

Ideas to support Croydon's Adult Social Care Strategy

Public discussion report

February 2026



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Executive Summary

As part of Healthwatch Croydon's Annual Meeting on 15 July 2025 at the Clocktower Café in central Croydon, there was a public discussion, section under the title: *Your views on Croydon's adult social care strategy*. Over 50 participants had the opportunity to share their views on the draft adult social care strategy in Croydon to help inform its development.

This session was focused on hearing experiences as residents and as individuals and organisations supporting people living in Croydon who currently use adult social care services or may do in the future.

Around eight tables, Croydon residents and stakeholders were encouraged to discuss these priorities and consider practical ideas which could be used to progress these in the new strategy. Each were given an overview of the six priorities that Croydon Council would like to see structure the strategy and participants were asked to consider practical suggestions to these which people could put on notes and then place by each priority.

Healthwatch Croydon analysed the various suggestions, and this report shares what was shared and makes some suggestions for future development of the strategy.

Findings

All the comments were collected under one of the six priority areas. As a result of this analysis, some additional general themes emerged, which are shown as the final column.

For each priority comments were classified under themes, which are shown in each column.

These were then further analysed and classified under five emerging categories of action:

- Recognition that the original priority is important (Pink).
- Communication of information to residents and partners to help meet priority (Light Blue).
- Outreach and feedback with residents about services to support better engagement and use of services that meet their needs (Green).
- Priority themes about services (Dark Blue).
- System responses needed to support the priorities (Yellow).

Support people earlier	Maximising independence	Identifying and reducing inequalities	Improve the accessibility and capacity of accommodation	Embed resident voice	Work with health partners to align services	General points
Priority recognised	Priority recognised	Priority recognised	Priority recognised	Priority recognised	Priority recognised (should this be happening already?)	Need for an implementation and action plan
Raise awareness of services	Keep people informed around their concerns	Engagement/ involvement plans	Availability of homes/housing capacity	Outreach – listen to our communities	Enhance understanding of local needs	Importance of outreach
Maximise role of community assets	Reach out to hear what would help people achieve this	Give people the support networks they need	Joined-up working as standard practice	Effective and independent feedback to improve services	Enhance understanding of the local service landscape	There is a key role for community supporting people
Supporting carers	Individualise support	Address specific barriers to care that reinforce inequities.	Lived experience – what it is like for the person and those around them		Listen and work with possible solutions from residents and communities	Better communication about expectations and pathways
Focus on early intervention/ Prevention	Embracing care for the environment	Provide effective languages support and communication				Co-accountability and cooperation with success measures
Emphasise importance of mental health						
Key	Recognition	Communication	Outreach & feedback	Key themes	System responses	

Priorities recognised as being important

- All priorities were recognised as important. Some questioned on whether working closely with health partners to provide more joined-up services had not happened already.

Communication of information to residents and partners to meet priorities

- Residents need to be aware of services if they are to be supported early on.
- Residents need to be informed about their concerns if they are to live more independently.
- Provide better language support and communications to those residents who need it.
- Provide better communications about service expectations and pathways.

Outreach and feedback with residents about services to support better engagement and use of services to meet their needs

- Outreach with resident was considered of key importance.
- Reach out to hear from people about what would enable them to live more independently.
- Individualise support to specific resident's needs.
- Improve the range of accessibility of accommodation by understanding and using lived experiences of those using services and those family and friends around them.
- Use ideas from the community to shape work by undertaking regular outreach where you listen to communities.

- The insight should be effective, independent and focused on improving services.
- Work closely with health partners to enhance understanding of local needs.

Key themes that emerged when discussing services

- Focus on early interventions and prevention.
- Emphasise the importance of mental health.
- Embracing care for the environment.
- Give people the support networks they need.
- Address specific barriers to care that reinforce inequities (fairness or justice).

System responses needed to support the priorities

- Maximise role of community assets to support people as early as possible.
- Improve availability of homes/ housing capacity.
- Joined-up working as standard practice.
- Enhance understanding of local landscape of services.
- Need for an implementation and action plan.
- There is a key role for community supporting people.
- Co-accountability and cooperation between providers to ensure a good service for residents.

Recommendations for action plan

- **Communicate effectively the range of services** on offer with high quality information sources in various languages that meet accessibility guidelines.
- **Conduct regular outreach and feedback with residents and service users** to ensure service meet needs and expectations. This is not a single consultation but a continuous conversation as services are developed and refined. Changes because of feedback should be regularly communicated back to those who shared their experience and idea, to show the benefit of user insight.
- **Ensure the first priorities are addressed to support early intervention and prevention.** This includes mental health and reducing barriers that cause health inequities.
- **Develop a better understanding of the adult social care landscape to enable a joined-up range of services.** This includes the effective use of community assets.
- **Prioritise addressing the role that accommodation, and specifically housing, have in supporting service users to live independently.**
- **Ensure there is a clear action and implementation plan with co-accountability and measures of success.**

Insight

This section presents a more detailed overview of the responses we received from the discussions and suggestions that were proposed.

Methodology

Participants were asked to respond to the six priorities of the draft Adult Social Care Strategy shown below:

The six priorities for our Adult Social Care and Health strategy refresh are:

Think imaginatively about how to **support people earlier** as effectively as possible

Maximising independence through a focus on person-centred outcomes

Providing high quality care and services, and **identifying and reducing any inequalities**

Improving the **accessibility and capacity of accommodation** by working with housing partners

Embed resident voice within **individual, operational** and **strategic** decision making

Work with **health partners to align services**, providing the right support in the right place

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We compiled all comments to each priority and then using a grounded theory approach (Glaser & Strauss, 1967) we analysed the suggestions and classified them to the themes that is shown in the table above.

The aim of this report is to represent the range ideas that we heard with some opportunities to support the development and implementation of the adult social care strategy in Croydon.

Priority 1: Think imaginatively about how to support people earlier as effectively as possible

Residents want to be proactive, before social workers are involved. Therefore, providers need to raise awareness of what services and support are available early on. There is a role here for community assets and supporting carers and an emphasis on prevention and early intervention.

Priority recognised

“Clarify what supporting people ‘earlier’ is – at what stage.”

“Do we have evidence from other areas of what works well that can be used as a myth buster?”

“Health in all policies, need for internal departments in the Council to understand the wider health agenda and embed in their work.”

Raise awareness of available services and support

“Early support through discussion about what is available in the area and how to access it.”

“What is the first point of call for social care?”

“Publicise services to the elderly.”

“Awareness of services and how to access them – important to ensure people know where to go.”

Maximise role of community assets

"Community asset's role in social isolation – enhance and make visible."

"Make use of existing assets like libraries as hubs – what does this look like?"

"Through day centres such as Pop In."

"Don't close them."

"Talk, coffee mornings."

"Use social prescribers, GPs, etc."

"Re-introduce 'Good Samaritans' for people who are housebound – volunteers who visit, shop, talk."

"Volunteer 111 service."

"Support the voluntary sector/voluntary and community sector partnerships."

Supporting carers

"Identify wants and needs of carers (including kinship, unpaid)."

"Better carer identification, encourage people to access support."

"We need to do preparatory work with unpaid carers, so they have support plans in place in case of an emergency or planned surgery for the unpaid carer, to avoid rushed unreliable placements."

Focus on early intervention and prevention

“Early help by sorting out what needs to be done to help someone to continue with their existing hobbies and activities.”

“Listen and take people’s concerns on board, listening to people is key.”

“Proactive approach through GPs.”

“Food – ensuring the high street is not littered with junk food.”

“Food, exercise and wellbeing starting in schools.”

“Exercise and wellbeing – health provider needs to be more culturally sensitive and aware and provide support without judgement and tailored to community needs.”

Emphasise importance of mental health

“Greater focus on intervention earlier with individuals.”

“Push further with community and prevention approaches to mental health.”

“Better support for people with mental health problems.”

“Recognise and support the contribution of communities, housing and employment.”

Priority 2: Maximise independence through a focus on person-centred outcomes

There is a need to focus on helping residents be more independent, from increasing trust by residents of whom is coming into their homes to help, to understanding resident needs, individualising support and considering the environment.

Keep people informed around their concerns

“Listen to and hear concerns.”

“How to overcome concerns around strangers coming to the home to provide support. Provide name and who they work for in advance. Arrive with ID and registration.”

Reach out to hear what would help people achieve this

“Attend resident meetings in the community at a time that is suitable for various people.”

“Provide interpreters and BSL translators.”

“Rely less on people coming along to a meeting/venue.”

Individualise support

“Social confidence for those who are socially isolated – counselling to build confidence.”

“Community to overcome social isolation.”

“Motivation and listening, asking and sign posting.”

“For people with progressive disease that makes a person frail and also live on their own.”

“To sell off a flat and avoid the social isolation of being frail living on their own in a flat.”

Embracing care of the environment

“Embracing care of the environment and collaborate in living around a better environment.”

Priority 3: Providing high quality care services and identifying and reducing any inequalities

Croydon is diverse, so we need to make sure our residents receive the best quality service, regardless of their background. To do this they need to be effectively engaged, involved and supported according to their needs. There is a need to focus on inequities (lack of fairness or justice) in accessing or using services) not just inequalities (lack of equality).

Recognised

“Housing, poverty and employment has to be addressed to make this strategy work.”

“Ensure health inequalities is not an add on but part of all that we do.”

“What do we mean by high quality care – does this raise expectations?”

Engagement and involvement plans

“Have a proper engagement/involvement scheme that enables residents and public members to engage with health and social care services.”

“Ensure that young people are invited to this meeting and encouraged – motivate them to participate.”

“Go out to meet people where they are – takes more time but will engage with different people.”

“Information from reports on complaints/feedback/other sources to the Council directly and via Councillors.”

Give people the support networks they need

“People with support networks are more likely to receive support.”

“The extent of VCS provision – use these organisations, continue to find/resource them.”

“Services for those people who can’t get out and take them out to see places and people.”

“Focus resources locally on local needs, e.g. some areas will have particular needs for Learning Disability services.”

Address specific barriers to care that reinforce inequities

“NHS Postcode lottery – sort it out.”

“Better recruitment of staff (vocation not wages).”

“Hospital weekends should NOT make a difference to quality of care.”

“Dignity – person centred care.”

“GP referral for a second opinion.”

“Choice of hospital for patients.”

“Appointment system.”

Provide effective languages support and communication

“Effective language use/interpreters, good information in different languages.”

“Better communication.”

Priority 4: Improving the accessibility and capacity of accommodation by working with housing partners

Accommodation is an important factor in supporting people with their independence. Commissioners and providers need to know lived experience and consider how housing can affect independence and quality of life and how joined-up services can enable this.

Lived experience – what it is like for the person and those around them

“Conversations with each persons’ different needs and of those around them (family/carers).”

“Be understanding about problems with money given directly to carers, e.g. budgeting and sanctions for mistakes.”

“Need support workers available to help people with social care needs to maintain their tenancy, e.g. help with neighbours, managing their money.”

“Awareness of how to live with little money and protecting the environment.”

Availability of homes/housing capacity

“Building in stability of homes.”

“Housing – sort out so there is more of it.”

“Expansion of shared lives – but home owned by someone already.”

“Manage decline of nursing and residential settings.”

“Adapting current housing stock to the needs of the population whilst ensuring that we are environmentally friendly.”

“Building a wider range of social housing.”

“Can we explore planning regulations where needed?”

Joined-up working as standard practice

Who takes ‘ownership’ of the whole holistic package?

“Standard practice/conversations with occupational therapy and housing – joined up working that should be standard practice.”

“Informed of outcomes so the correct preparations can be organised.”

“Convalescence time or support need?”

“Education – local services and collaboration

Priority 5: Embed resident voice within individual, operational and strategic decision-making

We want to ensure that residents and partners actively influence our decisions, so services in Croydon meet their needs. Creating regular channels for effective feedback is essential as is proactive outreach within communities.

Recognised

"Definitely yes."

"Quotes like this are half the problem! This isn't plain speaking – too highbrow!"

"Where are patients involved in all levels of strategic and operational decision making?"

"Voluntary and Community Sector and local community groups that are already connected – use these routes more."

"Explore the approach to neighbourhoods working – putting local communities and their needs at the centre of (re)design."

"Better family engagement and involvement, listen to our communities – All of Them!!"

Effective and independent feedback to improve services

"Something independent like Healthwatch!!"

"Embed residents voice by having a way of gathering and analysing people's feedback on services so that commissioners can use it to improve services."

"More work needed to empower and embed local decision-making forums, e.g. Patient Participation Groups (PPGs), local forums."

"Local Authority to ensure this strategy (is embedded) with housing partners to ensure commitment to accessibility and capacity, whilst holding them to account too."

"Volunteers aren't always best placed (can have own agenda and not around for long)."

Priority 6: Work with health partners to align services providing the right support in the right place.

There is an assumption that this should be happening already, but nevertheless, the need is recognised as important, with realistic and effective measures and targets and accurate mapping of local needs and services.

Recognised

“Yes, it should already be happening!”

“Need more joined-up services that link to different health, social and voluntary groups.”

“Need more joint working, not silo working.”

“How will you collaborate with all organisations to make this work?”

“Ensure targets are not only numerical but focus on quality, outcomes and impact.”

“Focus on care across the lifespan.”

“Have the outcomes and deliverables from previous health and social strategy to agree next steps.”

“‘Well seamed’ as opposed to ‘seamless’ – for a garment this gives shape and structure that others can see/understand – this is something that the policy lead for community care once told us.”

Enhance understanding of local needs

"Identify through engagement and mapping of current services where the gaps are."

"Using data to identify various community areas' needs, provide services that meet these needs and have regular reviews."

Enhance understanding of the local service landscape

"Cost and who funds what is often the cause of block and inadequate resources."

"What are the overlaps or similarities in functions?"

"How do we expand community hubs?"

"How do we manage health needs in care homes?"

Listen and work with possible solutions from residents and communities

"Case worker assigned to link with or assist others to make this happen."

"More time with carers/support workers for those who live on their own (in a flat) and cannot walk."

"Health literacy – tackle concerns around institutions, VCSF key role."

"Digital outreach so care including remote care is accessible."

"Increase digital alignment so Apps and patient portals are more joined-up."

“Ensuring good, positive ongoing and cross working relationships between local Authority and Integrated Care System/Health Services to ensure links between health and social care.”

“Surrey – Flag Up System – regular GP attendance and meet individual needs e.g. provide autism quiet spaces.”

General points relating to the strategy as a whole

While analysing the response, Healthwatch Croydon found some overall themes that relate to the strategy. While these are not direct ideas from the event, so are not represented as direct quotes, these bring together further themes for consideration. The final section on co-accountability does include some direct quotes on the potential of this as it was mentioned at the event, but could be applied generally on the subject.

Several comments around putting this all into practice, the need for a clear plan with actions that explains what these will mean for residents, what difference will they experience?

Importance of outreach

Recurring theme that was reinforced in the Q&A.

Need to visit and go out to meet groups to find out what they want – not always coming to you.

Key role for community supporting people

Need to let the community know what services we offer, where and how to access.

More advocates for those (or their families/carers) who cannot work the system and can't speak up.

Support more community centres to get mobile and actively visit people in the community as well as including social enterprises.

Better communication about expectations and pathways

Good written communication about the type of service/care that a person can expect.

Written pathway that make it clear what happens next and the possible timescale.

Better sharing of information – between service providers and with individuals and the people they want to be kept informed.

Co-accountability and success measures

These were mentioned as quotes in one specific section but have a relevancy across the strategy.

“How do we ensure that all organisations hold each other to account?”

“Are organisations marking our own homework?”

References

Glaser, B., & Strauss, A. (1967). *The Discovery of Grounded Theory*. Aldine Transaction.



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