

JEWISH CARE

IMPACT REPORT

2025/26



JEWISH CARE SERVICES *at a glance*



162 people attended
3 dementia centres

586

people attended
8 community centres



More than

2,300



active volunteers in
around **2,800 roles**

193

new admissions
to residential care and
retirement living

Almost

26,000



kosher meals delivered

225



people supported by
befrienders per month

1,139

people supported by
**Social Work and
Community Support**



More than

3,600

people supported by Jami
support, education and
Head Room café



Almost

25,000

calls to Jewish Care Direct

WHY OUR WORK MATTERS

Like every public service provider, Jewish Care is facing a set of interconnected pressures that are reshaping how care and support must be delivered. At the same time, the needs of our community are changing – becoming more complex, urgent and diverse. Together, they are changing the support our community needs and how it must be delivered.

THE CHALLENGE

An ageing population with more complex needs



Why it matters

People are living longer, often with dementia, frailty and multiple health conditions, increasing demand for personalised care and support.

Growing mental health needs



Why it matters

More people are presenting with complex mental health needs, increasing demand for earlier intervention, specialist support and effective links with statutory services. Mental health support now sits at the heart of Jewish Care's mission.

Loneliness and isolation



Why it matters

The legacy of the pandemic continues to be felt. Loneliness and social isolation continue to affect older adults, people living alone and those with limited family support, increasing demand for community, helpline and outreach services. Preventive community-based support helps people stay connected and independent.

OUR VISION

**A Jewish community in which everyone feels supported, connected and valued.
Where ageing, illness or hardship can be faced with dignity and purpose.**

OUR IMPACT MODEL

In 2025, Jewish Care developed a Theory of Change to define the difference we seek to make. Our impact statement is simple:

People in the Jewish community lead better lives.

People lead better lives when they can make informed choices, take control of their circumstances, manage their health and wellbeing, feel connected and supported, and have a strong sense of self-worth.

We understand our impact through four connected pillars:



Choice and control

People in the Jewish community have the knowledge, skills and resilience to make informed choices, take control and have agency on their journey.



Health and wellbeing

People in the Jewish community have their health needs met. They are better able to cope with mental and physical health challenges and experience improved wellbeing.



Connection

People in the Jewish community can engage meaningfully, helping them to feel less lonely or isolated, and part of a community.



Identity and self-worth

People in the Jewish community feel heard and understood. They feel comfortable to be themselves and receive support that is person-centred, and respects their identity, needs and wishes.

This model gives Jewish Care a shared language for impact. It helps us be more honest about what we can evidence well, what we are still learning, and what needs improving.



Scan the QR code to view our Theory of Change or visit jewishcare.org/strategy2030



THE DIFFERENCE WE MADE

Jewish Care supports people across residential care, retirement living, community and dementia services, social work and community support, and mental health services through Jami. Together, these services help people remain independent for longer, improve their wellbeing, stay connected and feel valued. The following section looks at the difference this support made in 2025/26.

The evidence collected in 2025/26 shows positive outcomes across all four of Jewish Care's impact pillars. The strongest evidence relates to connection: people feeling less isolated, more socially connected and part of a community.

CHOICE AND CONTROL



Improved resilience

As independent as desired

Access to appropriate support

Greater knowledge

Increased skills

Intended outcomes from impact model

Jewish Care services help people maintain independence, access the right support, make informed decisions and influence the services they use.

Independence in retirement living

Retirement Living residents who responded to the survey described being able to live independently while knowing support is available when needed.



Gives me the freedom to live my life with the opportunity to mix with other tenants and participate in events if I want to, or if I need to be alone, I have my own front door.

Influencing the service

Many respondents felt able to influence the service they receive:

- **Retirement Living:** 97% agreed or strongly agreed that staff and management listen to them (73 responses, 66% strongly agreed).
- **Care Homes:** 90% said they had opportunities to provide feedback and influence the activity programme (146 responses).
- **Day Centres:** 69% agreed they had opportunities to provide feedback and influence the programme.

CASE STUDY:

ONE BIG FAMILY AT SELIG COURT



After a series of falls, 97-year-old David was admitted to hospital and later returned to Selig Court on end-of-life care, with his future uncertain.

At first he found it difficult to accept support, but personalised care, companionship and reassurance helped him build trust with the team and feel safer and more settled. David is now involved in decisions about his care, has chosen to remain at Selig Court and can once again enjoy precious time with his family. His daughter said, "Whoever thought of the phrase 'one big family' got it so right."

IMPACT ACHIEVED

Choice and control

Involved in decisions about his care and home

Health and wellbeing

Personalised care helped him feel safer and settled

Identity and self-worth

His dignity, wishes and family relationships are respected

Informed choice

Results from Social Work and Jami showed evidence of access to support and informed choice. **87% of Social Work respondents said the service made a difference (91 responses), while 100% of new Jami service users said they received the information they needed to decide what to do next (45 responses).**

Progress on personal goals

Jami's mental health team works with clients on goals that matter to them. Across 217 goals set with 120 clients, 51% showed meaningful improvement (meaning they exceeded a change in score of 2.45 when rating goal achievement from 0 to 10) and 48% maintained progress.

Greater knowledge in the wider community

Jami's Education programme included a series of events, often focusing on suicide prevention and Mental Health First Aid, to equip people with the tools and knowledge to respond to people in need of support in their own communities. Following training, 98% agreed that they have gained knowledge, skills or ideas about the topic of the training (99 responses).



For a long time, I was stuck in a cycle of challenges and lacking self-awareness. [Staff] helped me to help myself and find a greater sense of autonomy and change, which I would not have been able to do in the chaotic situation I was in at the time.

HEALTH AND WELLBEING



Feel safe

Sense of hope

Increased self
confidence

Improved
physical health

Improved
mental health

Intended outcomes from impact model

Across several services, people reported feeling safer, experiencing improved mood and mental wellbeing, coping better and benefitting from cognitive stimulation. Evidence relating to physical health was less strong and may not yet be fully captured by current data.

Sense of safety

In **Retirement Living**, the clearest outcome was sense of safety: **99%** agreed or strongly agreed that they feel safe living there (**72 responses, 64% strongly agreed**).

Improving wellbeing

■ **Day Centre:** **90%** respondents said attending helps maintain their mental wellbeing (**163 responses**); **68%** said it helps maintain their fitness level (**161 responses**).

■ **Dementia Day Centres:** **100%** said they enjoyed their day, with **94%** giving a score of **5 out of 5** (**34 responses**). Families described the centres as a “lifeline”, offering respite, reassurance and peace of mind.

■ **Befriending:** **93%** agreed or strongly agreed that the service lifts their spirit and mood (**44 responses, 51% strongly agreed**).



My mental health is most certainly better than it would be living in a house all on my own and worrying about who is ringing my doorbell.

Better mental health

Jami combines survey findings with validated outcome measures completed throughout the year.

In the annual survey, **76%** of respondents said Jami contributed a lot or a moderate amount to improvements in their mental health and wellbeing, and **76%** said they cope better than before (**109 responses**).

Data from the outcome measure IROC (Individual Recovery Outcome Counter) showed that among **64** adult service users, **60%** improved, and **3%** maintained their score. In counselling, only **4%** of clients began at a healthy or low level of distress, compared with **34%** at the end of therapy.



When I come here, I am happy. As soon as I come in, I smile. It makes such a difference to life!

CASE STUDY:

FROM FEAR AND UNCERTAINTY TO HOPE AND RECOVERY



When Aviva and her husband discovered their son was self-harming and having suicidal thoughts, they turned to Jami feeling scared and unsure what to do.

Weekly meetings with Jess, a peer support worker with lived experience, gave them a safe space to talk, change the way they approached conversations, build coping strategies and find new ways to support their son and themselves.

The support helped the family hold onto hope during their son's recovery. Aviva said, "I honestly don't know how we would have managed without Jess and Jami."

IMPACT ACHIEVED

Choice and control

They gained knowledge, skills and confidence to support their son

Health and wellbeing

The family felt safer, more hopeful and better able to cope

Identity and self-worth

They felt heard, understood and supported without judgement



THE DIFFERENCE WE MADE



CONNECTION



Increased social connection

Feel more culturally connected

Feel part of a supportive community

Engage in meaningful activity

Greater sense of belonging

Intended outcomes from impact model

Connection was the most consistently evidenced area of impact across Jewish Care services.

Social connection and sense of belonging

■ **Retirement Living:** 91% agreed or strongly agreed that they feel involved and part of the community (71 responses, 49% strongly agreed).

■ **Care Homes:** 92% agreed or strongly agreed that the activities provide opportunities to socialise and develop friendships (154 responses, 26% strongly agreed).

■ **Day Centres:** connection was the most reported area of impact, including meeting others, getting out of the house, developing friendships, feeling part of a supportive community, and engaging in meaningful activity. 96% agreed the centre enables them to connect with others (164 responses).

■ **Befriending:** 85% agreed or strongly agreed that the service reduces loneliness (44 responses, 43% strongly agreed).

■ **Jami:** 87% agreed or strongly agreed that they feel part of a community of peers who understand and help them (110 responses, 47% strongly agreed).



It shows me and teaches me how to love.

CASE STUDY:

ONE CONNECTION, THREE GENERATIONS SUPPORTED



Daniel joined a Bnei Mitzvah leadership and volunteering session. Although he sometimes finds formal environments challenging, he thrived and enjoyed the experience so much that he now volunteers every school holiday. His mum said the Jewish Care centre “felt like home for him”.

That connection opened a conversation about the wider family's needs. Daniel's grandfather, who is living with Alzheimer's, attended a taster session at the Noé Dementia Centre and now goes regularly; his wife has joined Carers' Tea for peer support; and Daniel's mum is interested in volunteering herself.

IMPACT ACHIEVED

Connection

Daniel's grandfather has greater social connection and his wife has peer support

Health and wellbeing

The family can access specialist dementia support

Identity and self-worth

Daniel found a place where he can contribute, feel valued and be himself

Jewish connection

Retirement Living, Care Homes, Day Centres and Dementia Day Centres all reported high percentages of respondents (82 – 93%) who agreed that the service helps to connect them to their Jewish identity or Judaism in general.¹



¹Retirement Living: 85% agreed or strongly agreed that it helps them feel connected to their Jewish identity (71 responses, 49% strongly agreed). Care Homes: 92% of respondents agreed or strongly agreed that activities and events help them connect to Judaism (154 responses, 31% strongly agreed). Day Centres: 93% agreed that the centre they attend provides a safe space for them to express their Jewish identity (161 responses). Dementia Day Centres: 82% responded positively that the centre helps them connect with Judaism (33 responses).

THE DIFFERENCE WE MADE



IDENTITY AND SELF-WORTH



Dignity is maintained

Increased sense of purpose

Improved self-esteem

Sense of identity is maintained

Feel heard

Intended outcomes from impact model

Identity and self-worth are reflected in people feeling heard, understood, accepted, purposeful and valued. The strongest evidence came from Day Centres and Jami.

In Day Centres, the most frequently reported outcome in this area was a greater sense of purpose, with respondents describing the centres as providing routine, structure, motivation and a “reason to get up in the morning”.



It gives me a purpose. Today I felt not the best. But knowing I'm coming here, it means I'm around people and that makes a difference. The people make a difference.

CASE STUDY:

FEELING HEARD, INFORMED AND IN CONTROL



At a Dementia Carers' Tea, Rachel described the support she had received from Sarah, a Jewish Care social worker, as "wonderful".

Sarah had taken time to listen, understand Rachel's situation and explain information in a way that finally made sense. Rachel learned things she had not known before and felt calmer, better informed and more confident and in control of what lay ahead.

IMPACT ACHIEVED

Choice and control

Clearer information helped her feel more confident and in control

Identity and self-worth

Rachel felt heard, understood and valued



Life is not easy when you struggle with confidence, self-worth, and feeling lost. However, feeling heard, seen, and understood has been healing.

Jami service users also described feeling heard and accepted. Clients described staff listening in a non-judgemental way and offering a safe space to talk.

■ **In Counselling:** 99% reported feeling supported by their therapist and 95% felt understood (81 responses).

■ **Across Jami:** 88% agreed or strongly agreed that they are in a safe space where they are accepted for who they are (110 responses).



WHAT WE DELIVERED IN 2025/26

Jewish Care delivered support across residential care, retirement living, community services, mental health and volunteering. The figures below show the breadth of that work.

Service area	2025/26 in numbers	How this helps
Residential care 	Nine care homes; 83% average occupancy*; 426 of 513 beds filled on average; 172 new admissions	Residential, nursing, dementia and end-of-life care in a warm Jewish environment.
Retirement living 	Four schemes for people over 60; 136 of 141 apartments occupied (96%); 21 new residents	Independent living with flexible care and support available as needs change.
Community day centres 	586 people; 19,000 attendances across eight centres in London, Essex, South Hertfordshire and Southend. Many more attendances to our wider community programme	Social, practical and Jewish cultural activities helping people stay connected and engaged, with transport provided to and from the centres. Activities include quizzes, exercise classes, arts and crafts, discussion groups, and guest speakers.
Dementia support 	162 people; 7,200 attendances across three specialist dementia day centres	Person-centred activities supporting people living with dementia and their families. In addition to Centres, Jewish Care also provides a series of community-based dementia programmes, such as Singing for Memory, Memory Way Café and Movement for Memory.
Meals on Wheels 	Almost 26,000 kosher meals delivered to 263 people through Meals on Wheels	Nutritious meals alongside regular check-ins and social contact for older and isolated people.
Befriending 	Around 14,000 calls and visits; an average of 225 people supported each month	Through telephone calls, home visits and community meet-ups, befrienders provide companionship and emotional support to help reduce loneliness and isolation.

*Intentional reduction in capacity to prepare for refurbishment of Stella and Harry Freedman House in 2026/27

Social Work and Community Support



1,139 people supported

Assessment, advice, advocacy and practical support to help people access services and maintain independence.

Jewish Care Direct



Almost 25,000 phone calls

Information, advice, signposting and referrals to help people find the right support.

Jami mental health services



More than 3,600 people supported (10% increase from last year); around 40,000 interactions; an estimated 18,000 indirect beneficiaries

Mental health treatment and support, counselling, community support, education and suicide prevention, including connection and peer support through Head Room café.

Volunteering



More than 2,300 active volunteers in around 2,800 roles

Volunteers strengthen services while gaining purpose, connection and personal development.

Youth engagement



63 young people

Services include leadership programmes, Bnei Mitzvah, work experience and volunteering opportunities, helping to build confidence, skills and future engagement with Jewish Care.





The site is being renamed the Betty and Asher Loftus in recognition of the involvement and the generosity of the Loftus family to the redevelopment of the whole facility.

Lady Sarah Cohen House

Lady Sarah Cohen was the wife of the late Jack Cohen, the founder of supermarket chain Tesco. Lady Sarah Cohen House, which was opened in April 1997, was named following a substantial gift from the estate of Lady Sarah Cohen with support from her family including her two daughters Dame Shirley Porter and Irene Kreitman.

Rosemary...
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Teresa an...
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Recognition this year

- The Care team won the 2026 UK Dementia Award for End-of-Life Care and was shortlisted in the Specialist Care category at the 2026 Care Home Awards.
- The Community Services Dementia team won the Dementia Care and Engagement Award at the National Activity Awards.



What people told us about our services

Across 1,230 survey responses, Jewish Care's average Net Promoter Score (how likely they would be to recommend Jewish Care) for 2025/26 was 56: above the benchmark of 50 which is considered excellent.

In addition, 90% of 1,226 respondents rated themselves satisfied or highly satisfied with the service they received.

WHAT WE LEARNT

Across the annual surveys, we received feedback from respondents in the following areas:

■ Communication, information and managing expectations

People wanted clearer, more consistent information, including who to contact, what support is available and how they can be involved in care planning. Feedback also highlighted the importance of managing expectations around services, food provision and volunteering.

■ Activities, engagement and meaningful participation

People wanted a wider range of activities and more support to participate in ways that suit their interests and needs.

■ Food quality and service experience

Food was a recurring theme. Feedback focused on food quality, variety, healthiness and cultural appropriateness, as well as clearer information about menus.





LOOKING FORWARD

Looking ahead to 2026/27, areas of continued work and development include:

Helping people remain independent and building strong, connected Jewish communities across care homes and retirement living schemes.

Strengthening dementia and end-of-life support and expertise.

Key developments, including the new Sugar & Ronson Campus in Redbridge and the new Isaacs Day Centre in Golders Green for people living with dementia.

Through Jami, reaching more people through group-based support and strengthening the response to complex and emerging mental health needs.

OUR APPROACH TO MEASURING IMPACT

Jewish Care's evidence base is developing. Most current data comes from anonymous annual surveys, which provide rich data on people's experiences but do not track individual change over time or allow benchmarking against recognised standards. Outcome data was not available for End-of-Life Care or Jewish Care Direct.

These limitations and opportunities have shaped Jewish Care's Monitoring, Evaluation and Learning (MEL) Strategy, balancing robust organisational reporting with service-level learning. The aim is to both prove and improve impact – using evidence to demonstrate accountability alongside strengthening services and learning.

In 2025/26, key foundations were established, including our Impact Model. In 2026/27, the focus will move to implementation through pilot projects, cross-organisational outcome measures, stronger service user involvement and improved data quality.

This will enable future reports to show impact more consistently, and enable us to use insights throughout the year to improve services and decision-making.



Appendix Methodology and the Evidence Base

How do we know we made a difference?

Most data in this report comes from annual surveys conducted between January and March 2026. Questions focused mainly on satisfaction, with relevant outcome questions and qualitative responses analysed against the Jewish Care impact model.

In relation to the annual surveys, there are limitations to consider:

- Annual anonymous surveys do not allow individual outcomes to be compared over time.
- Many questions are not validated, limiting comparison with recognised benchmarks.
- Response bias: survey respondents may not represent everyone who uses the service, and some people face barriers to completing surveys.
- Courtesy bias: people may give overly positive answers to avoid offending the service, particularly when staff support them to complete surveys.

For Jami, survey data was supplemented with validated outcome measures used throughout the year, including the Individual Recovery Outcome Counter (IROC), Short Warwick Edinburgh Mental

Wellbeing Scale (SWEMWBS), Goal Based Outcomes (GBOs) and CORE-OM in talking therapies. These measures allow before-and-after comparison and benchmarking against thresholds for meaningful change. Additional evidence came from anonymous surveys across Jami services and education.

Gaps and areas of further exploration

No outcome data was available for End-of-Life Care or Jewish Care Direct within the reporting timeframe.

Meals on Wheels currently has limited evidence against the impact model because feedback focuses mainly on convenience rather than wider outcomes. Different methods would help capture its impact more fully.

Befriending evidence is strong on one-to-one connection and reduced loneliness, but weaker on broader social life and community belonging: 20% disagreed or strongly disagreed that the service improves their social life and helps them feel part of the community (44 responses).

A small number of relatives of Dementia Day Centre members reported declines in physical mobility, communication or quality of life. Whilst we aim to slow the rate of decline, these results may reflect the natural deterioration that some clients experience as their condition progresses.

FIND OUT MORE ABOUT JEWISH CARE'S WORK AND HOW YOU CAN HELP MAKE OUR VISION A REALITY.



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Call 020 8922 2600 or email donations@jcare.org



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