

APPENDIX 1 TERMINOLOGY DEFINITIONS

Integrated Care Systems (ICS): Bring together NHS organisations, local government and wider partners at a system level to deliver more joined up approaches to improving health and care outcomes. All areas of England will be covered by an ICS by April 2021 and on a statutory footing by 2022. Cheshire and Merseyside is an ICS area.

Place: is a defined area within an ICS, typically aligned with local authority boundaries. In Cheshire and Merseyside there are 9 places aligned with each local authority.

Neighbourhood: a defined area within a Place that is typically co-terminus with a Primary Care Network or other recognised local community footprint.

Integrated Care Partnerships (ICP): term used to describe **place-based** joint working between NHS, local government, community services and other partners. Each Place will determine how it organises itself as an ICP and how these arrangements relate to the Health and Wellbeing Board (HWB). HWBs continue to have a statutory role for improving health and wellbeing of local population, using Joint Strategic Needs Assessment (JSNA) to set local priorities. HWBs are a key component of the ICS and a key role for the ICS is to support place-based working and the development of ICP arrangements.

What is Purpose of an ICP? ICPs will deliver the local priorities set by the HWB and system priorities set by the ICS, by organising how local services and partners can work better together. ICPs will drive improved outcomes and address the inequalities identified by the HWB. They can use enablers such as integrated commissioning, BCF, population health data and improved digital technology to enable this work.

Provider Collaboratives: NHS-Led Provider Collaboratives will include providers from a range of backgrounds, including the voluntary sector, other NHS trusts and independent sector providers. Provider Collaboratives will work closely with established partnerships called Integrated Care Systems, which include NHS organisations, local councils and others, to support improved commissioning of services for people within the same population footprint. They will also work alongside service users, carers and families.

There are key principles which underpin the Provider Collaborative model:

- Collaboration between Providers and across local systems
- Experts by Experience and clinicians leading improvements in care pathways
- Managing resources across the collaborative to invest in community alternatives and reduce inappropriate admissions/care away from home
- Working with local stakeholders
- Improvements in quality, patient experience and outcomes driving change
- Advancing equality for the local population