NHS Structure

The Secretary of State for Health
The Secretary of State for Health has ultimate responsibility for the provision of a comprehensive health service in England and ensuring the whole system works together to respond to the priorities of communities and meet the needs of patients.

The Department of Health
The Department of Health (DH) will be responsible for strategic leadership of both the health and social care systems, but will no longer be the headquarters of the NHS, nor will it directly manage any NHS organisations. For detailed information about the department’s new priorities and roles visit the DH website.

NHS England
Formerly established as the NHS Commissioning Board in October 2012, NHS England is an independent body, at arm’s length to the government. It's main role is to improve health outcomes for people in England. It will:

- provide national leadership for improving outcomes and driving up the quality of care
- oversee the operation of clinical commissioning groups
- allocate resources to clinical commissioning groups
- commission primary care and specialist services

For more information, visit NHS England.

Clinical Commissioning Groups (CCGs)
Primary care trusts (PCTs) used to commission most NHS services and controlled 80% of the NHS budget. On April 1 2013, PCTs were abolished and replaced with clinical commissioning groups (CCGs). CCGs have taken on many of the functions of PCTs and in addition some functions previously undertaken by the Department of Health. All GP practices belong now to a CCG and the groups also include other health professionals, such as nurses. CCGs commission most services, including:

- planned hospital care
- rehabilitative care
- urgent and emergency care (including out-of-hours)
- most community health services
- mental health and learning disability services

CCGs can commission any service provider that meets NHS standards and costs. These can be NHS hospitals, social enterprises, charities, or private sector providers. However, they must be assured of the quality of services they commission, taking into account both National Institute for Health and Care Excellence (NICE) guidelines and the Care Quality Commission's (CQC) data about service providers.

Both NHS England and CCGs have a duty to involve their patients, carers and the public in decisions about the services they commission.

Find your local CCG.
Health and Wellbeing Boards
Every 'upper tier' local authority is establishing a health and wellbeing board to act as a forum for local commissioners across the NHS, social care, public health and other services. The boards are intended to:

- increase democratic input into strategic decisions about health and wellbeing services
- strengthen working relationships between health and social care
- encourage integrated commissioning of health and social care services

Also read the DH’s guide on Health and wellbeing boards.

Public Health England
A new organisation is also being created; Public Health England (PHE) will provide national leadership and expert services to support public health and will also work with local government and the NHS to respond to emergencies. PHE will:

- co-ordinate a national public health service and deliver some elements of this
- build an evidence base to support local public health services
- support the public to make healthier choices
- provide leadership to the public health delivery system
- support the development of the public health workforce

NHS Authorities and Trusts
Under the old NHS system, there were a wide range of NHS health trusts managing NHS hospital care in England, including community care and mental health services. With the new system, established on April 1 2013, all NHS trusts are expected to become foundation trusts by 2014. The NHS Trust Development Authority will help health trusts with this transition.

The new commissioner NHS England took on full statutory responsibilities in April 2013. Prior to this, all NHS planning and delivery was done by the Department of Health, strategic health authorities and primary care trusts.

The section below will give you an overview of new and current health trusts.
Other Local and National organisations we might come across are:

**CCG**

[http://www.swindonccg.nhs.uk/what-we-do](http://www.swindonccg.nhs.uk/what-we-do)

Clinical Commissioning Groups are groups of General Practices that work together to plan and design local health services in England. They do this by 'commissioning' or buying health and care services including:

- Planned hospital care
- Urgent and emergency care
- Rehabilitation care
- Community health services
- Mental health and learning disability services

Clinical Commissioning Groups work with patients and health and social care partners (e.g. local hospitals, local authorities, local community groups etc) to ensure services meet local needs. CCG boards are made up of GPs from the local area and at least one registered nurse and one secondary care specialist doctor.

Clinical Commissioning Groups are responsible for arranging emergency and urgent care services within their boundaries, and for commissioning services for any unregistered patients who live in their area. All General Practices belong to a Clinical Commissioning Group.

**Who are Clinical Commissioning Groups accountable to?**

Clinical Commissioning Groups are overseen by [NHS England](http://www.nhs.uk) at a national level. NHS England is a new body that ensures that Clinical Commissioning groups have the capacity and capability to successfully commission services for their local population. NHS England will also ensure that the Clinical Commissioning Groups meet their financial responsibilities.

As well as overseeing Clinical Commissioning Groups, NHS England commissions some
services itself. These are:

General Practice
Pharmacy
Dentists
Specialist services (i.e. those required by a limited number of people)

In other words the CCG spend the money and says broadly who provides the Services, i.e. the appointments for the treatments that GP’s consume.

It is worth remembering that whilst the CCG Contracts with certain Providers for particular services, every patient has the right to choose where they will be treated and that can be any hospital in the Country.
Health Watch Swindon
http://www.healthwatchswindon.org.uk/content/about

Healthwatch gives people a powerful voice locally and nationally. At a local level, Healthwatch Swindon works to help local people get the best out of local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. Healthwatch Swindon is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future.

Swindon Health & Wellbeing Board Swindon Council
https://ww5.swindon.gov.uk/moderngov/mgCommitteeDetails.aspx?ID=933

The purpose of the board is to improve the health and wellbeing of people of all ages resident in the borough of Swindon and to reduce health inequalities in Swindon.

This group I believe replaced the old Health Scrutiny & Overview Committee of the Council it is Council run and it would at first sight appear to crossover with the Health Watch Group. It has representation on its committee from a broad spectrum.

Membership
The membership will consist of:
The Leader of the Council (Chair)
Chief Executive of Swindon Borough Council
Cabinet Member for Health and Social Care
Shadow Member for Health and Social Care
Director of Adult Social Care/ Children's Services
Director of Public Health
Healthwatch Swindon representative
Swindon Clinical Commissioning Group (CCG) Accountable Officer
NHS England representative
Third Sector representative
NHS Swindon Clinical Commissioning Group Clinical Chair
Police and Crime Commissioner (Wiltshire)

Great Western Hospital Foundation Trust
http://www.gwh.nhs.uk/

GWH is of course your nearest Medium Sized Acute Hospital, delivering a wide range of Services. It is a Foundation Trust and so has some level of Autonomy with regards to how it is run.

It has a Board of Directors which consists of Executive (working Directors) & Non Executive (part time Directors).

Both of the above are accountable to a Board of Governors who are both Elected and Appointed. They represent the key areas that the Hospital Services.
Who is involved?

They run Care Homes, Rape Support, Home Care, Learning Difficulty Support & more.

SEQOL are a private company (non-profit), who provide Swindon’s Social Care, which was outsourced to them by Swindon Council.

You really should take a look at their web site.

**NAPP (National Association for Patient Participation)**

http://www.napp.org.uk/

The National Association for Patient Participation promotes and supports patient participation in primary care. Groups are an effective way for patients and GP surgeries to work together to improve services and to promote health and improved quality of care. PPGs are making a real difference across the UK.