



Standard Integrated Healthcare Area Design

Approved by Health Regions Governance Group February 2025

Role Titles TBC

Networks of Care driving integration across patient & service-user pathways at all levels across the IHA and Region

Voluntary Hospital Board
(for illustration)

Managers / teams within Section 38s will report into the relevant organisation / board, with a working relationship to the IHA Manager

IHA Manager
(& Defined Lead role across Region)

**Health & Social Care Manager
Hospital Manager / CEO**
(& Defined Lead role across IHA)

**Health & Social Care Manager
General Manager**
CHN+ / CHA Services
(& Defined Lead role across IHA)

**Health & Social Care Manager
Head of Service**
Specialist Services
(& Defined Lead role across IHA)

Clinical representation on IHA Management Team (e.g. ECD, Clinical Directors, GP Lead, Nursing & HSCP Representation)

Dedicated IHA QPS Role
(Proposal – TBC)

Dedicated partnering and support from Corporate / Enabling services

Patient & Public Partnership

- Operational accountability for all services delivered within the Hospital
- Specific proposals will be progressed in Regions to drive integration between acute and community services

- Operational accountability for majority of Community Services in the CHN geography, including:
 - High-volume teams (CHN, CDNTs, Home Support, CAMHS, Adult MH)
 - Some residential, respite and day services (in line with appropriate GM span of control)

- Operational accountability for specialist / higher complexity services that serve a wider geography including Community Specialist Teams and some regulated services (e.g. Mental Health Inpatient)
- Regulatory oversight role as 'Registered Provider Representative / Proprietor' for designated services
- Portfolio responsibility for specific care group(s) and for driving Networks of Care
- Additional defined accountabilities as determined by REO

Core service configuration will be applied consistently across Regions, some variation will be required between IHAs / Regions based on local context / current service delivery models, e.g. Social Inclusion, Specialist Palliative Care

