



Our version of NHS Structure Organisation Chart

The National Health Service (NHS) is made up of a wide range of different organisations with different roles, responsibilities, and specialities. These organisations work together to provide a variety of services and support to patients, carers and the public. Fundings for these services come from the government.

[Here's more information on how the NHS works.](#)

Government

The **Department of Health and Social Care (DHSC)** leads, shapes and funds health and social care in England, making sure people have the support, care, and treatment they need, with the compassion, respect, and dignity they deserve. The majority of the department's budget is passed on to NHSEI to fund services that are planned at a national level.

National Level

NHS England and NHS Improvement is responsible for providing national direction on service improvement and transformation, governance and accountability, standards of best practice, and quality of data and information. NHS England and NHS Improvement came together in 2019 to act as a single organisation (maintaining separate boards). The aim of the merger is to work more effectively with commissioners and providers, making more efficient use of resources, and removing duplication.

The **Care Quality Commission's (CQC)** role is to register care providers and monitor, inspect and rate their services to protect users. CQC publishes independent views on major quality issues in health and social care.

Regional Level

Regional NHS England and NHS Improvement teams are responsible for the quality, financial and operational performance of all NHS organisations in their region. Increasingly, they are working with local systems (ICs/STPs) to oversee performance, support their development and make interventions when necessary.

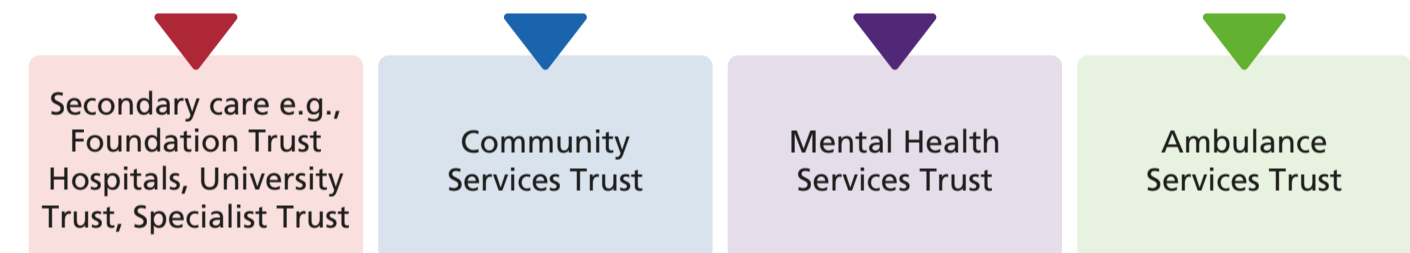
Local Level

Sustainability and transformation partnerships (STPs) bring together NHS providers and commissioners, local authorities, and other local partners to plan services around the long-term needs of local communities. In some areas, **integrated care systems (ICs)** have evolved from STPs. ICs are a closer collaboration in which organisations take on greater responsibility for managing local resources and improving health and care for their populations.

Integrated care partnerships (ICPs) are alliances of providers that work together to deliver care by agreeing to collaborate rather than compete. These providers include hospitals, community services, mental health services and GPs. Social care, independent and third sector providers may also be involved. NHS England and NHS Improvement is developing an 'integrated care provider contract' as an option for formalising these partnerships.

Local Level

Providers of NHS funded care include Acute Trusts (Hospitals), Community, Mental Health and other providers like GPs, voluntary, social enterprises, and private organisations. Providers can receive funding from other sources including local authorities and people who pay for private healthcare.



Local Level

Primary care networks (PCNs) bring general practices together to work at scale with other local providers from community services, social care, and the voluntary sector. Together they provide primary care by using a wide range of professional skills and community services. Since 1 July 2019, all except a handful of GP practices in England have come together in around 1,300 geographical networks.

National Level

Training within NHS is supported by **Health Education England (HEE)**. They support 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. They work with partners to plan, recruit, educate and train the health workforce.