Age UK Croydon Five Year Strategy





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Executive Summary



We deliver services, provide information and advice and influence our decision makers and, just like the ever-changing demographic that we serve, our plans for the future must adapt to the challenging environment in which we operate.

This plan comes at a crucial point in the development of the organisation. We have spent the past 23 years establishing high quality services and developing a strong reputation in the Borough for service delivery. It is now time to look ahead and this strategic plan sets out our direction for the next five years, taking us to 2023.

An organisation with a strong purpose is one which inspires higher levels of trust and confidence among its staff, partners and customers and is one which is more likely to grow sustainably. It is also more likely to be efficient, with strong accountability and a motivated team.

Therefore, this strategy focuses on clearly articulating our vision and mission - in a way which lays out a common purpose between staff, volunteers and partners and makes clear our ambition and dedication to the older people of Croydon. For us, this strategy is crucial for us to continue to keep our clients at the heart of what we do.

"We are Age UK Croydon and our vision is a Croydon where everyone can love later life. Our mission is to lead the way in empowering, enabling, supporting and connecting older people in the London Borough of Croydon to live well, healthily and independently."

In order to achieve our mission, we believe that we must develop and expand our services to better meet changing and increasing demands; and build a viable social business model for our trading activities to support the sustainable growth of our organisation. To do so, we will focus our service provision under our three main strategic priorities:

- Trading
- Development & Innovation
- Good Governance

We believe this strategy and its objectives set out the key elements to being a successful organisation.

Chile

Kate Pierpoint, **Chief Executive**

A Message from Our Chair



This is our roadmap for the next five years and the result of a tremendous joint effort. From the strategic direction set by the Trustees to the interpretation and translation of those goals into practical projects by the executive team, each aspect has been thought through, challenged and discussed, before being crafted into a coherent plan.

It is exciting to see our future laid out in this way for the first time. It gives a wider sense to our everyday decisions and provides clarity of purpose. It enables us to be greater than the sum of our parts. But most of all, it will help us direct more of our resources to where they are really needed - to our clients.

I am extremely proud to be able to work with such a committed and enthusiastic group of people and commend our Chief Executive, Kate Pierpoint, and her Senior Management Team on the way they have included all our clients, staff, volunteers and partners in giving meaning to our ideas.

"It is both a privilege and a pleasure to introduce Age UK Croydon's 2018 - 2023 strategy, which embodies the aspirations of the Board of Trustees, Senior Management and our entire team in our efforts to serve the older people of Croydon."

Our biggest strength is our people. We have an enthusiastic team of staff, volunteers and trustees who are dedicated to maintaining and improving the quality of life of older people.

As we confront the challenges of increasing demand and the undoubted difficulties faced by an ageing population, this strategy will keep us on point and accountable, so that we never forget our vision of a Croydon where everyone can love later life.

Deborah McCluskey, Chair

Introduction

Our previous strategic plan, our 2020 Vision, was developed in 2015 at a time when the organisation had been growing slowly and steadily after a period of significant shrinkage in 2008 and again in 2013.

The 2020 Vision's primary focus within this context was growth and diversification of revenue and strengthening our governance. Since 2015, Age UK Croydon's services have become well-established and we continued to develop a strong reputation for service delivery.

In 2016, this led to a major development in Age UK Croydon becoming the lead voluntary sector partner on the 'One Croydon Alliance'. The Alliance is a 10 year, pioneering programme to join up the health and social care system, to provide a more integrated, efficient, holistic and people-centred system.

Made up of seven partners, including Age UK Croydon, Croydon Health Services NHS Trust, NHS Croydon Clinical Commissioning Group, South London and Maudsley NHS Foundation Trust, Croydon Council, Croydon GP Collaborative, the Alliance is working to shift investment from urgent to preventative, community-based care. We believe this sector-wide commitment to change is a powerful platform for us to find innovative ways to deliver more services to a greater number of older people in Croydon; and that we have a role in supporting and collaborating with the wider voluntary sector to do the same.

In 2016, we also launched an exciting new service, which became the vanguard of the One Croydon Alliance strategy. The Personal Independence Coordinators programme provides personalised care support to individuals who are frail, vulnerable and in need of proactive health and wellbeing planning.

As a result, people will be empowered and enabled to stay active, healthy and independent for as long as possible. The new service proved so successful, it was expanded in 2017, which led to accelerated growth of the organisation.

"I was flat bound for four months then the PIC helped me, and I have gone on holiday, I cannot believe the change since they got involved"

- Personal Independence Coordinators (PIC) client



This service will be the main contributor to sustained rapid growth until 2019; where we anticipate reaching the 2020 Vision's objective to reach a turnover of $\pounds 2$ million.

Alongside these great achievements, our restricted income has doubled in three years, whilst our unrestricted income has contracted. This is a significant risk to sustainable growth. Unrestricted income is crucial for providing greater financial security in the event of a loss of restricted funding; but also for giving the organisation greater control over what services it wants to deliver, rather than relying on grant income.

In particular, unrestricted income from trading activities offers a more reliable source of income rather than depending on donations and legacies.

In view of these significant changes and new challenges, it is now time to look to the future and plan where we want to be in the next five years. This strategy focuses on how we can overcome these challenges, whilst building on the success and quality of our services.

£2.5m £357,315 £2m £354,620 £489,180 £1.5m £367,080 £373,489 Unrestricted £1m £234,181 Income £201.385 Restricted £500,000 Income

Age UK Croydon Annual Income

£0



2015

2016

2017

2018

2019

2013

2012

2014

Over the next five years, it is likely that opportunities to grow will continue, in order to meet the needs of an increasing older population in Croydon. It is therefore imperative that we control the areas of growth, to ensure:

- our unrestricted income keeps up with the pace of growth
- our services continue to develop, grow and innovate
- we are a well-governed organisation and our systems and infrastructure can support and facilitate growth

This plan sets out how we will achieve our vision and mission for the next five years, by focusing on these three key priorities. This is a five year strategy but we know that we need to be able to respond flexibly to the external environment and the needs of older people in Croydon.

Progress of the plan will be monitored by the Board with implementation overseen by the Chief Executive.

Our Vision

A Croydon where everyone can love life later



OUR VALUES

Strategic Objective 1: Trading

Ensuring our unrestricted income keeps up with the pace of growth

Guiding principle

Our Trading activities must grow significantly, whilst maximising the benefits to older people in Croydon and matching the quality of our other services Generating unrestricted revenue through trading activities will allow us to be the masters of our own destiny, giving us control over what services we fund.

This is important to us because it will mean less reliance on grant funding, which is often shortterm and can drive a focus on outputs (numbers) rather than outcomes (the change people experience which is important to them).

For organisations which rely on grant income, it can also mean that funders rather than serviceusers shape services and priorities. By building up reserves which are free for us to use, this is how we will keep our clients at the heart of our servicedelivery and what we plan to do in the future.

Our trading activities consist of our Help at Home service, the Brigstock Road Community Hub and Community Fundraising. We know that in Croydon there is a current lack of Befriending services and Dementia support services in particular.

We also know from experience that these services have significant benefits for older people in Croydon, especially in how they reduce isolation and loneliness and increase people's access to information and support.

Investing in opportunities

Building a loyal and diverse customer base

- We plan to address this gap in service delivery in the following ways:
- Using surpluses raised through the trading activities to fund Befriending and Dementia support services
 - By the end of year 1, we aim to raise £20,000
 - By the end of year 3, we aim to raise £45,000
 - By the end of year 5, we aim to raise £60,000
- Using our membership on the One Croydon Alliance to encourage our partners to fund these services more widely across the voluntary sector
- Using our funded projects to prove the value of the services, as a way to encourage further investment

We will use our reserves to fill gaps in service provision, including Befriending and Dementia support services.



Help at Home service

Over 20,000 people (40%) aged over 65 in Croydon are unable to manage at least one domestic task on their own.

Considering this alarming statistic, our approach to building a sustainable social business model will be to scale up the service across the Borough. We will keep the needs of our people at the heart of how we operate. **We want our Help at Home service to directly address this need and to support as many people in Croydon as possible.**

Our Help at Home service provides domestic tasks including cleaning, shopping, cooking and laundry. The service also provides nail care in hubs across the Borough. The Help at Home service is funded in the main by clients who pay directly for the service.

It also receives some Council funding for providing free domestic support for clients who need shortterm support in coming home from hospital. Whilst high levels of deprivation exist in the North of the Borough, our coverage is less prominent in the South of the Borough. We also know that there are a greater proportion of people over 65 in wards to the South, including Sanderstead, Coulsdon East and Selsdon and Ballards. We plan to make our service more available to these areas.

There are also growing opportunities to integrate our Help at Home service with other similar services in other Boroughs. Other Age UK brand partners, including Sutton, Merton, Lambeth and Lewisham & Southwark run successful services which we plan to work alongside and learn from.

The purpose of this will be to ensure that services across these Boroughs are as consistent as possible, reducing the risk of a postcode lottery. This will include the provision of more services, which might include escorting, respite, companionship and personal care.





Brigstock Road Community Hub

It is estimated that almost 40% of the population in Croydon aged over 65 lives alone.

Areas including Thornton Heath have the highest propensity of social exclusion for over 65s. In addition, Thornton Heath also suffers some of the highest levels of health inequalities in Croydon. Therefore, Brigstock Road Community Hub in Thornton Heath provides a valuable opportunity to directly tackle these issues.

Currently, Brigstock Road offers a suite of free or affordable community activities for older people, including balance and movement classes, dance classes, a choir, chair-based exercise and community events. OUR STRATEGIC OBJECTIVES - TRADING | 13

Brigstock Road also offers a regular health hub, a drop-in service providing individual and group support for healthy eating, weight management, BMI screening and blood pressure checks.

Our approach to building a sustainable business will be to increase the number and range of activities for local people. We want people of any age, ethnicity, gender or background to find something for them at the Hub.

Strategic Objective 2: Development & Innovation

Ensuring our services continue to develop, grow and innovate

Guiding principle

People must stay at the heart of how we develop our existing services, focusing on quality, becoming more accessible and adapting to changing needs

For 23 years, Age UK Croydon has developed high-quality and highly-respected services to address the ever changing needs of the community. Therefore, it is important to us to continue to learn, develop and innovate.

To do this, we have carried out an analysis of 15,000 of our clients over the past 5 years, a SWOT and a PEST analysis. We have also asked our staff, volunteers and clients what matters most to them. This has highlighted what Age UK Croydon does well and the strengths we can build upon. It has also shown us what improvements we need to make to our services, to better achieve our vision. The main recommendations from the research include:

We must represent better the demographics of the older population in Croydon

We know that we do not sufficiently engage people between the ages of 50 and 60; men; BAME groups; and those living in the South of the Borough. This is important because by serving a representative sample of the Croydon population, we are ensuring we are equally accessible to all. In addition, as an organisation which focuses on preventative services, we must explore ways to engage younger age groups.

Demographic characteristics also impact on people's vulnerability to health conditions, which is why we must also design more targeted services to address these issues. By increasing our coverage in the South, we will deliver services where they are most needed.

We must continue to focus on the prevention of social issues if we are to address the main issues older people face to their health & wellbeing

With almost half of our clients experiencing preventable health conditions related to mobility/balance, heart and mental health (and 10% diagnosed with Dementia/Alzheimer's), this provides a strong case for Age UK Croydon to continue to focus its efforts on preventative services, in order to address the issues most affecting our clients. These health conditions are strongly linked with four main social barriers: unhealthy lifestyles, isolation & loneliness, losing independence and limited access to services and information. By addressing these four issues, we will maximise the impact of our work.

We must develop a mixed approach to managing increases in demand & gaps in service

We must integrate our services better, use the power of partnerships and influence funders in order to explore ways to fill gaps in service provision.



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Strategic Objective 3: Good Governance

Ensuring our systems and infrastructure can support and lead growth

With the four outcomes at the heart at the heart of Age UK Croydon's future success, it is proposed that the staff structure mirror the strategy. This will keep the strategic objectives and main outcomes central to the organisation's development.

In doing so, we will distinguish services by their outcomes rather than by funding stream.

The main benefits of this structure include:

- Better integration of our services
- Increased efficiency through sharing of functions/services
- Managing demand for services more effectively
- More effective resourcing across
 the organisation

	Board of 1	
	Executiv	
GREATER INDEPENDENCE	GREATER CONTROL	
Personal Independence Coordinators, Home from Hospital & Help at Home	Information, Advice & Advocacy	
Personal support plans	Home visits	
Home visits	Complex support	
Complex support	Benefits support	
Care navigation	Energy advice	
Huddles	Care navigation	
Guided conversations	Drop-ins/appointments	
Home from Hospital	Outreach across the Borough	
Help at Home services	Helpline	
Nail care	Directory	

Guiding principle: Good governance is the key to sustained growth

Valuing Our People

- Through consultation with our staff, we will be working towards gaining the Investors in People Quality Mark by:
- Ensuring we listen to our staff
- Developing our staff through learning and training
- Rewarding and recognising staff for the work they do



Art exhibition

Our Research

Our clients are at the heart of our Strategy, which is why understanding our history, our Borough and our clients is vital to our future plans

Our History

We have developed services to reflect the ever changing needs of the community and to ensure the voice of all older people is heard.

In November 1995, a small steering group of volunteers from the Croydon community started working together to create an information and advice service for older people in Croydon. Named the Croydon Council on Ageing, the group focused on supporting those living in the densely populated North of the Borough.

Later renamed Age Concern Croydon, the service was expanded to include befriending, advocacy and minor home repairs. In 2009, we opened a dedicated information and advice office in central Croydon, and in 2010, we changed our name to Age UK Croydon.

At this time, we also became a member of the national Age UK network (the force combining Age Concern England and Help the Aged). The network works together at local, regional, national and international levels to create a world where everyone can love later life.

This valuable partnership allows us to draw from the strength and support of the national network, whilst operating independently and adapting to local need.





In 2011, we merged with the Thornton Heath Darby & Joan Club and as a result we were gifted a community building on Brigstock Road. In 2014, Age UK Croydon, Croydon Hearing, Croydon Vision and Disability Croydon were awarded a contract under the name of Advice Services Croydon, to provide information and advice and hearing support services to all adults with a care and support need in Croydon in line with the Care Act.

Partnership is an important part of our work. We are very pleased to work in partnership with many public, private and voluntary sector organisations and community organisations, specialising in a range of services across the health and social care sector.

Today, we run an extensive range of activities and services to promote the health, wellbeing and independence of older people in Croydon and support approximately 16,000 older people and their friends, relatives and/or carers every year.

Our People

We have a larger population of people over the age of 50 than any other London Borough, which is predicted to increase

Croydon is an outer London Borough bordering Surrey to the south and Lambeth, Lewisham and Southwark to the north. Croydon is London's southern-most borough and covers an area of 87 square kilometres. Croydon's population is projected to reach 404,000 in 2020 (Public Health England Health Profile 2017).

According to the Office for National Statistics 2017, Croydon has the one of the highest populations of older people over 50 in London, at 122,000 (32%). Nearly 13% (52,500) of the total population in Croydon are over the age of 65, which is projected to increase by 10% in the next five years (55,100).

Population is significantly denser in wards in the north of the borough, with a fifth of all Croydon residents living in just four northern wards (Croydon Observatory 2011).

Of a sample of 11,000 of our clients over the previous 5 years, over 75% (9,000) are aged between 60 and 90, with a significantly lower proportion of clients between the ages of 50 and 60 (8% -959). This is perhaps not surprising as clients do not currently tend to engage with us if they are living well. This does highlight an area for possible improvement, in being accessible to all older people over the age of 50, especially considering that clients would benefit from services which could help prevent future health conditions.

80-90yrs 28%	70-8 279	
60-70yrs 22%		50-60yrs 8%
90-100yrs 11%		Under 50 3%
		Over 100 1%

13% of Croydon's population is aged 65+

This is the 12th highest proportion in London. This equates to 49,900 people which is the 3rd highest number in London.



We have a larger proportion of women than men over 85 years

There are almost double the numbers of female residents over 85 years compared to male residents (Croydon Observatory 2011). Of a sample of 16,500 of our clients over the past 5 years, 64% (10,500) are female and 36% (6,000) are male. This highlights an area for possible improvement; to ensure our client demographic matches the Croydon population, as an indicator of accessibility and relevance of service.



We are a very ethnically diverse Borough

Currently, 50.7% of Croydon's population are Black, Asian and Minority Ethnic (BAME). By 2025, this is predicted to increase to 55.6%. Croydon's communities speak more than 100 different languages. Often, language barriers get in the way of residents accessing the most appropriate services at the right time. This can result in people not attending appointments or responding to letters, (Annual Public Health Report, 2017).

Of a sample of 16,500 of our clients over the past 5 years, 64% are white and 36% are non-white. Comparing this to the Croydon population where 50.7% of Croydon's population are Black, Asian and Minority Ethnic, this strongly suggests an area for improvement.

In order to be accessible to all older people, we must ensure our client demographic matches the Croydon population, as an indicator of equality and diversity.

White	Non - White
64%	36%

Older people in Croydon experience high levels of preventable health conditions

Of a sample of 5,000 of our clients over the previous 5 years, the most common health conditions recorded are related to mobility and balance, (24% - 980), mental health (21% - 850) and heart (20% - 800). Of the 850 mental health conditions recorded, 55% are cases of Dementia/ Alzheimer's and 27% are cases of depression. Of the 77 different health conditions we record, Dementia/Alzheimer's is the single most prevalent, affecting over 10% of our clients.

The three most common health conditions affecting our clients are all largely preventable. They also tend to be long-term, deteriorating and life-threatening and can lead to other health issues. They also tend to be caused or exacerbated by social factors. With almost half of our clients experiencing one or more of these conditions, this provides a strong case for Age UK Croydon to continue to focus its efforts on preventative services, in order to address the issues most affecting our clients.



Health conditions

Where our clients live

Our coverage and accessibility is stronger in the North and Central parts of the Borough. In the South, most wards have a low proportion of Age UK Croydon clients.

This is perhaps not surprising, considering where our offices are based in Thornton Heath and Central Croydon and that public transport tends to be better in these areas.







% of population who are 65+ 2016 Mid Year Estimates



We have a greater proportion of people over 65 years in the South of the Borough

Conversely, when we look at map 3, showing the proportion of the population who are over the age of 65, there is a distinct divide between the North and the South of the Borough.

Most areas in the South are home to over 25% of people over the age of 65, whilst most areas in the North are home to less than 11% of people over the age of 65. Wards with the greatest proportion of those over 65 include Sanderstead, Coulsdon East and Selsdon and Ballards (ONS 2011). In summary, there is a disconnect between where our current clients live and where the majority of the people we aim to serve live. Whilst income deprivation might suggest there is a greater need for our services in the North, there are also likely to be greater levels of isolation and loneliness in the South due to the relatively higher population of those aged over 65.

The four main outcomes we aim to achieve for our clients are very much affected by isolation, loneliness and health inequalities.

Therefore, we must explore ways to increase our accessibility to people in the South of the Borough, without losing our accessibility in the North and Central areas.

We have significant health inequalities in the Borough, with the North experiencing much higher levels of deprivation

Our strong coverage in the North is important considering map 2, which shows that income deprivation (which also indicates health deprivation) affecting older people is significantly higher in Central and North Croydon (clustered around our two main bases, demonstrating the value of their location to our work).

These areas with highest income deprivation are in the 5% most deprived in the country, whereas most of South Croydon is not in the 20% most deprived. In addition to differences in income deprivation, the Index for Multiple Deprivation score (Croydon Observatory, 2015), illustrates that there are also high levels of inequality between the North and the South of the Borough related to all types of deprivation.

We must also in the short-term find ways to become more accessible in the East of the Borough, as there is a cluster of high income deprivation, as well as a high proportion of people over the age of 65.

There are growing opportunities for us to become more accessible, by seeking out new locations to host our services, working more closely with GP surgeries and other voluntary sector groups/organisations across the Borough.

Isolation & Loneliness

What is isolation & loneliness?

Social isolation is often described as the objective state of a person with insufficient quality or quantity of social relationships. Loneliness is often described as the subjective state of person, as a result of social isolation.

How much of a problem is it?

In Croydon, there are an estimated 9,860 (19%) older people who are lonely and 5,423 (10%) older people who experience intense loneliness (Director of Public Health Report, 2016). It is estimated that almost 40% (18,057) of the population aged over 65 lives alone. The Thornton Health, West Thornton and Fairfield wards have the highest propensity for social exclusion for over 65s. Kenley, Purley and Sanderstead also show relatively high prevalence of social exclusion.

According to the Director of Public Health Report, 2016, the effect of loneliness and isolation on death is greater than the impact of wellknown risk factors such as obesity, and has a similar effect as cigarette smoking. Loneliness can also have serious consequences for the mental and physical health of people, linked to obesity, smoking, substance abuse, depression, Dementia/Alzheimer's and poor immunity. For our clients, isolation and loneliness can often lead to reduced confidence and are major contributors to increased risk of falls and malnutrition, (PICs service, 2017 data).

> **18,057** of people aged **65+ live alone** This is 37.6% of the 65+ population.

What are the causes?

For older people in Croydon, there are a number of risk factors increasing people's vulnerability to social isolation and loneliness. The Director of Public Health Report (2016) cites these as follows:

- Health and disability: Cognitive and sensory impairment, and physical impairment and disability are significant factors affecting isolation and loneliness, limiting a person's ability to access services and develop or maintain social relationships. Of our clients, 4% reported vision and hearing issues and 24% reported issues with balance and mobility.
- Mental health: This may include Dementia/ Alzheimer's, depression and anxiety. In Croydon, the number of people over 65 living with Dementia/Alzheimer's is approximately 3,290 (6% - this compared to 10% of our clients). For those living with Dementia/Alzheimer's, challenges include finding and accessing appropriate support, overcoming stigma and loss of confidence and independence through cognitive decline. These issues are strongly linked to an increased risk of loneliness and isolation.
- Life changes: This may include retirement, unemployment, becoming a carer and bereavement. Many older people are carers and they often have restricted access to social networks and services. In addition, they may be vulnerable to deteriorating health. In 2015, 1 in 2 carers reported not having as much social contact as they wanted, (Croydon Annual Public Health Report, 2015).
- **Personal factors:** sexuality, ethnicity and age are the main personal factors linked to increased vulnerability to isolation. In particular, ethnic minorities who experience language barriers and higher levels of poverty are more likely to become socially isolated.

Lack of independence

What does lack of independence mean?

What kind of loss of independence do older people experience? According to My Ageing Parent (2017), these can be:

- Mental and physical loss including forgetting appointments and day-to-day tasks, difficulty moving around or out of the house, sensory issues and less flexibility.
- **Social loss** including not being as able to be physically active or visit places and people.
- Emotional loss including significant life changes and the reactions people might feel in losing their independence like fear, anger, guilt and confusion.

How much of a problem is it?

Loss of independence results directly in people losing control over their health and wellbeing, which can lead to increasing external interventions like visits to the GP and hospital admissions. This is a drain on the health system and with most resources focused on urgent care, this will not necessarily lead to a person re-gaining their independence. Therefore, preventative and re-ablement services which offer tailored care plans are vital to addressing this issue.

Over 20,000 people (40%) aged over 65 in Croydon are unable to manage at least one domestic task on their own; whilst over 16,000 people (33%) aged over 65 are unable to manage at least one self-care activity. For this reason, there is overwhelming demand in Croydon for community-based, personal care services including nail care.

Lack of physical independence is also a cause and consequence of an older person's vulnerability to falls. Falls can lead to long-term disability and because broken bones do not always heal completely as you get older, a fall can mean you would no longer be able to live without support. 1 in 50 people over the age of 65 in Croydon are more likely to experience injury due to falls every year, (1,000 per year), (Public Health Report, 2015).



What are the causes?

- Mental and physical health: The physical and mental health risk factors increasing an older person's vulnerability to isolation and loneliness are also the main risk factors affecting an older person's independence. For this reason, lack of independence is also strongly linked to greater isolation and loneliness.
- **Hospital admissions:** For our clients, hospital admissions are particularly significant in limiting their independence when they return home.
- **Confidence:** Our Personal Independence Coordinators service recorded that over half of their clients with mobility issues in 2017 (200 people) said that confidence played a significant part in limiting their mobility.
- Lack of support networks: With 18,000 (38%) older people over 65 in Croydon living alone, this can exacerbate the impact of a loss in independence, where there is limited support for people in their homes. This can result in an increased need for external interventions. This illustrates the recognised need in the health and social sector to shift investment from urgent care to communitybased, preventative care.

33.3% of people aged 65+ are unable to manage at least one selfcare activity



Limited access to information and services

The health and social care system is continually changing, with funding often disparate and short-term. In addition, the health and social care systems in Croydon have not historically been joined up. This has contributed to a system which can be very difficult for people to navigate and access.

As a result, it can be a challenge for older people to know what is available, where to look and how to access the information and services they need. This is not a unique challenge to Croydon. This has meant that older people can often spend more time in hospital than necessary and the most accessible services tend to focus on reactive, urgent care, rather than preventative care or support.

There are also technological barriers to older people accessing information and services, as more information becomes available online. For those people without internet access, or the knowledge to access online resources, this can further isolate the very people the services are there to support.

21.6% people aged 65+ have a BMI of 30 or more

Unhealthy lifestyles

In Croydon, 2 in 3 adults are overweight or obese. This is costing the Croydon economy an estimated £190 million per year, of which £2.5 million is spent on associated social care. Thornton Heath has some of the highest levels of obesity, (Public health Report, 2015).

This issue is important as it increases the risk of strokes, type 2 diabetes, heart and liver disease, falls, cancer and depression and anxiety for older adults. From a sample of 5,000 of our clients, 20% suffer from heart conditions, many of which are directly related or caused by physical inactivity and unhealthy eating.

Summary

The three most common health conditions affecting our clients are related to mobility and balance, heart and Dementia/Alzheimer's. These conditions are often long-term, deteriorating and life-threatening health issues. However, they are largely preventable and largely caused by social factors. However, they are largely preventable and largely caused by social factors. Research and feedback from our clients tells us that the social factors most strongly linked to these health conditions include:

- unhealthy lifestyles
- isolation & loneliness
- losing independence
- limited access to services and information

These barriers which our clients face are also inter-connected, which means that one can lead to another with a multiplier effect to create vicious cycles of negative effects for people. This therefore highlights the factors which if prevented would break the cycle leading to serious health conditions. This is important for how Age UK Croydon determines the most effective approach to addressing the barriers people experience to their health and wellbeing.

Find our more: www.ageukcroydon.org.uk

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🍠 @AgeUKCroydon

