

Crossroads Care ... for Carers and the people they support



Crossroads Care Richmond and Kingston upon Thames

Strategic Plan

2018-2023

**Crossroads Care Richmond and Kingston upon Thames
places Carers, and the people they care for,
at the heart of everything we do.**



Crossroads Care ... for Carers and the people they support

For over 30 years, Crossroads Care Richmond and Kingston upon Thames has provided bespoke, high quality home and community respite services to Carers and the people we care for – babies, children, young people, adults and the elderly, across all disability.

Our Vision:

- For every Carer to be recognised, supported and have access to a range of quality care and support services to maintain their own health and wellbeing.

Our Mission:

- To provide high quality services that respond to the needs of Carers and the people they support, offering them peace of mind and understanding.
- Develop new services, working with Carers and the people they care for, and other stakeholders, to influence service innovation and growth.



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1. Introduction

The Crossroads Care Strategic Plan for 2018-2023 sets out our vision statement and strategic aims for the charity and the people we serve – Carers and the people they care for, living in both the London Boroughs of Richmond and Kingston upon Thames.

The 2018-2023 Strategy is intended to build upon the good work achieved in the previous Strategic Plan (2015-2018).

In order to capture any changes within the environment, both internally and externally, the plan will be reviewed on an annual basis.

Central to the implementation and strategy plan is our commitment to Carers and the people they care for.

The plan's priorities take into account the changing local and national political, demographic and financial environment. They refer to the aims and priorities as set out in both local and national strategy and priorities. For example, Health and Wellbeing Strategy (2016-2021) and Richmond upon Thames Carers' Strategy (Refresh 2016-2019).

This plan provides a clear and effective strategic direction for Crossroads Care Richmond and Kingston upon Thames to move forward productively into an improved financial position for 2018-2023.

2. Background

Who is a Carer

A Carer is a person of any age who provides unpaid care and support to a friend or family member who, due to illness, disability, a mental health problem or an addiction cannot cope without their help.

Caring for someone at home is hard work, and is often a 24-hour, seven days a week job. Caring has an effect on the Carers home and work life, their health and ongoing relationships with individuals and the community.

Providing respite care for a few hours gives unpaid Carers with an essential break from their caring role. It allows them to spend quality time alone, have time out, meet appointments, participate in activities with their other children or spend time with their partners.

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Crossroads Care (What we do)

A network partner of Carers Trust – the UK's leading provider of support for Carers and the people they care for – Crossroads Care Richmond and Kingston upon Thames, together with locally-based network partners, is able to support Carers. They are supported in their homes through the provision of replacement care and in the community through information, advice, emotional support, hands-on practical help and access to much-needed breaks.

Crossroads Care has been providing high quality home and community respite care services for babies and children, young people, adults and older people in the Borough of Richmond for over 30 years, and Kingston since 2011.

We offer specialist services for Carers of people of all ages and conditions through a range of individually tailored support and group activities.

We care for people of all ages with all health and social care conditions and needs, including specialist, complex care and support services.

Our highly skilled paid Care Support Workers take over the caring role and always go the extra mile. They understand the needs of Carers and the people they care for and take pleasure fitting into the family. It is no surprise that Crossroads Staff build long and trusted relationships.

We provide the specialist quality care that gives Carers and their cared-for peace of mind. We are a Carer Quality Commission (CQC) regulated service, which ensures we provide a quality and safe service. We are also a Centre of Excellence under the Carers Trust Quality Mark.

Over that time, Crossroads has developed specialisms and extended services for adults and children requiring palliative care, young Carers with special needs, male Carers and people with dementia, through drop-in workshops as well as outreach projects such as a Caring Café, a Saturday Clubs for children with special needs, a Young Carers and the Men Who Care project.

The primary function of our services is to provide Carers with respite and to improve their quality of life, while delivering high quality bespoke specialised care and support to the person(s) they care for.

A non-profit organisation, we can offer extended respite breaks beyond our charity services and provisions through, for example, private or match funding with direct payments and contracts from health and social care providers e.g. NHS, Continuing Care, Adult Social Services and Achieving for Children.

3. National and Local Demographics

The national and local demographics are essential to the development of our five-year strategic plan and how we best place ourselves to support Carers and the people they care for, within the climate.

The statistics and information below were published by Carers UK in 2011 for England and Wales.

Statistics for Carers

- There are almost 5.8 million Carers – representing 10% of the population
- Unpaid Carers save the NHS an estimated £132 billion per year, against £134 billion spent on the NHS
- 84% of Carers report health problems related to caring
- 94% claim that Caring affects their mental health
- Taking on a caring role can mean facing a life of poverty, isolation, frustration, ill health and depression
- 42% of Carers are men and 58% are women.

Young Carers and Young Adult Carers

- 2-3% of children (aged between 5-18 years) are Carers
- Young Carers are more likely to experience bullying and poor educational attainment
- 40% are more likely to be looking after someone with drug and alcohol problems
- Young adult Carers (aged between 16-18 years) are twice as likely to not be in education, employment or training (NEET).

Health and Wellbeing

A longitudinal study involving 392 Carers and 427 non-Carers (aged 62-92 years) found that Carers who were reporting feelings of strain had a 63% higher likelihood of death than non-Carers or Carers not reporting strain.

Source: Carers Trust <http://www.carers.org/key-facts-about-carers>

Richmond upon Thames Statistics

Carers statistics – The 2011 Census reports there were around 15,802 Carers living within the London Borough of Richmond upon Thames (8.5% of all residents). Of these Carers, 75% provided 1-19 hours caring per week, 10% 20-49 hours and 15% more than 50 hours.

Breakdown statistics – 59% are female (n=9,262). Of all care providers, 34% are aged between 25-49 years, 38% between 50-64 years, and 22% are aged over 65 years. However, of those who provide more than 50 hours of care per week, 38%

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are older than 65 years and 5% of Carers are younger than 25 years (n=864) (Census, 2011)

Key challenges facing the Clinical Commissioning Groups for 2018 are:

- Ageing population, with significant numbers of older people living alone
- Increasing numbers of people living with one or more long-term condition, thereby increasing the demands on hospitals (planned or otherwise)
- Rising numbers of Carers with dementia-related health problems
- Challenges in weight management in both adults and children
- Increasing emotional, self-esteem and wellbeing issues in school-age population.

General Practice data – Currently there are less than 1,000 Carers recorded in General Practice (0.45% of the registered population), suggesting that health professionals may not be aware of the Carer responsibilities and associated support needs of Carers.

Concluding that the true figure of caring is yet to be fully recognised!

Young Carers

The 2011 Census identified that there are 864 Carers in Richmond upon Thames aged 24 years and younger who provide unpaid family care.

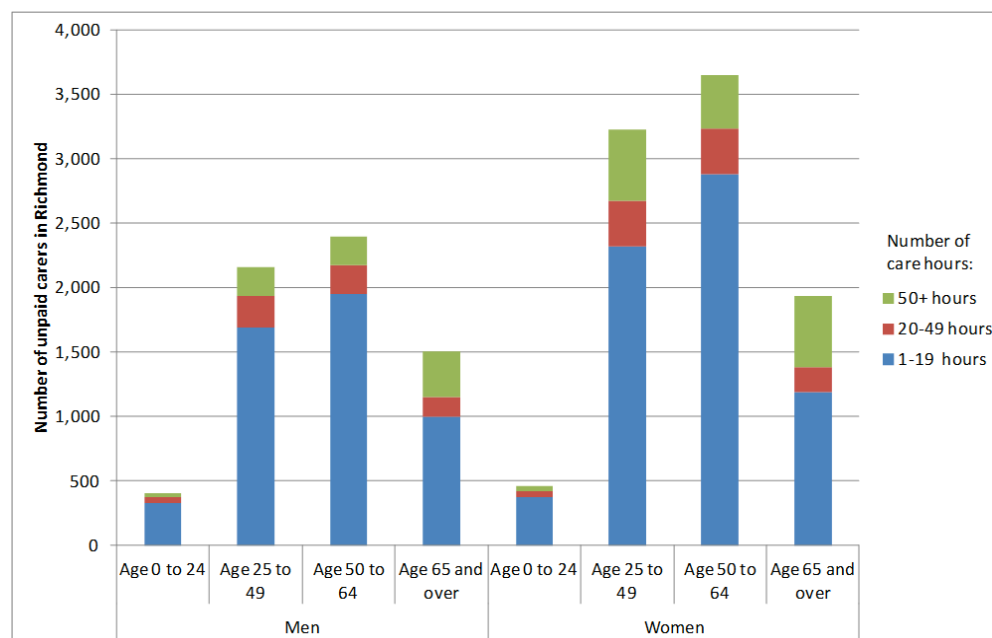


Figure 1. Age and sex distribution of Carers in the London Borough of Richmond upon Thames by number of hours of unpaid care

Source: <http://www.datarich.info/jsna/groups-and-communities/carers>

Kingston upon Thames Statistics

Carers Statistics – The 2011 Census reports that there were around 13,288 Carers living within the London Borough of Kingston upon Thames (8.3% of all residents).

Breakdown statistics – Of those Carers (people with physical and mental health problems), 2,346 provide care for over 50 hours a week. There are 251 young Carers aged under 16. The peak age for Carers is between 50 and 70 years.

An estimated 40 to 50% of all Carers provide care for another family member or friends with a mental health problem.

General Practice data – A survey of over 1,000 Carers in contact with Carers organisations found that just less than 50% believed that their health was adversely affected by their caring role. Mental health problems included stress and tension (38%), anxiety (27%) and depression (28%).

Carers may attribute symptoms of an illness to their work as a Carer and fail to recognise the onset of illness.

Age	Provides unpaid care: Total		Provides 1 to 19 hours unpaid care a week		Provides 20 to 49 hours unpaid care a week		Provides 50+ hours unpaid care a week	
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage
All Ages	13,288	8.3%	9,331	5.8%	1,611	1.0%	2,346	1.5%
Under 16	251	0.8%	206	0.7%	19	0.1%	26	0.1%
16 to 24	786	3.6%	629	2.9%	108	0.5%	49	0.2%
25 to 34	1,229	4.8%	852	3.3%	184	0.7%	193	0.8%
35 to 49	3,705	10.1%	2,569	7.0%	459	1.3%	677	1.8%
50 to 64	4,787	18.8%	3,630	14.3%	548	2.2%	609	2.4%
65 and over	2,530	12.4%	1,445	7.1%	293	1.4%	792	3.9%

Source: <http://data.kingston.gov.uk/resource/view?resourceId=215>)

Specific Needs of Carers

While there are general commonalities for Carers around their needs and experiences, such as anxiety, isolation, fear of the future, depression, loss of friendships and relationships, broadly each age group and/or disability tends to bring its own unique and distinct issues, obstacles and problems which affect the kind and level of support required.

Older people – Carers of older people also tend to be older and are often less able to undertake many of the tasks required. Their distinct issues are generally around health (Carer and cared-for), work, friendships, isolation, fear and fear of the future.

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Male Carers – Male Carers tend to be more socially isolated and are significantly more at risk of reaching crisis point before asking for support. They also tend to have low self-esteem and feel ill-equipped to cope with their caring role.

Parent Carers – Parent Carers find it difficult to access mainstream activities and are aware that their caring role is longer term. Their distinct issues are generally around education, work, finances, peer groups, relationships, marriages, isolation, future, transition, anxieties, family life and siblings.

Young Carers – Young Carers find it difficult to socialise and are often unable to relate to their peer groups. Their distinct issues are generally around education, peer groups, siblings, social concern, identification and the future.

“Despite differing caring roles, all Carers share some basic needs. All Carers also need services to be able to recognise the individual and changing needs throughout their caring journey.” Carers Trust

4. Operational Environment and Priorities

As a consequence of both the 2008 global financial crisis and an ageing population, there are more restrictive and stringent controls in the public and private funding of health and social care budgets in the UK, with people and/or organisations encouraged to tighten their purse strings.

A direct consequence of this is the provision of health and social care, which is now going through a period of major upheaval.

It is essential for Crossroads Care Richmond and Kingston upon Thames to consider the changing environment within which we operate and the changes in which the wide climate will affect our services over the next five years. Local and national changes to the provision of health and social care and the ways services are funded will ultimately have an impact on Crossroads Care Richmond and Kingston upon Thames, in both our operations and finances.

To take advantage of the positive changes, as well as being suitably robust and financially secure to weather any negative changes, the organisation has to be sufficiently reflective and flexible over the next five years.

The following changes are both challenges and opportunities that are already having, and will continue to have, an effect on us going forward:

The Care Act 2014

The new Care Act came into legislation in April 2015. The Care Act helps to improve people’s independence and wellbeing. It makes clear that local authorities must provide or arrange services that help prevent people from developing needs for care and support or delay people deteriorating such that they would need ongoing care and support.

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The major aims and outcomes are clearer and fairer Care and Support, Wellbeing, Prevention and Delay, and providing Carers/cared-for with control of their care. It provides new rights to Carers:

- Promotes Carers wellbeing
- Reduce the needs for support of Carers in their caring role
- Provide an accessible and proportionate information and advice service for all residents including Carer support
- The right to an assessment in their own right as Carers
- National Carers eligibility
- Identify and support young Carers.
- Support parent and young Carers when a young person transitions from children's social care service
- New rights to a personal budget and direct payments
- Right to the support of an independent advocate for those with substantial need.

Services to Carers are not currently means tested, however services to the cared-for are. In April 2016, there was to be changes for those who 'self-fund'; they would be able to be assessed and ask the local authority to manage their care, and the amount they would spend on social care would be capped, however this has been deferred until 2020.

Our Priority – For us the implications will be more Carers identified and given information about services, and therefore we need to ensure we have the correct marketing strategy so that people are aware of us as a preferred provider.

Increase in Carers Assessments

As of April 2015, Carers have the right to have their 'needs' as a Carer assessed. This potentially means a greater identification of Carers and their needs, and potentially a higher need for respite, thus potentially more respite provision required.

Our Priority – Greater need for respite is, however, reliant on Carers being identified and aware of their rights. We are providing this information to Carers where we can and at our Carers Drop-in and on social media, via our website.

Joint Health and Wellbeing Board

The Joint Health and Wellbeing Board identified supporting Carers as a priority in its 2013-2016 Strategy and is continuing the commitment in its 2016-2021 Strategy.

Our Priority – To ensure that we help influence the strategy, raising the needs of Carers and the people they care for.

Outcome Based Commissioning Approach

The change in how contracts are delivered now engages extensively with Carers, as well as service users, to establish the outcomes to be achieved. This move has

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come away from the local authorities to go out to tender for provision of services, 'Outcome Based Services', such as domiciliary care and children's activities.

Our Priority – To ensure we are aware and involved in relevant tender processes.

We do however need to ensure that we only apply for those tenders that are right for the organisation. We need to take into account the costs, length of contract, processes e.g. TUPE. Previously, we have found that the price offered is below what we are able to provide and thus not financially viable. Therefore, the process carries a risk and we cannot rely on it to assist in our sustainability.

Integration of Health and Social Care

The new Care Act, in addition to other legislation, requires collaborative working and cooperation between public authorities and promotes integration between Health and Social Care.

Our Priority – To ensure a good working relationship across both services. To support the integration of those services and awareness of the contribution of the voluntary sector, particularly our own services around good practice and service delivery across both sectors.

Direct Payments and Personal Budgets

Where previously Social or Health Care provided individual Carers with a package of care (via service providers), individuals can now receive a package in the form of a 'personal allowance'. This gives them the freedom to choose how their assessed needs are met.

While this was particularly pertinent to older people's services, there has been a huge push within children's services, already reflecting a decrease in commissioned care packages.

Our Priority – In the future, it is expected that 'personalised budgets' and self-funders will contribute a higher percentage of our total funding. Therefore we need to ensure that Carers' are aware of our services and we are able to provide the types of services Carers want.

Moreover, that we continue to explore cost effective services and ways of making our services available to those older people and parent carers receiving direct payments or personalised budgets – where the hourly rate is significantly less than our unit rate cost. Match funding is one approach.

Clinical Commissioning Groups

Health funding via GPs and the Clinical Commissioning Groups (CCG). The Health and Wellbeing boards decide the local priorities and work with the CCGs to fund the services linked to these priorities.

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Our Priority – We will continue to work with the CCG and support those children and families within the borough that meet criteria. Our partnership is important and we will continue to build upon existing relationships and promote services at management and commissioner levels.

With a decrease in commissioned services, and the criteria being harder to achieve, it is important to maintain a presence within this field through our charitable provision and outreach and project community work and promoting our specialisms within this field.

We need to ensure that we are familiar with the priorities, that Carers are on the agenda and their support is prioritised.

Priorities include familiarization, networking, promoting specialism, providing health services within the community and reducing hospital admission. We can possibly facilitate these by providing health services ourselves via a possible nurse led service.

Achieving for Children

Achieving for Children (AFC), as a social enterprise, is a positive move for families. AFC have promoted and developed their own 'in-house' services to meet the needs of children with special needs within the borough, including community respite services, after school provisions, overnight unit/services and summer programmes.

Our Priority – We will continue to work with AFC and support those children and families within the borough. Our partnership is important and we will continue to build upon existing relationships and promote services at management and commissioner levels.

Within a decrease in commissioned services, it is important to maintain a presence within this field through our charitable provision and outreach and project community work, and promote our specialisms within this field.

Better Care Closer to Home Strategy

The Better Care Closer to Home Strategy, Promoting Wellbeing and Independence, is a framework for prevention. The plan and CCG sponsored transformation of services – Outcome Based Commissioning and feedback from public and local NHS stakeholders' deliberate engagement events (2015) – evidence a major service and strategic change, offering people, including Carers, the opportunity to be involved in development, advocacy and support.

Strength Based Approach

The Strength Based Model approach has been adopted by Adult Social Service Richmond and Wandsworth – focusing on a shift in the paradigm of operations in 2017-2018. The enablement and empowerment approach focuses on prevention and

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community, where individuals are encouraged to explore all options of support in the community. The aim is to reduce dependency and increase enablement.

Our Priority – The model is to drive access voluntary sector support before council funded support, therefore placing the voluntary/third sector support as the Front Door.

Partnership Working

Our organisation has always believed in the benefits of partnerships. We work with:

- Carers and cared-for in the development of person-centered Care Support Plans and service provision
- Staff, volunteers and trustees in our service and organisation development
- Voluntary and statutory authorities
- Commissioners
- Corporate partners
- Local community.

Our Priority – To ensure a positive partnership, there must be a shared goal and a benefit to all partners. A relationship is only as good as the partner who wants it least.

In preparation for upcoming changes in tendering and processes, we are developing virtual partnerships across the voluntary and statutory sectors.

Competitive Markets

Many local authorities are changing the way they fund services and are changing from grants to tendering. This means there is a more open market and more competition.

Our Priority – In order to procure a more business-like outlook and profile, and in readiness for possible tender opportunities, we are changing from virtual relationships across the voluntary and business sector.

Changes in Future Demographics

We are aware of an ageing population; there are more people living with dementia and other health conditions than ever before.

There is also an increase in 'Sandwich' Carers (multiple Carers) - Carers who are looking after both children and parents, and also trying to continue to work. This also has an impact on the emotional and mental health of our young people.

Our Priority – The need to look at expanding the specialist areas of our service which can support the gaps in provision and needs of the community, e.g. our dementia service and the Men Who Care project.

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Improved Technology and Social Networks

So we can continue providing high quality services efficiently and effectively using technology available, we must keep updating our systems, communications and processes.

Our Priority – To continue to monitor and expand upon up-to-date social networks and systems, and to promote Crossroads efficiently and effectively, both on an operational and promotional level.

5. Current Crossroads Services

Crossroads Care is positioned strategically across the boroughs of Richmond and Kingston upon Thames. We work with all other voluntary and statutory services and strive to meet the needs of Carers and the people they care for. This includes identifying specific 'hidden' and 'hard to reach' groups within our local community.

For over 30 years, Crossroads Care Richmond and Kingston upon Thames has provided bespoke, high quality respite and support services to unpaid Carers.

Our services help Carers by giving them time (a minimum of two hours) to recharge their batteries away from their caring role.

Our highly skilled, trained and experienced Care Support Workers take over the caring role and always go the extra mile. They understand the needs of Carers and the people they care for and take pleasure fitting into the family. It is no surprise that Crossroads Care Staff build long and trusted relationships, and more people turn to us for support than any other social care provider.

In order to maximise the benefits of a respite break, each package of care is personalised. We are one of the few care providers where family Carers do not have to remain in the home during times of care. This may or may not include looking after the whole family unit.

In order to ensure sustainability in the long term, Crossroads Care Richmond and Kingston upon Thames must look at:

- Continuing and maintaining high quality services
- Promoting our services
- Diversifying our services
- Expanding upon our specialism
- Networking and working with our partners within the voluntary and statutory services. This is in order to address the needs and gaps within the services and the respective boroughs within the current financial and changing environment.

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In the 2017-2018 financial year, Crossroads Care Richmond and Kingston upon Thames delivered over 22,000 hours of care to over 500 Carers and the people they care for.

We provide the following services:

Core 1:1 Respite

Offering respite at home, in the community, specialist/complex care and self/match-funding.

Crossroads Care provides a minimum of two hours 1:1 respite services within the home or community. This gives unpaid Carers an essential break from their caring role. It allows them to spend quality time alone, have time out, meet appointments, participate in activities with their other children or spend time with their partners.

Over that time, Crossroads Care has developed specialisms and extended services for adults and children requiring palliative care, young Carers with special needs, children with special needs, male Carers and people affected by dementia through drop-in workshops as well as outreach projects such as a Caring Café, a Saturday Club (run during term time) and the Men Who Care project.

Emergency Respite Care

For over 15 years, we have provided high quality Emergency Respite Services and support to unpaid Carers living within the London Borough of Richmond upon Thames. Our team cares for adults and the elderly with behavioural, emotional and/or medical needs.

Should a Carer become ill or experience an emergency situation, Carers will have peace of mind knowing that the Crossroads Care Emergency Respite Service will ensure continued care in the home by our highly trained and experienced team. The service provides up to 48 hours of high quality care in emergency situations, enabling Social Care Services, Careline or the nominated Carer to make alternative arrangements or support over the period of the Carers ill health or until the emergency situation has been resolved.

This care could be live-in or supplied through a team of Carers.

Funding – This service is funded by the London Borough of Richmond Upon Thames.

Children's Saturday Club, Time Out and Transitional Projects

For over 17 years, the Crossroads Care Saturday Club has run every Saturday during term time. The club provides children and young people, from 'hard-to-reach' groups e.g. Autism and Asperger's, with the specialised support they require in order to participate in mainstream activities. This "club of their own" also provides parents, carers and siblings with a break from their caring role.

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In line with best practice, each child/Young Person is risk-assessed.

The service is delivered by highly trained, experienced and competent Children's Care Support Workers who understand disability and are able to carry out a programme of activities with the child/young person and meet therapy needs in line with implemented care plans.

The Service is committed to delivering improved outcomes, in line with 'Every Child Matters', and the local agenda – 'Achieving for Children' and the 'Children and Young People's Plan'.

The Transitional and Time-Out projects which operate at the club enable us to meet the outcomes under 'Participate, Enjoy and Achieve' – addressing 'Health, Disability and Wellbeing'.

Caring Café

Caring for someone with dementia can be frightening and isolating. Our Caring Café has been running for over 17 years and provides a safe and friendly environment for Carers and those living with dementia to meet others, feel supported and gain information to help them in their caring role.

Since 2013, the Caring Café has been funded by the London Borough of Richmond upon Thames, within the HUB service for Carers.

Run in partnership with Alzheimer's Society South West London, Care Support Workers from both organisations are on hand to provide guidance and information. The Caring Cafe is a place where people with dementia, their families and friends can meet for a coffee or lunch, spend time together and share their experiences with each other.

Drop-in Workshops

The 'Carers Drop-in' is held at our offices on the last Friday of each month. All Carers are welcome to drop in, meet the team, have tea or coffee, meet other Carers, have a chat, ask questions and gain information. The drop-in provides an informal and welcoming atmosphere for Carers to discuss issues and experiences. We are also able to provide replacement care and transport to enable Carers to attend.

Digital Inclusion

In addition to the facilities available at the drop-ins, we have introduced digital tablet training and support for Carers to explore their interests and search for information and advice.

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Men Who Care project

The Men Who Care project was developed specifically to address the health, support and care needs of male Carers, a vulnerable and particularly socially isolated group. Male Carers who are caring for a partner, mother or child are invited to a monthly male-focused social group. This group provides friendship, specialist support and activities; it also provides care and respite for the person they are caring for.

6. Current Financial Position

The prevailing economic climate has seen Crossroads Care Richmond and Kingston upon Thames operating over the last few years with a small deficit.

Further compounding factors have been changes in the boroughs' demographics, commissioning and tendering processes, general costs increase, greater demands upon trusts (competitive market), and changes in the current health and social care funding environment.

We have made much headway counteracting these effects.

What we have done so far

- Developed a more efficient and sustainable office and management structure
- Streamlined in-house training
- Generated income through renting our meeting room and in-house training
- Increased fundraising activities and events which led to several 'charity of the year' status'
- Restructured the trustee board
- Improved IT systems
- Developed new systems and social networks (Webroster)
- Improved marketing strategies, to include a new website
- Developed 'Friends of Crossroads' – a new way of giving
- Promoted and expanded our services, through projects and new initiatives

Current Funding Breakdown

A healthy balance between statutory and charitable funding and private income has always been a central priority for Crossroads Care Richmond and Kingston upon Thames.

Presently around 50% of Crossroads Care finance is received from contracts via the Social Service Department of London Borough of Richmond and joint or single contracts from the borough, including the Clinical Commissioning Group and Achieving for Children.

Other funding comes from local funders and trusts who have supported Crossroads Care for over 15 years. These include Richmond Parish Lands Charity, Hampton Fuel Allotment Charity and Barnes Workhouse.

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Other charitable income is procured through funding applications to major charity givers and payments from private contracts and other income services.

The recently launched 'Friends of Crossroads' is starting to bring in a healthy income.

Crossroads Care's strong financial asset is our head office premises in Teddington, which has substantially appreciated in value since being purchased.

Our Priority – The financial assumptions that underpin this strategic plan for 2018-2023 recognises the changing climate and the need to further increase the level and diversification of our funding, increase our service margins and grow our cash reserves.

7. Vision and Mission Statement

Mission – Crossroads Care provides services that respond to the needs of Carers and the people they support, offering them peace of mind and understanding.

Works with them and other stakeholders to influence service innovation and growth.

Vision – Crossroads Care wants every Carer to be recognised, supported and offered services to help them maintain their own health and wellbeing.

8. Values

Crossroads Care places Carers and the people they support at the heart of everything we do.

- **Trust** – We understand that our services only respond to Carers needs when they trust us to care for the person they hold.
- **Involvement** – Carers and the people they support drive Crossroads Care's service design and development.
- **Quality** – We ensure that our services are high quality, flexible, responsive and continually improving.
- **Family Friendly** – We recognise that our services impact on families and friends, not just the Carer and the person they support, and so we design our services with that in mind.
- **Availability and Accessibility** – We work to make our services available and accessible to many Carers and the people they support as possible.
- **Dignity and Respect** – We always treat Carers and the people they support with dignity and respect.
- **Working for change** – We work proactively with government and policy makers at national and local level to influence legislation and practice.

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- **Partnership working** – We actively explore opportunities for establishing joint projects and relationships with other organisations that will improve services for Carers and the people they support.
- **Learning** – We learn from the good practice of others in order to improve our services for Carers and the people they support and we encourage others to learn from us.

9. Strategic Objectives

This five-year plan was developed by staff, trustees and service users (Carers and people with care needs) at our Strategic Away Day.

It has TWO distinct phases that are designed to ensure a sustainable and successful long-term future for Crossroads Care.

Phase One (Year 1) – Focuses on the continued building of secure and reliable foundations which will enable Crossroads Care to operate with a renewed confidence going forward.

Phase Two (Years 2 to 5) – Refers to how Crossroads Care will grow in order to meet the challenges of the 'new realities' with the expansion of existing core services and the introduction of new specialisms and services.

In order to ensure their continued relevance and successes, the Strategic Objectives will be reviewed annually in the following areas:

- **Operational Structure**
- **Services**
- **Financial (fundraising, marketing and communications)**
- **Partnerships and Development**

In order to deliver the plan's strategic objectives, we will develop the organisation's objectives, input and outcome which will be reviewed and monitored by the trustee board and senior management meetings on a regular basis.

Four Strategic Objectives that have been identified with the key initiatives that need to be delivered in order to meet each of the objectives:

(1) Finances

Secure the financial stability of the organisation, and improve the financial status with at least six months' reserves and income.

Grow business revenues, margins and reserves by expanding/developing both existing and new services. (Year 1 - 5)

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(2) Services

Continue to deliver high quality services that meets the needs of Carers and those they care for.

To secure/build upon and expand our quality services and projects; to meet the health and social care needs of all Carers and the people they care for. (Years 1 - 5)

(3) Organisational

Develop and maintain its people (including partnerships).

To ensure that the necessary and appropriate organisational, governance, financial and staff structures are in place to support the pursuit of our objectives. (Years 1 – 5)

(4) Social Impact/Profile

Build upon our measurement, marketing and quality standards/accreditations.

Work closely with local commissioners and other health and social care service providers and the voluntary sector to sustain, promote and develop services, knowledge and relationships. (Year 1 – 5)

10. Financial Projections

As a consequence of both the 2008 global financial crisis and an ageing population, we have more restrictive and stringent controls in the public and private funding of health and social care budgets in the UK, with people and organisations being encouraged to tighten their purse strings.

A direct consequence of this situation is the provision of health and social care, which is now going through a period of major upheaval.

Crossroads Care has to take into account this changing environment within which we operate and the changes in which will have an effect on our services over the next three years. Local and national changes to the provision of health and social care and the ways services are funded will ultimately have an impact on Crossroads Care, in both our operations and finances.

Our five-year Strategic Plan 2018-2023 will implement and monitor all financial matters and predictions.

For a full breakdown of current finances, refer to:

Audited Accounts 2016/2017
Annual review 2016/2017
CEO Target Report 2018/2019

11. Conclusions

Crossroads Care is positioned strategically across the boroughs of Richmond and Kingston upon Thames. We work with all other voluntary and statutory services and strive to meet the needs of Carers and the people they care for. This includes identifying specific 'hidden' and 'hard to reach' groups within our local community.

In terms of demographics, an ageing population and changing economic environment present new and very real challenges for all organisations operating in the health and social care sector over the next few years. The key to successfully meeting the challenges and opportunities that lay ahead is to ensure that Crossroads Care Richmond and Kingston upon Thames continues to provide high quality services for Carers and the people they care for.

The challenges, sustainability and future growth of our organisation will be dependent upon our ability to continue to develop, adapt and diversify the services we provide, in a very competitive environment, in line with what Carers and the cared-for require going forward.

Operating in a more competitive environment means it is also essential for Crossroads Care Richmond and Kingston upon Thames to continue to raise our profile and support, and increase awareness of the organisation amongst Carers where we operate.

As we move into the future, we will continue to be ambassadors of Carers and Carers needs, together with the people they care for. We embrace these new challenges with our partners and the voluntary and statutory sectors, and will continue to ensure high quality respite breaks and services within the health and social care sector. We will also continue meeting the specific needs of our local community, while promoting health and wellbeing.

The Strategic Plan 2018-2023 was developed from our Strategic Away Day where we consulted with local Carers, the people they care for, our partners, staff and trustees about what they feel the organisation should deliver in the future and how this can be best achieved.

Julie Da Costa CEO