Arthritis Care is the UK’s largest organisation working with and for all people with arthritis

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www.arthritiscare.org.uk

Registered charity numbers 206563 and SC038693.
Legal status: Charitable company limited by guarantee and not having a share capital. Each member of the board and member of the charity guarantees the company the sum of £1.

Pictures posed by models for illustrative purposes only.

LIVING WITH ARTHRITIS
Our new strategic direction from 2014 to 2017
Our vision has always been of a world where people with arthritis can lead full and active lives. That commitment has never changed – and it never will. And in so many ways it doesn’t seem that much to ask for. But we know that we now have to find a new way to realise this vision against a backdrop of significant changes.

We are not alone in facing these challenges. Most charitable organisations are facing a decline in giving combined with changes to grant awards and an emphasis on commissioning new contracts. This plan is more than our response to these challenges. This is an opportunity for Arthritis Care. Yes, we have to change but we want to change too. And we are not at a standing start. Throughout 2013 we have been investing in our future and making changes so the future is a chance to both build on past and current achievements and redefine ourselves. We are confident that we’re more than up to this.

The strategy has been developed by the Board of Trustees alongside the Senior Management Team. It has been informed by the views of our staff, volunteers, members, supporters, beneficiaries and healthcare professionals to create a shared vision and mission.

We want to have a greater impact and hold ourselves to account, satisfying ourselves that we are using our funds as effectively as we possibly can to maximise the impact on the lives of people living with arthritis. That has been the starting point for this review: we can have a greater impact and we need to ensure that we explore all possible avenues to bring in new funding.

What is clear is that we don’t operate alone. Arthritis Care is more than just a national organisation. We have members, supporters and branches across the four nations. To fully deliver the potential of our shared impact we know we have got to work hard to break down any sense of the ‘them and us’. This is no time to be working alone but old partnerships have to change and new partnerships need to be established on new terms.

We have achieved so much in the life of our previous plan and as an organisation we’re not new to facing challenges. We’ll draw on this learning as we move into this next phase, making sure we manage the transition as we go. This is our chance to create a new and lasting legacy, one where we reach more people with arthritis, and their families. We’re deeply committed to doing just this.

Judi Rhys, Chief Executive
Susan Cheetham, Chair

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ABOUT US

“THE PAIN IS MY CONSTANT COMPANION AND AT TIMES I GET EXTREMELY TIRED AND DEPRESSED”.

We will:

- Constantly strive to deliver the best and be the best at what we do.
- Challenge, question and fight to deliver the improvements people living with arthritis need.
- Never lose sight of what it means to live with arthritis, gathering evidence and insight and applying this in all we do.
- Focus on the person, delivering tailored services and choice with no expectation that one size fits all.
- Be inclusive, working in partnership to reduce the inequalities that confront those living with arthritis.

Our vision
Our vision is of a world where people with arthritis can lead full and active lives.

Our purpose
Our purpose is to empower people with arthritis through support and information, ensuring their voices are heard and their conditions are effectively managed.

Our values
Arthritis Care is committed to living and working by the values we have set ourselves. This is about how we deliver our services and the choices we make. It is about how we work with, support and develop our staff and volunteers. And it crucially informs our expectations of all our partners across all sectors.

HOW WE CURRENTLY WORK

- We are the only charity led by people with arthritis and users of health services, tackling all forms of arthritis. There are 10 million people with arthritis in the UK.
- We have 12,000 members and over 170 branches and support groups across the UK.
- The significant majority of our volunteers are people living with arthritis themselves offering a uniquely personal and patient perspective.
- In 2012 1,250 people with arthritis attended our self-management courses. In 2013 we more than doubled the number of people receiving our self-management support.
- Corporate Fundraising is a growth area for Arthritis Care and we are already seeing substantial increases in this area of support.
- Our new magazine “Inspire” was introduced in 2013. This quarterly publication is now sent out to over 20,000 people and we are working with new corporate partners to increase its reach. We are working towards increasing the distribution of this magazine to 100,000 people within 2 years.
- In 2013 our Helpline managed over 8,500 requests for help.
- In 2013 133,000 of our booklets, information and factsheets were either distributed or read online.
- In 2013 we more than doubled our Trust Fundraising income to bring in £138k and we are building a healthy pipeline with larger Trusts for donations in 2014.
- We have around 2,000 regular donors making monthly contributions to Arthritis Care. In 2013 we recruited 1,000 new donors through our Direct Mail campaigns.

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THE IMPACT WE WANT TO HAVE IN THE FUTURE

From 2014 we are prioritising five impact goals for people with arthritis:

Impact goal 1: To increase the number of people with arthritis who are able to manage their pain on a daily basis.

Why this is important
Arthritis is the most common cause of chronic pain in the UK with being the most common symptom of living with arthritis. An average of 85% of contacts to the Arthritis Care helpline is about pain.

8.5 million people in the UK have osteoarthritis and 71 per cent of them – 6 million people - are in constant pain. 1 in 8 people with osteoarthritis live day in, day out, with unbearable pain.

Why this is important
For people living with osteoarthritis in the UK, the vast majority of their care is self-managed, which means the individual manages their medicines, lifestyle and symptoms in order to reduce the burden of their condition and live as full and active life as possible. For those with rheumatoid arthritis who have approached Arthritis Care, 80% have asked for specific information to take back control and manage themselves better.

More than half of people with osteoarthritis say it has a large impact on their lives. This equates to approximately 4.5 million people in the UK. 79% had given up or reduced an activity because of their osteoarthritis. Half give up or reduce walking or being active.

Impact goal 2: To improve the health and wellbeing of people with arthritis and ensure more have the confidence to manage their condition.

What we’ll be doing:
We will ensure more people living with arthritis have access to and directly benefit from a wider range of effective self-management support.
We will work more closely with the NHS and healthcare professionals to ensure more and better information is available at the point of diagnosis; ensuring that Arthritis Care is there from diagnosis onwards.
We will increase the number of callers to our Helpline.
We will ensure young people living with arthritis have access to support services that meet their unique needs.
We will increase the support we give to the recruitment, development and retention of our volunteers; we will develop new volunteer roles, including in community fundraising, and we will increase the number of volunteers offering self-management support.

What this means for people with arthritis:
• They will have increased knowledge about their condition.
• They will feel more confident to manage their condition.
• They will feel more able to communicate effectively about their condition.
• They will feel better able to cope with their symptoms, including pain.
• They will be more active.

Why this is important
Arthritis has an impact on an individual’s social life, relationships and emotional wellbeing. 1 in 5 people with osteoarthritis give up holidays, hobbies and leisure activities. 1 in 10 find intimacy - such as hugging and sexual relationships - difficult, and 1 in 8 people find socialising and meeting with friends a challenge. In 2012/13 musculoskeletal (MSK) disorders accounted for 7.5 million days lost due to work related ill health*.

Impact goal 3: To reduce the physical and emotional isolation felt by many people living with arthritis.

What this means for people with arthritis:
• They will feel less isolated.
• They will have someone to talk to and someone to help them feel more positive.
• They will have renewed self-confidence and independence.
• They will develop new social relationships.

From 2014 we are prioritising five impact goals for people with arthritis:

We will offer an increased range of local engagement options making it easier for those living with arthritis to engage with Arthritis Care on their doorstep.
We will increase the number of people engaged and supported through our online forums.

"IT HAS MADE ME AN OLD WOMAN PREMATURELY AND I FEEL VERY DEPENDENT ON OTHERS, WHEN PREVIOUSLY I WAS A VERY CAPABLE PERSON".

* The Health and Safety Executive: Annual Statistics Report for Great Britain 2012/13

www.arthritiscare.org.uk

Arthritis Care strategic direction 2014

Arthritis Care strategic direction 2014

Statistics, unless otherwise stated, are taken from the Arthritis Care OA Nation 2012 report.

Arthritis Care strategic direction 2014
Arthritis carries a huge economic as well as human and social cost, estimated at £7 billion annually in terms of lost labour in 2007.

An Arthritis Care survey showed that, when pain is at its most severe:

- 65% of respondents have difficulty making a cup of tea
- 58% of respondents have difficulty making the bed
- 77% of respondents are unable to sleep through the night

Arthritis affects a person’s ability to be independent and to lead a full and active work and family life. When arthritis is at its worst, the simplest of activities becomes difficult, such as getting out of a chair or climbing the stairs.

Osteoarthritis affects the lives of many working people. One third of people with osteoarthritis retire early, give up work or reduce the number of hours they work because of their condition. This has an impact on their independence and self-esteem, and on household incomes, productivity and the welfare estate. 72% of people with osteoarthritis receive no state benefits. 18% are claiming disability living allowance.

Through our policy and influencing work we will ensure the voice of those with arthritis isn’t lost in the welfare reforms.

What this means for people with arthritis:

- They will have access to the support they need to live independently.
- They will have access to the information they need to live independently.
- They will have access to the services they need to live independently.

**ANALYSIS OF CALLS TO THE ARTHRITIS CARE HELPLINE IN 2011 REVEALED THAT OVER 3,000 CALLS WERE RECEIVED FROM OLDER PEOPLE SEEKING HELP BECAUSE THEY FELT ISOLATED, DEPRESSED, WERE LIVING IN SEVERE PAIN OR HAD MOBILITY ISSUES BECAUSE OF THEIR ARTHRITIS.**

**Impact goal 4:** To ensure more people with arthritis can live an independent life, receiving the support they are entitled to.

**Why this is important:**

Living with osteoarthritis comes with a personal financial cost for many people. Two thirds of people report an increase in their own costs, such as travel and treatment, totalling an average of £480 per person each year.

Through our policy and influencing work we will ensure more people living with arthritis have access to and directly benefit from a wider range of effective self-management support services.

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**What we’ll be doing:**

- We will ensure more people living with arthritis have access to and directly benefit from a wider range of effective self-management support services.
- We will continue to produce up to date information on those benefits people with arthritis are entitled to.
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- We will ensure more people living with arthritis have access to and directly benefit from a wider range of effective self-management support services.
“I FEEL EXHAUSTED, DOWN, FORGotten, GUILTy, MISSING OUT ON LIFE”.

Impact goal 5: To improve services and ensure the voice of people living with arthritis is heard and acted on.

Why this is important

People with osteoarthritis are diagnosed on average 2.8 years after they first notice symptoms, though diagnosis times vary across the UK. It takes an average of 3 years for someone to be diagnosed with osteoarthritis in Scotland, whereas it takes an average of 1.5 years in Northern Ireland and 2 years in England and Wales. Generally it now takes longer for someone to be diagnosed with osteoarthritis than it did in 2003.

Most people with osteoarthritis manage their condition with their GP, yet only a third visit with any regularity. For people with osteoarthritis there are strong links between finding their treatment effective and feeling that they are given the time they need with their medical practitioner and the treatment they need. People who have a treatment and care plan agreed, who discuss self-management with their doctor and who set goals are more likely to see their treatment as being effective. Yet only 18% of people with osteoarthritis have an agreed care plan and almost half feel that the NHS does not see their condition as a priority.

What we’ll be doing:

We will put policy at the core of everything we do, using it as the driver for service development and delivery.

We will establish supported self-management as the cornerstone of arthritis services.

We will mobilise people with arthritis to become agents for change.

We will do more to review the performance of local health providers, including through and by our supporters and people with arthritis.

What this means for people with arthritis:

• They will feel more able to influence policy and the shape of services.
• They will have increased knowledge and confidence about arthritis helping them to communicate with their healthcare professionals about their treatment; they will feel listened to and respected.
• They will feel included.

“It’S MOTIVATED ME TO DO MORE IN MY COMMUNITY”. 