



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 and updated quarterly 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](#).

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, but also 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.
- This establishes a clear case for change nationally. Incremental improvements will not deliver the scale of change needed to ensure sufficient, consistently high quality and financially sustainable capacity across the NHS.
- In response, as part of the Five Year Forward View (FYFV), NHS England has launched a national initiative to enable better, more sustainable services for local populations. Sustainability and transformation plans 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 (ICS), formerly accountable care systems (ACS).
- STPs and ICSs have the opportunity to develop new models of care so that health and care services are more joined up.
- New care models, including vanguards, integrated pioneer sites and primary care homes (PCH) have been testing approaches for shifting the focus away from service / disease-led decisions about how health and care is delivered to population health / demand-led decisions.
- This involves a move away from traditional organisational / 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 are expected to make in 2018/19.

Terminology used in reference to system change

<p>ALBs Arm's Length Bodies</p>	<p>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.</p>
<p>BHP Better Health Partners</p>	<p>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.</p>
<p>CCG Clinical Commissioning Groups</p>	<p>The NHS Clinical Commissioners website defines CCGs as "...clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area."</p> <p>CCGs</p>
<p>CQC Care Quality Commission</p>	<p>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.</p> <p>The CQC is setting out its plans as to how it might regulate integrated care. The first step will be to look at how the organisation regulates new models of care. They will work with the vanguard sites to understand how services can be monitored for quality and improvement, and will outline how new care models should be registered. "An example of this would be acute hospitals that employ general practices," said David Behan, former CEO of the CQC. "At the minute we register hospitals and we separately register general practices but in the future we'll need to flex and change the way we register those services."</p> <p>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.</p> <p>CQC</p>
<p>CSUs Commissioning Support Units</p>	<p>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.</p> <p>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 Clinical Commissioning Groups (CCGs), acute trusts, NHS England, and local government.</p>

<p>DHSC Department of Health and Social Care</p>	<p>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 15 arm's length bodies, and other agencies and public bodies.</p> <p>DHSC</p>
<p>Devolution</p>	<p>Devolution of powers and funds from central government to local government has emerged as one of the Government's flagship policies.</p> <p>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.</p> <p>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.</p>
<p>EDC Equality and Diversity Council</p>	<p>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.</p> <p>EDC</p>
<p>EDS 1 & 2 Equality Delivery System</p>	<p>Versions of the Equality Delivery System. The EDS is a toolkit and framework for assessing how NHS organisations are performing with regard to equality, diversity and human rights; how they can improve; and how they get to where they want to be.</p>
<p>EIA Equality Impact Assessment</p>	<p>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.</p>
<p>ESR Electronic Staff Record</p>	<p>This is a national database used by the majority of NHS trusts in England and Wales to hold staff data. The functions are interlinked and specific to HR, training, occupational health and payroll.</p> <p>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.</p>

	<p>ESR Oracle Learning Management (OLM) eLearning</p> <p>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 <u>ESR</u> programme, DHSC, NHS Connecting for Health, Skills for Health - Core Learning Unit and eLearning for Healthcare.</p> <p>How to access OLM eLearning</p>
Funding	<p>There are many funding mechanisms that cover the flow of money in the NHS. Primary care is funded by NHS England. Care delivered by acute, mental health, ambulance and community care providers is commissioned and paid for by clinical commissioning groups (CCGs) or NHS England specialised 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.</p> <p>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.</p>
HEE Health Education England	<p>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.</p> <p>HEE</p>
Healthwatch England	<p>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.</p> <p>Healthwatch</p>
Integrated Care Provider (ICPs)	<p>'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 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 if and when it is awarded an ICP Contract, simply by virtue of holding that contract. The introduction of the ICP Contract is subject to the outcome of NHS England's recent consultation.</p>
LWAB Local Workforce Action Boards	<p>Part of 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/ICs progress.</p>

	<p>Workforce issues are challenging for most NHS trusts, including skills shortages so LWABs will identify how this might be addressed within the STP locality including how healthcare can be delivered more efficiently based on the skills and funding available.</p> <p>It is anticipated that there will be an HR Director on LWABs.</p> <p>Local Workforce Action Boards (LWABs)</p>
<p>LWAG Local Workforce Action Groups</p>	<p>An LWAG is a sub-group of the LWAB.</p> <p>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.</p> <p>LWAG membership has not been finalised. It is anticipated that they will include HR and staff side representatives.</p>
<p>New Care Models</p>	<p>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 are five vanguard types:</p> <ul style="list-style-type: none"> • 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 <p>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</p> <p>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.</p> <p>New care models/vanguards Some assembly required: implementing new models of care - lessons from the new care models programme</p>

<p>NHS Employers</p>	<p>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. Their 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.</p> <p>NHS Employers</p>
<p>NHS England</p>	<p>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, which plan and commission local health services from hospitals and ambulance services.</p> <p>NHS England</p>
<p>NHSI NHS Improvement</p>	<p>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. They aim 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.</p> <p>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.</p> <p>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.</p> <p>The Next Steps document states that ACSs (now ICSs) will be offered: “A single one stop shop regulatory relationship with NHS England and NHSI in the form of streamlined oversight arrangements. An integrated CCG Improvement and Assessment Framework (IAF) and trust single oversight framework”</p> <p>NHS Improvement</p>
<p>Productivity in the NHS</p>	<p>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.</p>

	<p>Productivity in NHS Hospitals Review</p>
<p>SOF Single Oversight Framework</p>	<p>The SOF was developed by NHSI and introduced on 1 October 2016 to replace Monitor’s Risk Assessment Framework and the NHS Trust Development Authority’s Accountability Framework.</p> <p>It also included the recommendations of Lord Carter’s review into operational productivity in English NHS acute hospitals. Carter noted the variations in acute trusts and ultimately the quality of service which patients can access. This created a model hospital, which is an online system to access best practice guidelines.</p> <p>The Single Oversight Framework is designed to help NHS providers attain, and maintain, CQC ratings of good or outstanding. The framework doesn’t give a performance assessment in its own right.</p>
<p>SPF Social Partnership Forum</p>	<p>The SPF brings together NHS Employers, NHS Trade Unions, NHS England, HEE, NHSI 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.</p> <p>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 - an online toolkit designed to support staff who are facing transfer to providers of NHS funded services in England.</p> <p>Social Partnership Forum SPF supporting system change</p>
<p>STP</p>	<p>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.</p> <p>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.</p> <p>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.</p> <p>STP</p>
<p>Streamlining</p>	<p>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.</p>

	<p>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.</p> <p>NHS streamlining resource hub</p>
<p>WDES Workforce Disability Equality Standard</p>	<p>The NHS Equality and Diversity Council (EDC) recommended that a Workforce Disability Equality Standard (WDES) should be mandated via the NHS Standard Contract in England from April 2019.</p> <p>WDES</p>
<p>WRES Workforce Race Equality Standard</p>	<p>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.</p> <p>WRES</p>

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
Health Education England	www.hee.nhs.uk
NHS Improvement	www.improvement.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 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.sor.org
British Association of Occupational Therapists	www.cot.co.uk
Trades Union Congress	www.tuc.org.uk
Business Services Association	www.bsa-org.com