

THE BIG PICTURE

Into the labyrinth: UK health and social care funding

This month, *The BMJ* has been running a series focusing on the current pressures facing the NHS across the UK.

The series reflects on how the NHS's ability to fulfil its founding aims—to provide universal, equitable, comprehensive, high quality healthcare free at the point of use—is being tested more than at any other time since it was established almost 70 years ago.

As the graphic to the left shows, the now largely devolved UK health and care system has a labyrinthian flow of funding between government and the frontline that sometimes makes it difficult to establish who is responsible for which pot of money in the NHS.

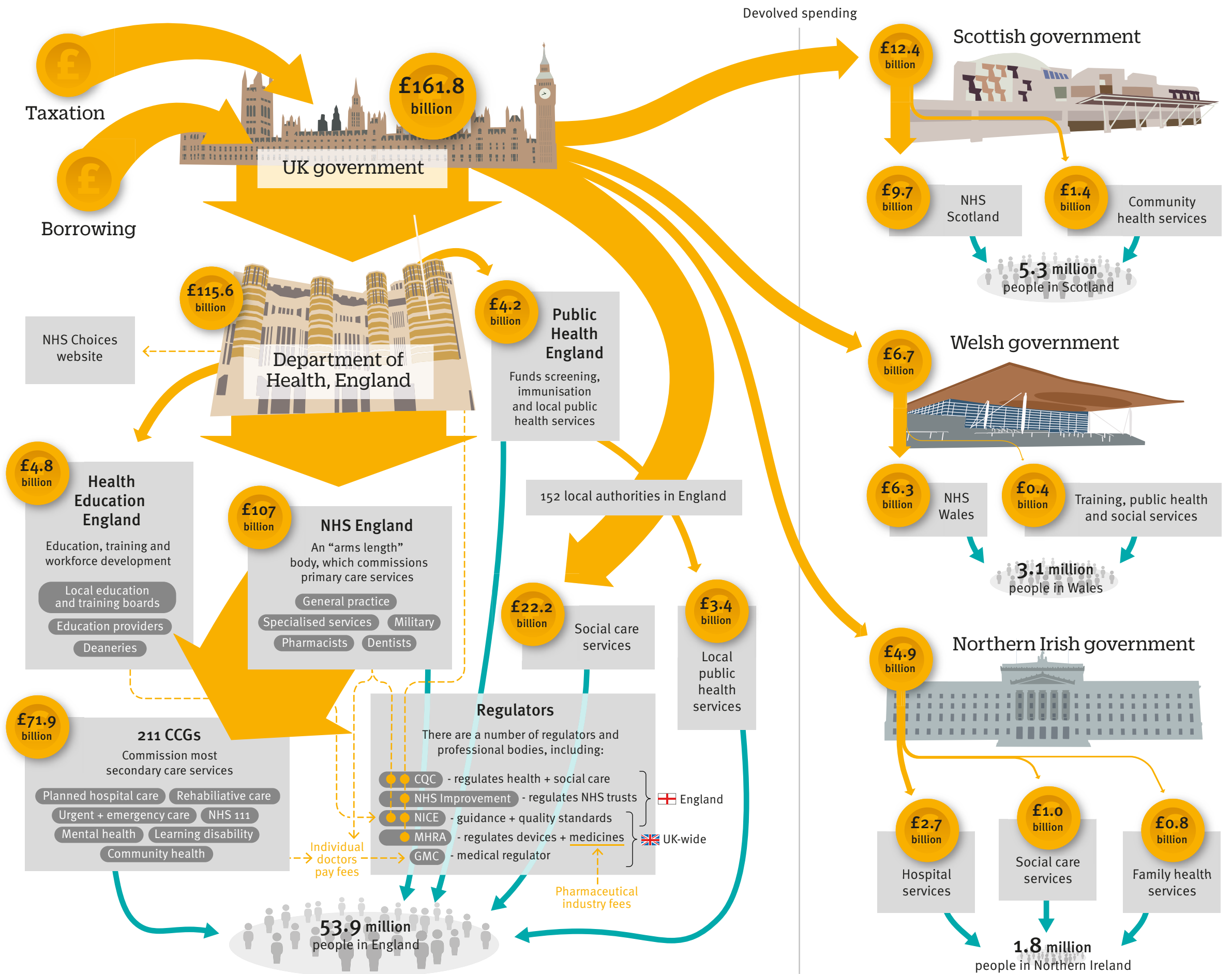
This is particularly the case in England, the largest and most complex health system in the UK which treats the bulk of the population and consumes the vast majority of funding.

It is something of an irony that the plethora of arm's length health bodies and regulators that now exist in England actually increased as a result of the Health and Social Care Act 2012, a piece of legislation that was designed to reduce bureaucracy in the NHS.

The confusion was writ large in the wake of the government's 2015 spending review after it emerged that ministers' pledge to protect "the NHS budget" in England only applied to funding for NHS England, and not the Department of Health's budget that funds areas such as medical education, training, and public health.

Current plans to devolve entire health and care budgets to local English regions—as has already begun in Manchester—are not represented on this graphic, but will add a further layer of complexity to an already complicated system as they develop.

Gareth Iacobucci, *The BMJ*



Key

- Financial flows
- Width of arrows is proportional to annual budgets
- Most recently available data used (commonly 2015-16 or 2016-17)
- Uncertain/unavailable financial flows
- Service provision