

## **Jargon Buster**

## A glossary of terms for Our Healthier South East London (the south east London commissioning strategy programme)

All industries, sciences and services have developed their own "jargon", or internal language which facilitates easy communication between those working in them. The NHS is no exception. While we try as hard as possible to keep our documents jargon free, sometimes we will use words, phrases and abbreviations which are not immediately clear to everyone reading it. This current list of jargon, abbreviations and acronyms explains what is meant in documents that we write. In some cases the same word or acronym has two or more uses, which are also explained below.

We hope that this list is useful. If there are any other words or phrases which are unclear on our website or in any of our published documents, please let us know. Contact <a href="mailto:SELStrategy@nhs.net">SELStrategy@nhs.net</a>

The list is alphabetic, as being the easiest way to access any subject.

**111:** a 24 hours a day 7 days a week contact number (free of charge from landlines and mobiles) which can provide medical advice and help when it is not a 999 emergency situation.

**999**: the 24/7 number to call for real emergencies. Callers will be asked what service is required (Fire, ambulance or police) and will be sent send appropriate help. In SEL, LAS emergency vehicles are staffed by paramedics able to assess and give emergency treatment. Attendance of an LAS vehicle and crew is not a guarantee of being taken to A&E.

**A&E (Accident & Emergency):** a hospital service which provides care for emergency, life threatening and critical conditions for patients of all ages, twenty-four hours a day, seven days a week. This is also known as ED – Emergency Department. It is common for paediatric (children) emergencies to be managed in a separate area of the departments

**Acute care:** short-term treatment, usually provided in hospital.

**Acute trust:** an NHS Hospital Trust or Foundation Trust providing and/ or managing hospitals. Some acute trusts also provide community services, such as Guy's and St Thomas' NHS Foundation Trust.

**Admission** (to a hospital): needing (at least) an overnight stay in hospital, either for an emergency or following a planned procedure.



ALOS (Average Length of Stay – also sometimes LOS, Length of Stay): is an average of the length of time a patient stays in a hospital when admitted. Collection of this data is essential to service planners and audit.

**Asthma** –Chronic lung disorders with a variety of causes but all characterised by reversibility of small airway obstruction. Not to be confused with COPD (See below)

'At scale' provision: Existing or proposed services which are or can potentially be provided across a greater population or geographical area (larger scale). Usually used in the context of the whole of south east London or across more than one borough. In primary care, this term is also used to mean a service provided at a much larger scale than found in current GP practices e.g. serving populations of 50,000 or more

**Blue Light Case**; patients transported to hospital A&E by emergency ambulance in response to a 999 call or GP request

**CAMHS:** Child and Adolescent Mental Health Services

**Care Pathway:** the care and treatment a patient receives from start to finish for a particular illness or condition, usually across several parts of the health service and often including social care. Care pathways as planned for a condition can ensure full seamless integration of all the necessary services.

**Carer/informal carer:** a person who looks after or supports someone else due to illness or disability. This can be an unpaid, **informal carer**, who may be family members, including children and young people, who live with the person they care for; or family, friends or neighbours who live elsewhere. **Carer** is also used to describe paid staff working in care homes and/or supporting people at home, particularly staff who do not have professional qualifications

Case for Change: sets out the reasons why current health and integrated services need to change if SEL is to improve health, reduce health inequalities and deliver health and integrated care services which are of consistently high quality within the money available.

**CCB (Clinical Commissioning Board):** the key decision making body for the five year strategy, which brings together commissioners from CCGs, NHS England and Local Authorities. It also includes patient, public and Healthwatch representation.

CCG (Clinical Commissioning Groups): Statutory Organisations which plan and fund (commission) most local health services. These replaced primary care trusts (PCTs) in April 2013. CCGs are led by GPs and other clinicians. All GP practices in a CCG area are members. Each CCG in south east London covers one borough. CCGs do not commission or fund GP contracts (See NHS England)



**CEG (Clinical Executive Group):** This brings together clinical leaders (medical and nursing directors from NHS providers, clinical chairs from CCGs) and patient, public and Healthwatch representation. It provides the clinical leadership for the strategy programme as a whole; provides challenge and assurance to the individual clinical leadership groups; and manages interdependencies across groups.

**CEPN (Community Education Provider Networks)**: Local CCG-led group of providers including social services, co-ordinating and prioritising a more network-based approach to designing and delivering health education and training.

**CHD (Coronary Heart Disease):** the narrowing or blockage of the coronary arteries, the major blood vessels around the heart. (See also CVD)

**CIP (Cost Improvement Plan):** plans to meet the cost savings targets by NHS organisations.

Clinical Leadership Groups (CLGs): clinically-led working groups consisting of senior experts drawn from across commissioners, providers of NHS services, social care and public health, as well as patient, public and Healthwatch representation.

**CNS:** Clinical Nurse Specialist – a nurse who specialises and has a high level of qualifications and experience in a specific area. (In medical texts CNS can mean Central Nervous System. However in our documents we are unlikely ever to use the abbreviation in this context.)

**Collective action:** Work that we can do across the six boroughs – this is either because we can do it more efficiently and effectively together, or because the changes being looked at will affect more than one borough

**Commissioning:** The planning, buying (procurement) and contract management of health and health care services. This can be for a local community a specific population or a specific condition. This can be done at National NHS, Local NHS or CCG levels..

**Community Based Care:** covers a range of community based services which can range from district nursing, health visiting, foot health, sexual and reproductive health and specialist nursing services.

Contacts / NHS contacts / every contact counts: A contact occurs every time a patient or a member of the public sees, talks to, or otherwise makes contact with a health professional. 'Every contact counts' refers to making these meetings and conversations as meaningful as possible in helping patients keep healthy and/or manage their health. There is a specific, structured programme to improve the effectiveness of our contacts in addressing a range of health issues (used in Yorkshire and Humber) which we are considering as part of developing the strategy.



**Continuing Healthcare:** CCG-funded packages of care given to those meeting set criteria.

**Co-production:** Co-production is an approach to ensuring that effective and long-term partnership is at the heart of services. It aims to bring together, in an equal relationship, professionals, users, communities and any other relevant individuals to jointly design and deliver services.

**COPD (Chronic Obstructive Pulmonary Disease):** The name for a collection of lung diseases including chronic bronchitis and emphysema. Characterised by irreversible airways and lung damage. (see Asthma)

**CSU (Commissioning Support Unit):** An organisation providing back-office support (such as IT, HR, contract management and communications) to CCGs.

**CQC (Care Quality Commission):** An organisation funded by the Government to inspect all hospitals, care homes and care services in England to make sure they are meeting government standards and to share their findings with the public.

**CQUINs (Commissioning for Quality and Innovation):** A contractual mechanism that allows commissioners to pay providers for completing activities that directly relate to improving the quality of care received by patients.

**CVD (Cardiovascular Disease):** Also known as heart disease, this refers to diseases that affect the heart or blood vessels. (CVS). Hypertension (high blood pressure) is the most common form.

CVS (Cardiovascular system) the heart, arteries capillaries and veins

**Day case or day surgery:** patients who have a planned investigation, treatment or operation and are admitted and discharged on the same day.

**Deficit**: the net financial position of an organisation where expenditure (outgoings) is greater than income. (opposite: Surplus)

**ECG** (Electrocardiogram): a test of the electrical activity of the heart.

**Elective centre:** a hospital or a distinct part of a hospital which provides elective (planned) care, separated from urgent and emergency care.

**Elective surgery:** planned / non-emergency surgery (i.e. not immediately necessary to save life). This is usually carried out in a hospital either as a day case or an inpatient. Minor surgery may be carried out in a range of approved settings

**Emergency admission:** a patient who is admitted to hospital on the same day due to urgent need (also known as urgent admission and unplanned care).

**End of Life Care** – dignified care of the dying planned as far as possible to include the patient's wishes as to where they are cared for.



**Every contact counts:** every time a patient or a member of the public sees, talks to, or otherwise makes contact with a health professional every effort is given to making these meetings and conversations as meaningful as possible in helping patients keep healthy and/or manage their health. There is a specific, structured programme to improve the effectiveness of our contacts in addressing a range of health issues (used in Yorkshire and Humber) which we are considering as part of developing the strategy

**Financial surplus:** the net financial position of an organisation where income is greater than expenditure (outgoings) – so there is a surplus of money at year end.

**Foundation Trust:** a NHS hospital that is run as an independent, public benefit corporation, controlled and run locally. Foundation Trusts have increased freedoms, including around funding of and investment in services. They are regulated by Monitor – The independent regulator of NHS Foundation Trusts.

**Friends & Family** - the Friends and Family Test (FFT) is a simple question that patients are asked when they leave hospital about whether they would recommend the hospital to their friends or family. This gives hospitals a better understanding of the needs of their patients to help them continually improve services.

The test asks the following standardised question: "How likely are you to recommend our ward/A&E department to friends and family if they needed similar care or treatment?" Patients will use a descriptive six-point response scale to answer the question with the following response categories:

- 1. Extremely likely
- 2. Likely
- 3. Neither likely nor unlikely
- 4. Unlikely
- 5. Extremely unlikely
- 6. Don't know

This test will be extended to all GP services in late 2014.

**General Practice** – the medical specialty providing a range of health care services within the community. Now typically includes doctors and nurses, May include physiotherapists and other community services.

**GP:** General Practitioner (s), your local doctor (s). Usually practicing in groups)

**GSTT:** Guy's and St Thomas' NHS Foundation Trust, which runs Guy's and St Thomas' hospital and community services across Lambeth and Southwark.

**Governing Body:** Sets the direction of the CCG by developing plans and priorities for improving NHS services to ensure people in their borough get the best healthcare services possible; and ensures strong and effective leadership, management and accountability. Governing Body members are primarily GPs, together with as CCG executive staff and lay members.



**Health and Wellbeing Strategies:** jointly-agreed and locally-determined set of priorities for local partners (including CCGs and local Authorities) to use as basis of commissioning plans.

**Healthwatch England:** an independent organisation giving people a local voice about their health and social care services. It supports and co-ordinates the activity of all the Local Healthwatch. Each borough or CCG area typically has its own largely autonomous Healthwatch. It aims to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality. They have a seat on health and wellbeing boards, ensuring that the views and experiences of patients, carers and other service users are taken into account when preparing local needs assessments and strategies such as the Joint Strategic Needs Assessment (JSNA).

**Healthwatch:** Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark Boroughs each have a Healthwatch. The six south east London Healthwatches have representation on all the CLGs and PPAG.

**HESL:** Health Education England – South London region. Health Education England (HEE) is responsible for the education, training and personal development of the workforce in the NHS, and recruiting for values; HESL is the organisation with responsibility for south London within the overall umbrella of HEE.

**Home ward:** a care pathway (system) in which professional care is delivered to patients in their own homes rather than on a ward in hospital, organising the care in a similar way to a ward. It is a cost effective system and avoids hospital admissions which can cause stress to elderly and vulnerable patients.

**IEG (Implementation Executive Group):** the executive group supporting the Clinical Commissioning Board (CCB), providing oversight to planning, implementation, benefits realisation and assurance. The IEG will also have a responsibility to make recommendations to the CCB on the optimal structure and scope of the programme

**Implementation:** putting into practice the plans and strategies that have been developed

**Independent sector:** a range of non-public sector organisations involved in service provision, including private, voluntary and charitable organisations

**Inpatient:** a patient who stays overnight in hospital, either following an emergency admission or a planned procedure.

**Intervention:** term for the point at which a medical, social care or other professional gets involved in a person's healthcare. Early intervention is when this happens before a person's health is severely affected. This term is also used as a general name for a medical or nursing procedure.



**JSNA (Joint Strategic Needs Assessment):** a document which analyses the health needs of a population to inform the commissioning of health, well-being and social care services. This document is updated annually.

KCH: King's College Hospital NHS Foundation Trust.

**Keogh / Keogh requirements:** Clinical standards set out by NHS England's Sir Bruce Keogh for seven day services across the NHS

**KHP (King's Health Partners):** one of five Academic Health Science Centres in England, made up of Guy's and St Thomas', Kings College Hospital, South London and the Maudsley (SLaM) and King's College London. It works to transfer research into practice, teaching and clinical practice to the benefit of patients.

**LIS (Local Incentive Scheme):** a process to encourage GPs to proactively look at specific health objectives for the local population. This has included long term conditions (such as COPD and diabetes), early cancer diagnosis and effective prescribing.

**London Clinical Standards:** These are the minimum standards of care that patients attending A&E / admitted as an emergency or using maternity services should expect to receive in every acute hospital in London. These standards are set out by NHS England and have been agreed by all CCGs. Although they are specific to London, they are consistent with, and sometimes build on, national standards.

**LTC** (Long Term Condition): a long term or chronic condition or illness that cannot be cured (but can be managed through medication and/ or therapy) and that people live with for a long time, such as diabetes, heart disease, dementia and asthma.

**Mortality rate:** a measure of the number of deaths (in general or due to a specific cause) in a defined population, scaled to the size of that population, per unit of time. National and local mortality rates can be compared and are essential in determining local priorities for services.

**Midwife led unit:** a unit which specialises in delivering babies by midwives, without the intervention of a consultant obstetrician.

**Minor surgery** (Minor ops) -small surgical procedures which may be carried out in a range of approved settings

**Multidisciplinary / multi-professional teams (MDTs):** teams comprising different kinds of staff involved in patient care – this could include GPs, nurses, psychologists, occupational therapists, pharmacists, social care staff, hospital doctors and other specialists.

**NHS England:** This body oversees the day-to-day operation of the NHS from April 2013 as set out in the Health and Social Care Act 2012 and is responsible for



commissioning some local services, such as GPs, and all specialised services such as prisons, HIV. It also assures the performance of CCGs.

**Obstetrics:** the medical specialty that deals with care for women during pregnancy, childbirth and the postnatal period.

**OoH** (Out of Hours): a term usually referring to services available between 6.30pm and 8.00am and sometimes also at weekends. This sometimes specifically refers to GP type services. **OoH** may also mean Out of Hospital

**Partnership Group:** This brings together a wide range of senior clinicians and managers from commissioners, including local authorities, providers of NHS services and advisory bodies and also includes patient and public voices representation. It is the key advisory group to the Clinical Commissioning Group.

**PHB: Personal Health Budgets:** A personal health budget is an amount of money to support an individuals' identified health and wellbeing needs, planned and agreed between them and their local NHS team. The aim is to give people with long-term conditions and disabilities greater choice and control over the healthcare and support they receive.

Personal health budgets work in a similar way to the personal budgets that many people are already using to manage and pay for their social care.

**Planned Care:** where a patient is referred for treatment and there is a predetermined pathway of care.

**PPAG** (Patient and Public Advisory Group): the collective forum for the strategy's patient and public voices (or patient, public and Healthwatch representation and reports to the Clinical Executive Group (CEG).

**PPV:** patient and public voices – people who are part of the strategy development to ensure that the experiences and values of patients and the public are included in all discussions

**Primary care:** Sometimes used to describe the services provided by GPs, NHS dentists, optometrists (opticians) and community pharmacists. This may also include other community health services

**Primary Care Trust (PCT):** NHS bodies that commissioned primary, community and secondary care from providers before April 2013.

**Priority pathways:** the five areas of focus for the strategy, in addition to primary and community care and long term conditions, agreed as priorities for joint working across south east London.



**Proactive care:** care that actively seeks to prevent ill health or a deterioration in health by intervening and working with people before they get ill. (also called preventive care)

QIPP (Quality, Innovation, Productivity and Prevention): an NHS-wide initiative to deliver more and better services and care with fewer resources. RMS or RMBS: Referral management (Booking) Service: Central referral system for agreed clinical pathways.

RTT - Referral to Treatment Time: standards included in the NHS Constitution that establish a patient's right to be treated within a specified time frame. These standards are The Referral to Treatment (RTT) operational standards are that 90 per cent of admitted (requiring at least overnight stay) and 95 percent of non-admitted (outpatient/day case) patients should start consultant-led treatment within 18 weeks of referral. In order to sustain delivery of these standards, 92 per cent of patients who have not yet started treatment should have been waiting no more than 18 weeks.

**Secondary care:** More specialised care, usually after referral from GP (primary care). This can be provided in a hospital or in the community.

SEL: south east London

**SELDOC** – **S**outh East London **Doc**tors – a co-operative organisation of member practices which provides Out of Hours Services across NHS Lambeth, Southwark and Lewisham CCGs, including telephone advice, GP consultations and home visits

**SLaM:** South London and Maudsley NHS Foundation Trust, providing a range of hospital and community mental health services.

SLIC (South London Integrated Care): a programme across Lambeth and Southwark looking at how to co-ordinate care for older people and people with long term conditions, so that people have a better experience of care and are supported to keep healthy and maintain independence. This involves a range of organisations working together including Lambeth and Southwark CCGs, GPs, Guy's and St Thomas' NHS Foundation Trust, King's College Hospital Foundation Trust, South London and Maudsley NHS Foundation Trust and Lambeth and Southwark Councils.

**Social Care:** a range of non-medical services arranged by local councils to help people in need of support due to illness, disability, old age or poverty. Social care services are available to everyone, regardless of background. However rules about eligibility apply.

**Specialist hospital:** a hospital which provides specialist care for complex conditions. There are none in south east London but patients might be referred to one – for instance, the Royal Marsden cancer hospital or Moorfields Eye Hospital.



**Supporting strategies:** Workstreams (programmes of work) that have been set up to support the overall aims of the strategy programme. They are: Information and IT; Communications and Engagement; Workforce; Commissioning models; and Estates.

**System-wide:** Across the whole of the health service or health and social care system, sometimes specifically in south east London

**Tertiary care:** very specialised care, usually provided in hospital, where a patient is referred by a secondary care provider. Tertiary care is supplied by Specialists to Specialists

**TSA (Trust Special Administrator):** Appointed by the Secretary of State in 2012 to make recommendations in relation to South London Healthcare NHS Trust, which was identified as not sustainable in its existing form.

**UCC (Urgent Care Centre):** a centre which provides care and treatment for minor illnesses and injuries that require urgent attention but that are not critical or life-threatening.

**Unplanned Care:** is care that is not planned or pre-booked with your GP or hospital.

**Voluntary and Community Sector / Organisations:** not-for-profit organisations set up to offer services to specific groups in society. These can be run and staffed by paid professionals as well as volunteers.

**Walk in Centre**: where unregistered patients may go if they need to see a GP or nurse without an appointment