Overview of Cheshire East Joint Strategic Needs Assessment 2013 PH Outcomes, NHS Outcomes, Adult Social Care, East and South CCG 2nd Worst in the country 2nd Best in the country Best quarter in the country Worst quarter in the country Outcomes Pupil absence Temporary housing Adults LD housing Youth justice Affected by Improving the wider determinants of Reoffending Homelessness NEET noise health Killed on roads Violent crime admissions Violent offences Adult MH housing Outdoor space Children in poverty Wellbeing LAC Cervical screening Low birth weight Low Health improvement Breast screening Adult smoking worth Breastfeeding initiation Recorded diabetes Overweight 4/5 Happiness Anxiety Drug treatment Fall injury over-65 Breastfeeding continuation Smoking at delivery Teenage conception Health Check take up Overweight 10/11 Diabetic eve screening % deaths due Flu iabs at Chlamvdia Board **Health protection** Late stage HIV MMR age 2 Flu iabs 65+ to air pollution risk plans Excess Potential YLL Preventable CVD death <75 Suicide Communicable Stroke /kidney health care males Preventable <75 deaths dis deaths serious MH Hip fractures CVD death disease in diabetics liver <75 <75 Life Exp <75 respiratory CVD death Potential YLL health deaths Cardiac rehab Stroke /kidney <75 cancer care females at 75 f deaths disease in diabetics deaths Healthcare public health and Preventable <75 Life Exp Infant mortality **HPV** preventing premature mortality Emergency liver Preventable sight cancer <75 deaths Neo deaths/ 30-day death respiratory at 75 m CVD death 12/13 (alcohol) admissions loss certifications still births from stroke deaths <75 <75 <75 respiratory <75 liver 30-day death Preventable sight Preventable liver <75 cancer Potential YLL health Preventable sight <75 cancer deaths deaths from stroke deaths sight loss AMD deaths loss glaucoma deaths care males loss diabetic Cardiac <75 liver Preventable resp Potential YLL health Potential YLL Potential YLL health rehab Emergency readmission <30 days Emergency liver (alcohol) admissions deaths <75 deaths Ambulator care females health care males care females Employment Employment Service user have МН LTĊ admission Ambulator Enhancing quality of life, for people Admission <19 Ambulatory admissions control over their daily asthma/diab/epilepsy with LTC also with care and support Social care LD live with family or LD in paid work admission quality life own home MH in paid Receive self -directed support Admission <19 MH living indep with or without Receive direct payments employment asthma/diab/epilepsy support Delaying and reducing the need for 65+ offered reablement Perm admission (18-64) 65+ still at home 91 to residential or NH Perm admin (65+) Delayed trans to care from hospital after discharge care and support days after discharge Delayed trans to care from to residential or NH attributable to Adult social care hosp Unnecessary Readmissions within admissions 30 days Admission children Helping people to recover from ill Admission children lower lower URTI health or injury URTI PROMS for elective PROMS for elective PROMS for elective PROMS for elective procedures (hernia) procedures (hips) procedures (hernia) procedures (hips) Admissions for acute Readmissions within 30 primary care Emergency PROMS for elective PROMS for elective admission children Admissions for acute procedures (knee) primary care procedures (knee) lower URTI Easy to find information Ensuring people have a positive experience of care and support Satisfaction with Patient experience Patient experience Patient experience of GP OOH care and support of community MH of GP OOH Treating and caring in a safe People who use environment and protecting from Admission of full term People say that services have made babies to neonatal care services feel safe them feel safe and secure avoidable harm (vulnerable)

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