwatch network. Each local Healthwatch is part of its local community and works in partnership with other local organisations.

See the Healthwatch [website](#) for more information on what they do.

### ICCs Integrated care communities

An ICC aims to improve the overall health and wellbeing of the community by joining up health and care services to work together more effectively; providing more care out of hospital and supporting people to have information about their health conditions.

See the animation on the Kings Fund [website](#) for the reasoning behind ICCs.

### ICP Integrated Care Partnership

The Kings Fund defines ICPs as: ‘alliances of NHS providers that work together to deliver care by agreeing to collaborate rather than compete. These providers include hospitals, community services, mental health services and GPs. Social care and independent and third sector providers may also be involved’. See the Kings Fund [website](#) for more information.

### ICP Integrated Care Provider

‘Integrated Care Provider’ (‘ICP’ – formerly known as an ‘accountable care organisation’) is a term used to describe a provider that is responsible for the integrated provision of general practice, wider NHS and potentially local authority services, which enters into an ICP Contract with the commissioner(s) of those services. The ICP would be a ‘lead’ provider organisation, and so would be
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<th><strong>contractually responsible for delivering integrated services for local people. An ICP is not a new type of legal entity, and an organisation would become an 'ICP' only when it is awarded an ICP contract, simply by virtue of holding that contract.</strong></th>
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| **ICS Integrated Care System** | **ICSs involve NHS organisations, in partnership with local councils and others, taking collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.**  
**See NHS England’s website for more information on ICSs.** |
| **Learning disability services** | **A learning disability affects the way a person learns new things, understands information and communicates - throughout their lifetime.**  
**Learning disability services can be provided by GPs, paediatricians (doctors who specialise in treating children), speech and language therapists, physiotherapists, educational and clinical psychologists and social care; with the aim to help people with a learning disability live as full and independent a life as possible.** |
| **LWAB Local Workforce Action Boards** | **Initially established and facilitated by HEE. Connected with the creation of a STP, an LWAB’s role is strategic, ensuring that decisions made in connection with the workforce on both health and social care are planned effectively at the right time with the correct people involved. They were created in 2016, and it is anticipated that their purpose will evolve as STPs/ICSs progress. HEE and NHSE/I will work collaboratively to support systems to take on additional workforce responsibilities.**  
**Workforce issues are challenging for most NHS trusts, including skills shortages so LWABs will identify how this might be addressed within the STP/ICS locality including how healthcare can be delivered more efficiently based on the skills and funding available.**  
**It is anticipated that there will be a chief executive or executive director of workforce lead from the system on LWABs.**  
**See the HEE website for more information on the LWABs.** |
| **LWAG Local Workforce Action Groups** | **An LWAG is a sub-group of the LWAB.**  
**The sub-group’s role is to consider and plan the operational impact of decisions made at strategic level at the LWAB, escalating any issues which may need board approval. Not all areas have an LWAG.**  
**LWAG membership has not been finalised. It is anticipated that they will include HR and staff side representatives.** |
| **Mental health services** | **Someone with a mental health condition may feel great emotional distress or anxiety, cannot cope with day-to-day life or work, think about suicide or self-harm, or experience hallucinations and hear voices. This may be the result of an underlying medical condition or delusions caused an infection, overdose, illicit drugs or intoxication with alcohol.**  
**NHS Mental health services can be provided by GPs, local health centres, specialist mental health clinics or an NHS mental health hospital trust.** |
| **New Care Models** | **As part of the new care models programme, 50 vanguards took the first steps towards delivering the Five Year Forward View (published October 2014) - supporting improvement and integration of services. There were five vanguard types:** |
• Integrated **primary and acute care systems** (PACS) - joining up GP, hospital, community and mental health services

• **Multispecialty community providers** (MCPs) - moving specialist care out of hospitals into the community

• **Enhanced health in care homes** - offering older people better, joined up health, care and rehabilitation services

• **Urgent and emergency care** - new approaches to improve the coordination of services and reduce pressure on A&E departments

• **Acute care collaborations** - linking hospitals together to improve their clinical and financial viability

Primary Care Homes (PCH) - The PCH model builds on the strength of primary care to focus on personalisation of care within the context of improvements in population health outcomes for a registered population of between 30,000 and 50,000. The scale of the population for the PCH model is intended to drive a workforce model that ensures patients have a consistent and personalised experience of care. **National Association of Primary Care**.

**Integrated Pioneer** sites - 25 integrated care pioneer sites developed and tested new and different ways of joining up health and social care services across England. Utilising the expertise of the voluntary and community sector, with the aim of improving care, quality and effectiveness of services being provided. The shared goal of the integrated pioneer sites was to put the needs and experiences of people at the heart of the health and care system.

See the NHS England [website](#) for more information on the new care models/vanguards.


**NHS Digital**

NHS Digital has responsibility for standardising, collecting and publishing data and information from across the health and social care system in England and using this to improve health and care services.

For more information, see the NHS Digital [website](#).

**NHS Employers**

NHS Employers works on behalf of NHS organisations throughout England and aims to be the authoritative voice of workforce leaders, experts in HR, and negotiate fairly to get the best deal for patients. Its role includes negotiating with trade unions on the terms and conditions of employment for NHS staff on a national basis. NHS Employers also provides advice and guidance to the NHS on staff wellbeing; pay and reward; recruitment and retention and helps NHS organisations plan for their future workforce needs. NHS Employers works in partnership with the government, arm’s length bodies and trade unions, through the SPF, on workforce issues that are impacting or could have an impact on staff working for the NHS in England. They have close links with the NHS in Wales.

NHS Employers is part of the **NHS Confederation**.

For more information, see the NHS Employers [website](#).

**NHS England (now combined with NHS Improvement)**

A national ALB of the DHSC, NHS England sets the priorities and direction of the NHS and encourages and informs the national debate to improve health and care. Much of NHS England’s work involves the commissioning of health care services in England. They commission primary care services from independent contractors (GPs, pharmacists, dentists and optometrists) and oversee the work of CCGs,
**referred to NHSE/I**

which plan and commission local health services from hospitals and ambulance services.

In April 2019, NHS England and NHS Improvement came together to act as a single organisation.

For more information, see the NHS England [website](#).

**NHSI**  
**NHS Improvement**  
(now combined with NHS England referred to as NHSE/I)

A national regulatory arm’s length body (ALB) of the DHSC, supporting foundation trusts and NHS trusts to give patients consistently safe, high quality, compassionate care within local health systems that are financially sustainable. NHSI aims to develop an environment for success by empowering leaders and developing improvement capabilities and they encourage collaboration across the sector and the increased use and sharing of established improvement tools and techniques.

NHSI brought together Monitor, NHS Trust Development Authority, Patient Safety, the National Reporting and Learning System, the Advancing Change Team, and the Intensive Support Teams.

NHSI builds on the best of what these organisations did, but with a change of emphasis. Its priority is to offer [support to providers](#) and local health systems to help them improve.

In April 2019, NHS England and NHS Improvement came together to act as a single organisation.

For more information, see NHS Improvement’s [website](#).

**NHS Oversight Framework**

The NHS Oversight Framework for 2019/20 outlines the joint approach from NHSE/I to oversee organisational performance and identify where commissioners and providers may need support.

The NHS Oversight Framework for 2019/20 replaced the provider [Single Oversight Framework](#) and the CCG Improvement and Assessment Framework and informs assessments of providers in 2019/20. It is intended as a focal point for joint work, support and dialogue between NHS England and NHS Improvement, CCGs, providers and sustainability and transformation partnerships, and integrated care systems.

To access the Framework see NHS Improvement’s [website](#).

**NHSX**

NHSX brings teams from the DHSC and NHSE/I together into one unit to deliver the plan set out in the [policy paper](#), *The future of healthcare: our vision for digital, data and technology in health and care*, building on the NHS Long Term Plan.

For more information, see the NHSX [website](#).

**Primary care**

Primary care is a typically a service user’s first point of contact in the healthcare system. Providers of primary care services include: general practice, community pharmacy, dental and optometry services.

**PCNs**  
**Primary Care Networks**

Primary care networks build on the core of current primary care services and enable greater provision of proactive, personalised, coordinated and more integrated health and social care.

They include GP practices working with community, mental health, social care, pharmacy, hospital and voluntary services in their local areas. They help meet the
| needs of people who are living with long term conditions such as diabetes and heart disease or suffer with mental health issues. For more information on PCNs see NHS England’s [website](https://www.england.nhs.uk/).

| **Productivity in the NHS** | Lord Carter of Coles chaired a national review panel which examined productivity in the NHS and recommended more efficient ways of providing the service. The report set out 15 recommendations to help reduce variation across the biggest areas of spend in hospitals: clinical staff, pharmacy, procurement and estates and facilities. By eliminating unwarranted variation in hospitals – from staffing to services. See the Gov.uk [website](https://www.gov.uk/) for the Productivity in NHS hospitals review report. |

| **Provider (NHS)** | NHS acute, ambulance, community and mental health hospital trusts that treat patients are all NHS providers. |

| **Regional Networks for STPs & ICSs** | There are seven regional networks, which:

- provide an independent forum to discuss challenges and opportunities facing local systems and help to disseminate learning and best practice
- promote joint working and integration between local authorities, NHS, clinicians and the voluntary sector, complementing and signposting to existing support from national bodies, peers and others
- facilitate a dialogue with national bodies about the key issues facing local systems and enable more co-production of national policy.

For more information and the name of the engagement manager responsible for each region, see the NHS Confederation [website](https://www.england.nhs.uk/). |

| **Secondary care** | Secondary care covers treatment for illness, injury or other health problem, with patients either referred by a GP or through attending accident and emergency. Secondary care services, which includes elective care (a planned operation) are usually provided by an NHS hospital trust. |

| **SPF Social Partnership Forum** | The SPF brings together NHS Employers, NHS Trade Unions, NHSE/I, HEE and the DHSC to discuss and debate the development and implementation of the workforce implications of policy. The forum also encourages and supports managers and trade unions to work in partnership to support staff to deliver high quality patient care. See annex for the membership of the SPF.

The SPF is supporting effective system change and has produced guidance for social partnership working in developing and implementing new care models and system transformation. The SPF has also produced the [SPF Staff Transfer Guide](https://www.england.nhs.uk/) - an online toolkit designed to support staff who are facing transfer to providers of NHS funded services in England. See [Social Partnership Forum](https://www.england.nhs.uk/)

[SPF supporting system change](https://www.england.nhs.uk/)

| **STP** | STP stands for sustainability and transformation partnership. These are 44 areas covering all of England, where local NHS organisations and councils have drawn up proposals to improve health and care in the areas they serve. |
STP can also stand for ‘sustainability and transformation plan’, plans drawn up in each of these areas setting out practical ways to improve NHS services and population health in every part of England.

They aim to help meet a ‘triple challenge’ set out in the [NHS Five Year Forward View](#) – better health, transformed quality of care delivery, and sustainable finances.

For more information on STPs, see the NHS England [website](#).

### Streamlining

A way of working which is simpler and more efficient. Streamlining the administrative functions which support clinical and care providing staff can reduce time and costs associated with recruitment, training and occupational health. This also prevents unnecessary spend on agency staff, for example, filling patient facing job roles due to pre-appointment checks being incomplete or new starters attending a full induction including training that they have already received. There is a portability of information aimed at preventing an individual ‘starting again’ if they change their job role to another employer. Streamlining works in accordance with the NHS employment standards.

Streamlining allows NHS organisations to share best practice and learning and increase job satisfaction by removing time consuming, repetitive tasks to enable teams to focus on progression rather than reaction.

[NHS streamlining resource hub](#)

### Tertiary care

Tertiary care services are provided in specialised hospitals by clinicians qualified to treat unusual disorders, equipped with diagnostic and treatment facilities not available in other hospitals.

### WDES

**Workforce Disability Equality Standard**

The NHS standard for governing all that NHS organisations do regarding disability equality and for which the CQC will hold organisations to account as part of their inspection regime. The WDES became mandatory for NHS providers, via the NHS Standard Contract in England, from April 2019.

For more information on the WDES, see the NHS England [website](#).

### WRES

**Workforce Race Equality Standard**

The NHS standard for governing all that NHS organisations do regarding race equality and for which the CQC will hold organisations to account as part of their inspection regime.

For more information on the WRES, see the NHS England [website](#).
Annex

SPF partners' websites
Social Partnership Forum  www.socialpartnershipforum.org
UNISON  www.unison.org.uk
NHS Employers  www.nhsemployers.org
NHS England  www.england.nhs.uk
NHS Improvement  www.improvement.nhs.uk
Health Education England  www.hee.nhs.uk
Royal College of Midwives  www.rcm.org.uk
Royal College of Nursing  www.rcn.org.uk
British Medical Association  www.bma.org.uk
Chartered Society of Physiotherapy  www.csp.org.uk
Managers in Partnership  www.miphealth.org.uk
Unite  www.unitetheunion.org
GMB  www.gmb.org.uk
British Dietetic Association  www.bda.uk.com
British and Irish Orthoptic Society  www.orthoptics.org.uk
Federation of Clinical Scientists  www.acb.org.uk
Hospital Consultants & Specialists Association  www.hcsa.com
College of Podiatrists  www.cop.org.uk
Society of Radiographers  www.spr.org
British Association of Occupational Therapists  www.cot.co.uk
Trades Union Congress  www.tuc.org.uk
Business Services Association  www.bsa-org.com

Department of Health and Social Care:  www.gov.uk/government/organisations/department-of-health-and-social-care
www.socialpartnershipforum.org

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