

Age UK Islington Strategic Plan 2025 – 2028

Vision

Our vision is a better quality of life for adults in Islington.

Mission

Our mission is to inform, guide, support and connect residents in Islington so they are empowered, informed, valued and engaged.

About Age UK Islington

Established in 1963 we are a local independent charity which supports adults and older people in Islington.

Our services are principally for people over 50 living in Islington. We encourage, promote, organise and run services and activities appropriate to the needs of individual older people or groups of older people and focus on helping people maintain and increase their general wellbeing.

We also provide support to people under 50 who are living with long term health conditions, and we operate the Islington Carers Hub offering specialised support for family carers.

Each year we support thousands of people through a range of services – divided into two areas.



Our services

Personalised Care and Support		Carers and Community	
Care Navigation	One-to-one casework to enable people to take control of both their physical and mental health, coordinating with a range of other professionals who may be involved with the person's care or support and exploring alternative ways for people to take control of their situation and build skills.	Activities	Activities, support groups, workshops and events take place all over Islington and are hosted in a variety of venues.
Community Mental Health Key Workers	Working within the three local core community mental health multidisciplinary/multiagency core teams, which integrates services across health, social care and the Voluntary and Community Sector. Their role is to support clients who have been traditionally hard to reach or engage in traditional mental health support services.	Befriending	This service matches socially isolated and lonely people with a volunteer befriender. The volunteer meets with their matched person at home, or in the community, on a fortnightly basis.
Counselling	Age UK Islington has a new free counselling service that you can apply for. We provide up to 12 counselling sessions with the same counsellor, with a once-a-week session lasting 50 minutes. We provide individual counselling sessions on issues including difficult emotions, loneliness and isolation, stress, relationship issues, and work and life problems.	Carers support	We provide carers assessments and carer information packs, and supported connections to events, breaks, income support and peer support groups. We also provide carerfocused counselling support.

Planning for the Future	End of life planning and assisting people to make plans for the future, including Lasting Powers of Attorney, so others know how they would like to be cared for.	Enablement	We provide one-to-one casework support to link people to assistance with daily living and looking to resolve and remove obstacles in accessing services and increasing independence.
Primary Care Network Social Prescribing Link Workers	Social prescribing connects people to activities, groups and services in the community to meet practical, social, emotional, health and wellbeing needs. These link workers provide one-to-one case work to assist with resolving practical barriers and issues. Referrals are made by clinical staff in GP surgeries.	Helpline and information and guidance	Our Helpline is usually the first point of contact for general enquiries, fact sheets, mailings to keep people informed about what is going on and information on a range of activities. We also provide one-to-one sessions giving people an opportunity to talk more about their needs and discuss the various options available and giving support to contact and make the first steps towards achieving what is needed.
Proactive Ageing Well Service	Supporting people who are frail with one-to-one case work and social prescribing to keep connected and active.	Volunteering	We have volunteers from all walks of life who utilise their many different skills to support our clients and staff in a wide range of roles.

Challenges in our borough

Islington is the second-most densely populated local authority area across England, with a growing and diverse population. The estimated population in 2021 was 216,600 of which older people represent 9%. This is projected to increase to 35% (+ 7,800 more older people) over the next five years.

Despite a common perception that it is an affluent area it has some of the starkest inequalities in health in the country. 70% of people aged 65 and over in Islington have one or more long term health condition.

The Indices of Multiple Deprivation (IMD) 2019, ranked Islington as the fifty third most deprived local authority area in England and sixth most deprived local authority in London. It has the fourth highest level of income deprivation in England for income deprivation affecting older people.

It is estimated that 40% of pensioners are beneficiaries of Pension Credit, a means-tested benefit for older people, in Islington, compared to 25% in London and 17% nationally. 34% of Islington's 60+ population are living in income deprived households. This is the fourth highest proportion of 60+ persons living in income deprived households relative to all other London Boroughs and the fifth highest nationally.

Challenges we face as an organisation

Rising costs We face resource constraints – limited funding, staffing and infrastructure, increase in suppliers' charges and increase in National Insurance Contributions.

Growing demand for services The rise in poverty and economic inequality impacts on people needing essential services. There is a significant increase in the demand for mental health services often related to the increasing prevalence of mental health challenges and the lingering impacts of the pandemic.

Increasingly complex client needs and the volume of needs This is not only about the number of clients but clients presenting with multifaceted and severe problems which require more support and places strain on resources. There is a significant rise in clients with multiple long-term health conditions, making care coordination more complex, as well as housing instability, employment issues, mental health problems, and physical health concerns. This requires a more holistic and integrated approach, whilst maintaining our high quality of service delivery.

Restricted funding from trusts and foundations creates a need to diversify our fundraising sources We have been impacted by reduced funding from public contracts, the lasting effects of austerity, the economic fallout from COVID-19 and the ongoing cost of living crisis. We recognise the risk of over-reliance on a single funding source (statutory contracts) so there is a need to develop a portfolio of alternative income streams. Trusts and foundations are closing or pausing grant programmes or are narrowing their grant criteria to exclude certain charities and causes. The competitiveness for grant applications is likely to continue over the next few years hence the need to diversify our fundraising efforts.

Challenges regarding an ageing population

Impact of an ageing population In the UK there will be a significant increase in the number of households in older age groups by 2037. By 2040 it is projected that nearly 13.3% of the UK's population will be aged over 75, almost double the proportion in 2014.

Significant demographic shifts will have profound implications for Adult Social Care, the NHS and economic policies. The increase in the number of individuals aged 65 and over, together with the reduction in the number of working-age people per older person places a growing burden on the working-age population to support older people. This will also cause economic pressure on the welfare state.

Increasing demand Organisations serving older adults face increased demand due to a growing ageing population and the accompanying rise in age-related health issues and need for care and support.

Long term conditions There is a rise in the number of people living with long-term conditions, including multimorbidity (multiple conditions). People with long-term conditions face various challenges such as managing symptoms, medications, and appointments, alongside potential emotional distress and social isolation, which can impact their mental and physical wellbeing. People may face difficulties accessing the right care and support at the right time, which can lead to a deterioration of their health. Long-term conditions can lead to social isolation and shrinking social networks, impacting mental wellbeing, leading to emotional distress, hopelessness and fear. Managing a long-term condition can also create financial challenges due to medication costs, travel expenses for appointments, and potential loss of income.

Key priorities

Following our consultation process involving clients, staff, trustees and professionals, plus an appraisal of the external environment and challenges we face, we are committed to focusing on the following priorities for the next three years:

- 1. Focus on prevention, early intervention and resilience building.
- 2. Diversify funding and fundraising approaches.
- 3. Increase our partnership working, resource optimisation and consolidation.
- 4. Reach marginalised and underrepresented communities.
- 5. Increase our digital presence and support.

Focus on prevention, early intervention and resilience

Context

To effectively prevent small issues from being scaled up, prevention, early intervention and community support must be two key components of our work, addressing issues before they spiral.

How we will do it

Education and information sessions to teach individuals basic knowledge as preparation for when issues arise – social, benefits, housing, employment, finance – assist in identifying the problem to enable early intervention.

Work with the Islington Together 2030 strategy and increase partnership working to increase our reach and effectiveness of prevention.

Work with primary and secondary healthcare to provide preventive information and care to people with long-term conditions and chronic illnesses.

Build client resilience through support groups, wellbeing checking, workshops, training, peer support, mentoring and specialised programmes.

Partner or link with other organisations to exchange ideas and potentially launch collaborative programmes.

Increase volunteer involvement and support.

Diversify funding and fundraising approaches

Context

We need to carry out a shift to more diversified and proactive fundraising due to a volatile fundraising environment and increasing client needs.

How we will do it

Cultivate major donor funding by developing relationships with high-net-worth individuals and foundations.

Build long term partnerships with corporate donors to secure both financial and in-kind support.

Develop a dedicated corporate partnership section on our website.

Continue to submit applications to trusts and foundations.

Make more of our digital fundraising platform and online campaigns.

Develop legacy giving by liaising with local solicitors and encouraging supporters to include AUKI in their wills.

Submit joint funding applications to local, regional and national funders.

Continue using sub-contractor for grants and foundations and investing income.

Consider developing paid-for services.

Increase our partnership working, resource optimisation and consolidation

Context

Clients present multifaceted support needs – housing instability, employment issues, mental health problems, physical health concerns. This requires a more holistic and integrated approach to service delivery. We should actively pursue partnerships and consolidation to respond to the highlighted challenges to improve the efficiency and effectiveness of service delivery.

We need to develop more integrated, holistic and adaptable services to address the complex and intertwined needs of our clients. This requires increased resources and innovative service delivery models.

How we will do it

Actively engage in partnered provision of services and outreach.

Collaborate with the local council and NHS as well as specialist voluntary sector organisations.

Be a significant part of Islington's work towards being an Age-friendly Community.

Joint workforce development initiatives – staff training and resource management.
Consider resource optimisation when working with other organisations to improve efficiencies by streamlining operations and centralising backoffice functions and merging similar programmes.

Explore strategic partnerships to share resources, expertise and funding opportunities. – sharing data and client referrals, joint training and staff development, facilities, events and campaigns.

Reach marginalised and underrepresented communities

Context

We need to increasingly reach clients in marginalised and underrepresented communities, recognising key barriers such as digital exclusion and linguistic challenges.

How we will do it

Partner with organisations that have established trust within these communities to ensure services are accessible and culturally appropriate.

Partner with translation charities to understand the needs of certain communities.

Organise events and activities in locations that are accessible to the community.

Use a variety of communication channels – social media, community newsletters, flyers, posters, and word-of-mouth.

Involve community members in the planning and implementation and empower them to lead and participate in the process.

Train staff on cultural sensitivity and competencies.

Increase our digital presence and support

Context

We need to respond to the fact that a significant proportion of the local population want to access a proportion of information and support online.

How we will do it

Create an information giving and training facility on our website.

Feature engaging content and active social media engagement, whilst building relationships with our audience.

Regularly publish high-quality, informative, and engaging content like blog posts, articles, videos, and infographics.

Partner with influencers and other organisations to expand our reach and audience.

Encourage other websites to link to our online content.



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