Who funds what

Where the money for a service comes from, who commissions it and how it is paid, in England and the devolved nations. Keep it next to a service proposal.

The main routes in England

NHS: Treasury → DHSC → NHS England → 36 ICBs → Trusts, GPs and other providers

Public health: DHSC → Councils (ring-fenced grant, £4.4bn) → NHS and other providers

Social care: MHCLG and council tax → Councils → Care providers

Capital: DHSC capital limit → System and national programmes → Trusts

Service by service

Service	Commissioned by	Funded from	How it is usually paid
Hospital care, planned (e.g. hip replacement)	ICB	NHS budget	NHS Payment Scheme: paid per case at national price
Hospital care, emergency	ICB	NHS budget	Fixed payment plus 20% adjustment above or below plan
Mental health and community services	ICB	NHS budget	Mostly the fixed part of the contract
Specialised services, screening, immunisation	NHS England (some delegated to ICBs)	NHS budget	National contracts and agreements
General practice	ICB	NHS budget	GP contract: mainly per registered patient
Pharmacy, dentistry, optometry	ICB	NHS budget, plus some patient charges	National contracts
NHS care in independent hospitals	ICB	NHS budget	Per case at national prices
Sexual health, drug and alcohol, health visiting	Council	Public health grant from DHSC	Council contracts, outside the NHS Payment Scheme
Adult social care	Council	Local government funding, council tax, personal contributions	Council contracts or direct payments
Health protection (outbreaks, labs, vaccine supply)	UKHSA	DHSC budget	National
New buildings and major equipment	Trust, within system and national limits	NHS capital (DHSC capital limit)	Capital allocations; running costs come from revenue

Scotland, Wales and Northern Ireland

Health is devolved. Each government gets a block grant (adjusted by the Barnett formula) and decides how much goes to health. No ICBs, foundation trusts or national payment scheme.

Nation	Who plans and provides	How bodies are funded
Scotland	14 territorial health boards plan and provide; integration authorities pool health and council budgets	NRAC formula; annual break-even
Wales	7 health boards plan and provide; 3 all-Wales trusts	Needs-based allocations; three-year plans; break even over three years
Northern Ireland	Department of Health (SPPG) plans; 5 HSC trusts and NIAS deliver integrated health and social care	Allocations; often one-year budgets

Income ≠ funding ≠ cost

Extra activity may not bring extra income, and income may not cover cost.

Capital buys it, revenue runs it

A capital grant does not pay for the staff to use what it buys.

Check who benefits

Savings may land in a different organisation's budget from the costs.