



Locality Profile Information – Argyll and Bute as a whole



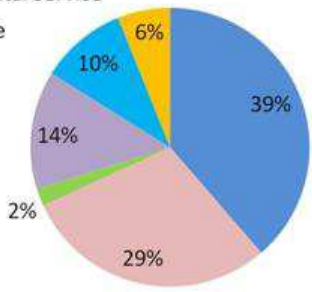
Health and Social Care Partnership expenditure



Expenditure – Argyll and Bute as a whole

NHS – Direct Health Services only
Total £175m

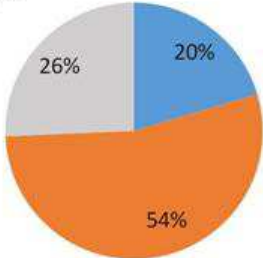
- Hospital & Community Care In Argyll and Bute
- Commissioned from Greater Glasgow & Clyde
- Salaried Dental Service
- Primary Care
- Prescribing
- Other



Source: NHS: Finance, Argyll and Bute. Data from 2014/15

Social Work – exc. ‘Management and Support’
Total £53m

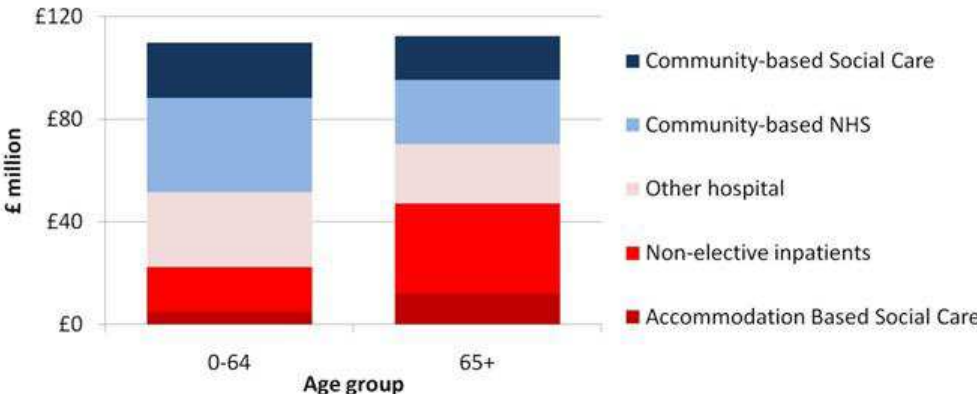
- Children and Families (including Criminal Justice)
- Adults - Older People
- Adults - Other



Source: Argyll and Bute Council Strategic Finance Financial year 2014/15 Note that ‘other’ adults services includes services to older people for reasons other than age and frailty e.g. learning disability.

Summary: Note the breadth of services included in the Health and Social Care Partnership.

Combined NHS, Children and families social work and adult social work



Source: NHS National Services Scotland, Integrated Resource Framework, 2013/14

Summary: People aged 65+ account for over half of the money spent and of that over half is spent on institutional care. Institutional care includes Nursing and Care homes and hospital care.

Be aware that: Social work data does not include Criminal Justice or Children's panel. Data limited by ability to assign services by age.

Argyll and Bute

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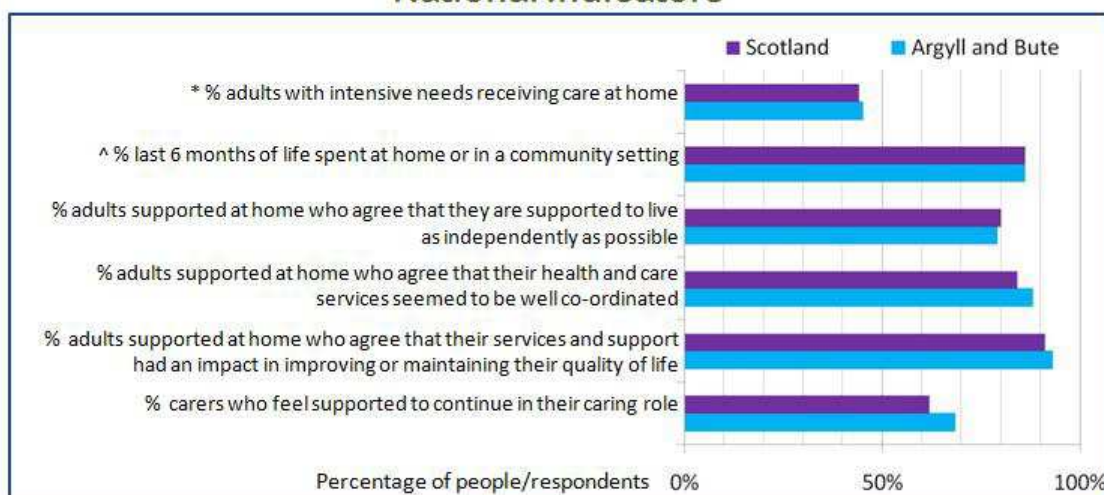
Performance and Outcomes



9 National Health and Wellbeing Outcomes:

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities, long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of service users.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and well-being.
7. People who use health and social care services are safe from harm.
8. People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do.
9. Resources are used effectively in the provision of health and social care services, without waste.

National Indicators



Summary: The performance of the new Health and Social Care Partnership will be measured by these and additional indicators.

Source: * SG - Health and Social care – Benchmarking Dashboard ^ NHS National Services Scotland, End of Life Care 2012/13. All others: Health and Care Experience Survey 2013/14

Further information

These posters were compiled by Argyll and Bute Public Health Information in September 2015 .

Any queries, comments or suggestions are welcome: High-UHB.ABPHI@nhs.net

Many people have contributed to those posters including from:

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 NHS Information Services, Argyll and Bute
 NHS Public Health Information

Argyll and Bute Council Commissioning Team
 NHS National Services Scotland Local Intelligence Support Team
 Argyll and Bute Council GIS Team

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