

**Appendix B: Outcome Framework for the Mental Wellbeing in Bradford District and Craven: A Strategy 2016 – 2021**

<b>1. The people of Bradford district and Craven will be supported to recognise and value the importance of their mental wellbeing and take early action to maintain their mental health through improved prevention, awareness and understanding</b>
1.a Self-reported wellbeing
1.b Suicide rate **(NHSOF 1.5iii)
<b>2. Enjoy environments at work, home and in other settings which promote good mental health and improved wellbeing</b>
2.a Social isolation † (ASCOF 1.18)
2.a.i Percentage of adult social care users who have as much social contact as they would like
2.a.ii Percentage of adult carers who have as much social contact as they would like
2.b Employment
2.b.i Employment rates for district
2.b.ii Employment of people with long-term conditions (ASCOF)
2.b.iii Employment of people with mental illness (ASCOF 1F** & PHOF 1.8**)
<b>2.c Housing</b>
2.c.i Proportion of adults in contact with secondary mental health services living independently with or without support
2.c.ii Households in temporary accommodation (ASCOF 1.15ii)
2.c.iii Fuel poverty (ASCOF 1.17)
2.d Index of multiple deprivation: proportion of lower layer super output areas (LSOAs) in most deprived 10% nationally
<b>3. Experience seamless care and have their physical and mental health needs met through services that are integrated and easily accessible</b>
3.a People with long-term condition (LTC) feeling supported to manage their condition(s) (IAF) (CCGOF)
3.b Improving outcomes from planned treatments: Total health gain as assessed by patients for elective procedures (i Physical health-related procedures; ii Psychological therapies; iii Recovery in quality of life for patients with mental illness)
3.c Enhancing quality of life for people with mental illness: Health-related quality of life for people with mental illness (ASCOF 1A** & PHOF 1.6**)
3.di People with SMI receiving a full annual health check
3.dii Excess under 75 mortality rate in adults with serious mental illness (PHOF)
<b>4. Reach their maximum potential through services which are recovery focussed, high quality and personalised and which promote independence</b>
4.a Proportion of people who use services who have control over their daily lives (ASCOF)
4.b Improving Access to Psychological therapies (IAPT) - recovery rate
4.c People with first episode of psychosis starting treatment with a NICE-recommended package of care within 2 weeks of referral

4.d Percentage of CYP with a diagnosable mental health condition receive treatment from an NHS funded community mental health service
4.e Percentage of people with common mental health problems accessing psychological therapies
4.f Enhancing quality of life for carers: Health-related quality of life for carers (ASCOF 1D**)
4.g Proportion of community mental health service users feeling that overall they had a good experience (NHS Community Mental Health Survey)
<b>5. Expect support to be commissioned and delivered in a way that leads to increases in efficiency and enables transformation of care through reinvestment.</b>
5.a Spend and outcome tool (SPOT) ( <a href="http://www.yhpho.org.uk/default.aspx?RID=49488">www.yhpho.org.uk/default.aspx?RID=49488</a> )