

## Aims, Priorities, Outcomes, Risks and Indicators

Strategic Aims	Prevention	Resilience	Enabling	Connections	Communities
<b>Priorities</b>	Promote Positive Mental Health and Wellbeing	Support and promote self-management and independent living for individuals	Reshape our Primary Care sector	Enable our citizens to have opportunities to maintain their wellbeing, and take a full and active role in their local community	Implement our three locality model
	Address the factors that cause inequality in outcomes	Value and Support Unpaid Carers	Shift the balance of care from the acute sector to community based services	Reduce the perception of loneliness and isolation experienced by individuals across age and client group	Develop a diverse and sustainable care provision
	Reduce alcohol and drug related harm		Develop our palliative and end of life care provision		
<b>Commitments</b>	We will produce a Mental Health Strategy and Action Plan	We will continue to invest in our promoting self amangement and building community capacity transformation programme	We will implement fully our Primary Care Improvement Plan	We will develop a co-ordinated engagement plan for all the partnership's activities and initiatives with our client and patient groups	We will implement a three locality model and, in doing so, align our activities more fully with those of the Community Planning locality model
	We will actively contribute to known health inequalities	We will support our unpaid carers to identify as carers, to manage their caring role, to be involved in the planning of services for both the cared for person and to have a life alongside caring if they so choose	We will support and implement as appropriate, the local Unscheduled Care Essentials Action Plan, developed with our partenr agencies	We will develop the social capital of our partnership across all sectors and services	We will refresh our Market Facilitation Statement and develop and Action Plan showing how we will support our local care provision
	We will support the Alcohol and Drug Partnership in delivering actions to reduce substance related harm		We will review our palliative and end of life care provision and develop an action plan to fulfill the strategic framework vision		
<b>Wellbeing Outcomes</b>	Health and Social Care services contribute to reducing health inequalities	People are able to live as far as is reasonably practicable independantly and at home or in a homely setting in their community	Resources are used effectively in the provision of health and social care services without wast.	People are able to look after and improve their own health and wellbeing and live in good health for longer	People who use health and social care services have positive experiences of those services and have their dignity respected
	People who use health and social care services are safe from harm	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing	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		Health and Social Care Services are centred on helping to maintain or improve the quality of life of service users
<b>LOIP</b>	Supported, Included	Resilient	Resilient, Supported	Resilient, Supported, Included	Resilient, Supported, Included
<b>Strategic Risk</b>			SR5. Performance standards not met		SR1. Insufficient capacity in the market
			SR6. Complexity of function		SR2. Risk of financial failure
			SR7. Failure to deliver sustainable system change		SR3. Risk of service failure
			SR9. Workforce Planning		SR4. Relationships with partner ofganisations
					SR8. Failure to maximise locality working
					SR10. Brexit
<b>Strategic Performance Indicator</b>	Number of A&E Attendances	Emergency Admission Rate (per 100,000 population)	% of population aged 75+ living in a community setting (including a Care Home)	% Uptake of Self Directed Support Options	Number of new referrals to initial investigation under Adult Support and Protection
	Warwick Edinurgh Mental Health Wellbeing Score	Readmission to hospital within 28 days (per 100,000 population)	Total number of Delayed Discharges	% of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	Total of home care hours delivered
	Number of alcohol related hospital admissions	Falls rate (per 100,000 population)	Proportion of last 6 months on life spent at home or in a community Setting	% of adults able to look after their health very well or quite well	Social Care Unmet Need
	Number of Alcohol Brief Interventions delivered	Premature mortality rate for people aged under 75 (per 100,000 population)	% of staff who say they would recommend their workplace	Life Expectancy	Residential Care Occupancy Rate
	% of clients receiving alcohol treatment within 3 weeks of referral	% adults supported at home who agree they felt safe	Total FTE posts vacant	Offender re-conviction rate	Proportion of Care Services graded "Good" (4) or better in Care Inspectorate inspection
	Number of alcohol related deaths	% of adults supported at home who agree that they are supported to live as independantly as possible	Total FTE Agency Staff employed	Number of deaths related to cancer	Propotion of Care Service contractually non-compliant
	Drug related hospital admissions	% of home care where two or more members of staff are required	Sickness Absence Rate	Number of deaths related to circulatory disease	% of people with positive experience of care provided by their GP practice
	% of clients receiving drug treatment within 3 weeks of referral	% of adults with intensive care needs receiving care at home	Staff Turnover Rate	Level of social isolation reported	% of adults supported at home who agreed that their health and social care services seemed to be well coordinated
	Number of drug related deaths	Number of people using a Community Alarm Service	Adverse Events	% of Community Lnks Workers in post	Total % of adults receiving any care or support who rated it as excellent or good
	Obesity levels	Number of people using Telecare		Number of clients supported by Community Links Workers	Number of complaints received and responded to within 20 working days
	Suicide rate	% of adults registered with a GP		Number of community groups convened and meeting regularly	
	Smoking cessation in 40% most deprived areas after 12 weeks	% of adults registered with a dentist		Number of community training sessions delivered	
	Number of people with a learning disability who are in Further Education	Number of unpaid carers supported			
	Number of people with a learning disability who are in Employment	% of carers who report they are supported to have a life alongside caring			
Number of people with a Learning Disability who attend a Day Centre or has alternative opportunities					
<b>Committee</b>	Clinical and Care Governance	Clinical and Care Governance	Audit and Performance Systems	Clinical and Care Governance	Audit and Performance Systems