

A Review of Hillingdon's Shared Lives Scheme



Social Services, Housing & Public Health Policy Overview Committee

Members of the Committee

Wayne Bridges (Chairman)
Teji Barnes (Vice-Chairman)
Peter Davis
Jas Dhot
Beulah East (Labour Lead)
Ian Edwards
Becky Haggar
Manjit Khatra
Shehryar Wallana

Co-opted Member
Mary O'Connor

Contents

Chairman's Foreword	3
Recommendations	4
Overview	5
Examining the Effectiveness of The Current Arrangements for the Shared Lives Scheme	6
Proposed Improvements to Enhance the Scheme	10
Appendices	13



CHAIRMAN'S FOREWORD

First and foremost, our review highlighted the positive difference the Shared Lives Scheme is having on resident's daily lives and the increased choice and control it affords them.

Building upon the learning and understanding established during the Committee's previous reviews of the Personalisation agenda, we were acutely aware of how important it is to provide accommodation, care and support to all residents with long term care needs and, in particular, those whom are vulnerable and in need of greater assistance.

Although most of the Committee were familiar with the long term care options of either residential care or supported living, many Members had not encountered the Shared Lives Scheme before. It was therefore important from the outset of the review to understand what the Scheme was and how it operated, as well as how it was performing in comparison to other neighbouring Local Authorities.

The second aspect of the review focused on developing proposals to improve the Shared Lives Scheme and suggest ways in which the Scheme might be taken forward in the future. Having considered these twin aspects, we concluded that, within existing resources, consideration should be given to doubling the size of the current provision at first and then possibly to further expansion at some point in the future.

To explore these areas the Committee heard from a wide range of witnesses both internal and external. The Council's officers provided a valuable overview of the operation of the current Shared Lives Scheme and we heard how the schemes in Ealing and Harrow functioned, as well as some of the generic challenges faced by all Local Authorities with Shared Lives Schemes. Members were also keen that this review should not just focus on the high level issues facing the scheme but that it incorporated the day to day experiences of carers and service users who use the scheme and could offer a unique perspective.

Consequently, as well as hearing evidence in a Committee setting, a limited number of the Committee visited Carers and Service Users in a home setting to gain further knowledge of the scheme as well as practical ideas as to how it might be improved. These insights enabled us to produce a valuable report that affirms the Scheme and sets out proposals for the future. For this, the Committee is enormously grateful.

Councillor Wayne Bridges

Chairman

Social Services, Housing & Public Health Policy Overview Committee

RECOMMENDATIONS

Following the witness sessions with Officers, representatives from neighbouring boroughs, service users and carers, the Social Services, Housing and Public Health Policy Overview Committee saw it fit to recommend:

- 1. That the Committee commend the Shared Lives Scheme to Cabinet and recognise the good work undertaken by Officers to develop a successful scheme that delivers much improved quality of life to the participants and has the capacity to deliver modest financial savings.**
- 2. That there are potential challenges in the scheme, including safeguarding, and that any proposal to develop the scheme should ensure robust management such as is currently in place.**
- 3. That the Cabinet Member for Social Services, Health and Housing and the Leader of the Council, consider extending the scheme, as identified in the review, in the first instance by 100% (i.e. to total 40 Service Users) and that potential savings arising from this be investigated for inclusion in the MTFF from 2016/17.**
- 4. That consideration be given to further development up to the optimal size (80 service users) once the initial extension has been successfully undertaken.**
- 5. That any extension of the scheme is dependent upon appropriate matches being found in the community and that consequently the time frame needs to be flexible.**

OVERVIEW

While the Committee were fully aware of supported living and residential care options for disabled adults and older people, most of the Committee were unaware of the Shared Lives Scheme. Currently, Shared Lives is used by around 12,000 people in the UK and is available in nearly every area.

Shared Lives carers are recruited, vetted, trained and supported by local Shared Lives schemes, which have to be registered with the Care Quality Commission (CQC), the Government's care regulator.

Shared Lives operates by putting a Shared Lives carer in touch with someone who needs support so that they get to know each other over time, and once a bond has been formed, they share family and community life. Essentially, the service user becomes a regular daytime or overnight visitor to the Shared Lives carer's household, and may eventually move in with the Shared Lives carer. In a great number of cases, these relationships can be lifelong. Having heard from a number of Carers during the course of the review, many remarked that clients were deemed to be "one of the family". The Committee learnt that people who used Shared Lives had often moved between a number of care environments and may have been considered too "challenging" to live in an ordinary household, but had found that for the first time, Shared Lives offered a real solution and sense of belonging.

From a financial stand point, the Committee heard that Shared Lives carers were paid a modest amount to cover some of their time and expenses. However, they were not paid an hourly rate and a considerable amount of what they did was unpaid and seen as a vocation rather than a form of employment. The Committee were encouraged to learn that whereas other types of adult care could become preoccupied with ensuring clear professional boundaries were delineated, Shared Lives offered the opportunity for everyone to contribute to real relationships with the goal of an ordinary family life.

Shared Lives is used by people with learning disabilities, people with mental health problems, older people, care leavers, disabled children becoming young adults, parents with learning disabilities and their children, people who misuse substances and (ex-)offenders. There are already 12,000 Shared Lives carers in the UK, recruited, trained and approved by 150 local schemes.

In 2010, the CQC inspectors gave 38% of Shared Lives schemes the top rating of excellent (three star): double the percentages for other forms of regulated care. When people labelled 'challenging' have moved from care homes or 'assessment and referral units' into Shared Lives households, annual savings of up to £50,000 per person have been realised. The average saving to a Local Authority is £13,000 per person, per annum.

The report has been structured to reflect the Committee's two main areas of concern:

1. Examining the effectiveness of the current arrangements for the Shared Lives Scheme
2. Proposed Improvements to Enhance the Scheme

EXAMINING THE EFFECTIVENESS OF THE CURRENT ARRANGEMENTS FOR THE SHARED LIVES SCHEME

At the outset of the review, Officers explained the aims and objectives of the Shared Lives Scheme. The Committee learnt that it was open to adults aged 18 years or over with a learning disability, recovering mental health problem, physical or sensory disability or someone who needed support because they were an older person.

Officers highlighted the flexibility of the scheme and described how it could be used in a number of ways, including as a means of support for families who were caring for a dependant relative by offering periods of respite care and to assist in rehabilitation or convalescence. The scheme could be used by people who did not need nursing or residential care, but would benefit from a supportive caring environment as a step towards moving on towards good health management and independence. As well as offering long term accommodation and support for people who wished to live with a family, Shared Lives offered the opportunity of being an active part of the community and a viable alternative to living in a large residential home, hospital setting, or alone. A final role included as an ongoing arrangement for young people who had lived with foster carers, who will have an ongoing social care need into adulthood.

During the early stages of the review, Officers provided a number of written and verbal reports covering a wide range of areas to establish what the current arrangements were. These included the size and uptake of the scheme, its operational and management footing as well as how the scheme was funded.

Size and composition of the scheme

Discussing the size and composition of Hillingdon's Scheme, it was noted that there were currently 20 adults placed by Adult Social Care with Shared Lives carers in Hillingdon and 21 registered carers. In addition, some carers were registered as respite carers, which not only gave additional capacity and support to those in the scheme but also those who needed a break from caring. Officers explained that presently there were 6 residents who lived at home with family carers who received respite short breaks as part of their agreed care package and chose to use the Shared Lives scheme carers for this. This compared favourably with Harrow's scheme which was a similar size, whereas Ealing's was somewhat less developed than Hillingdon's.

Location and operational footing

Officers explained the scheme was administered from 3 Merrimans House, a Registered Care Home that provided 9 beds for respite care for adults with a learning disability in Hillingdon and there were three Shared Lives officers who totalled 2 full time employees. Shared Lives officers recruited, trained, supported, monitored and reviewed carers who provided placements. Further roles included conducting environmental risk assessments of people's property and providing ongoing support to carers to ensure that they were equipped to provide a high quality service.

Providing an overview of the managerial and operational details of the scheme, the Committee heard that the line management and CQC registered manager role of the scheme was shared with the Respite Care service. The advantage being, that the co-location of these two services gave residents choice about how they took their respite breaks, either in a family setting or within the care home buildings based service. The Committee were encouraged that Shared Lives respite carers also offered the additional

capacity needed and at times that were convenient to residents and families and had at times taken people in an emergency to support carers.

Funding Arrangements

The role of the scheme is to support the carer, with the resident being supported by the Social Worker. When a match is found for both the carer and the resident, following an assessment of need, a 'placement' with the carer is made. This placement might be a 'permanent' or long term arrangement, or short term placements for respite short breaks.

Placements are funded in three tiers to ensure that the carer receives the proportionate level of funding per level of support and care required. This process ensures that those with prompting and guidance requirements, such as those with enduring mental health issues are considered a 'band 1' whilst those with high level physical care needs and 24 hour supervision are considered 'band 3'. The following payments are made to the carer on a weekly basis depending on the banding:

- Band 1 - £ 323.89
- Band 2 - £ 375.00
- Band 3 - £ 450.00

Residents are financially assessed as part of their needs assessment and paid eligible contributions and those who are eligible are guided and encouraged to claim housing benefit to help contribute towards their accommodation costs especially as these accounted for a third, to a half of the schemes overall costs. However, in some cases, residents might be ineligible to claim benefits if they have no recourse to public funds. Placing those people within the scheme is clearly a cost effective way of achieving positive outcomes for residents.

The Committee learnt that at present, the overall establishment annual budget is £ 77,300 and placement costs are paid from the relevant service area placement budgets.

Assessing the effectiveness of the scheme

Having heard how Shared Lives operated, the Committee were eager to gauge its effectiveness. To do this, Officers prepared a series of costed case studies which were considered at the October meeting . These clearly illustrated the positive impacts that Shared Lives placements could make to an individual across a wide spectrum of need and highlighted how these placements significantly reduced costs when compared to residential and support living options providing the same levels of long term care. Representatives from Harrow and Ealing echoed these sentiments and agreed with the national best practice information which had been shared which indicated that Shared Lives offered:

	Traditional forms of long term residential care, nursing care and supported accommodation	Shared Lives	Saving
Learning Disabilities	£60K per person / per annum	£34K	£26K
Mental Health	£28K per person / per annum	£20K	£ 8k

As well as considering theoretical data, the Committee gathered evidence from a series of Carers and Service Users in a variety of home settings. What the Committee were keen to establish was the difference the scheme was making, looking at whether or not Shared Lives was embedded in the community, and to test whether it allowed people to lead ordinary lives in the community and if service users felt like part of the Shared Lives Carers family with wider access to social networks.

In this respect, it was affirming that all the Service Users described their experiences in positive terms and highlighted that they were satisfied or very satisfied with the support they received. Summarising the tone of the home visits, as well as hearing from a carer in a committee meeting setting, positive outcomes experienced by service users included:

- Living the life the person wants
- Developing a person's confidence / life skills and independence
- Enabling increased choice and control
- The ongoing relationship between the person and the Shared Lives carer
- Having different experiences
- Enjoying wider social networks
- Increased self esteem
- Becoming an integral part of the Shared Lives carer's family and networks
- Greater integration in the community
- Physical and emotional well-being
- Being safe
- Being able to build personal relationships and sustaining this with relatives
- The increased possibility of employment.

The case studies and the site visits showed that a major difference between Shared Lives and other forms of support services was the real choices this afforded service users and the how flexibility and individualisation of Shared Lives services allowed service users to help tailor their support needs. With this in mind the Committee agreed that:

1

That the Committee commend the Shared Lives scheme to Cabinet and recognise the good work undertaken by Officers to develop a successful scheme that delivers much improved quality of life to the participants and has the capacity to deliver modest financial savings.

Hearing about how the bond developed between the service user and carer over time, the Committee saw how trust networks developed and how these were affirmed by the consistent level of care Shared Lives was able to provide.

Service users explained how the activities they undertook in their daily lives had changed as their confidence, skills and independence had increased and carers highlighted how by offering flexible care and support, there had been a reduction in the need for costlier interventions.

As well as hearing a considerable number of positive messages about how, the scheme was operating and the excellent outcomes for service users, the Committee touched on the challenges faced by the scheme. These are developed further in the second major

section of the report. However, one area where the Committee raised concerns was adult safeguarding and the measures in place to reduce instances of abuse.

Adult Safeguarding concerns

The Committee recognised that there would be some circumstances when service users chose either to move as their needs/circumstances changed over time or transferred to a different care provider. To ensure service users were protected and safeguards were in place, the Committee was encouraged to learn that:

- In the event of a safeguarding alert, Hillingdon holds a case conference with all relevant and appropriate parties to establish the best way in which to safeguard users. In the event that a protection plan is required to be actioned, a move to an alternative carer within the scheme or alternative care provision will be swiftly arranged to suit the needs of the user. In cases where immediate action is not required but it is necessary for someone to move on, a suitable transition will take place.
- All carers undergo a probationary period and the training provided to carers is personalised to the challenges they face. The training period is unspecified and, as the relationships between service users and carers take time to develop, there is reduced likelihood of there being an incompatible match.
- The Scheme does not use Agency staff. All carers once registered are recruited on a self employment basis so there are no void posts.
- Nationally, Shared Lives schemes are regularly monitored and Shared Lives are scrutinised on average 4 times more frequently than other Adult Social Care areas.
- There are a variety of feedback mechanisms which include: the family, social workers and care workers. In Hillingdon, service user's main point of contact is their social worker but they are also encouraged to complete surveys twice a year to ensure there is ongoing feedback.
- As well as being subject to a CQC inspection regime, the Shared Lives scheme is regularly inspected by the Council's Internal Audit Department.

Consequently, the Committee recommended:

2

That there are potential challenges in the scheme, including safeguarding, and that any proposal to develop the scheme should ensure robust management such as is currently in place.

Concluding the first element of the review, the Committee agreed that Hillingdon's Shared Lives Scheme delivered high quality care are relatively low cost and had the potential to deliver further savings whilst meeting the desired objectives and outcomes for service users. In terms of longer term dividends, these included the impact Shared Lives could have through prevention and early intervention by supporting different approaches to service delivery and through lessening the predicted impacts of rising social care costs.

PROPOSED IMPROVEMENTS TO ENHANCE THE SCHEME

Given many Members of the Committee were unaware a Shared Lives scheme existed before the start of the review; it became apparent there was scope to make a series of improvements. The second part of the review centred on increasing a general awareness of the scheme and, looking to the future, considered the viability of expanding the scheme and the further work required to achieve this.

Increasing awareness

During the course of the witness sessions, the Committee heard about the steps which were currently being taken to market and highlight the scheme. Actions included the use of posters and Shared Lives publicity materials as screen savers in Doctors surgeries. Other steps included ensuring Shared Lives posters were prominently displayed in a number of municipal buildings, including libraries and also ensuring Shared Lives remained in the public eye by submitting regular articles and advertisements to the Hillingdon People bimonthly magazine.

As Shared Lives is dependent on a pool of registered Carers to operate (as well the availability of suitable accommodation), new and innovative ways of increasing the numbers of carers were welcomed. Hearing how Harrow's scheme had recently grown, the Committee endorsed the use of regular social events to increase the number of carers and appreciated these also provided invaluable networking opportunities.

Developing the general theme of awareness, the Committee agreed it was important to learn what other Local Authorities were doing. Hearing about each training regime, both Local Authority witnesses highlighted the importance of ensuring this was ongoing for carers and noted how useful the introduction of regular briefings in Harrow had been. Conscious how digital technologies were developing, the Committee also touched on the subject of social media as a valuable means of augmenting fixed and mobile forms of internet access. Although Ealing and Harrow had not explored this possibility and it was seen to have value as a means of highlighting the scheme and enhancing the interaction between different stakeholders in Shared Lives.

Considering the viability to expand the scheme

Having concluded early on, Shared Lives delivered positive outcomes for service users and had the potential to deliver further savings, the Committee made a number of enquiries in October and November about the viability of expanding the scheme.

It was noted that any expansion of the scheme would be reliant on a number of factors, such as the recruitment / training and retention of further carers and the availability of suitable accommodation. However, having taken these considerations into account, Officers reported there was scope to develop the service by increasing the number of available placements, by recruiting an additional cohort of approximately 20 carers.

To flesh out this idea, further information was provided on three key issues as shown below:

1. The current costs of the Shared Lives Scheme per annum (20 service users)

Current costs are as follows:

- Team Costs = £67.4k
- Overheads = £9.9k
- Package Costs = £499.3k
- Total Costs = £576.6k per annum

2. How the scheme could be expanded by 100%, to 40 Service Users within existing budgets (as confirmed at the meeting)

As described earlier, there are currently 2 Full Time Employees in the team. The Committee heard that, on the assumption, each officer has the capacity to oversee 20 service users, which is the number recommended by the National Shared Lives Network, as there are currently only 20 service users, the service should be able to be doubled within existing capacity.

With this in mind the Committee recommended:

3

That the Cabinet Member for Social Services, Health and Housing and the Leader of the Council, consider extending the scheme, as identified in the review, in the first instance by 100% (i.e. to total 40 Service Users) and that potential savings arising from this be investigated for inclusion in the MTFF from 2016/17.

Developing this theme further, consideration was given to the viability of possible further expansion at some point in the future, given that a larger scheme had the potential to deliver optimal savings. As a result, the following question was posed:

3. An approximation of the cost of expanding to the optimal figure of 80.

Although this calculation would need some kind of time scale to realise the expansion, officers estimate that the resourcing costs (staffing) would need to double to support the optimum number of 80 users. This would mean that staffing costs would increase by an additional £67.4K and overheads would also increase but not necessarily at the same rate.

At this stage, Officers estimate that an additional £5k should be sufficient. This makes the overall estimated additional revised costs of the extra 2 staff at £72K p.a. The management costs of this service remain charged to the respite care service at present, where the service is based. In the event of a larger scale expansion, alternative accommodation may be necessary and these costs would need to be considered at the appropriate time.

The potential savings/costs that could be generated from having 80 service users based upon the same profile used in the calculation for 20 users provided previously, for illustrative purpose would be as follows:

- Potential saving from moving from a residential care home placement to a shared life placement for an extra 60 service users would be an estimated £900k p /a
- However, placement to a Shared Lives from supported living for 60 service users could see an increase on the costs of the care packages by an additional £160k, but it should be noted that these assumptions do not take into account the additional support over and above the 'core' staffing hours and this may in fact incur significant increases in the supported living costs, balancing out the cost/saving ratios.

These savings are illustrative based upon the profiles used in the cost comparison between Shared Lives placements, Residential Care and Supported Living provided during the review and were current as at October 2014.

Bearing these important caveats in mind, and the prudence of conducting further investigative work before proceeding with any expansion of the scheme, the Committee recommended the following:

4 **That consideration be given to further development up to the optimal size (80 service users) once the initial extension has been successfully undertaken.**

Having explored the financial implications at length, the Committee appreciates that actual savings are likely to vary considerably as the profile for each user is different and the key issue is how to recruit carers with suitable accommodation which then allows the expansion of the scheme. With this in mind the Committee recommends:

5 **That any extension of the scheme is dependent upon appropriate matches being found in the community and that consequently the time frame needs to be flexible.**

TERMS OF REFERENCE

1. To review how Shared Lives is developing in Hillingdon and other local authorities and to review current best practice.
2. To examine the opportunities presented by Shared Lives to prevent avoidable admission into residential and/or hospital, including assisting carers in their caring role.
3. To make recommendations that will help officers and partners address any identified gaps in the role and function of Shared Lives to support Hillingdon residents to remain independent and assist the Council in achieving cost savings.
4. To make any recommendations, with full costings to Cabinet to improve the efficiency and effectiveness of the service as appropriate based upon the findings of this review.

WITNESSES

SESSION 1 – 31 JULY 2014
Tony Zaman – Director of Adult Social Care Neil Stubbings – Head of Housing Sandra Taylor – Head of Service, Early Intervention & Prevention Kim Jebson – Team Manager, Early Intervention & Prevention Mr Sooben – Carer within the Hillingdon Shared Lives Scheme
SESSION 2 – 9 SEPTEMBER 2014
Sandra Taylor – Head of Service, Early Intervention & Prevention Kim Jebson – Team Manager, Early intervention & prevention Caroline Tomlinson - London Borough of Harrow Catherine Kiraz - London Borough of Ealing
SESSION 3 – 7 OCTOBER 2014
Sandra Taylor – Head of Service, Early Intervention & Prevention Kim Jebson – Team Manager, Early intervention & prevention Karl Steenson - SCH&H Operational Finance Manager
SITE VISIT TO SHARED LIVES HOMES - 21 OCTOBER 2014
3 Service Users (A,B and C) 2 Carers (X and Y)
SESSION 4 – 5 NOVEMBER 2014
Sandra Taylor – Head of Service, Early Intervention & Prevention Kim Jebson – Team Manager, Early intervention & prevention Tim Dauncey - SCH&H Operational Finance Manager