

BACKGROUND

The Integrated Care System (ICS NI) is intended to be a single, joined-up system, based on bringing different parts of the health and social care system together with others who have a role in the wellbeing of the Northern Ireland population. The overall aim of bringing everyone together is to understand what is needed to improve the health and wellbeing of the population, and how we can best deliver that with the resources we have.

One of the ways of achieving this is by putting in place ways of working both locally and regionally which focus on how we can keep people well in the first instance (prevention), what we can do to provide early support to stop things getting worse (early intervention) and how we can best do that within specific communities.

This means we need to think about what else may affect our health and wellbeing such as, where we live, employment levels and educational attainment and work closely with others who also look at these aspects of our lives.

To support this at a local level, the Department of Health has created five area partnerships that bring a range of sectors together so that we can work better across those sectors.

In addition to the four VCSE members, each area partnership (Area Integrated Partnership Board) consists of the following membership:

- General Practitioners
- Trust Directors and Chief Executive
- Community Pharmacist
- Service User
- Carer
- Local Government

At a regional level, support and guidance is provided by a Regional ICS Partnership Forum. The forum mirrors the AIPB membership and each AIPB is represented.

ROLE OF THE VCSE MEMBERS

Each member of the AIPB has a specific document that sets out the roles and responsibilities for their membership. It provides background information to the member on ICS NI, the role of the AIPB and sets out each member's specific role and responsibilities as well as information about business conduct.



The role and responsibility document for VCSE members is enclosed. In summary, each VCSE member is there to act on behalf of the entire voluntary and community sector which has an interest in health and social care issues. This goes beyond the individual's own specific area of expertise.

This ask alone is a major one and is subject to ongoing development. Currently to help members with this role two strands of support have been implemented. Firstly, members have been enrolled as members of the CO3 Health Special Interest Group. This is a vital link to the network of third sector leaders with valuable peer connections, skills development and advocacy responsibilities. The Department of Health looks to the SIG as an essential forum that will support AIPB members with access to expertise, communications, and engagement opportunities across the sector.

The second strand of support is the establishment of a VCSE AIPB member Peer Support Group. The group will ensure that members representing the VCSE on AIPBs can openly discuss their role, any challenges they encounter, and help support each other to champion the voice of their communities, thereby enhancing the cohesion and effectiveness of the VCSE Reps on AIPBs.

The CO3 Health SIG on 23 September 2025 is to consider not just how to make the above work well, but to consider what else is needed to support the VCSE members fulfil their role and have reach and engagement with the sector as a whole.

WHO ARE THE VCSE MEMBERS?

Western AIPB	South-Eastern AIPB	Southern AIPB	Belfast AIPB	Northern AIPB
Jenny Irvine (Co-Chair) ARC Healthy Living Centre	Grainne Close Mencap	Geraldine Lawless TADA Rural Support Network	Stevie Corr Falls Community Council	Conor Corr Cookstown and Western Shores Area Network
Edel O'Doherty Developing Healthy Communities NI	Gillian Lewis (Co-Chair) NI Health Collective	Jacinta Linden Bolster Community	Julie Jamieson Reach Out Community Health & Wellbeing	Ann McNickle Causeway Rural & Urban Network



George McGowan The Old Library Trust HLC	Nicholas McCrickard County Down Rural Community Network	Colin Loughran Action Mental Health	Irene Sherry Ashton Community Trust	Johny Turnbull The Cedar Foundation
Rosie McNaughton The Cedar Foundation	Suzie Hull Diabetes UK	Anne Woods The Cedar Foundation		Mandy Wilson Age NI

PRIORITIES UNDER CONSIDERATION

Not all AIPBs commenced at the same time. Several convened during the Autumn of 2024, whilst Belfast and Northern AIPBs convened for the first time in March 2025.

For 2025/26 each AIPB has been tasked with creating a plan aimed at improving the health and wellbeing outcomes across several topics of their choice.

The Regional ICS Partnership Forum offered some suggestions for consideration such as cardio-vascular, respiratory conditions, and cancer. But it was up to each AIPB to choose based on what the information was telling them about their localities. The basic steps for this year are:

- Chose several priority topics based on population health and wellbeing information.
 Set out clearly the actions and activities intended to make a difference for the
- Set out clearly the actions and activities intended to make a difference for the population, and how they will be delivered.
- Specify the outcomes intended including interim indicators to support monitoring of progress.
- Explain how the plan will be resourced AIPBs do not have a budget but are to agree how to re-engineer existing resources.



CURRENT POSITION

Topics being considered by each AIPB are as follows:

Northern	 Obesity prevention & intervention Smoking prevention & cessation Improving outcomes for children & young people 	
Southern	FrailtyHeart failureConsidering mental health	
South Eastern	 Cardiovascular specialty – specific localities and subspecialty still to be finalised. 	
Belfast	 The last AIPB to commence. Using a population planning approach a template has been devised to assist members identify issues of greatest need and wider health inequalities. Priority areas are to be selected during September. 	
Western	 Provisionally the AIPB is looking at two themes of 'frailty' and 'starting well'. An approach similar to Belfast is being used to help support decision-making. 	

As AIPBs are producing cross-sectoral plans, plans do not need to be submitted to the Department for approval. Instead, sectors are to work together and implement their plans.

2026/27 AND THE RESET PLAN

On 9 July 2025, Health Minister Mike Nesbitt, published a Health and Social Care NI Reset Plan. The plan commits to establishing a neighbourhood centred system of health and social care, bringing more services closer to communities.

In the plan, the AIPBs are highlighted as a key driver of reform, with a renewed focus on prevention, health literacy, and empowering people to managed their own health. This will involve working with a broad range of stakeholders and coherently with Local Government.



Page 11 of the plan also establishes that by March 2026, we will have re-designed and re-orientated the Area Integrated Partnership Boards to support local care planning.

The Department will be working with AIPBs to help shape what this looks like.

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