This plan was developed in partnership between the Stoke-on-Trent Adults’ Strategic Partnership Board and the Stoke-on-Trent Health and Wellbeing Board with input from wider partners including private and voluntary providers and organisations.

We would like to thank all organisations and individuals who have helped to develop this plan and identify priority areas which we believe will improve the lives of adults living in Stoke-on-Trent, especially vulnerable adults, their families and carers.

Stoke-on-Trent Adults’ Strategic Partnership Board
- Healthwatch Stoke-on-Trent
- North Staffordshire Combined Healthcare NHS Trust
- North Staffordshire and Stoke-on-Trent Local Pharmaceutical Committee
- Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board
- Staffordshire and Stoke-on-Trent Partnership NHS Trust
- Staffordshire Fire and Rescue Service
- Staffordshire Police
- Stoke-on-Trent City Council
- Stoke-on-Trent Clinical Commissioning Group
- University Hospitals of North Midlands NHS Trust
- Representative from the Voluntary and Community Sector
Foreword from the Chair

The Adults’ Strategic Partnership Board is delighted to be presenting its first Adults’ Strategic Partnership Plan for the city, which sets out our priorities over the next four years, aimed at improving health and wellbeing in Stoke-on-Trent and explains how this will make a positive difference for local people.

We know that a wide range of factors impact upon an individual’s health and wellbeing, such as whether they have a regular income, are able to access social and leisure activities and feel a sense of belonging in their local neighbourhood. The broad scope of these factors highlights the importance of a partnership approach to achieving our vision. To that end, this plan has been developed, and will be delivered, by the Stoke-on-Trent Adults’ Strategic Partnership, which draws together representatives from statutory, community, voluntary and private sectors.

It is vital that we work across and beyond traditional service boundaries to address the full range of needs each of us will have throughout our lives. In delivering our priorities, we are committed to making local services flexible and responsive to individual needs, meeting people’s wishes for independence and greater control over their lives. We will build on what we have already achieved, focussing more on prevention and early intervention and ensuring that mainstream services cater for everyone within our community.

We recognise that, if we are to be successful in delivering our plan, we must effectively listen to, consult and involve service users, but for us to make the biggest difference we need everyone to get involved. That means us as neighbours, relatives, friends and community members all doing our bit to help and support each other.

We will work with communities and other providers to build trust and resilience and empower people, to come together to help one another in a collective attempt to make Stoke-on-Trent a much healthier place to live, learn and work.

We would like to say a big thank you to everyone who has contributed to the development of this important document. Let’s all work together to make this happen.

Val Lewis - Chair of the Stoke-on-Trent Adults’ Strategic Partnership Board
Introduction

The vision of the Stoke-on-Trent Adults’ Strategic Partnership is to support local adults to lead healthy and fulfilling lives and enjoy wellbeing and independence.

Since the launch of the city’s first Health and Wellbeing Strategy in 2013 much good progress has been made, with achievements including:

- Stoke-on-Trent has achieved Age Friendly City status and continues to be designated a World Health Organisation (WHO) European Healthy City.
- The pan Staffordshire Frail Elderly Strategy has been implemented for older people with long term conditions.
- We have developed and implemented the Stoke-on-Trent Joint Carers Strategy 2014-19.
- An integrated Carers Hub has been commissioned working in partnership with Staffordshire County Council and the six Staffordshire Clinical Commissioning Groups, which went live in October 2015.
- City Council in-house assessment care and reablement has been being realigned to localities to support local communities better through the Community Wellbeing Service.
- We have developed and implemented the Stoke-on-Trent Joint Dementia Strategy (Stoke-on-Trent City Council and Stoke-on Trent Clinical Commissioning Group). We have redesigned Dementia Services – new services are due to go live in early 2016.
- We are developing Dementia Friendly Communities and have a Dementia Ambassador for the City.
- Apprenticeships for young people aged 16-18 increased by 7.7% whilst nationally they went up by 4.6%.
- A ‘Chronic Worklessness’ debate was held and commitment to increasing levels of volunteering activity in the city agreed, alongside development of a city wide approach to social prescribing.
- Launch of the pan Staffordshire Joint Mental Health Strategy – Mental Health is Everybody’s Business. An implementation plan to drive forward the strategy is in development.
- The launch of the Stoke-on-Trent Dignity and Respect Charter that has been signed up to by all Health and Wellbeing Board member organisations and is now integrated into health and social care commissioning procurement processes.
- The roll out of Cooperative Working to promote early support and prevention.

Our priorities

Building on our recent achievements and drawing on strong evidence of need and demand; messages and feedback from people living and working in Stoke-on-Trent; alignment to local and national priorities and policy; and the extent to which they build on existing strengths across the partnership; we have chosen the following priorities to focus on for our Adults’ Strategic Plan:

- Keep older people safe and well
- Improve emotional wellbeing and mental health

We will work jointly with the Children and Young People’s Strategic Partnership to:

- Improve skills and employability
- Prepare young people for adulthood

These priorities are intended to complement and overlap with each other and also with the Stoke-on-Trent Joint Health and Wellbeing Strategy and Children, Young People and Families Plan. In delivering our plan we will ensure that we contribute towards improving the outcomes set out in the overarching Health and Wellbeing Strategy.
Cross cutting themes and principles

The principles of personalisation underpin all the priorities outlined in the Adults' Strategic Partnership Plan, and as such, the Adults’ Strategic Partnership is committed to promoting independence, choice and control for all the community enabling individuals to stay healthy and actively involved in community life.

All of our strategic partnership plans focus on six key cross-cutting themes that will be central to our work, we will:

- Proactively promote personal responsibility.
- Make sure that prevention, early intervention and promoting independence are at the core of what we do.
- Involve communities in shaping services to address needs and encourage community leadership.
- Make sure we explain things clearly.
- Work together so people can access our services easily.
- Ensure that we have a strong focus on efficiency and value for money.

We will also ensure that all of our partnership plans complement the work to safeguard children and vulnerable adults by working closely with the Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board and the Stoke-on-Trent Safeguarding Children Board.
About Stoke-on-Trent

Stoke-on-Trent is a city steeped in history and tradition, with a legacy of pottery, coal and steel industries. It is experiencing encouraging improvements in its economic and social environment, with the city’s economy growing and has seen unemployment fall by 31% during 2015.

The city has been confirmed as a new Enterprise Zone in the recent Government Spending Review, with the creation of ‘Ceramic Valley’ and has also been awarded the status of European City of Sport 2016 which will be a catalyst to increase participation in sport and to promote an active and healthy lifestyle that is accessible to everyone.

A multi-million pound programme of investment has been approved to bring about significant improvements to housing in the city; which includes an additional £55 million investment in our Housing Revenue Account (HRA) Council Stock and an initial £53.5 million to build new homes through a Council Development Company.

Approximately 250,000 people live in the city, over 61,000 of which are children aged 19 and under and almost 39,000 are adults aged 65 years and over. Almost 27,500 people in the city have identified themselves as being an informal carer and they report higher than average levels of satisfaction with their level of social contact.

Although the city is ranked as the 14th most deprived area in the country it is underpinned by a strong sense of community and a rich tapestry of volunteering and engagement with many local people volunteering for a wide range of organisations across the city.

There are still deep health inequalities in the city, for example lower than average life expectancy for both men and women, higher than average numbers of households experiencing fuel poverty and fewer social care users reporting acceptable levels of social contact compared to regional and national averages.

The effectiveness of reablement services for over 65s and dementia diagnosis rates are significantly higher than both regional and national averages. Permanent admissions to residential/nursing care are lower than both regional and national rates for people aged 18-64, but significantly higher for over 65s.

Being designated as a World Health Organisation (WHO) Healthy City has led to a range of local work including health literacy, enabling people to understand and improve their own and their family’s health and wellbeing. Our Age-Friendly programme, to tackle loneliness in the community and to give older people a voice in health and social care decision making has also been developed as part of this initiative.

Currently a lack of skills and qualifications prevent too many people in the city from securing more sustainable and better employment.

Policy

Recently there have been some significant policy and legislative changes introduced that are designed to provide a system that provides care for those who need it, and which enables people to retain their independence and dignity. Some of these changes include:

Introduction of the Care Act 2014, designed to put people in control of the support they receive, placing the wellbeing of the individual, and what is important to them, at the centre of any decisions. The Care Act will help to improve people’s independence and wellbeing. It makes clear that local authorities must provide or arrange services that help prevent people developing needs for care and support, or delay people deteriorating such that they would need ongoing care and support.

The Better Care Fund, implemented to improve outcomes for the public, provide better value for money, and provide more sustainable health and social care services. It is a programme that will pool some funds and integrate plans between the NHS and local authorities in every area throughout England. It is intended to reduce emergency admissions into hospital, in turn saving money for both the NHS and local authority services.
The **NHS Five Year Forward View** sets out a clear direction for the NHS – showing why change is needed and what it will look like. Some of what is needed can be brought about by the NHS itself, but other actions require new partnerships with local communities, local authorities and employers. Patients’ needs are changing, new treatment options are emerging, and the NHS face particular challenges in areas such as mental health, cancer and support for frail older patients, which means that service pressures are building. When people do need health services, patients will gain far greater control of their own care – including the option of shared budgets combining health and social care.

The revised **Mental Health Act Code of Practice** which aims to provide stronger protection for patients and clarify roles, rights and responsibilities. This includes:

- Involving the patient and, where appropriate, their families and carers in discussions about the patient’s care at every stage.
- Providing personalised care.
- Minimising the use of inappropriate blanket restrictions, restrictive interventions and the use of police cells as places of safety.

The **Transforming Care Programme** aims to improve services for people with learning disabilities and/or autism, who display behaviour that challenges, including those with a mental health condition. The programme will drive system-wide change and enable more people to live in the community, with the right support and close to home. It focuses on addressing long-standing issues to ensure sustainable change that will see:

- More choice for people and their families, and more say in their care.
- Providing more care in the community, with personalised support provided by multi-disciplinary health and care teams.
- More innovative services to give people a range of care options, with personal budgets, so that care meets individuals’ needs.
- Providing early more intensive support for those who need it, so that people can stay in the community, close to home.
- Ensuring that for those that do need in-patient care, it is only for as long as they need it.

The programme is led jointly by NHS England, the Association of Directors of Adult Social Services, Care Quality Commission, Local Government Association, Health Education England and the Department of Health, and focusses on the five key areas of empowering individuals; right care, right place; workforce; regulation; and data. 48 Transforming Care Partnerships have been established across England to re-shape local services, to meet individual’s needs, supported by a new Service Model for commissioners across health and care.

Employment has a significant impact on health and wellbeing. The Government has indicated a clear focus around increasing productivity across the economy. This includes a strong acknowledgement that tackling issues around the **skills agenda** is central to achieving this goal, with local areas being best placed to deliver a step change in the skills system.

The national skills context will focus on delivering a more flexible, higher quality, value for money skills system that is led by employers.

There is also a clear drive to create three million new apprenticeships by 2020.

The announcement of the Government’s Productivity Plan, “Fixing the Foundations: Creating a more prosperous nation”, has significant implications for skills.
Stoke-on-Trent Adults’ Strategic Partnership

To improve the health and wellbeing of the thousands of people who live and work in Stoke-on-Trent requires cooperation and commitment of many individuals and organisations. The city’s Health and Wellbeing Board is well established and provides leadership, direction and influence to encourage everyone who lives, works and provides services in the city to work together to improve health and wellbeing and so reduce the inequalities that exist.

Underpinning the Health and Wellbeing Board are three strategic partnership groups in the city, the Adults Strategic Partnership, the Children and Young People’s Strategic Partnership and the Responsible Authorities Group.

The Adults’ Strategic Partnership (the Partnership) is made up of a number of organisations within the city who have a strong commitment to work together to improve the lives of adults living in Stoke-on-Trent, especially vulnerable adults, their families and carers.

The purpose of the Partnership is to deliver measurable improvements on agreed outcomes for local adults and to help achieve the priorities of the Stoke-on-Trent Health and Wellbeing Board.

The Partnership is led by the Adults’ Strategic Partnership Board (the Board) and includes representation from social care, health, housing, Police, education, employment and skills, Fire and Rescue Service, the voluntary and community sector and Healthwatch.

The Board reports directly to the Health and Wellbeing Board and provides strategic leadership for the Partnership in terms of setting the strategic direction and shared priorities; making major joint commissioning decisions; resource allocation; and strategic coordination and performance management to the Partnership.
The Board will maintain working relationships with the other partnership groups that report to the Health and Wellbeing Board (namely the Children and Young People’s Strategic Partnership Board and Responsible Authorities Group) as well as other relevant partnership boards and will work closely with the Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board.

As part of the wider system, the Partnership will also ensure collaboration with the Stoke-on-Trent and Staffordshire Local Enterprise Partnership (SSLEP) to maximise the collective impact we can have on improving health and wellbeing of the local workforce and improving education, skills and employment outcomes for local people.

We will also share priorities and undertake work as partners of the pan Staffordshire Health and Care Transformation Board (led by NHS England) and these will form a key part of our approach to improving outcomes for older people in particular.

The plan will help to ensure that the resources and contributions of partners in improving outcomes for adults are deployed in a strategic way at a time of rising need and budget pressures.
Priority - Keep older people safe and well

Our aim is that older people’s health and wellbeing will be maintained or improved so they experience a quality of life acceptable to them and live independently for as long as possible.

Why is this important?

- The Care Act 2014 requires Local Authorities to collaborate, cooperate and integrate with other public authorities to take steps to prevent, reduce or delay the need for care and support for local people.
- The adult population of Stoke-on-Trent aged 65 and over is estimated to rise by 22% to 53,200 by 2030.
- Older people, because of their wealth of skills, knowledge and life experience have a vital role to play in contributing to and building upon already existing community capacity.
- Demand for primary, secondary and domiciliary services is continuing to grow and the number of people entering long term care is increasing also.
- Evidence confirms that people maintain a higher level of independency, and health and wellbeing outcomes are consistently better, when people remain in and receive treatment in their own homes.
- Enabling older people to remain independent in their own home for longer requires homes that are flexible enough to take account of changing needs as people age; more choice in relation to supported housing options; and improved housing information and advice services enabling older people to make an informed choice about their housing options.
- The majority of excess winter deaths occur among the elderly population.
- In the 2011 census, over 27,000 people in Stoke-on-Trent identified themselves as a carer. It is estimated that within the next 3-4 years the number of people requiring care will outstrip the number of people caring.
- As people live longer, and given the increase in the ageing population, the need for future planning and support for older carers of people with a learning disability will increase. This is also the case for individuals with a learning disability, and their need for support to enable them to become carers for ageing family members through a reversal of the caring roles.
Where are we now?

- Older people aged 65 and over are the majority of general hospital users in England.
- At any one time, patients aged 65 and over account for 70% of the bed days in Stoke-on-Trent’s acute hospital.
- The largest increase in population will be seen in the over 80 age group, whilst the number of people over 90 is expected to increase by almost 45%.
- Stoke-on-Trent has the 3rd lowest score for health related quality of life in the West Midlands for older people.
- Stoke-on-Trent has the 4th highest rate of hip fractures in the over 65s in the West Midlands and significantly higher than the national average.
- The rate of injuries due to falls is the highest in the West Midlands, with a sharp increase between 2011/12 and 2013/14.
- Vaccination coverage for flu and PPV (Pneumococcal Polysaccharide Vaccine) are both lower than the national average and PPV coverage has continued to drop year on year since 2010/11.
- There continues to be an undersupply of supported housing suitable for the needs of older people and it is expected that demand will be further exasperated as the number of older people is set to increase, particularly those in the over 79 age group; this includes those with a physical and/or mental frailty as well as other long term health conditions.
- Excess winter deaths have continued to increase over the last three calculating periods and are now higher than both regional and national rates.

What are we going to do?

- Map and analyse need, demand and support provision available so that we can improve coordination and address gaps.
- Work together to develop a local collaborative model that can be shaped in localities within the city, with health and social care teams working productively and patients/residents get quicker and more convenient treatment and support.
- Drive and deliver succession and workforce planning so that the skills and abilities needed to respond to the care needs of older people now and in the future are available, and that the workforce needs of health and social care providers can be met.
- Provide timely access to high quality support, advice and information for service users, their families and carers, communities and professionals.
- Ensure older people are listened to and are actively involved in decisions about their care and support.
- Help people to stay safe within their home, delaying or preventing hospital or social care interventions.
- Develop befriending networks in communities.
- Improve the health and wellbeing of older people through, for example, increased take up of flu and PPV vaccination rates for over 65s.
- Support people to maximise their income and independence.
- Implement the Older People’s Housing Strategy 2014–19 through delivery of the associated delivery plan.
- The delivery of Extra Care housing facilities currently through PFI (Private Finance Initiative) funding.

Other ways that partners can help make a difference

- The local authority Age Well Commissioning team will undertake a programme of work that will help people to live well with dementia and remodel the support given to carers.
- The Fire and Rescue service will educate communities and businesses to raise awareness about fire and road safety, the risks they face, reduce fires and mitigate the economic impact of fire.
- The local authority Housing team will continue an investment programme in relation to the council’s sheltered housing schemes and seek to improve service delivery in relation to aids and adaptations and Disabled Facilities Grants.
What difference will we make by 2020?

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure(s)</th>
<th>Where are we now?</th>
<th>Where do we want to be? (target by the end of the plan)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures around domiciliary care, extra care housing, residential care</td>
<td>Number of domiciliary care packages:</td>
<td>219</td>
<td>Contextual measure</td>
</tr>
<tr>
<td>and adaptations will be included in our performance management framework</td>
<td>• High volume - 15hrs and above</td>
<td>873</td>
<td></td>
</tr>
<tr>
<td>to provide context.</td>
<td>• Low volume - less than 15 hrs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of people over 65 still at home 91 days after reablement</td>
<td>% of people over 65 still at home 91 days after reablement</td>
<td>90.8</td>
<td>Increase</td>
</tr>
<tr>
<td>Total number of extra care apartments</td>
<td>Total number of extra care apartments</td>
<td>411</td>
<td>16/17 – 534</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>17/18 – 770</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>18/19 - 801</td>
</tr>
<tr>
<td>Number of residents in extra care housing in receipt of care and support</td>
<td>Number of residents in extra care housing in receipt of care and support</td>
<td>165</td>
<td>Contextual measure</td>
</tr>
<tr>
<td>from Social Care</td>
<td>from Social Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people over 65:</td>
<td>Number of people over 65:</td>
<td>1,135</td>
<td>Contextual measure</td>
</tr>
<tr>
<td>• In residential care</td>
<td>• In residential care</td>
<td>249</td>
<td></td>
</tr>
<tr>
<td>• Entering residential care</td>
<td>• Entering residential care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average length of stay for non-elective hospital admissions for people</td>
<td>Average length of stay for non-elective hospital admissions for people</td>
<td>7.48 days</td>
<td>Reduce</td>
</tr>
<tr>
<td>over 65 (Local Authority (LA) area)</td>
<td>over 65 (Local Authority (LA) area)</td>
<td>(2014/15)</td>
<td></td>
</tr>
<tr>
<td>Number people registered with assistive technology</td>
<td>Number people registered with assistive technology</td>
<td>3,050</td>
<td>Increase</td>
</tr>
<tr>
<td>Aids and adaptations:</td>
<td>Aids and adaptations:</td>
<td>155</td>
<td>Contextual measure</td>
</tr>
<tr>
<td>• Council adaptations referrals</td>
<td>• Council adaptations referrals</td>
<td>128</td>
<td></td>
</tr>
<tr>
<td>• Disabled Facilities Grant referrals</td>
<td>• Disabled Facilities Grant referrals</td>
<td>18 weeks</td>
<td></td>
</tr>
<tr>
<td>• End to end time (minor adaptations)</td>
<td>• End to end time (minor adaptations)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Outcome Measure(s) Where are we now? Where do we want to be? (target by the end of the plan)

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure(s)</th>
<th>Where are we now?</th>
<th>Where do we want to be?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older people have the opportunity to enjoy good health and wellbeing throughout their life, and can access support and information to help them manage care needs when they arise.</td>
<td>Number of A&amp;E attendances for people over 65 (LA area)</td>
<td>14,346 (2014/15)</td>
<td>Reduce</td>
</tr>
<tr>
<td></td>
<td>Number of non-elective hospital admissions for people over 65 (LA area)</td>
<td>11,820 (2014/15)</td>
<td>Reduce</td>
</tr>
<tr>
<td></td>
<td>Carer reported quality of life (score out of 12 points)</td>
<td>Stoke 8.4, England 7.9 (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>Self-reported resilience scores (local measure)</td>
<td>Data is being collated from 1st February 2016 to give a baseline figure</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>% of service users who find it easy to get information</td>
<td>Stoke 69.2%, England 74.5% (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>Carers who find it easy to get information</td>
<td>Stoke 70.6%, England 65.5% (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td>People will have a decent and safe home to live in which will be warm and suitable in a safe and pleasant environment</td>
<td>% of people who use services and feel safe</td>
<td>Stoke 59.3%, England 68.5% (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>% of people who feel very/fairly safe outside in their local area (daytime)</td>
<td>97% (Sept 2015)</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>% of people who feel very/fairly safe outside in their local area (after dark)</td>
<td>74% (Sept 2015)</td>
<td>Increase</td>
</tr>
<tr>
<td>Outcome</td>
<td>Measure(s)</td>
<td>Where are we now?</td>
<td>Where do we want to be?</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>People will feel valued and have a sense of belonging with positive</td>
<td>% of service users with as much social contact as they would like</td>
<td>Stoke 39.1% England 44.8% (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td>relationships and social networks which will allow them to enjoy</td>
<td>% of carers with as much social contact as they would like</td>
<td>Stoke 48.0% England 38.5% (2014/15)</td>
<td>Increase</td>
</tr>
<tr>
<td>hobbies, interests and employment</td>
<td>% of people who have given unpaid help to groups, clubs or organisations</td>
<td>11%</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>% of people who have given unpaid help to friends or neighbours</td>
<td>23%</td>
<td>Increase</td>
</tr>
</tbody>
</table>

**Underpinning plans and strategies**

- Stoke-on-Trent Joint Carers Strategy
- Stoke-on-Trent Joint Dementia Strategy
- Staffordshire Frail Elderly Strategy
- North Staffordshire and Stoke-on-Trent CCG Care Home Commissioning Strategy
- Stoke-on-Trent Better Care Fund Plan 2015/16 (2016/17 plan to follow)
- Staffordshire ‘Together We’re Better’ Transformation Programme
- Age Friendly Homes - Supporting Independence and Choice (Stoke-on-Trent Older People’s Housing Strategy 2015-2020)
- ‘Mental Health is Everybody’s Business’ (Staffordshire and Stoke-on-Trent Mental Health and Wellbeing Strategy)
Priority - Improve emotional wellbeing and mental health

Our aim is that people will be supported to be healthier and more independent, feel safe, happier and more supported in and by their community.

Why is this important?

- It is estimated that one in four of us will suffer from mental health problems in our lives.
- People with mental health issues are less likely to have a job, stable housing and their life expectancy is lower.
- For adults who have mental health needs and are parents, this can have an extra negative impact on their children and partners (links to Toxic Trio) and replicates strains and stresses on the family.
- Poor mental health can be both a cause and a consequence of family breakdown, debt and unemployment, homelessness and isolation.
- Poor mental health is consistently linked with lower levels of educational achievement, as well as poor physical health.
- It is no coincidence that the most deprived communities have the poorest health and wellbeing and the highest levels of mental illness.
- Only around 27% of working age adults in England with a mental illness are in employment.
- A focus on recovery will enable adults with mental health related issues and their families and friends and others to live and maintain their optimum social roles.
- There are clear connections between mental health disorders and substance abuse, and any number of combinations can develop, each with its own set of unique causes and symptoms.
- In England during 2013/14, admissions to hospital with a primary diagnosis of a drug related mental health and behavioural disorder increased by 8.5% from 2012/13.
- The pressures of caring can take a toll on carers’ physical and mental health, with over 90% of informal carers saying that caring has had a negative impact on their mental health, including stress and depression.
- When young people are no longer eligible for CAMHS (Child and Adolescent Mental Health Services) there is often a period of no support as they may not be eligible for or may have to wait to access Adult Mental Health Services and are put back on waiting lists.

Where are we now?

- Stoke-on-Trent has the 26th highest excess mortality rate in England and 2nd highest in the West Midlands for people 18-74 with serious mental illness.
- The rate of suicides in Stoke-on-Trent is the highest in the West Midlands and 5th highest in England. During 2011-2013 there was an increase in suicides in the city.
- Stoke-on-Trent employment rates (in relation to people in contact with secondary mental health services) are on par with regional and better than national rates. The percentage point gap is larger for males than females.
- Joint Staffordshire and Stoke-on-Trent Mental Health Crisis Care Concordat Action Plan in place.
What are we going to do?

- Create a wider common workforce training programme and ensure it is delivered and embedded across a wide range of services.
- By working in partnership, positively encourage wider workforce development across the Mental Health agenda to support independence and early intervention.
- Develop shared care services that will give parity of esteem for mental health.
- Staffordshire and Stoke-on-Trent Mental Health Strategy and Implementation Plan which focusses on:
  - Prevention
  - Stigma and Discrimination
  - Access to Mental Health services
  - Employment
  - Recovery
  - Early Intervention
  - Mental & Physical Health
  - Housing
- Use the Crisis Care Concordat (formal agreement) we have developed as a partnership to make sure we can provide the best response to people in mental health crisis, in relation to:
  - Access to support before crisis point.
  - Urgent and emerging access to crisis care.
  - Quality of treatment and care when in crisis.
  - Recovery and staying well.
- Continue to work with children and young people’s mental health commissioners to coordinate approaches to working with children and young people who need support into adulthood.
- Work with partners across Staffordshire to ensure good practice is shared and where improved service delivery can be gained.

Other ways that partners can help make a difference

- North Staffordshire Combined Healthcare Trust will implement Increasing Access to Psychological Therapies (IAPT) and implement mental health National Minimum Dataset.
- Stoke-on-Trent Clinical Commissioning Group will liaise and influence Specialist Commissioning Team at NHS England.
- Wider partners will be encouraged to familiarise themselves with the ‘Upside’ website and promote as a resource to the services and families that they work with.
What difference will we make by 2020?

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure(s)</th>
<th>Where are we now?</th>
<th>Where do we want to be?</th>
</tr>
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<tbody>
<tr>
<td>People will be healthier and more independent through engaging in meaningful activities supported by trained and competent front line staff.</td>
<td>Number of people engaged in meaningful activity</td>
<td>Measure to be developed</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>Number of partner agencies who participate in training programme</td>
<td>Training programme and measure to be developed</td>
<td>Increase</td>
</tr>
<tr>
<td></td>
<td>Number of frontline staff who have participated</td>
<td></td>
<td>Increase</td>
</tr>
<tr>
<td>People can access support when they need it</td>
<td>Suicide rates (per 100,000 population)</td>
<td>12.1</td>
<td>Slow down the year on year increase in the number of people who die from suicide and injury of undetermined intent.</td>
</tr>
<tr>
<td></td>
<td>Male suicide rates (targeted) (per 100,000 population)</td>
<td>19.6</td>
<td></td>
</tr>
<tr>
<td>People will feel safer, happier and more supported in and by their communities.</td>
<td>Number of people who have been detained in custody under section 136 of the Mental Health Act</td>
<td>168 (2012)</td>
<td>Reduce</td>
</tr>
<tr>
<td></td>
<td>Number of people who have been assessed by the Community Triage Team</td>
<td>869 (2014/15)</td>
<td>Increase</td>
</tr>
</tbody>
</table>

Underpinning plans and strategies

‘Mental Health is Everybody’s Business’ (Staffordshire and Stoke-on-Trent Mental Health and Wellbeing Strategy)
Suicide Prevention Action Plan 2015
Crisis Care Concordat Action Plan
Stoke-on-Trent Homelessness Strategy 2016-2020 (under development)
Priority - Improve skills and employability

Our aim is that everyone who can and wants to work has the right support, advice and guidance to do so and once in work people are able to progress their career, reskill, upskill and achieve a good quality of life.

This is a shared priority with the Children and Young People’s Strategic Partnership Board.

Why is this important?

• Getting people into sustainable, quality work is of critical importance for reducing health inequalities.
• Long-term unemployment is damaging to individuals and communities; it affects mental and physical health, and holds back economic growth.
• Out of work older people can find it more difficult to get a job and are more likely to remain unemployed for longer.
• For young people, securing that first foothold into a good career is a lot harder than it used to be as opportunities to combine work and study decline.
• Higher than average rates of people claiming out of work benefits increase the risk of negative impacts from the welfare reforms.
• Lack of skills and qualifications prevent local residents from securing more sustainable and better paid employment.
• Low skill levels dissuade potential inward investors from locating in the city because they believe they will not be able to recruit a suitably qualified workforce.
• Children in Care enter the care system already a long way behind their peers, and therefore too many leave education without the requisite qualifications.
• The number of care leavers who are not engaged in education, employment or training is too high.
• Vulnerable people without employment because of their overall vulnerability are particularly at risk of homelessness as well as poor physical and mental health and wellbeing.
• Adult education is essential to competitiveness and employability, social inclusion, active citizenship, and personal development, and provides an important first step back into second chance learning for many adults.
• Informal carers make up over 12% of the workforce in Stoke-on-Trent. Through a national survey, over a quarter of all carers’ reported that their ability to take up or stay in work has been affected by their caring responsibilities, with nearly 40% having to leave work completely and over a third having to reduce their hours.
Where are we now?

- The proportion of people in higher paid occupations is less than 75% of the national rate.
- Employment in routine (unskilled) occupations is approaching double that seen across England.
- Almost 15% of households in the city experience fuel poverty.
- The rates of people claiming out of work benefits remain 1½ times the national average.
- Despite continuing economic growth over the past six years, the Employment and Support Allowance (ESA) claimant count has remained broadly unchanged as a percentage of the city’s workforce while the proportion of Job Seekers Allowance (JSA) claimants and workless lone parents has reduced.
- Since 2011, Stoke-on-Trent has seen an 88% reduction in the proportion of school leavers ending up Not in Education, Employment or Training (NEET).
- There are high levels of NEETs within vulnerable groups.
- The city experiences high levels of part-time, low paid temporary jobs.
- Less than 50% of our school leavers have 5 GCSEs, A* to C, including English and Maths.
- Within the working population, the city has more than double the national average of people with no qualifications.
- Children in care and care leavers are given good support to access and maintain education, but only 10-15% gain the benchmark 5 GCSEs, A* to C, including English and Maths.
- Stoke-on-Trent offers a range of accredited adult learning provision, and a wide range of non-accredited adult learning opportunities, held across 130 venues throughout the city.
- A Workplace Health Charter has been developed and implemented.

What are we going to do?

- Develop Stoke-on-Trent City Council into an exemplar employer with the ability to influence.
- Engage businesses more effectively so that they clearly identify and articulate their skills needs, which will then be met by local providers through a responsive and flexible skill offer.
- Improve labour market information so that people understand what jobs are available and the skills they require to be able to secure sustainable, quality employment.
- Develop a cohesive employment strategy for the city which will articulate clear career pathways and implement Pathways to Employment for young people and adults across the city.
- Influence national policy and programmes, such as European Social Fund (ESF) and European Regional Development Fund (ERDF), to ensure that local needs are met.
- Support employers to develop flexible employment policies to support those with specific needs, for example, people with enduring mental health issues, physical/learning difficulties or those with caring/parental responsibilities.
- Continue to increase the number of 18-24 year olds who gain the skills necessary to secure a job of their choice.
- Increase the number of local people moving into work and securing good quality work.
- Embed the Raising Participation Age (RPA) model and the tracking of client participation.
- Provide support in obtaining ESF funding for 2016-2018 to fill the gap in provision and support for the Risk of NEET Indicator (RONI) and at risk young people groups.
- Ensure there is co-ordinated partnership delivery and improved employer engagement to deliver apprenticeships.
- Participate in the Post 16 area review.
- Develop meaningful activities (formal/informal volunteering, adult learning opportunities, work like activity, skills for employment, etc.) for those not in work, including those experiencing long term unemployment.
- Increase job readiness through Early Help and support for households.

Other ways that partners can help to make a difference

- The Library Service supports families, job-seekers, digital inclusion and helps to upskill the workforce by offering informal learning opportunities.
- Development of a Single Employability Hub through a Transformation Challenge Award.
- The city council and locally commissioned services offer opportunities that meet with the aims and objectives of the Employability & Education Opportunities for Care Leavers Policy.
- Provide good quality apprenticeship opportunities.
### What difference will we make by 2020?

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure(s)</th>
<th>Where are we now?</th>
<th>Where do we want to be? (target by the end of the plan)</th>
</tr>
</thead>
<tbody>
<tr>
<td>People are upskilled and ready for work.</td>
<td>Number of learners on adult skills programmes.</td>
<td>11,570 (2012/13)</td>
<td>15,000</td>
</tr>
<tr>
<td></td>
<td>Proportion of 16-17 year olds participating in education, employment or training</td>
<td>88.3% (June 2015)</td>
<td>Maintain a level that is at least 1% above the West Midlands average (currently 85.2%) and in line with national levels (currently 87.4%)</td>
</tr>
<tr>
<td>People secure employment that provides them with a good quality of life.</td>
<td>Level of JSA claimants (initial twelve month target)</td>
<td>1.8%</td>
<td>1.5%</td>
</tr>
<tr>
<td></td>
<td>Level of universal credit claimants (data not yet available) (Note: The above measures will change as people transfer from JSA to Universal Credit)</td>
<td>Baseline to be established</td>
<td>Target to be agreed once baseline has been established</td>
</tr>
<tr>
<td></td>
<td>Level of ESA claimants.</td>
<td>10.3%</td>
<td>8%</td>
</tr>
<tr>
<td></td>
<td>Number of apprenticeship starts.</td>
<td>3,230 (2014/15 academic year)</td>
<td>4,353 (2018/19 academic year)</td>
</tr>
<tr>
<td></td>
<td>Average gross weekly full time wage levels (resident population)</td>
<td>£433.10</td>
<td>Regional average (currently £492.50)</td>
</tr>
<tr>
<td>Post 16 learning provision meets the needs of learners, businesses and the economy.</td>
<td>Proportion of employers in Stoke-on-Trent with skills shortage vacancies</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td></td>
<td>Proportion of employers in Stoke-on-Trent with skills gaps</td>
<td>15%</td>
<td>12%</td>
</tr>
<tr>
<td></td>
<td>% of vacancies due to skills shortages</td>
<td>29%</td>
<td>20%</td>
</tr>
</tbody>
</table>

### Underpinning plans and strategies

- Stoke-on-Trent and Staffordshire Local Enterprise Partnership (SSLEP) Skills Strategy (under development)
- SSLEP European Structural Investment Fund (ESIF) Strategy
- SSLEP ESIF Commissioning Plan and Prospectus 2014-2020
- SSLEP Apprenticeship Strategy (under development)
- SSLEP Information, Advice and Guidance Framework (under development)
- Stoke-on-Trent and Staffordshire Post 16 area review
- Hardship Commission Stoke-on-Trent Initial Report 2015
- Stoke-on-Trent Employability Strategy (under development)
- SSLEP Strategic Economic Plan (March 2014)
- Employability & Education Opportunities for Care Leavers Policy
Priority – Prepare young people for adulthood

Our aim is for children and young adults to lead happy, healthy and fulfilled lives, with choice and control over their support and successful preparation for adulthood including independent living and employment. We want to make sure that in particular, children and young adults with special educational needs and/or disabilities, and those leaving care, receive the right support at the right time.

This is a shared priority with the Children and Young People’s Strategic Partnership Board.

Why is this important?

- The process of transition can be a vulnerable and stressful time for young people and their families. Often, they stop receiving services that they have had from a young age and move on to equivalent adult services (subject to criteria being met) which are often delivered and funded very differently.
- With the introduction of a new statutory framework, education, health and social care services will work together to provide support for children and young people up to the age of 25, who have a special educational need or disability (SEND). The Education, Health and Care Plan (EHC) brings education, health and social care needs into a single, legal document.
- The Children and Families Act (2014) and the Care Act (2014) are designed to work in partnership to enable us to prepare children and young people for adulthood from the earliest possible stage, including their transition to adult services. We have a responsibility to ensure that services cooperate, the right information and advice is available and that timely assessments can be carried out jointly. It is crucial that the young person, their parents/carers and professionals are supported to work together to ensure successful transition.
- Those leaving care often struggle to cope with the transition into adulthood. They may experience social exclusion, unemployment, health problems or end up in custody. Care leavers often have to start living independently much earlier than their peers.

Where are we now?

- Over 1,500 children and young people with Special Educational Needs (SEN) have an Education, Health and Care plan or formal Statement of SEN in the city.
- 7.57% of school pupils in the city have an identified learning disability (2,828 children and young people). This is a significant increase from 2014 (4.26% and 1,570 respectively).
- More than one in five children or young people have, or may have, a special educational need.
- Data records show that 5.3 adults (aged 18-65) per 1,000 in the city are known to the local authority with a client type ‘learning disability’.
- Outcomes for young people with SEN are worse than their peers in a number of areas, for example, there is an increased risk of exclusion and absence from school.
- Anecdotally parents and young adults tell us that transition is difficult.
- There is currently a much higher demand for the Aiming High programme than previously experienced.
- There are currently 260 care leavers in the city, of which 170 are aged 18 or over.
**What are we going to do?**

- Commissioners and providers will make ‘choice and control’ a reality by listening to, involving and learning from young people and their families to gain clear understanding of what they want/need from support services including transition pathways.  
- Follow the new legislative framework, and national guidance, so that young people are appropriately supported through their transition with all their education, health and social care needs.  
- Encourage services to improve co-ordination across education, health and social care and work closely with parents/carers so that individual needs of children and young people with a special educational need and/or disability are met and delivered in a way so that families and young people report that they have had a positive experience.  
- Offer high quality personalised provision which ensures good educational progress, health and care which allows timely preparation for independence into adulthood and employment.  
- The Local Offer will continue to be developed, delivered and promoted, ensuring that information, advice and guidance is clear, transparent and accessible.  
- Ensure that plans written for education, health and care needs are aspirational, with clearly defined outcomes and goals.  
- Ensure effective data sharing arrangements are in place to enable more collaborative planning.  
- Launch Hazel Trees as the new co-located hub and assessment centre, offering co-ordinated services for families of children with special educational needs and/or disabilities aged 0-25.  
- Ensure all services ‘Think 14-25’ and do not place artificial barriers on age.  
- Develop a multi-agency transition policy ensuring pathways are clear, transparent and accessible.  
- Utilise the skills and knowledge across the partnership to support care leavers transition into adulthood.  
- Continue to improve outcomes for all pupils - including closing the gap for vulnerable pupils, children and young people with a special educational need and/or disability in mainstream education, higher attaining pupils, free school meal/pupil premium pupils and care leavers.

**Other ways that partners can help to make a difference**

- Ensure all aspects of the SEND reforms are fully implemented.  
- GPs to be more involved at an earlier stage in planning for transition.  
- Services must be tailored to meet the needs of young people transferring from children’s health services and include extra training for health care staff in caring for young people.  
- Children and adult social care will continue to operate an enhanced transition model, so that young adults and their families are supported throughout the transition process, underpinned by a person centred planning and enablement approach.
### What difference will we make by 2020?

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure(s)</th>
<th>Where are we now?</th>
<th>Where do we want to be? (target by the end of the plan)</th>
</tr>
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<tbody>
<tr>
<td>Children and young adults lead happy, healthy and fulfilled lives with choice and control over their support.</td>
<td>Children, young adults and parent/carers report satisfaction levels</td>
<td>To be established - results to be reported</td>
<td>Improvement in reported satisfaction levels (target to be agreed following establishment of baseline data)</td>
</tr>
<tr>
<td>Children and young adults experience positive levels of independence/independent living, based on their individual requirements, with accommodation that is suitable, safe and meets their needs.</td>
<td>% of care leavers living in suitable accommodation</td>
<td>87.6% (148 young people)</td>
<td>95% of care leavers access suitable accommodation</td>
</tr>
<tr>
<td></td>
<td>% of care leavers who have accessed the training flat and move on to suitable accommodation</td>
<td>Baseline to be established</td>
<td>Target to be agreed once baseline has been established</td>
</tr>
<tr>
<td>Children and young adults have a positive experience of education and progress following school/college based on their individual needs and aspirations (Linked to Improve skills and employability priority)</td>
<td>% of care leavers in Education, Employment or Training (EET)</td>
<td>46% EET (December 2015) 61% EET (Nationally 2014-2015)</td>
<td>An overall increase in line with the National average</td>
</tr>
<tr>
<td></td>
<td>An increase in the participation of supported internships, employment opportunities and apprenticeships by young people with additional needs.</td>
<td>New measure - baseline to be established</td>
<td>Target to be agreed once baseline is established</td>
</tr>
</tbody>
</table>

### Underpinning plans and strategies

SEND Commissioning Strategy  
Transition Task and Finish Review – Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board  
Stoke-on-Trent Whole Life Disability approach, now known as Enhanced Transition
How we will deliver these outcomes

The Adults’ Strategic Partnership Plan underpins the Stoke-on-Trent Joint Health and Wellbeing Strategy and therefore sits alongside other underpinning plans such as the Children, Young People and Families Plan. In seeking to improve wellbeing and tackle the wider determinants of health, the Adults’ Strategic Partnership Plan is closely linked with several other strategic boards, including the ‘Together We’re Better’ Transformation Programme, Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board and the Stoke-on-Trent and Staffordshire Local Economic Partnership.

Wherever possible we will align existing strategies, plans and management groups to deliver the priorities in our plan and develop new ones to fill gaps.

Monitoring progress
Nominated strategic champions at senior management level will take responsibility for the high-level progress and performance of each priority and will report to the Adults’ Strategic Partnership Board on a regular basis. We will measure our success in meeting our objectives using a mixture of indicators and progress reports to the Board.

The performance management arrangements required to deliver the plan are contained within our Strategic Partnership Performance Management Framework. The framework is crucial to the delivery of the plan’s outcomes and is a way for each level of the partnership to hold to account the next level for the delivery of their tasks and targets.

We will produce an annual report showing how we have performed and identifying any areas that we need to review or where we need to take further action. The Health and Wellbeing Board will monitor our progress and take action to ensure that we stay on track.

Resources
The cost of achieving the vision and priorities contained within this plan will be met through existing transformational work programmes and within existing resources.

We recognise the strategy will be delivered during a period of continuing local and national austerity and declining budgets, that is why it is crucial that we work together to maximise the impact that our collective resources have on improving outcomes and reducing inequalities.
# Stoke-on-Trent Adults’ Strategic Partnership plan 2016-2020

The vision of the Stoke-on-Trent Adults’ Strategic Partnership is to support local adults to lead healthy and fulfilling lives and enjoy wellbeing and independence.

<table>
<thead>
<tr>
<th>Priorities</th>
<th>Measure/s</th>
<th>Outcome</th>
</tr>
</thead>
</table>
| Keep older people safe and well | Number of domiciliary care packages:  
• High volume -15hrs and above  
• Low volume - less than 15 hrs  
% of people over 65 still at home 91 days after reablement  
Total number of extra care apartments  
Number of residents in extra care housing in receipt of care and support from Social Care  
Number of people over 65:  
• In residential care  
• Entering residential care  
Average length of stay for non-elective hospital admissions for people over 65 (Local Authority (LA) area)  
Number people registered with assistive technology  
Aids and adaptations:  
• Council adaptations referrals  
• Disabled Facilities Grant referrals  
• End to end time (minor adaptations)  
Number of A&E attendances for people over 65 (LA area)  
Number of non-elective hospital admissions for people over 65 (LA area)  
Social care related quality of life (score out of 24 points)  
Carer reported quality of life (score out of 12 points)  
Self-reported resilience scores (local measure)  
% of service users who find it easy to get information  
Carers who find it easy to get information  
% of people who use services and feel safe  
% of people who feel very/fairly safe outside in their local area (during daytime)  
% of people who feel very/fairly safe outside in their local area (after dark)  
Service users with as much social contact as they would like  
Carers with as much social contact as they would like  
% of people who have given unpaid help to groups, clubs or organisations  
% of people who have given unpaid help to friends or neighbours | Older people will be supported to live independently for as long as possible  
Older people have the opportunity to enjoy good health and wellbeing throughout their life, and can access support and information to help them manage care needs when they arise.  
People will have a decent and safe home to live in which will be warm and suitable in a safe and pleasant environment  
People will feel valued and have a sense of belonging with positive relationships and social networks which will allow them to enjoy hobbies, interests and employment |
<table>
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<tbody>
<tr>
<td><strong>Improve emotional wellbeing and mental health</strong></td>
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<td><strong>Improve skills and employability</strong></td>
<td>Number of learners on adult skills programmes.</td>
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<td>Level of JSA claimants – initial twelve month target</td>
<td>Post 16 learning provision meets the needs of learners, businesses and the economy</td>
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<td>Level of universal credit claimants – (data not yet available)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level of ESA claimants</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of apprenticeship starts</td>
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<td></td>
<td>Average gross weekly full time wage levels (resident population)</td>
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<td>Proportion of employers in Stoke-on-Trent with skills shortage vacancies</td>
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<tr>
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<td>Proportion of employers in Stoke-on-Trent with skills gaps</td>
<td></td>
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<tr>
<td></td>
<td>% of vacancies due to skills shortages</td>
<td></td>
</tr>
<tr>
<td><strong>Prepare young people for adulthood</strong></td>
<td>Children and young adults and parent/carer report satisfaction levels</td>
<td>Children and young adults lead happy, healthy and fulfilled lives with choice and control over their support.</td>
</tr>
<tr>
<td></td>
<td>Children and young adults and parent/carer report high quality, personalised provision ensuring good health, care and educational progress</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of care leavers living in suitable accommodation</td>
<td>Children and young adults experience positive levels of independence / independent living, based on their individual requirements, with accommodation that is suitable, safe and meets their needs.</td>
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<td>% of care leavers who have accessed the training flat and move on to suitable accommodation</td>
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</tr>
<tr>
<td></td>
<td>% of care leavers in Education, Employment or Training (EET)</td>
<td>Children and young adults have a positive experience of education and progress following school / college based on their individual needs and aspirations (Linked to skills and employability)</td>
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<td>An increase in the participation of supported internships, employment opportunities and apprenticeships by young people with additional needs.</td>
<td></td>
</tr>
</tbody>
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Stoke-on-Trent Strategic Partnership Priorities 2016-2020

Stoke-on-Trent Health and Wellbeing Board
Vision: Stoke-on-Trent is a vibrant, healthy, caring city which supports its citizens to live more fulfilling, independent and healthy lives

What are we going to focus on?
• Increase breastfeeding
• Make healthy weight the norm
• Reduce under 18 conceptions
• Control tobacco and reduce smoking
• Reduce alcohol related health harms
• Improve emotional wellbeing and mental health
• Keep older people safe and well

We will work with our underpinning strategic partnership groups to improve these health outcomes and to tackle the additional priorities below that impact on health and wellbeing.

Children and Young People’s Strategic Partnership (CYPSP):
• Reduce the impact of child poverty
• Make a positive difference for children and young people through parenting
• Provide Early Help and support for children and families who need it most
• Improve emotional wellbeing and mental health
• Prepare young people for adulthood (joint with the ASP)
• Improve skills and employability (joint with the ASP)

Adults’ Strategic Partnership (ASP):
• Keep older people safe and well
• Improve emotional wellbeing and mental health
• Improve skills and employability (joint with the CYPSP)
• Prepare young people for adulthood (joint with the CYPSP)

Responsible Authorities Group (RAG):
• People and communities feel safer from the harm caused by violent crime
• Reduce the incidence of, and harm from, offending behaviour
• Reduce the incidence of harm from antisocial behaviour
• Reduce prevalence of, and harm from drug and alcohol misuse
• Empower communities and build community resilience

Cross cutting themes
• Proactively promote personal responsibility
• Make sure that prevention, early intervention and promoting independence are at the core of what we do
• Involve communities in shaping services to address needs and encourage community leadership
• Make sure we explain things clearly
• Work together so people can access our services easily
• Ensure that we have a strong focus on efficiency and value for money

Safeguarding
We will ensure that all of our partnership plans complement the work to safeguard children and vulnerable adults by working closely with the Stoke-on-Trent Safeguarding Children Board and the Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board.
For more information on the Adults Strategic Partnership see our webpages

stoke.gov.uk/adultsstrategicpartnership

Our Joint Strategic Needs Assessment can be accessed online at stoke.gov.uk/JSNA