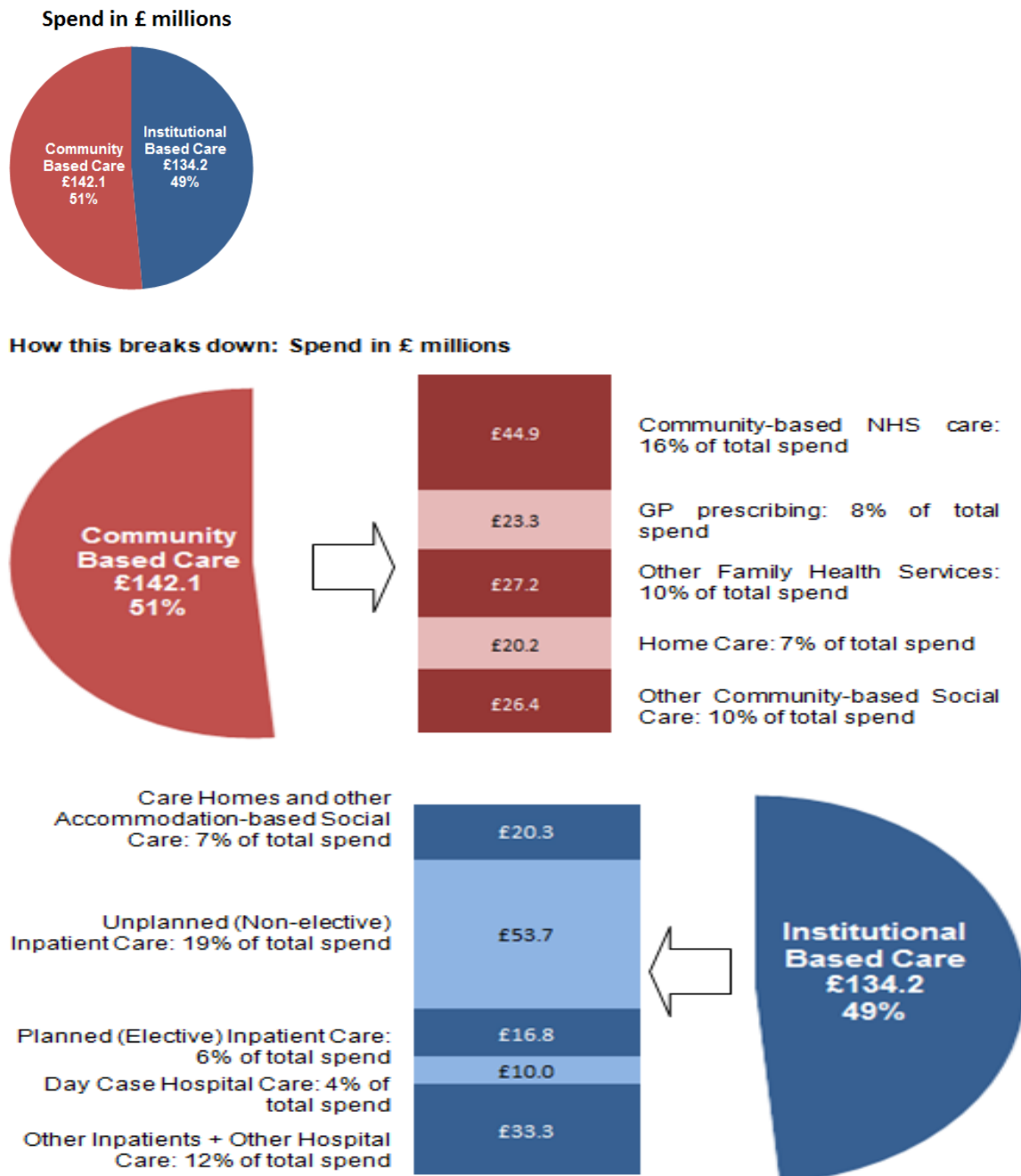


Health & Social Care Spending

The total NHS and social care spend in the Borders in 2015/16 was £276.3m. All NHS services are included in this total, including health services that are part of the Health and Social Care Partnership’s responsibilities (such as planned outpatient care, and some inpatient services) as detailed in Figure 1 below:

Figure 1: How this total spend breaks down



Note: totals do not match exactly, due to rounding.

Source: Integrated Resource Framework (IRF), ISD, NHS National Services Scotland.

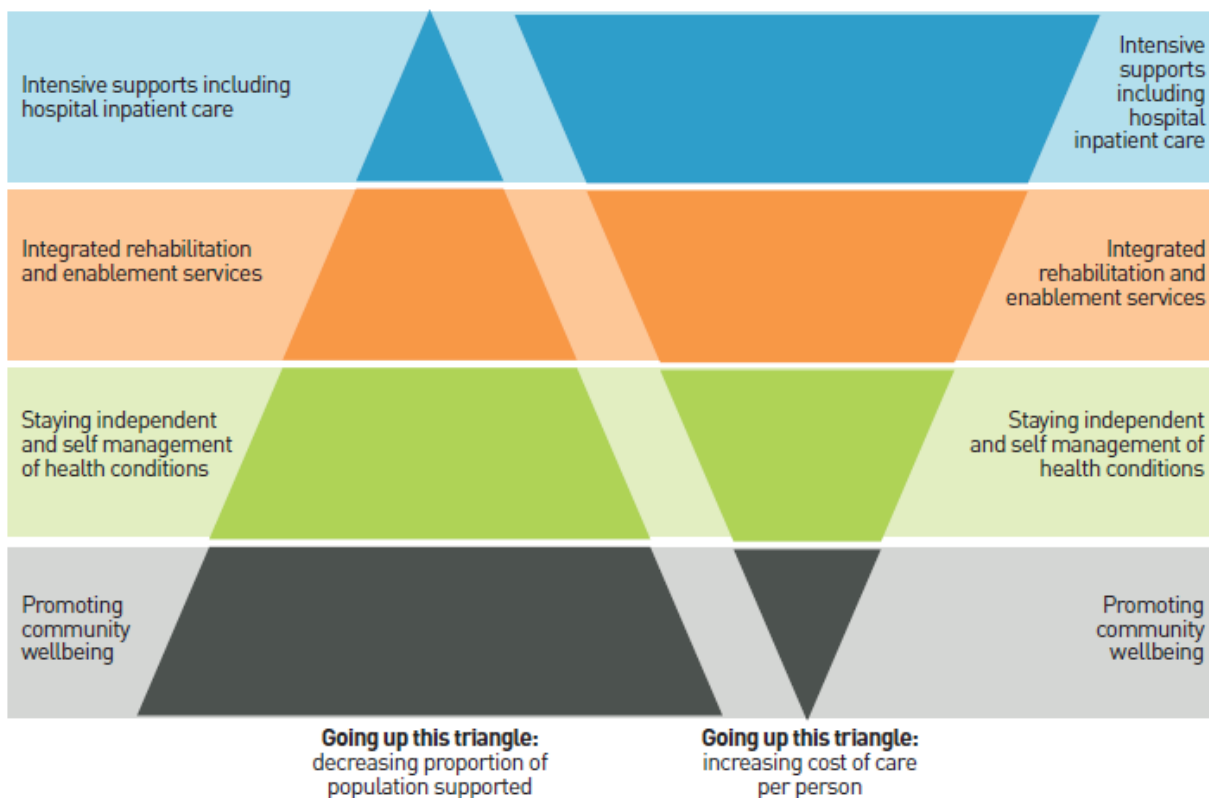
Shifting the Balance of Care Towards Prevention and Early Intervention

The aim of integrated health and social care services is to shift the balance of care towards prevention and early intervention (community-based services) to ensure that individuals have better health and well-being. Services need to be redesigned around the needs of the individual, to:

- Ensure that their journey through their care and treatment is as integrated and streamlined as possible;
- Enable them to remain independent for as long as possible; and
- Support them to recover after illness and at times of crisis.

In Figure 2 below, services that promote health and well-being are shown at the bottom of each triangle, whilst intensive support services (such as acute hospital inpatient care) are shown at the top. The triangle on the left shows that a small number of people need the intensive support and care provided within hospital. However the triangle on the right shows that this small group of people use a large amount of total resource available for health and social care.

Figure 2 CURRENT CARE MODEL



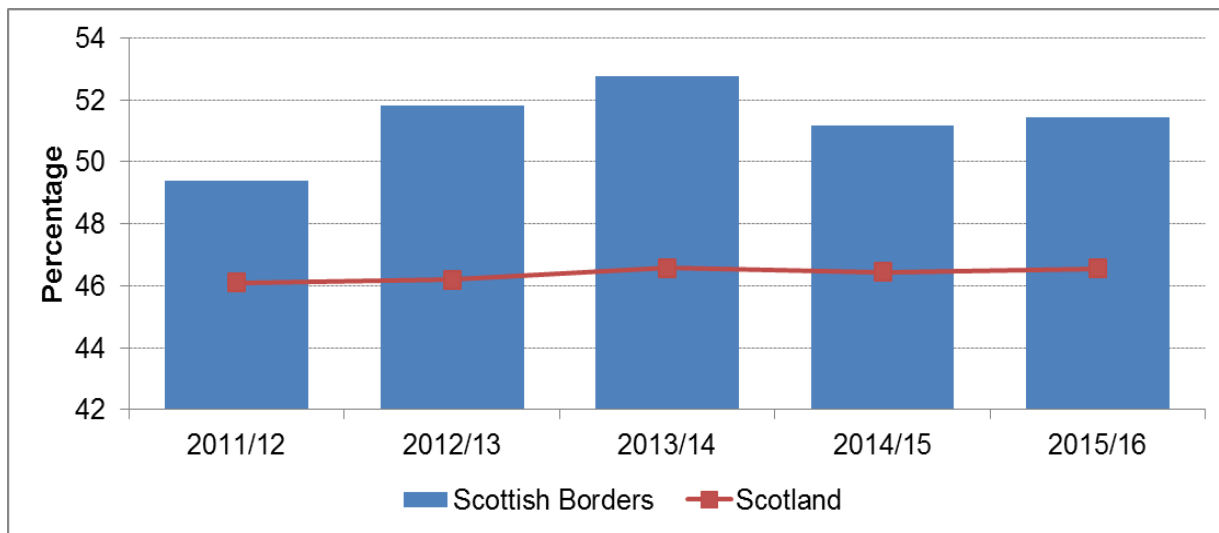
If we are able to improve health and wellbeing through preventive and supportive community-based care, resources can be moved and the balance of care shifted into the community as illustrated in Figure 3.

What shifts do we need to make?

By shifting resources FROM Unplanned Hospital Care and Institutional-Based Social Care TOWARDS Community-based NHS and Social Care and Planned Inpatient Care, resources are used more effectively and on prevention, rather than treatment. This will help us invest in new integrated ways of working, particularly in terms of early intervention, reducing avoidable hospital admissions, reducing health inequalities, supporting Carers and independent living.

The Scottish Borders has already made some progress towards the aim of providing more care in the community compared with Scotland as a whole. In 2015/16, 51% of total NHS and Social Care Spend in the Borders was on Community-based services, higher than the 47% for Scotland as a whole.

Figure 3 Percentage of total NHS and social care expenditure spent on community based care



Source: Integrated Resource Framework (IRF), ISD, NHS National Services Scotland.

Notes:

1. Community-Based Care comprises all NHS community services, family health services including GP prescribing, and all social care expenditure excluding accommodation-based social care services.
2. Institutional Care comprises all hospital-based care including outpatients, day case and day patients, plus accommodation-based social care services.