Contents

Section 1: About Shared Lives ................................................................. 5
  Introduction to Shared Lives Guidance ............................................... 5
  Definitions ........................................................................................... 5
  Principles underlying our approach are as follows: .................................... 7
  Responsibilities/accountability ............................................................... 7
  Defining Shared Lives ........................................................................ 9
  Terms used in Shared Lives ................................................................. 12

Section 2: Processes for Shared Lives arrangements ................................ 15
  Referral to the Shared Lives Service ...................................................... 15
  Assessment of Needs ........................................................................... 16
  The Matching Process ......................................................................... 17
  Urgent and Emergency Shared Lives Arrangements ................................ 19
  License Agreement for Shared Lives ..................................................... 21
  Adult Plan, Monitoring and Review of Shared Lives Arrangements ........... 23
  Transition and Mixed Child-Shared Lives Arrangements (Formerly Adult Placement) ...... 42
  Intergenerational Practice for Shared Lives and Homeshare Arrangements ............ 46
    Intergenerational Practice .................................................................. 46
    Intergenerational Practice and Shared Lives .......................................... 47
    Intergenerational Practice and Homeshare ............................................ 48
  Payment Model for Long Term Shared Lives Carers ................................ 50
  Funding a Shared Lives Arrangement .................................................... 57
  Managing Transport Costs in ‘Long Term’ Shared Lives Arrangements ........... 63
  Disputes - Protocols for Shared Lives Plus Role ...................................... 67
  Protocols and Agreements for Sharing Shared Lives Carers Between Schemes ...... 70
  Who Would be Expected to Pay for What? .............................................. 72
  Personal Budgets and Direct Payments in Shared Lives Arrangements ............. 76
  Ending a Placement ............................................................................ 78
Section 3: Supporting people in their daily lives .......................................................... 80

Communication, Choices and Decisions ........................................................................ 80
Family, Friends, Culture and Community ...................................................................... 81
Safe Friendships and Relationships .............................................................................. 83
Personal Care .................................................................................................................. 85
Staying Healthy and Making Use of Health Resources ............................................... 86
Responding Positively to People whose Behaviour Challenges Services .................. 88
Dealing with Emergencies and Crises ............................................................................. 91
Palliative or End of Life Care, Death and Dying ............................................................ 93
Being missing from a Shared Lives arrangement ............................................................. 94

Section 4: Health and Safety ......................................................................................... 95

The Health and Safety at Work Act 1974 ...................................................................... 95
Shared Lives Carer Health and Safety Checklist ............................................................ 97
Risk Assessment and Risk Management ...................................................................... 102
Safe Working Practices (Including Moving and Handling) ......................................... 103
Accidents, Dangerous Occurrences and First Aid ....................................................... 105
Control of Substances Hazardous to Health (COSHH) ............................................... 113
Hygiene and Infection Control ..................................................................................... 114
Medication .................................................................................................................... 116
Medication Profile ........................................................................................................ 118
Shared Lives – Medicine Administration Chart .......................................................... 119
Disposal of Medication ............................................................................................... 121
Food Safety, Nutrition and Hydration .......................................................................... 122
Lone Workers ............................................................................................................... 124

Section 5: Safeguarding ............................................................................................... 125

Safeguarding Against Abuse and Neglect ................................................................. 125
In the case of an allegation of abuse or neglect against a Shared Lives carer or a member of their household ................................................................. 128
Safe Management of People’s Money, Valuables and Financial Affairs .................... 138
Harassment and Bullying ............................................................................................................. 140

Section 6: Good practice throughout the service ........................................................................... 141

Equality and Diversity ..................................................................................................................... 141
Standards of Conduct and Practice ................................................................................................. 143
Complaints and Concerns ............................................................................................................... 145
Confidentiality ................................................................................................................................ 147
Quality Assurance .......................................................................................................................... 148
Consultation and Participation in Running the Shared Lives Scheme ............................................ 149
Record Keeping, Access to Files and Information Sharing ................................................................. 151
Smoking, Alcohol and Drugs ........................................................................................................... 154
Communication Choices and Decisions ............................................................................................ 157

Section 7: Recruiting, employing or assessing, reviewing and developing workers and Shared Lives carers ........................................................................................................................................ 159

Learning and Development ............................................................................................................ 159
The Shared Lives Panel Guidance ................................................................................................... 162
Approaches for the recruitment of Shared Lives Carers ................................................................. 191
Recruitment and Assessment of Shared Lives Carers ..................................................................... 196
Record of Pre-assessment meeting ................................................................................................. 198
Shared Lives Carer Application Form .............................................................................................. 201
Equal Opportunities Monitoring Form ........................................................................................... 212
Shared Lives Carer Assessment Form for New Applicants ............................................................... 214
Shared Lives Carer Agreement ......................................................................................................... 235
Guidance on Shared Lives Support Carers ....................................................................................... 243
Supporting and Reviewing Shared Lives Carers ............................................................................. 251
Close Family as Shared Lives Carers ............................................................................................... 260

Contact Information ....................................................................................................................... 268
Section 1: About Shared Lives

Introduction to Shared Lives Guidance

Shared Lives guidance has been developed over many years and has been informed by practice within Shared Lives schemes throughout the UK. The various documents are not a catalogue of absolute requirements but are intended to help schemes to maintain a consistently high standard of practice and to ensure that they meet the differing regulatory requirements in whichever country they are located. They provide a template which can be used by Shared Lives schemes in developing practice guidance tailored to their individual situation. They are intended to be useful to Shared Lives schemes, whether they are part of a local authority or the independent sector, whatever their size and whatever the client group they work with. They will need adaptation by the scheme to their particular circumstance and to any local organisational policies and procedures within which they work.

In order to assist schemes in using this guidance to evidence compliance with regulations we have included maps which cross reference the guidance to the regulations and standards in each of the four countries.

Definitions

Shared Lives Plus is a UK charity established to represent the interests of all those involved in delivering very small, individualised, community-based services such as Shared Lives and Homeshare.

Shared Lives (also known as Adult Placement) is a regulated service in England, Wales, Scotland and Northern Ireland and whilst the term Shared Lives is used generically to describe the activity, regulation in all four countries continues to use the term Adult Placement. The role of the regulator is to make sure that the care and support people receive meets regulations and standards of quality and safety and to encourage ongoing improvements by those who provide or commission care.

Shared Lives offers people an alternative and highly flexible form of accommodation and/or care or support using the Shared Lives carer’s home as a resource. Shared Lives arrangements are set up and supported by Shared Lives schemes and the care and accommodation people receive is provided by ordinary individuals, couples or families in the local community. Individuals and their Shared Lives carers enjoy shared activities and life experiences.

Shared Lives enables a wide range of people who need support to live independent lives and have their health and well-being promoted. Shared Lives can reduce the need for admission to hospital or residential care (for example through ‘Home from Hospital’ services). Shared Lives schemes can also support disabled or ill parents to continue to look after their children and young people (aged 16+) in transition to adulthood. The opportunities that Shared Lives has to offer are greatly valued by both people using the service and by family carers and commissioners.

Shared Lives care and support may include:

- Long term accommodation and support
- Short breaks
- Daytime support
- Rehabilitative or intermediate support

Where Shared Lives carers are providing personal care in people’s own homes there is a distinction between this and domiciliary or supported living care. Domiciliary carers follow a rota to visit and support a number of individuals with specific care tasks to be performed. Similarly, supported living carers may provide varying degrees of support but only in or from the person’s own accommodation. The relationship with the person using the domiciliary or...
supported living care service will be entirely ‘professional’ and will not involve any involvement of the carer’s family or home. A Shared Lives carer supporting a person in the community will do this in the context of a matched relationship as part of a Shared Lives agreement. They will carry out their support in much the same way that a natural family member may provide that support.

Where care is being undertaken but there is no link back to the Shared Lives carer’s home and family, the scheme should consider that the personal care is provided by a domiciliary care service or a supported living arrangement.

**Shared Lives carer** is a person who, under the terms of a Shared Lives carer agreement provides, or intends to provide, personal care. They use their home as a resource and, where necessary, provide accommodation there.

**Shared Lives Scheme Manager**: Manages the scheme, is registered with the relevant care regulator and has overall responsibility for the quality and safety of care and support of all Shared Lives arrangements within their Shared Lives scheme. The scheme manager has legal accountability for the final decision on approval of new Shared Lives carers, continuing approval and de-approval of exiting Shared Lives carers.

**Shared Lives workers** are individuals employed by a Shared Lives scheme and who have the competencies, qualities and experience needed to carry out its tasks. These include recruiting, assessing, training and supporting Shared Lives carers, matching and making arrangements for people with Shared Lives carers and supporting and reviewing those arrangements.

**Shared Lives schemes** are regulated by the relevant social care inspectorate in England, Wales, Scotland and Northern Ireland. Schemes are run by Local Authorities, Health Trusts or Independent (profit-making or non profit-making) bodies. They are responsible for recruiting and training Shared Lives carers; matching people with suitable Shared Lives carers; making Shared Lives arrangements; and providing ongoing support and monitoring of Shared Lives arrangements. The care they provide is wholly or mainly for adults with some schemes offering transition arrangements.

**Shared Lives panel**: Provides independent scrutiny and a quality assurance process for Shared Lives schemes regarding assessments for new Shared Lives carers, the ongoing approval and de-approval of existing Shared Lives carers.

**Shared Lives carer agreement** is an agreement entered into between a Shared Lives scheme and a Shared Lives carer for the provision, by that Shared Lives carer, of personal care and support to a person using or living in a Shared Lives arrangement together with, where necessary, accommodation in the Shared Lives carer’s home. This agreement is the contract between the Shared Lives carer and the Shared Lives scheme. The Shared Lives carer agreement outlines the role and responsibilities of the Shared Lives carer in working with the Shared Lives scheme and the role and responsibilities that the Shared Lives scheme has in supporting and working with the Shared Lives carers. It also sets out the terms and conditions for the Shared Lives carer(s) approved by the Shared Lives scheme.

**Shared Lives arrangement agreement** is made in relation to each individual Shared Lives arrangement. It is an agreement between the person who will be making use of or living in a Shared Lives arrangement, the Shared Lives carer, the scheme and anyone involved in commissioning the service (care manager, social worker, and family member). The agreement incorporates the responsibilities and expectations of all those involved in the arrangement and includes details of the plan of care for the person using the service. It must be signed by all relevant parties before the commencement of the Shared Lives arrangement.
Regulations in relation to Shared Lives schemes (formally adult placement schemes) in Wales and Northern Ireland limit the number of people who could be supported at any one time to no more than 3 people. There is no such regulatory requirement in England or Scotland but the principle remains that Shared Lives care is provided in a family setting. This in itself limits the numbers of people whom care can be provided for. The principle is embedded in the Shared Lives Plus model and, additionally, there are limits set in relation to other arrangements. For example:

- The Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006 do not apply to scheme Shared Lives carers providing accommodation for not more than 3 people. In Scotland the Civic Government (Scotland) Act 1982 (Licensing of Houses in Multiple Occupation) Order 2000 (currently under review) applies to placements in excess of two.
- There are simplified HMRC tax arrangements for Shared Lives carers who provide care for between one and three adults at any one time.
- The Shared Lives Plus Fire Safety Guidance prepared specifically for scheme Shared Lives carers is based on the assumption that Shared Lives carers use their accommodation for no more than 3 service users at any one time.
- Preferential insurance arrangements for Shared Lives carers are limited to 3 people at any one time.

**Principles underlying our approach are as follows:**

1. Current established good practice which is embedded in and underpinned by Shared Lives Plus guidance will continue and is supported by the Regulators in all four countries. The guidance focuses on essential scheme processes such as selection, training, approval panels and matching.

2. Shared Lives Plus has a comprehensive range of learning materials and opportunities which are specific to Shared Lives and complement the guidance.

3. The Shared Lives Plus guidance and learning materials provide an underpinning model if schemes choose to use them, but they are not a legal requirement. Schemes can choose to adopt or adapt Shared Lives Plus guidance or show their compliance with the regulations and standards in a different way.

4. Shared Lives carers cannot provide personal care, overnight accommodation or personal care in the home of the individual independently of their Shared Lives scheme unless they have registered themselves with the appropriate Regulator. Doing so would leave them open to prosecution. In England, Wales and Northern Ireland Shared Lives carers can provide personal care in their own home which does not include overnight accommodation (i.e. day care) without requiring regulation.

5. Where a person makes an entirely private arrangement with a Shared Lives carer for their care using a direct payment or their own resources to employ them as their personal assistant, then this falls outside of the definition of Shared Lives. It may also fall outside of the scope of regulation although this will depend upon the extent of the role of the personal assistant. It will also fall outside of the Shared Lives carer tax exemption.

**Responsibilities/accountability**

**Shared Lives schemes – accountability**

Arranging and monitoring the provision of personal care and support which is compliant with the regulations and standards and meets the outcomes for people using the scheme.
**Shared Lives carers – responsibilities**
To work within their Shared Lives carers’ agreement and Shared Lives arrangement agreement to meet the identified needs of people they are providing care for.

**Local authority/health commissioners of care – responsibilities**
To commission care with Shared Lives carers only through the Shared Lives scheme in order to be assured the care they commission is safe, good quality care.

**People commissioning their own care – responsibilities**
To only commission directly with the Shared Lives scheme and not directly with a Shared Lives carer.
Defining Shared Lives
This document is intended as a UK-wide definition document for the Shared Lives sector.

Shared Lives is defined in legislation and regulations by the governments of the four home nations, as well as by Her Majesty's Revenue and Customs and by the insurance providers who provide the group insurance schemes from which all Shared Lives Plus full member’s benefit. These various regulatory definitions are not identical, so this document is developed and maintained by Shared Lives Plus and the UK Shared Lives schemes and carers, to identify those key features of Shared Lives which we believe all regulatory regimes, and everyone working in Shared Lives, hold in common.

This document does not have statutory status and nothing in it should be taken as legal guidance or an interpretation of regulations.

Why define Shared Lives?
Shared Lives Plus began a consultation to define Shared Lives in 2011 as a response to concerns that, in some areas of the country, services were being provided which were being described as Shared Lives and/or values. Although these services are valuable in their own right, differing uses of the label ‘Shared Lives’ can cause confusion. Some Shared Lives carers involved were also being given misleading advice about their tax and insurance responsibilities.

For our members, both schemes and Shared Lives carers, this confusion represents a genuine risk to their wellbeing and working roles. Misinterpreting tax rules can lead to serious penalties. The consultation involved a tour of branches by the Head of Shared Lives, as well as discussion papers, consultations, questionnaires and seminars at our conferences.

This document represents the final outcome of that consultation and presents a definition which will be used by Shared Lives Plus as the basis of our communications to promote and raise awareness of Shared Lives, and our negotiations for products and services for our members.

We hope that the definition will lead to a more consistent view of what Shared Lives is and of its unique characteristics

Shared Lives: Concept v Service Type
Shared Lives can be described both as a ‘concept’ and as a ‘service type’. However, as part of structured social care in the UK, Shared Lives as a service type should always contain the concept of sharing home and family (or community) life in order to distinguish it from other similar types of service.

The Definition
Shared Lives always involves the Shared Lives carer using and sharing their home and their family (or community) life with the person using or living in a Shared Lives arrangement. Shared Lives can be offered to any adult with care and support needs and, in some cases, to young people from the age of 16.

Shared Lives is delivered only by Shared Lives carers who are assessed and currently approved by a registered Shared Lives scheme. Shared Lives is always arranged and monitored by a registered Shared Lives scheme. Shared Lives which involves personal care is a regulated form of social care, further defined by the regulators of each home nation.
Shared Lives may include:

- longer term accommodation and support
- short breaks or other time limited live-in support such as intermediate care
- day time support involving the sharing of home and family (and/or community) life of the Shared Lives carer. In Shared Lives day support arrangements, this can be using the home as a base and then visiting the community.
- support offered by a Shared Lives carer to individuals who have moved on, which continues to involve the Shared Lives carer using their home and sharing their family (and/or community) life

No more than three people are normally accommodated or supported at any one time by a Shared Lives carer. The Scottish regulator and some schemes elsewhere, limit the number supported to two, which all local schemes are free to do. See notes below for more detail on numbers supported.

**Key Processes**

Shared Lives arrangements always involve the following processes:

- **Matching:** Shared Lives arrangements are formed using a matching process. The process involves participants getting to know each other at their own pace, before making any commitment to sharing home and family (and/or community) life.

- **Monitoring and safeguarding by the Shared Lives scheme:** the registered manager of the Shared Lives scheme remains ultimately responsible for the quality and safety of care and support in every Shared Lives arrangement.

- **Self-employment:** Shared Lives carers are self-employed and can access the Shared Lives tax break. Shared Lives carers are not paid by the hour and do not work to a fixed schedule but are paid in line with the expectations set out in a Shared Lives arrangement agreement.

- **Shared Lives carers are under no obligation to agree to any care and support arrangement offered.**

- **Shared Lives carers do not employ staff to help them provide care.**

These processes may also be found in other forms of regulated and unregulated care and support, so their presence does not on its own define an activity as Shared Lives.

**Shared Lives carer agreement** is an agreement entered into between a Shared Lives scheme and a Shared Lives carer for the provision, by that Shared Lives carer, of personal care and support to a person using or living in a Shared Lives arrangement together with, where necessary, accommodation in the Shared Lives carer’s home. This agreement is the contract between the Shared Lives carer and the Shared Lives scheme. The Shared Lives carer agreement outlines the role and responsibilities of the Shared Lives carer in working with the Shared Lives scheme and the role and responsibilities that the Shared Lives scheme has in supporting and working with the Shared Lives carers. It also sets out the terms and conditions for the Shared Lives carer(s) approved by the Shared Lives scheme.

**Shared Lives arrangement agreement** is made in relation to each individual Shared Lives arrangement. It is an agreement between the person who will be making use of or living in a Shared Lives arrangement, the Shared Lives carer, the scheme and anyone involved in commissioning the service (care manager, social worker, and family member). The agreement incorporates the responsibilities and expectations of all those involved in the arrangement and includes details of the plan of care for the person using the service. It must
be signed by all relevant parties before the commencement of the Shared Lives arrangement.

Use of support carers
Whilst Shared Lives carers do not employ others to provide care on their behalf, they may make use of support carers who provide care alongside the main Shared Lives carer or by substituting for them, using the main Shared Lives carer’s home as a base. The role of the support carer is defined in more detail in Shared Lives Plus guidance.

Number of people
Regulations in relation to Shared Lives schemes may limit the number of people who can be supported at any one time to no more than three. Regulations in Wales and Northern Ireland limit the number to three and the Regulator in Scotland limit the number to two. Whilst there is no such requirement in the regulatory framework in England, Shared Lives Plus and the Regulator believe that no more than three people should be supported in a Shared Lives arrangement. This is to maintain the principle that Shared Lives care is provided in a household, not in a setting which feels more like a small residential care home. This in itself limits the number of people for whom care can be provided. Many local Shared Lives schemes set their own lower limit which they are free to do. The approval and matching process in Shared Lives can also be used to limit the number of people in a Shared Lives carer household. Additionally, there are limits set in relation to other areas of regulation.

For example:

- The Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006 does not apply to scheme carers providing accommodation for no more than three people. There is an equivalent regulation in Wales and in Scotland which sets the limit at two.
- There are simplified tax arrangements and concessions for Shared Lives carers who provide care for between one and three adults.
- The Fire Safety Guidance prepared specifically for Shared Lives carers and schemes is based on the assumption that Shared Lives carers provide accommodation for no more than three people at any one time
- Preferential insurance arrangements for Shared Lives carers (arranged via Shared Lives Plus) are limited to three people.

Commissioning and providing Shared Lives
Shared Lives schemes are run by local authorities, health trusts or independent (profit-making or non-profit making) bodies. All schemes are responsible for recruiting and training Shared Lives carers; matching people with suitable Shared Lives carers; making Shared Lives arrangements and providing ongoing support and monitoring of Shared Lives arrangements. The care they provide is mainly for people aged 18+ and in some cases 16+ where they meet the eligibility for adult services or in Scotland are a supported lodgings scheme.

Commissioners should commission care with Shared Lives carers only through the Shared Lives scheme in order to be assured that the care they commission is safe, of good quality and compliant with regulations governing the provision of personal care.

Payments
Payment for Shared Lives longer term arrangements are made up of up to three elements according to the type of arrangement:

- A payment for assessed care and support needs which is paid from the local authority, health, a personal budget, or someone self-funding. This payment is made

---

1 See HMRC hs 236 2012hs at [http://www.hmrc.gov.uk/helpsheets/hs236.pdf](http://www.hmrc.gov.uk/helpsheets/hs236.pdf)
A payment for accommodation which is usually paid for by housing benefit, or if the person living in Shared Lives is ineligible they will need to pay this themselves

A payment for food, utilities, household bills etc, which is paid for by the person living in the Shared Lives arrangement from their benefits or other income

The person living or using a Shared Lives arrangement is eligible to be assessed under Fairer Charging and may be subjected to a contribution to the local authority to help meet the cost of their care and support.

Where accommodation is provided, this is normally arranged under a licence agreement.

Payment for Short Breaks and day time support are generally paid for from the Community Care Budget directly from the Shared Lives scheme to the Shared Lives carer. The person using the Shared Lives arrangement may be eligible to be assessed under Fairer Charging and may be subjected to a contribution to the local authority to help meet the cost of their care and support.

Direct Payments can only be used to purchase Shared Lives in England from an independent Shared Lives scheme.

Our guidance advises against using a Direct Payment to pay the Shared Lives carer directly because doing so can create a number of unnecessary risks, but where this happens, it is essential that there is a clear Shared Lives agreement in place in which all three parties (the individual, the Shared Lives carer and the scheme) agree that the care being purchased is: arranged and monitored by the scheme; that the Shared Lives carer will have the same obligations to the scheme as they would in any other Shared Lives arrangement and that the scheme is ultimately responsible for quality and continuity of care.

A person is only providing regulated Shared Lives if they are doing so within the terms of a Shared Lives carer agreement which is arranged and monitored by a registered Shared Lives scheme. Shared Lives Plus guidance gives more detail on this.

**Terms used in Shared Lives**

**Shared Lives Plus** is a charity and the UK network for small community services, including Shared Lives carers and schemes and Homeshare.

**A Shared Lives carer** is a person who, under the terms of a Shared Lives carer agreement provides, or intends to provide, personal care and support. They share their home and their family (and/or community) life and, where necessary, provide accommodation to the person using or living in a Shared Lives arrangement. In Shared Lives day support arrangements, this can be using the home as a base and then visiting the community. The use of the term ‘and/or community’ above takes account of: ‘and’ - that all Shared Lives involves sharing the community life of the Shared Lives carer; ‘or’ - that some Shared Lives carers (e.g. single Shared Lives carers who do not have regular contact with their families) may not consider themselves as having a ‘family life’ to share.

**Shared Lives carer assessment and approval** – is a thorough process for assessing the suitability of Shared Lives carers. It is quality assured by the local / regional Shared Lives Panel.

**Shared Lives workers** are individuals employed by a Shared Lives scheme and who have the competencies, qualities and experience needed to carry out its tasks.

**Shared Lives scheme manager**: Manages the scheme, is registered with the relevant care regulator and has overall responsibility for the quality and safety of care and support of all
Shared Lives arrangements within their Shared Lives scheme. The scheme manager has legal accountability for the final decision on approval of new Shared Lives carers, continuing approval and de-approval of exiting Shared Lives carers

**Shared Lives panel:** Provides independent scrutiny and a quality assurance process for Shared Lives schemes regarding assessments for new Shared Lives carers, the ongoing approval and de-approval of existing Shared Lives carers

**Shared Lives schemes** are regulated care services in England, Wales, Scotland and Northern Ireland.

**CQC** - the Care Quality Commission is the regulator of health and social care in England.

**RQIA** – the Regulation and Quality Improvement Authority is the regulator for Health and Social Care in Northern Ireland.

**CSSIW** – the Care and Social Services Inspectorate in Wales is the Regulator for Social Care in Wales.

**Care Inspectorate** – is the regulator for Social Work and Social Care in Scotland.

**Arrangements which are not Shared Lives**

Arrangements which have some of the features of Shared Lives, such as outreach or community support, but which do not involve the Shared Lives carer sharing their home and their family (and/or community) life, should not be described as Shared Lives. Similarly, care and support which is arranged or purchased directly with a care worker, without the involvement of a scheme in recruitment, approval, matching and ongoing monitoring, is not Shared Lives. In such arrangements, the care worker is likely to be the employee of the person receiving the care, or of the organisation purchasing care on their behalf.

Where the arrangement has some or all the features of a regulated Shared Lives arrangement, but does not involve any personal care, this may fall outside of regulation. Schemes which provide a mixture of regulated and unregulated activities must nevertheless register with the appropriate Regulator.

Some scenarios which can help in identifying what is or is not Shared Lives are available as a separate guidance note. In each case the key test is whether the Shared Lives carer is an approved member of a Shared Lives scheme and is sharing their home and their family (and/or community) life with the people they support through a Shared Lives arrangement agreement.

Shared Lives Plus welcomes schemes developing additional strands of support alongside their regulated Shared Lives activity, providing that the scheme registers each strand of its work with the appropriate regulatory regime.

Where a person makes an entirely private arrangement for their care using a direct payment or their own resources to employ someone as their personal assistant, this falls outside the definition of Shared Lives.

**Marginal Activity**

The character of the supportive relationships within Shared Lives is based on that of the supportive relationships within families and extended families. This means that when, for example, a service user moves on, their former Shared Lives carer may continue to support them in their new living arrangement, in some cases providing them with a place to come back to, in the same enduring way that a family might, or visiting the service user regularly in their new home. The support which continues to be offered may feel the same in character to
a typical Shared Lives arrangement, but the Shared Lives carer may no longer be able claim the Shared Lives tax break (if they are no longer using their home as a care or support base), or the activity may fall outside of care regulation (if personal care is no longer involved).

In the past this kind of support has sometimes been described as ‘kinship care’. However, ‘kinship’ is not a term with an accepted definition within adult social care, whilst it does have an accepted – and different – definition within the children’s support sector. It has also arguably been used overly loosely as a way of describing marginal activities as Shared Lives services, which has not been helpful to the sector.

Shared Lives Plus supports the development of supportive, caring relationships which draw on the values and practices of Shared Lives, but which fall more properly under a different definition or regulatory regime. We encourage other kinds of service to adopt Shared Lives’ values and processes to engage the skills and caring capacity of ordinary individuals and families.

But, please, only describe as ‘Shared Lives’, those approaches which fall clearly within the definition outlined in this document.
Section 2: Processes for Shared Lives arrangements

Referral to the Shared Lives Service

The Poole Shared Lives Service recognises the importance of proper information in making informed decisions. Our referral procedure aims to be prompt, thorough and fair to everyone concerned. We will give you information about Shared Lives (SL) and ask for information about you that is based on your assessed needs and wishes. We will tell you in as short a time as possible whether we can meet your needs and if not we will tell you the reasons why.

How will this happen?
We will start by giving you clear information about what kinds of accommodation and/or care and/or support we provide and which people can make use of this. This will be included in our Statement of Purpose and our Service Guide. We will give this and other useful information to you and/or your family or representative and to your Care Manager/ person referring you. The information will be written in plain English or another language or format that you can easily understand or we may use an audiotape or a short film or some other way of communicating if you prefer.

We will arrange to visit you and your family if you wish so that you can ask questions about Shared Lives and so that we can get to know more about you too. The first meeting could be at your home, our office or somewhere else if you prefer.

If you would like to continue with your referral, we will ask you or your representative or your Care Manager to fill in a referral form and to include information about your assessed needs and wishes.

We will not be able to proceed with a referral until we have written information about your needs. This could be a self-assessment if your local authority has agreed a process for this. If you do not already have an assessment of your needs, we will arrange for a suitably qualified person to discuss and agree this with you and/or your representative. If we need any specialist information, such as nursing or occupational health, we will ask your permission and work with you and/or your representative to make arrangements for this too.

We will use all this information and the information we already have about our SL Carers to decide whether we have any Carers who can meet your needs. This is known as matching. If we do have Carers that we think you will like and who can meet your needs, we will arrange for you to meet them before you decide whether you want to go ahead with an arrangement.

If we do not provide the kind of accommodation and/or care and/or support you are looking for, or you do not fit the criteria for our service or we cannot find any suitable Carers, we will tell you and your Care Manager / person who referred you as soon as possible and we will also explain the reason for this in writing.

See these other guidance and documents for further information:
- Model Referral Form 1a
- Assessment of Needs Form
- Statement of Purpose
- Service Guide
- Matching and Introductions
- Making Choices and Decisions
- Communication
- Equal Opportunities
Assessment of Needs

It is important that we know about a person’s physical, social, emotional and cultural needs and their hopes and wishes so that we can meet these within the Poole Shared Lives scheme.

How will this happen?

Before making a Shared Lives arrangement we will always ask for a written assessment of the person’s needs and their aspirations. This can be a local authority community care assessment or a self-assessment if the person’s local authority has agreed a process for this. The person’s Care Manager or other appropriate professional will have discussed this with the person before and it will cover the person’s:

- accommodation and personal support needs
- community, family and social contacts
- education, training, and/or occupation
- leisure activities
- cultural and faith needs
- physical and mental health care
- any special equipment or treatment or rehabilitation the person requires
- how the person communicates
- having adequate money
- whether there are particular risks in the person’s day-to-day life and how these can be managed
- What changes or wishes the person has for the future.

If the person does not already have an up-to-date assessment of their needs, then we will ask a suitably qualified person to discuss these areas with the person and/or the person’s representative, and then to let us know about the needs they have agreed together.

We will use this information to find Shared Lives carers who may be able to meet these needs. If we find Shared Lives carers who are suitable for the person, we will share this information with them so that they can also think about providing a service for the person, and whether they will be able to meet the person’s needs. The Shared Lives worker will give the person information about the Shared Lives carer too, so they can also think about whether that arrangement would be right for them. This process is called matching.

If the arrangement goes ahead (after all the necessary introductions, visits etc) the Shared Lives carer will be given a copy of the person’s needs assessment, or a summary of this, to keep for as long as the arrangement continues. Another copy will be kept at the office and we will also make sure that the person has been given a copy too.

The person’s assessment of needs will be the starting point for planning the details of the person’s Shared Lives arrangement. The plan will be agreed between the person and/or the person’s representative, the Shared Lives carer and the Shared Lives worker, and is called a Service User Plan.

The plan and the arrangement will be reviewed regularly (at least once every year). If the person’s needs or wishes change over time the plan and/or the arrangement can be changed.
The Matching Process
A Shared Lives arrangement can only be successful if the Shared Lives carer is able to meet the person’s needs and if the person and the Shared Lives carer(s) and other people in their household all get on well together. The Poole Shared Lives scheme therefore gathers together all the important information about the person and about our Shared Lives carers and we use this to work out which Shared Lives carers will suit the person. This is known as matching.

How matching will happen?
All our Shared Lives carers have been properly recruited, assessed and trained by us before they are able to start working with the person or anybody else who requires support. During this time we build up our knowledge of them and their families and of the skills and experience they have to support someone.

Once we receive a referral for the person who will be using or living in a Shared Lives arrangement, we start to build up our knowledge of the person and their needs, wishes and aspirations.

These are the sorts of things we take into account when working out which of our Shared Lives carers might be suitable for the person:

- the person’s assessed needs and wishes
- any identified risks/ risk management
- the skills, knowledge and experience of the Shared Lives carer(s)
- the personal interests that the person and the Shared Lives carer(s) have
- the location of the Shared Lives carer(s) home
- the facilities and accommodation the Shared Lives carer(s) can offer the person
- the cultures and/or faiths that are important to the person and the Shared Lives carer(s)

If we find any Shared Lives carers whose skills can be matched with the person’s needs, we will give the person and/or the person’s representative information about all of them. This information will be in a format that the person can understand easily. We will also give information about the person to those Shared Lives carers that we think will make a good match with the person.

If the person and/or the persons representative would then like to meet up with one or all of the Shared Lives carers we will make arrangements for this. This enables the person and the Shared Lives carer(s) to find out more about each other and to see for themselves whether they have things in common. This kind of visit is called an introduction and is part of the matching process. An introduction can include an overnight stay if the person is thinking about having short breaks with the Shared Lives carer(s) or of living with them for a while.

We will make sure that the person and/or the person’s representative understands the matching process and also that all our Shared Lives carers understand it too. It is very important that the person and the Shared Lives carer(s) get on well together. Both the person and the carer have a say in whether the arrangement could be a suitable one. It will not cause a problem if either the person or the Shared Lives carer(s) does not wish to go ahead with more introductory visits or with making a longer-term arrangement.

The decision about whether a Shared Lives arrangement is right for the person is a very important one. We understand that it takes time and proper information to make this sort of decision and that the opportunity for the person and the person’s family or representative to visit and ‘test drive’ an arrangement will be a helpful part of that process.

How introductions will take place?
An essential part of making a decision is having all the information the person needs beforehand.

The person will be given information about the Poole Shared Lives scheme and about any Shared Lives carers who may be suitable for the person as part of our referral and matching procedures. Visiting the Shared Lives carer(s) adds to this by giving them and the person and/or the person’s representative an opportunity to experience the arrangement directly. The Shared Lives carer(s) can also visit the person if the person wishes.

The person will usually be able to:

- meet the Shared Lives carer(s) and other members of their family or household and find out what they are really like
- see the house, the bedroom (if the person will be staying there) and the neighbourhood
- have a meal there
- have an overnight stay (if the person will be having short breaks or living there)
- see what kinds of records are kept by the Shared Lives carer(s)
- speak in private with other people who are already making use of a Shared Lives arrangement
- ask any questions they may have.

The person and/or the person’s representative can visit as many times as the person wishes until the person feels comfortable about going ahead with a longer-term arrangement. However either the person or the Shared Lives carer(s) can call a halt to the introductions at any point if they do not feel the arrangement will be suitable after all.

Even if the person does decide to go ahead with a longer-term arrangement, there will still be a trial period when the person can change their mind. The length of the trial period will be agreed at the start of the arrangement and written in the Arrangement Agreement.

Deciding that one Shared Lives arrangement is not right for the person does not mean that the person cannot try another one. The Shared Lives worker will discuss this and will arrange introductory visits to another Shared Lives carer(s) if appropriate.

Introductory visits play a big part in making sure an arrangement is right for everyone involved. We therefore try to avoid making Shared Lives arrangements in emergencies, when this kind of opportunity may not be possible. However, we have a separate procedure which we follow if an emergency situation arises and there really is no time for the person to get to know the Shared Lives carer(s) before the person goes there. The person’s Shared Lives worker will explain more about this if it affects the person.
Urgent and Emergency Shared Lives Arrangements

In order to be sure that any Shared Lives arrangement will meet the person’s needs and wishes, the Poole Shared Lives scheme follows its procedures for referrals, matching and introductions whenever possible. However, we understand that traumatic events can occur in a person’s life which mean an arrangement may have to be made with minimal matching and without opportunity for the person to ‘test drive’ the arrangement. In these circumstances we must still make sure that the person and the Shared Lives carer(s) and their family will be safe, that the person’s needs will be met as effectively and quickly as possible and that the needs of the Shared Lives carer(s) and their family have also been considered.

How will this happen?

An emergency situation is not the same as an urgent one. It is sometimes possible to set up an arrangement urgently (ie in a short time) whilst still following usual procedures for referrals, matching and introductions. We will always try to work with the person and their family, Care Manager/other appropriate professional and the Shared Lives carer(s) to follow these procedures wherever possible. Emergency arrangements are only considered as a last resort.

In an emergency situation, this is what will happen:

1. We will ask the person, their family and Care Manager/other appropriate professional for enough information about the person so that the Shared Lives carer(s) can support the person effectively during this difficult time.
2. We will require any current risk assessment/risk management plans which must include any known risks that the person may pose to themselves, the Shared Lives carer or the Shared Lives carer’s family. We will pass this information on to the Shared Lives carer(s) before the arrangement starts. We will not be able to agree an arrangement without this information.
3. We will ask the Shared Lives carer(s) to introduce the person to everyone in their household and to give the person all the immediate information they need about the facilities and support available, including whether there are any house rules. We will make sure the person has all the other useful information (such as the Service Guide) within 1 working day.
4. We will obtain full written information about the person’s needs and a copy will be given to the Shared Lives carer(s) within 1 working day.
5. In order to prevent emergency arrangements drifting into longer term arrangements a planning meeting will be held within 5 working days of the arrangement starting. This will include the person and/or their representative, the Shared Lives carer(s), Shared Lives scheme worker and Care Manager/other appropriate professional. This meeting will decide whether the arrangement should continue, for how long and whether any additional services are required. If the meeting decides that the arrangement should not continue, a plan will be agreed for making alternative arrangements.
6. A Shared Lives Agreement and Service User Plan will be completed within 5 working days and everyone will be given copies of these.
7. The arrangement will be reviewed at least every 4 weeks (or more often if required) for as long as the emergency arrangement continues.

When an emergency arrangement has been set up this does not necessarily mean that it can, or should, continue on a long term basis. It will usually only continue for an agreed period of time which will be written in the Shared Lives Arrangement Agreement.

The arrangement will only continue for longer than this agreed period if everyone is certain it can meet the person’s needs and if the person and the Shared Lives carer(s) would like it to. In this case, the arrangement changes from being an emergency to a long-term arrangement and this change will be recorded in the review of the Shared Lives Agreement.
If at any time it becomes clear that the emergency arrangement cannot meet the person’s needs or the needs of the Shared Lives carer and their family or the person does not wish it to continue, the person’s Care Manager/other appropriate professional will work with the person to find an alternative. This may include looking for a more suitable Shared Lives arrangement if the person wishes.
License Agreement for Shared Lives

This license agreement explains the basis on which a person can live in a Shared Lives carer’s home. The person will have a separate agreement with Poole Shared Lives scheme (called the ‘Arrangement Agreement’) which describes the care or support services they will receive.

This agreement is between:

The householder/Shared Lives carer(s) name: ……………………………………………………………………………………

Address: ………………………………………………………………………………………………………………………………

And the licensee (name of the person using the service): …………………………………

The licensee will occupy a single/shared room and will have the shared use of: ……………

The room is furnished in accordance with the attached inventory.

Aims of the Poole Shared Lives Scheme:

- Short term care for adults with a learning disability or early stage dementia to provide a break for families or carers
- Care can be from an hour to a maximum of two weeks at any one time and is agreed within the care plan guidelines
- Long term care for adults with a learning disability
- Care is provided by people who are approved by Poole Adult Social Services as Shared Lives Carers’ for either day or overnight care
- Care can be provided in the Shared Lives Carers’ own home, the service users’ home or accompanying the person on activities in the community

Weekly charge

- The total weekly charge is £ ………………… payable in advance every ………………….
  If it is necessary to increase the charge, one month’s notice will be given.

Services

- The householder shall provide the following services which are included in the charge.
- The charge includes heat, light, and water plus £……. for meals, £……. for cleaning, and £……. for laundry

Meals

- The following meals will be provided and are included in the charge.
- 3 meals per day, breakfast, lunch and dinner…………………………………………………………………………………

The Householder’s Responsibilities

- The householder will respect a person’s right to privacy except where he/she requires access to inspect the condition of the room or to carry out repairs or other work or to provide any of the services described above. The person will be informed in advance when access is required.
The householder will pay the water rates, utility bills and other charges collected from the person and due to the local authority, water authority or other body.

The householder will keep the house, all internal and external fixtures, fittings, furniture and electrical appliances in good repair and in safe condition.

The householder will insure the house, furniture, fixtures and fittings for the full reinstatement value.

The householder will ensure that the communal areas of the premises are regularly cleaned and will provide you with clean bedding.

The Licensee’s Responsibilities

- The person / licensee must pay the weekly charge in advance.
- The person / licensee must not invite visitors to the house without the consent of the householder and the licensee is responsible for the behaviour of their visitors at the house.
- The person / licensee must not cause nuisance or annoyance through noise or unruly behaviour to the householder or members of the household or others living nearby.
- The person / licensee must not cause damage to the house or to the householder’s fixtures, fittings or furniture.
- Pets or other animals are not allowed without the permission of the householder.
- The person / licensee must keep the room reasonably clean and tidy, assist in keeping the communal areas clean and tidy and report any repairs to the householder.
- The person / licensee must comply with the rules for fire safety and for other health and safety matters and not engage in any conduct or activity which is likely to endanger the health and safety of the householder or any other member of the household.
- The person / licensee must inform the householder if they intend to be away from the room overnight.
- The person / licensee is responsible for insuring their personal possessions.

Ending the Licence

- When a person / licensee wishes to leave they must give the householder at least 28 day’s notice in writing.
- The householder can end the licence by giving the person / licensee 28 day’s notice to vacate the room.
- If the person / licensee breaks any of the terms of this agreement, the householder will give them 28 day’s notice.
- In the case of serious nuisance, disruptive or violent behaviour or harassment the householder reserves the right to ask the person / licensee to leave immediately.
- In the event of death of the person/licensee, the Shared Lives scheme will be responsible for ensuring that the Shared Lives Carers are paid for a further 28 days, as with the notice period.

Signature of the parties

Signed by the householder: …………………………………………………………………………………

Date: …………………………………………………………………

Signed by the licensee: ……………………………………………………………………………………………

Date: …………………………………………………………………
Adult Plan, Monitoring and Review of Shared Lives Arrangements

The Poole Shared Lives scheme aims to deliver the support a person, who will be using or living in the Shared Lives arrangement, requires in a way that is personalised and fair, and which meets their current and changing needs and wishes safely and effectively.

How will this happen?

Before beginning a Shared Lives arrangement, the person’s Shared Lives worker will meet the person and/or their representative to agree the way in which their needs and wishes will be met in the arrangement. The decisions reached together will be written down as an Adult Plan. The plan will be discussed with the person and their Shared Lives carer(s) and a copy given to them so that they know how best to support the person.

The Adult Plan will aim to maximise the person’s independence. It will be based on information from the assessment of their needs and wishes and will include information and decisions about:

- what the person prefers to be called
- any communication needs and how these will be met
- whether the person requires support in speaking up for themselves or making decisions and, if so, how this will be provided
- the people who are important to the person and arrangements for staying in touch with them
- the person’s social, cultural and spiritual needs and how these can be met
- any specialist equipment the person needs and how this will be provided
- what food and drink the person prefers and any special dietary needs
- the person’s activities and leisure interests
- the person’s personal care and health needs, including arrangements for taking medication
- decisions on potential risks, including any restrictions to the person’s choices and freedoms which may be necessary for their own safety or the safety of others
- the person’s hopes and wishes for the future
- any other services the person receives and how these will be co-ordinated with their Shared Lives arrangement, if necessary
- the name of an independent person or organisation who can be contacted if the person wishes to make a complaint or raise a concern
- how often the person’s plan will be reviewed and who should be involved in the reviews

The person and/or their representative will be given a copy of their Adult Plan. It will be in a format that the person can easily understand. The plan will be reviewed at least once a year or sooner if the person’s needs or circumstances change, or if the person requests a review.

The Adult Plan is part of the Shared Lives Arrangement Agreement which explains the terms and conditions for the person’s Shared Lives arrangement. The Shared Lives Arrangement Agreement will be reviewed at least once a year or sooner if required.

If the Shared Lives arrangement is funded by the Local Authority, the person’s Shared Lives worker will seek to involve their Care Manager in the annual review of the arrangement so that it can be co-ordinated with the review of the their Care Plan and/or personal budget if possible.

The person’s Shared Lives worker will make regular monitoring visits (at least once every 3 months) to see the person and/or the Shared Lives carer(s), in order to make sure the arrangement is working well for the person and everyone else involved in it. Unannounced visits may be made to the Shared Lives carer(s) if there are any concerns about an arrangement or the care or support that is being provided. The Shared Lives worker will also meet with the person at least once a year in a setting away from the Shared Lives carer(s)
and their home to make sure that the person has an opportunity to discuss the arrangement without being influenced by it.
Adult Plan Form

This Adult Plan is part of your Shared Lives (Adult Placement) arrangement agreement. It gives your Shared Lives carer(s) the information they will need to support you effectively, tells them about the things that are important to you, and also tells them about who else supports you and how.

Your name: ...............................................................

What do you like to be called?: ...............................................................

Address: ....................................................................................

....................................................................................

....................................................................................

Home Phone: ....................................................................................

Work Phone: ....................................................................................

Mobile Phone: ....................................................................................

Who is your nearest relative?: ........................................

How is this person related to you?: ...............................................................

If there is an emergency and we need to contact someone about you, who would you like us to contact?

Name: ....................................................................................

Contact details: ....................................................................................

....................................................................................

....................................................................................

....................................................................................

(A) Contact with your family and friends

Which members of your family or friends do you want to stay in touch with or see regularly?

Name: ............................................. Name: .............................................

Address: ............................................. Address: .............................................

....................................................................................

....................................................................................

....................................................................................

Phone: ............................................. Phone: .............................................

Name: ............................................. Name: .............................................
Is there anyone you do not wish to have contact with?

How do you want to keep in contact with your family and friends? (This could include how often and information about phoning/visiting)

Would you like your Shared Lives carer to help with this, and if so, how?

Who else can help with this, and how?

(B) Your religion and culture

What is your religion?

Are there things about your religion or culture that it would help your Shared Lives carer to know about so you can be supported in the ways you want?

Who else can help with this, and how?
(C) Eating and drinking

What do you like to eat?

What do you not like to eat?

What do you like to drink?

What do you not like to drink?

Is there any food or drink that you should not have? 

Please explain why?

Would you like to lose weight?  Yes  □  No  □

Would you like to put on weight?  Yes  □  No  □

Do you need any help with this?  Yes  □  No  □

If yes, who can help, and how?

Would you like help at meal times?  Yes  □  No  □

What help do you need?

Do you use any aids or special equipment at meal times?  Yes  □  No  □

What are they?

Who is responsible for getting these for you?
Name ........................................................................................................................................
Job ................................................................................................................................................

Do you like to have meals with other people in the house?                                 Yes □ No □
If not, please can you explain why? ............................................................................................
....................................................................................................................................................
....................................................................................................................................................

(D)  Talking with your Shared Lives carer and others
People talk to each other in different ways. For example, you may talk using words, you may use
your hands to sign or to point, you may say what you mean with pictures, or you may use a
communicator machine.

How do you talk?.............................................................................................................................
How do you want other people to talk with you? ........................................................................
....................................................................................................................................................
....................................................................................................................................................

(E)  Making your decisions
Do you need any support to speak up for yourself?   Yes □ No □
If yes, how can your Shared Lives carer support you in this? ......................................................
....................................................................................................................................................
....................................................................................................................................................
Who else can support you, and how?.............................................................................................
....................................................................................................................................................
....................................................................................................................................................

Do you need any support with making decisions and being in control of your life?             Yes □ No □
If yes, how would you like your Shared Lives carer to support you? ...........................................
....................................................................................................................................................
....................................................................................................................................................
Who else can support you, and how? .............................................................................................
....................................................................................................................................................
....................................................................................................................................................
(F)  **Help with money**
In a Shared Lives arrangement you can look after your own money or you can have help with this.

Are you able to manage your own money?  Yes ☐  No ☐

If no, what kind of help would you like from your Shared Lives carer?

Who else can help, and how?

(G)  **Moving and getting about**
It will help your Shared Lives carer(s) to know if you have any difficulties with getting about. Can you describe any difficulties you have with getting out of a chair or bed / walking / using stairs / using escalators?

Do you use a wheelchair?  Yes ☐  No ☐

Manual? ☐  Electric? ☐

Inside the house? ☐  Outside the house? ☐

Do you use any aids or special equipment for moving or getting about?  Yes ☐  No ☐

If so, what are they?

Who gets these things for you?

**Name**  .................................................................

**Job**  .................................................................
Can you describe any assistance you need from another person to help you get about?

Has a risk assessment for moving and handling been completed?
(see Section K)   Yes □    No □

(H) Things you like to do regularly

<table>
<thead>
<tr>
<th>Day and time</th>
<th>What you do (and contact details if your Shared Lives carer needs these)</th>
<th>What support, if any, would you like, and from whom?</th>
<th>What do you need with you?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(I) Other activities, interests and hobbies
What other things do you like to do?

.................................................................
.................................................................
.................................................................
.................................................................
What support, if any, would you like from your Shared Lives carer for these activities and interests?

Who else can support you, and how?

(J) **Holidays/Short Breaks**
People in long-term Shared Lives arrangements will sometimes have holidays / short breaks away from their Shared Lives carer(s) so that you and your Shared Lives carer(s) can enjoy a change. Sometimes people go to stay with another Shared Lives carer, or visit their families, or enjoy some other kind of break. What kind of short breaks or holidays would you like, if you are in a long-term arrangement?

Do you need help to arrange this?  
Yes ☐  No ☐

Who will help you with this?

Do you need help to arrange other kinds of holidays or breaks?  
Yes ☐  No ☐

Who will help you with this?

(K) **Keeping Safe**
Your Shared Lives carer will support you to have the kind of life that you want, doing the things that are important to you and enabling you to take risks.

Is there anything your Shared Lives carer should know to help you stay safe, and to avoid unnecessary harm to yourself or other people?  
Yes ☐  No ☐

If yes, what are the risks, and how can these be reduced?
<table>
<thead>
<tr>
<th>Risk</th>
<th>How to reduce this</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you have a written risk assessment and guidelines on how to manage the risks?  
Yes ☐  No ☐

If no, is a written risk assessment required?  
Yes ☐  No ☐

Who will complete the risk assessment, if required? .................................................................
 ......................................................................................................................................................

Who will provide your Shared Lives carer with a copy of your risk assessment and guidelines for managing risks? .................................................................
 ......................................................................................................................................................

Have any restrictions been agreed with you for your own safety, or the safety of others?  
Yes ☐  No ☐

If yes, please explain what these are:
 ......................................................................................................................................................
 ......................................................................................................................................................
 ......................................................................................................................................................

(L) Getting upset or angry  
Everyone is upset or angry sometimes.

Do you know anything that makes you angry?  Yes ☐  No ☐

What can make you angry? ............................................................................................................
 ......................................................................................................................................................

How do you show you are angry? ..................................................................................................
 ......................................................................................................................................................

Do you know anything that makes you upset?  Yes ☐  No ☐

What can make you upset? ............................................................................................................
 ......................................................................................................................................................
How do you show that you are upset? .................................................................................................................................

What will help if you get very upset or angry? ........................................................................................................................

(M) The future
Are there any new things you would like in your life in the future – for example new friends, a relationship, doing something different during the day or to live in your own flat?

.................................................................................................................................................................................................

Is there anything you need to learn or do before these things can happen? Yes  □  No  □
<table>
<thead>
<tr>
<th>Things to learn or do</th>
<th>Who will help?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(N) **Your health**

<table>
<thead>
<tr>
<th>GP at home</th>
<th>New GP (if changed for the Shared Lives arrangement)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Name</td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Tel. No</td>
<td></td>
</tr>
</tbody>
</table>

Do you have any health problems your Shared Lives carer(s) needs to know about?

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
Do you require any support from your Shared Lives carer in staying well or managing your health?  Yes ☐ No ☐

If yes, please explain more, and/or attach a written health plan

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................

Do you have a written health plan?  Yes ☐ No ☐
(e.g. for diabetes / epilepsy etc)

If yes, will your Shared Lives carer have a copy?  Yes ☐ No ☐

Who else helps you with your health? (e.g. consultants, psychiatrist, psychologist, CPN, community nurse, diabetic nurse, dentist, optician, occupational therapist, physiotherapist, chiropodist)

<table>
<thead>
<tr>
<th>Name</th>
<th>Job</th>
<th>How does this person help you?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you take prescribed medication?  Yes ☐ No ☐

If yes, what prescribed medication do you take?

<table>
<thead>
<tr>
<th>Name and dosage of medication</th>
<th>When do you take it</th>
<th>Important information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Can you take any over-the-counter medicines (e.g. painkillers / cough medicines etc)?  Yes ☐ No ☐

If yes, which ones can you take?

........................................................................................................................................................................
........................................................................................................................................................................
Taking your medication
Will you take your own medication and look after it safely without help?  
Yes ☐ No ☐

OR

Will you take your own medication and look after it safely but need to be reminded by your Shared Lives carer?  
Yes ☐ No ☐

OR

Do you want your Shared Lives carer to look after your medication and give it to you?  
Yes ☐ No ☐

Is there anything you are allergic to?  
Yes ☐ No ☐

If yes, please give details: .................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................

What should be done to prevent or deal with the allergy?
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................

(O) Personal care (looking and feeling good)
It is helpful for your Shared Lives carer(s) to know whether you require support with your personal care.

Do you like to have a bath or a shower? .................................................................

How often? ...........................................................................................................

In the morning or in the evening? ...........................................................................

Do you need help with having a wash or a bath or a shower?  
Yes ☐ No ☐

What help do you need? ..........................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................

Do you need help if you want to go to the toilet?  
Yes ☐ No ☐

What help do you need when you want to go to the toilet?
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
Do you need help with any of these things?

<table>
<thead>
<tr>
<th>Yes/No</th>
<th>The help you need</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Shaving</td>
</tr>
<tr>
<td></td>
<td>Cleaning your teeth</td>
</tr>
<tr>
<td></td>
<td>Looking after your nails</td>
</tr>
<tr>
<td></td>
<td>Care of your ears</td>
</tr>
<tr>
<td></td>
<td>Getting dressed</td>
</tr>
<tr>
<td></td>
<td>Coping with periods</td>
</tr>
<tr>
<td></td>
<td>Doing your hair</td>
</tr>
<tr>
<td></td>
<td>Make-up</td>
</tr>
<tr>
<td></td>
<td>Other things (could include care of glasses contact lenses, hearing aids)</td>
</tr>
</tbody>
</table>

(P) Your post
Do you need help with reading letters or cards you receive? Yes ☐ No ☐

What help would you like from your Shared Lives carer? .................................................................

Who else can help with this? ....................................................................................................................

Do you need help with replying to your mail? Yes ☐ No ☐

What help would you like from your Shared Lives carer? .................................................................

Who else can help with this? ....................................................................................................................

(Q) Keys
You will be given a key to the Shared Lives carer’s house Yes ☐ No ☐
If you will not be given a key, the reason is.................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................

(R)  Anything else
Is there anything else you would like your Shared Lives carer to know about you, or to support you with?
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................

(S)  Important contacts

<table>
<thead>
<tr>
<th>Role or Job</th>
<th>Name</th>
<th>Address</th>
<th>Tel No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>College tutor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day service keyworker</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dentist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Role or Job</td>
<td>Name</td>
<td>Address</td>
<td>Tel No</td>
</tr>
<tr>
<td>----------------------</td>
<td>------</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>Optician</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chiropodist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational therapist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physio-therapist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPN</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community nurse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetic nurse</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
(T) Signatures
I have completed this Adult Plan with my Shared Lives worker. I agree that the information is about my wishes and needs in a Shared Lives arrangement, and that it can be given to my Shared Lives carer(s)

Signed ..............................................................................................................................................................
(Person using or living in the Shared Lives arrangement or their representative. If signing as representative, please state your relationship with client)

Date ...................................................................................................................................................................

Signed ..............................................................................................................................................................
(Shared Lives worker)

Date ...................................................................................................................................................................

(U) Independent contact
Here is the name and telephone number of a [person/organisation] you can contact if you would like to discuss your Shared Lives arrangement with someone who is not part of the Poole Shared Lives Service. This [person/organisation] will also help you make a complaint or raise a concern about your Shared Lives arrangement if you wish.

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................
...................................................................................................................................................................

................................................................................................................................................
### Reviews and Changes to your Adult Plan

<table>
<thead>
<tr>
<th>Date of review</th>
<th>Change</th>
<th>Reason for change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Transition and Mixed Child-Shared Lives Arrangements (Formerly Adult Placement)**

**Introduction**
Shared Lives Plus and the Fostering Network recognise the benefits of inter-generational practice. It is our view that intergenerational placements are of benefit to all parties. This jointly agreed practice guide is underpinned by this belief.

There are many instances in which Shared Lives carers may find themselves assisting with the transition of young people from children’s to adult services. There are also instances where they may provide accommodation and support to both children placed through the Fostering Service and adults under Shared Lives. There are a number of different ways in which transitional and mixed child-adult placements arise:

- Foster carers who wish to become Shared Lives carers in order to facilitate a continuation of support into adult life to an individual child.
- Foster-carers who are supporting siblings (that is children placed who are related to one another) or have other children of differing ages placed with them and wish to continue to support those siblings or other children after the age of 18. Shared Lives schemes will become involved when the oldest child reaches 18 but fostering will remain involved with the younger children.
- Foster carers who wish to accommodate siblings but where one or more are already 18+.
- Short breaks carers approved to support both adults and children.
- Schemes that have developed a service for 16 – 18 year olds in response to transition issues for this age group.
- Schemes that offer parent and baby placements.
- Young people moving from other children’s services to adult services e.g. from residential care.
- Shared Care arrangements running into adult life.

Where the term ‘carer’ is used on its own in this document it refers to a person who is intending to work or is working as both a Shared Lives carer and a foster carer.

This guidance only relates to England and to mixed child adult placements where children are placed under fostering regulations.

The following Shared Lives Plus practice guidance represents what we consider to be best practice advice for such transition and mixed child-adult placements.

In order that transition from child to adult placement takes place effectively and for mixed child-adult placements to be a positive experience for all parties Shared Lives Plus believes that there should be jointly agreed protocols and procedures between children’s and adult services. In order to create a national consistency to this approach it is felt that these should be agreed to at a national level between key stakeholder organisations.

Mixed child-adult placements require particularly careful planning to take account of:

- the different legal status of children and adults
- the difference between the children and adults legislative frameworks
- the fact that separation between children’s services and adult services can cause significant communication difficulties
- the need to avoid unnecessary breakdowns in funding arrangements caused by a lack of forward planning for young people in foster care

By planning carefully we can achieve stability of placements, a seamless transition into adulthood and clarity of information about payments.

**Practice guidance**
Principles of good practice:
- The wishes and requirements of the individuals placed are central
- Good information must be provided to carers about Shared Lives and fostering requirements
- Carers working for fostering and Shared Lives services will need support to be clear about their role with each person that they support
- There is a need to ensure that effective communication takes place between children's and adults care management teams throughout the transition period
- There is a need for clear protocols governing the way in which the Fostering and Shared Lives services work together
- There is a need to avoid unnecessary duplication of processes and paperwork
- Good risk assessment and risk management is essential

Protocol for Transition from Foster Care to Shared Lives

Schemes will need to consider a number of factors when supporting Foster Carers who wish to continue to care for the young people placed with them once they reach 18:

- Information about Shared Lives should be available for children’s teams and foster carers so that it can be considered alongside other long term options such as direct payments or discharge from care to continue to live with the foster carers without support or funding.
- The need for a continued service into adult life should be formally identified as early as possible but certainly by the age of 16.
- Shared Lives schemes should be involved at an early stage in transition planning
- Information sharing between agencies should be given a high priority (e.g. transfer of information from the fostering agency to the Shared Lives scheme; Information sharing between agencies when making a new placement and resolving any confidentiality issues which may make inhibit comprehensive information sharing).
- Shared Lives schemes are subject to different Regulations compared to foster care. They also have separate Regulators. Shared Lives is regulated in England by the Care Quality Commission and Fostering is regulated by Ofsted.
- The issue of care management support for the young person must be addressed. This should recognise the current difficulty which exists in the different legal responsibilities which the Shared Lives carer and the foster carer have to the people placed with them. Ensuring that this change in responsibilities is explained carefully to the foster carer moving into the Shared Lives scheme.
- The Shared Lives scheme will need to assess the suitability of the foster carer to be a Shared Lives carer. This will involve careful communication between the fostering agency and the Shared Lives scheme. The Shared Lives scheme assessment should take into account the foster carer assessment.
- Considering the relative knowledge skills and qualification requirements of foster carers and Shared Lives carers. Ensuring that the foster carer is able to provide evidence that they have the skills and knowledge to support adults.
- Level of respite support for Shared Lives carers and foster carers may differ and any discrepancies will need to be recognised and wherever possible equalised.
- The scope of any existing Carer Public Liability Insurance will need to be looked at and fresh or amended cover obtained as appropriate.
- Any implications related to DBS or other safeguarding checks both for service users and members of the household.
- Impact of Building Regulations (if there are more than 6 people in the house then the foster carer may need to apply for change of use of the premises). Refer to separate guidance on Houses in Multiple Occupation.
- Who will fund the placement of the young person once they reach 18? Also consider the implications of any differential fee level and impact of benefits entitlement.
- The Benefits impact when the young person turns 18 needs to be considered both in terms of the impact on charges and on the foster family/Shared Lives family.
Carers need to be fully informed about the HMRC rules covering tax relief and National Insurance contributions for both Fostering and Shared Lives.

Any continued or joint use of any adaptations or special equipment to be considered.

Protocol for joint working between the Fostering/Share Care Agency and the Shared Lives scheme

Agreement between agencies is vital to the success of any mixed child-adult placement. This should set down the way in which the agencies will work together. A working protocol should be drawn up which includes agreement on:

- The identification of a lead agency
- Being clear that approval as a foster carer does not automatically make someone suitable as a Shared Lives carer and vice versa
- The way Shared Lives carers should be assessed:
  - if the carer is an approved foster carer then the Shared Lives scheme should be able to use the assessment of the fostering agency as a basis for their own assessment;
  - if the Shared Lives carer wishes to support someone under 18 with personal care needs then the fostering agency should be able to use the Shared Lives assessment as a basis of the foster carer assessment;
  - if the carer has applied to work with both adults and children then the assessment should be carried out jointly by the agencies.
- Agency involvement in Carer training. Both agencies should be involved in training where the carer has applied to support both adults and children.
- Health and safety issues particularly around risk assessment
- If the carer has applied to work with both adults and children the assessment report should be presented separately to the fostering and the Shared Lives Panels
- Situations where the Shared Lives carer wishes to provide support to 16-18 year olds without personal care needs. In this case their Shared Lives assessment should be appended to a fostering service assessment and presented to the fostering panel as required by the Fostering Services Regulations 2002.
- The need for consultation between the agencies before making a decision to place anyone into the household. Matching decisions should be agreed by all agencies involved after comprehensive information sharing. All agencies should be involved in the placement agreement meeting and the detail of the service user plan.
- Support visits: there must be an agreement between the agencies about the frequency and timing of support visits to avoid unnecessary burden on the carer.
- The way in which complaints are investigated. All agencies must:
  - liaise fully during any investigation
  - be notified of the outcome of any investigation
  - be notified of any complaint or allegation
- The way in which the placements are monitored. Clear identification of a lead agency for each placement and agreement about where joint placement reviews would be appropriate.
- How carer reviews will be conducted and agreement about when it would be appropriate for these to be held jointly.
- Post approval training:
  - each carer should have a common learning and development plan agreed with the carer by both agencies;
  - the plan should clarify which agency is responsible for delivering which parts of the plan and how the carer should be supported to enable them to take part in learning opportunities.
- DBS checks:
  - agencies must be clear about the DBS checks required, who is checked and which agency is responsible for carrying them out;
  - the DBS check must be the ‘DBS Enhanced with list checks’.
The shared responsibility for POVA and POCA procedures particularly around relative reporting and information sharing responsibilities.
Intergenerational Practice

In the United Kingdom the Centre for Intergenerational Practice (CIP) run by the Beth Johnson Foundation is the lead and authority on Intergenerational issues. They produce guidance, undertake studies, determine standards and widely promote the benefits of Intergenerational Practice (IP).

Their 2006 publication “Intergenerational Programmes – An introduction and examples of practice 2006” introduces readers to Intergenerational Practice as follows:

“…Intergenerational practice aims to bring people together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations and may contribute to building more cohesive communities. Intergenerational practice is inclusive, building on the positive resources that the young and old have to offer each other and those around them.

These generations have become progressively disconnected from each other at an individual, family and community level due to a number of circumstances that has meant that the natural relationship between them has been affected. These disconnections include smaller families, increased geographical distance between family members, divorce and single parent households, the different expectations of working women and the impact of migration.

Alongside these changing family patterns has been the development of age segregated activities and living arrangements that have further distanced the old and young from each other. This has been exacerbated by the way that policies and services are normally around target groups or issues that are by their nature disjointed and discriminatory.

The aim of intergenerational work is to find ways to develop and strengthen these relationships and consequently become an agent of social change with benefits to the whole of society. The middle generation has an important part to play in enabling and supporting this intergenerational exchange to take place.

The intergenerational relationship is significant for a number of reasons:

- It recognises that everyone has the capacity as human beings to learn and grow throughout the whole of the life span.
- It breaks down the structures in society which perpetuate the fact that chronological age, at both ends of the life span, often excludes people from the mainstream activities; in addition the young and old are not seen as contributing to the economy and are therefore commonly described in terms such as burden.
- It promotes a sense of social responsibility as a citizen because older people are able to support and nurture the young, whilst the young recognise that older people can become frail and need care as they age.
- This social responsibility promotes communities that support and value all of its members in a culture of respect and mutual understanding.
- It sees the young and old as active, participating members of their community contributing to the overall well being of those around them and creating more cohesive and healthy communities.
- It acknowledges every human beings need for reciprocity, giving back something to others, at a time when the opportunities for this to occur naturally within families have diminished.
- It demonstrates the mutual benefit that each group gains from the exchange and breaks down the barriers of perceived power between them.
- It creates a synergy which strengthens and supports the young and old and so enables them to make changes which benefit everyone.
This has lead to an increasing recognition of the importance of looking at the issues of ageing through an intergenerational focus, for the following reasons:

- Older people are recognised as having a valuable role in society by serving youth in a way that the middle generation cannot. They can receive service from youth which recognises the responsibility of others to support elders when the process of ageing requires care.
- It fills the need of the older generation to nurture the young and to pass on their experience of life to the benefit of future generations.
- It develops an understanding amongst the generations of what it is like to be old and seeks to dispel the myths and fears.
- It leads to greater respect for older people and recognises their contribution in striving towards a better society.
- It removes the fears and prejudices that older people have of the young and builds a safer and more civilised society for all.
- It allows ageing to be recognised as a continuum throughout life with different phases and transitions which are all of equal value.

In summing up I would wish to stress my belief in the importance of protecting and developing productive intergenerational relationships. One only needs to look around the world at the impact of globalisation, migration, HIV/AIDS, the breakdown of families and increasing social tension to realise how important it is to find ways to mend the tears in the fabric of our societies.

Intergenerational approaches can provide at least some of the thread we need to work towards this."

Intergenerational Practice and Shared Lives

Shared Lives is a service provided by individuals and families (Shared Lives carers) in local communities and is distinguished by the following features:

- Arrangements are part of organised Shared Lives schemes that approve and train the Shared Lives carers, receive referrals, match the needs of service users with Shared Lives carers and monitor the placements
- People using Shared Lives services have the opportunity to be part of the Shared Lives carer’s family and social networks
- Shared Lives carers can use their family home as a resource
- Arrangements provide both parties with the opportunity to forge committed and consistent relationships
- The relationship between the Shared Lives carer and the person who lives with them is of mutual benefit
- Shared Lives carers can support up to three people at any one time
- Shared Lives carers do not employ staff to provide care to the people placed with them and as a result often get support from members of their friends and family network.

People engaged in Shared Lives arrangements often forge strong, enduring relationships that enrich the lives of all participants. People living with Shared Lives carers have the opportunity to forge links and friendships with the friends and family of the carer and to become a real part of their local community. This can also be a reciprocal arrangement with the person engaged in Shared Lives bringing their own networks and contacts to the arrangement and giving the carer and their family a chance to forge new relationships. This can often result in Shared Lives carers operating in a way that can be seen as intergenerational in its broadest sense.

For example:
• Parents, foster carers and child minders who are bringing up or supporting children in their home alongside adult Shared Lives service users
• Shared Lives arrangements for parents and babies
• Shared Lives carers who have an older parent or dependent living with them alongside a younger person living there as part of a Shared Lives arrangement
• Younger Shared Lives carers who have Shared Lives arrangements supporting older people and vice versa.
• Family and friends of the Shared Lives carer bringing opportunities for people of different generations to be together

(NB Shared Lives Plus has produced clear guidance for Shared Lives schemes to ensure that households who support both children and adults at the same time have the skills they need to be able to manage this effectively and get consistent support and information from all the agencies involved in the arrangement.)

The benefit of this intergenerational contact cannot be underestimated and Shared Lives Plus is committed to supporting Shared Lives carers and schemes to recognise when they offer intergenerational opportunities and then to celebrate the value these bring to participants and communities. Shared Lives Plus is taking active steps to enable Shared Lives practitioners to engage with the intergenerational aspects of their practice and to minimise any barriers that may arise as result.

Intergenerational Practice and Homeshare

Homeshare is a simple way of helping people to help each other. A Homeshare involves two people with different sets of needs, both of whom have something to offer. Firstly, people who have a home that they are willing to share but are at a stage in their life where they need some help and support. These people are known as Householders. Secondly, people who need accommodation and who are willing to give some help in exchange for somewhere to stay. These people are known as Homesharers.

By putting these two people together Homeshare manages to find the Householder the help, support and security they need. At the same time Homeshare finds the Homesharer a place to call home, possibly rent free and maybe in an area or property that would have been financially out of their reach. Both people, their families and communities benefit from the arrangement and the costs are very low. Homeshare works particularly well for people from different generations with older Householders and younger Homesharers able to help each other in a way that suits them both.

Many housing and/or support services inadvertently place the user of the services in the position of “recipient” and the people who provide that service in the powerful position of “provider”. However hard people try and minimise this obvious power imbalance it is always part of the arrangement and can affect the way the service is provided and received. Homeshare has the real advantage of being “power neutral”. Both the Householder and the Homesharer are gaining from the arrangement and can both be seen as “service users”. Both parties feel valued and respected for whatever they are contributing and this allows them to enter the arrangement with dignity and enthusiasm.

Homeshare is run by a Homeshare Programme that employs a Homeshare Co-ordinator. The Co-ordinator has the task of finding suitable Householders and Homesharers and introducing them to each other. Co-ordinators also provide any help and support that the Householder or Homesharer need in order to keep the Homeshare arrangement working well for both parties.

The Centre for Intergenerational Practice (CIP) has produced a set of standards to measure the work of intergenerational programmes. The standards can be used to enable programmes to evidence their value and the CIP are then able to formally approve suitable
programmes as “Approved Intergenerational Practice” providers. As part of its commitment to
Intergenerational practice Shared Lives Plus has recently gained approved provider status
for its two Homeshare pilot programmes

Conclusion
Shared Lives Plus believes that Intergenerational Practice has tremendous value to
individual participants, communities and our wider society.

Shared Lives and Homeshare create natural opportunities for real and often lasting
relationships to be forged between people from different generations and for a better mutual
understanding to emerge as result. Engaging with the Intergenerational agenda may
highlight difficulties and barriers and Shared Lives Plus is committed to working with
practitioners and regulators to minimise these.

Shared Lives Plus is committed, with the support of the CIP to working with Shared Lives
and Homeshare Coordinators and participants to promote the intergenerational aspects of
their arrangements and to enable them to appreciate the benefits that these bring.
Payment Model for Long Term Shared Lives Carers

Introduction

Shared Lives Plus carried out a survey of Shared Lives payments and benefits across the UK between May and September 2005. The report based on this survey called Adult Placement Costs presents baseline information about current practices.

The survey showed that a very wide range of payment systems and structures were in use.

- Some differences stemmed from the view the local authority took of Shared Lives arrangements. Those that saw Shared Lives as a form of residential care tended to try and apply the payment system used for residential care to Shared Lives arrangements. These payment systems were often inappropriate to Shared Lives.
- Other differences arose as a result of the funding stream used to fund the placement. Shared Lives payments in the main were funded totally, or in part, through community care budgets, particularly in England. Systems for assessing need varied widely and resulting payments were not consistent.
- Banding criteria typically determined the level of Shared Lives fees paid through community care budgets. The rationales on which banding criteria were based varied widely. Client groups, level of support needs, and hours of care provided formed the basis of a range of banding arrangements with varying degrees of complexity. This gave rise to a diverse range of payments across different schemes in all types of care.
- There was a lack of consensus over which items (if any) should attract additional payments to carer(s), particularly travel and equipment costs. Some schemes lacked any policy guidance so that additional payments were awarded on a seemingly arbitrary basis.

The purpose of the report was to provide base line information from which we could identify and establish good practice. Following the publication of the report, Shared Lives Plus established a working group of Shared Lives carers and schemes, whose remit was to produce good practice guidance about the structure and level of Shared Lives fees. The working group recognised that a transparent, equitable and fair payment system is vital to the recruitment and retention of Shared Lives carers. Equally, people using Shared Lives services must be confident that they will retain a level of disposable income that enables them to be as independent as possible, to pursue interests and participate in community life. The wide variation in payment systems and charging policies lead to clear inequities and the preponderance of payment and charging systems based on a residential care model are damaging to Shared Lives.

Fair remuneration and fair charging policies are both therefore important for the continuing success and growth of Shared Lives. The payment model described below is designed to ensure that Shared Lives carers who provide long term accommodation, support and care are fairly and appropriately remunerated. It is based on a series of underpinning principles that are linked to those underpinning Shared Lives. This linkage is intended to ensure that the payment model is appropriate to Shared Lives and will not inadvertently distort the way in which Shared Lives arrangements are seen and provided. Shared Lives Plus is separately producing guidance on charging in Shared Lives that address some of the current inequities in Shared Lives charging policies.

DEFINITIONS

Monetary Payment
The amount of money that the Shared Lives carer(s) receive each week for accommodation, board and support.

Total Payment
The money paid to the Shared Lives carer(s) each week together with other benefits (such as paid respite care).
Long Term Care
Long term care is defined as 'care that is intended to be permanent and lasts longer than 26 weeks'.

Underpinning principles
1. Shared Lives arrangements offer people an opportunity to be supported within an ordinary household or family. Supporting someone within your own home and sharing your family life with them is very different from working in or managing a residential care home. Shared Lives carers do not work shifts or have regular time off. They do not employ staff to provide care to the person placed with them and have responsibility for them 24 hours a day and 7 days a week. They have to balance the needs and wishes of everybody in the household and maintain their own personal life while having 24/7 responsibility for the person placed with them. As a community based model of care and support it is not appropriate to use a residential payment model for Shared Lives carer(s). People living in Shared Lives arrangements are not classed as living in residential accommodation and CRAG (Charging for Residential Accommodation Guide) should not be used to calculate the payment to the Shared Lives carer.

2. The Shared Lives carer payment model should be easy to understand, transparent and fair.
   - The monetary payment is only part of the total payment package. The total payment will also include a range of non financial benefits. The payment model should therefore set out both the monetary payment and the other benefits that the Shared Lives carer(s) will receive.
   - The monetary payment will come from a number of different sources (most usually Housing Benefit for the rent of the room, a contribution from the person placed towards their board and a payment from the local authority or personal budget for support provided by the Shared Lives carer). The payment model should guarantee a total payment linked to the requirements made of the Shared Lives carer(s) and regardless of any changes in the different funding sources. Thus (given the requirements made of the Shared Lives carer(s) remain the same) if one source of funding is reduced the placing authority is responsible for ensuring that the Shared Lives carer(s) continues to receive their agreed total payment. Equally if one source of funding (e.g. Housing Benefit) is increased the total payment to the Shared Lives carer(s) will remain the same as it is linked to the requirements made of the Shared Lives carer(s) and not the funding stream.

Where the person has a Personal Budget
Where the Shared Lives carer(s) is providing support to someone with a personal budget the individual will normally pay for the cost of their board from their benefits and their support from their personal budget. Payment for support must be made directly to the Shared Lives scheme. The level and method of payment will be agreed and set out in financial agreement between the person, the Shared Lives carer(s) and the Shared Lives scheme. Where the cost of accommodation is met through Housing Benefit there will need to be a separate agreement with the placing authority that any shortfall caused by a decrease in the Housing Benefit payment will be met by the placing authority.

---


There should be a review of the total payment package in the light of any change in the level of need of the person or the requirements made of the Shared Lives carer(s). Reviews should be held at least annually or more frequently if the needs of the person are changing rapidly.

Where the person has a Personal Budget
A change in the level of need of the person will be reflected in the amount of money in the personal budget. Where the money is increased the person is in a position to choose whether it should be spent in purchasing extra support from the Shared Lives carer(s) or from elsewhere. The decision should be made in consultation with the Shared Lives carer(s) as it will impact both upon the Shared Lives carer(s) and on the household.

There should be an annual uplift of the monetary payment to the Shared Lives carer(s) which should be linked to an accepted annual inflation indicator such as the Retail Price Index (RPI) or Consumer Price Index (CPI).

Where the person has a Personal Budget
This annual uplift will normally be reflected in the level of the charge for rent, board and support. The financial agreement between the individual and the Shared Lives carer(s) should contain provision for an annual uplift, the level to be linked to the annual rate of inflation.

Where the support payment is subject to charging, the local authority or exceptionally the Shared Lives scheme will have responsibility for collecting the charge. This should not be the responsibility of the Shared Lives carer(s).

3. Successful long term Shared Lives arrangements involve **regular breaks** for both the Shared Lives carer(s) and the person in the Shared Lives arrangement and a **range of purposeful day time, occupational and leisure activities for the person outside the family home** and involving people other than the Shared Lives carer(s). The monetary payment to the Shared Lives carer(s) should only be part of the funding package for the person using or living in a Shared Lives arrangement.

The total funding package will also include:

**a) Funded day time and leisure activities outside the family home**

1. The Shared Lives carer(s) monetary payment will cover the cost of accommodation, board and morning, evening and weekend support.
2. Day time activities Monday – Friday should be tailored to the requirements of the individual and funded (and ideally provided) separately.

For people of working age: Funding should be sufficient to allow the person to be involved in purposeful activity outside their home for 6 hours each day.

For retired people: Funding should be sufficient to allow the person to be involved in a range of activities inside and outside the home.

Where the person has a Personal Budget
Where the person has a personal budget, funding for day time activities will normally be included in their budget. The individual is then in a position to decide, with support where needed, how this money is best spent.
b) **Transport**

Shared Lives carers should be able to receive a contribution from the individual towards the cost of petrol where they are using their car for journeys specifically for the individual. The reason for and level of the contribution must be agreed at the Shared Lives Arrangement Agreement meeting or at the Shared Lives arrangement review.

Where one individual has purchased a vehicle through the Motability Scheme, this vehicle should only be used for journeys made for the benefit of that person.

c) **4-6 weeks funded short break** for the Shared Lives carer(s)

- Local authorities/schemes should directly fund the cost of the short break at no cost to the Shared Lives carer(s).
- Local authorities/schemes should avoid funding the cost of the short break through an extra payment to the Shared Lives carer(s) because of adverse tax and employment implications.
- The Shared Lives carer(s) should continue to receive accommodation and support payments (but not payments for board) while the individual is having their break.
- Suitable short break provision should be identified with each person at a placement arrangement meeting. The suitability of this short break provision should be reviewed at the Shared Lives placement review meeting. The scheme should ensure that appropriate short break provision is identified for each person in a long term arrangement.
- Short breaks should be able to be provided flexibly in response to family or other emergencies with pro-rata payments for short periods e.g. an evening or afternoon.

d) **Introductory Periods**

Shared Lives carer(s) should receive a pro rata payment for planned introductory visits after the match between the person and the Shared Lives carer(s) has been provisionally agreed.

e) **Payment following the ending of a Shared Lives arrangement**

**Planned Endings**

Where the individual gives notice that they wish to end the arrangement:

- The Shared Lives carer(s) should normally receive full monetary payment for the notice period (normally 28 days).
- Where there is a gap between the ending of one arrangement and the beginning of the next the local authority may wish to consider paying a retainer fee to cover ongoing expenses in order to avoid losing a valuable and cost effective resource.

Where the Shared Lives carer(s) gives notice that they wish to end the arrangement:

- The Shared Lives carer(s) will receive full monetary payment for the notice period (normally 28 days) except where at the Shared Lives carer(s) request the arrangement ends before the end of the notice period, the monetary payment to the Shared Lives carer(s) will end with the ending of the arrangement.

**Unplanned endings**
Except where an arrangement has ended because of a proven allegation of abuse against the Shared Lives carer(s), the Shared Lives carer(s) should receive full monetary payment for the notice period (normally 28 days).

Where someone has died in a Shared Lives arrangement: The Shared Lives carer(s) should receive full monetary payment for 28 days after the death of the person.\(^4\)

f) Absences

Absence of the person living in a Shared Lives arrangement because of a hospital stay

For the first 4 weeks: Shared Lives carer(s) should continue to be paid in full (recognising that Shared Lives carer(s) will continue to be involved in supporting the person in hospital).

From 4 weeks: The Shared Lives carer(s) should continue to be paid for accommodation and support but not for board. Where accommodation is funded through housing benefit local authorities will need to consider making an ex gratia payment to cover the loss of income from housing benefit. This arrangement should be reviewed every four weeks until the person returns home or the arrangement ends.

Absences because of a holiday taken by the person living in the Shared Lives arrangement in addition to their agreed short break

The Shared Lives carer(s) should continue to receive accommodation and support payments while the individual is having their break. The individual will not continue to pay for board as that money will go towards the cost of meals during their break.

Absence because of a temporary suspension of the arrangement following an allegation against the Shared Lives carer(s)

The Shared Lives carer(s) will continue to be paid in full during the period of suspension of the arrangement (in line with the Scheme or local authority policy on suspension).

Absence of the individual because of the illness or hospitalisation of the Shared Lives carer(s)

For the first 4 weeks: Shared Lives carer(s) should continue to be paid in full.

After four weeks: Where the Shared Lives arrangement is to continue: The payment will be reduced. The placing authority will continue to pay a retainer which takes into account the continuing costs of retaining a place for the individual in the home of the Shared Lives carer(s).

Where the Shared Lives arrangement is not to continue: The Shared Lives carer(s) should receive payment in full for a further 28 days in lieu of notice.

\(^4\) It is acknowledged that housing benefit payments will stop immediately following the death of the person and that local authorities do not have the power to fund accommodation costs in unregistered settings. In that circumstance, the local authority should consider making an ex gratia payment that covers the loss of income from housing benefit for the 28 days.
g) Training
Shared Lives schemes should support Shared Lives carer(s) to attend training courses by covering the costs of the course and the Shared Lives carer(s)’s travel costs. Where a course is held at a time when the Shared Lives carer(s) has caring responsibilities, the scheme should cover any additional costs incurred by the Shared Lives carer(s) for alternative care arrangements necessary in order to attend the course.

h) Public Liability Insurance
Schemes should consider covering the cost of the Shared Lives carer Public Liability Insurance.

i) Shared Lives Plus Membership
Shared Lives carer contact with Shared Lives Plus is confidential and is not shared with schemes unless requested by the Shared Lives carer. Our membership offer to Shared Lives carers includes:

- A confidential Shared Lives carer support and advice line
- A member’s only advice line hosted by South Liverpool Citizen’s Advice Bureau giving information about benefits and housing
- Full Shared Lives Plus members’ Public Liability insurance
- Legal helpline and expenses cover
- An online forum where Shared Lives carers can connect and share their knowledge
- Discounted conference fees
- Shared Lives carer breaks and funding for local/regional events
- Support and guidance to develop and maintain Independent Shared Lives carer groups

Full membership includes all of the benefits above.

Basic membership includes all the benefits above with the exception of the Public Liability Insurance.

Schemes should consider providing Shared Lives Plus membership for all their approved Shared Lives carer(s).

- Where the person has a Personal Budget
  The benefits listed in c)-i) are part of the Shared Lives carer(s)’s terms and conditions of work and the responsibility for meeting the cost of these is the Shared Lives scheme’s rather than the individual’s. Scheme costs therefore include infrastructure costs (scheme staff, travel, office running costs etc and the cost of ensuring the Shared Lives carer(s)’s terms and conditions of service). Scheme costs may be met separately by the funding authority. Alternatively the scheme may include a weekly management charge as part of the total arrangement fee (which in that case will be made up of the total monetary payment to the Shared Lives carer(s) and the scheme management charge). The management charge will be set at a level that reflects the total costs incurred by the scheme in supporting the placement. The management charge will be broken down so that it can be readily understood by both the person with the individual budget and the Shared Lives carer(s).

The Shared Lives carer payment model
The model should include three areas of payment:

1. A care and support payment which is paid from the local authority, health, a personal budget, or someone self-funding their care/support.
- Any care and support payment should **not** be linked (even notionally) to ‘hours worked’. This approach is inappropriate to Shared Lives arrangements and can distort working practice.
- The level of any care and support payment should be transparently linked to the assessment of the requirements and needs of the individual which in turn should inform the scheme matching process and underpin the Service User Plan.
- The additional payments/services should be reviewed after 3 months and then against the changing requirements of the arrangement.

The scheme should use the information provided in the care management assessment or the self-assessment questionnaire as the basis of its own decision on banding levels. Most schemes will want to supplement the information given in these assessments. Shared Lives Plus is developing a model assessment tool designed to ensure that all relevant information is taken into account before making a judgment on banding levels.

2. A payment to the Shared Lives carer for the accommodation provided. The rent for the room which the person living in the Shared Lives arrangement occupies is usually paid for by housing benefit, or if the person living in Shared Lives is ineligible they will need to pay for this themselves.
   - Differing HB payments should not be allowed to affect the level of this basic payment.
   - The basic fee level should be linked to evidenced household costs (mirroring the approach used by Fostering Network)

3. A payment to the Shared Lives carer towards the cost of daily living e.g. food and utilities. The board and lodgings payment is made by the person living in the Shared Lives arrangement to the Shared Lives carer. The amount they will contribute is agreed when the arrangement is set up and included in the Arrangement Agreement.
Funding a Shared Lives Arrangement

Profile of Support to be Provided by the Shared Lives Carer

Introduction
This profiling tool is intended to be used to identify and agree the level and type of support that the Shared Lives carer will be required to provide to the individual and in turn the level of payment they will receive from the Shared Lives scheme. This tool is not intended to be used to assess need but should be used after the community care needs assessment has been carried out, Shared Lives has been identified as the best way to meet the individual’s requirements and the care or support plan agreed. The profile of support needs to be met by the Shared Lives carer, will be informed by the adult/support plan.

The questions in this form are asked in the first person but the form is not a self assessment questionnaire. The form should be completed by the Shared Lives scheme in discussion with the Shared Lives carer and the person using the Shared Lives service (with support as required).

The statements in the boxes will not always be a perfect fit and the statement that is nearest to the level of support needed should be ticked without too much agonizing.

1. Meeting personal care needs – (such as washing, dressing and going to the toilet)
*Please tick the box that most closely describes the amount of support you will need from your Shared Lives carer/s.*

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>A) I will always need my Shared Lives carer(s) to give me a lot of help and/or prompting with personal care, including during the night.</td>
</tr>
<tr>
<td>7</td>
<td>B) I will always need my Shared Lives carer(s) to give me help and/or prompting with personal care in the day.</td>
</tr>
<tr>
<td>5</td>
<td>C) I will sometimes need help or prompting by my Shared Lives carer(s) with personal care.</td>
</tr>
<tr>
<td>0</td>
<td>D) I will not need help or prompting from my Shared Lives carer(s) with personal care.</td>
</tr>
</tbody>
</table>

2. Being alone and safe at home – to what extent can you be left alone and be safe
*Please tick the box that most closely describes the amount of support you will need from your Shared Lives carer/s.*

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>A) I will always need my Shared Lives carer(s) to be around day and night to keep me safe.</td>
</tr>
<tr>
<td>10</td>
<td>B) I will need my Shared Lives carer(s) about most of the time to keep me safe.</td>
</tr>
<tr>
<td>5</td>
<td>C) I can be left without my Shared Lives carer(s) in places that I know for a short time.</td>
</tr>
<tr>
<td>0</td>
<td>D) I can be left without my Shared Lives carer(s) safely for quite a long time.</td>
</tr>
</tbody>
</table>
3. Eating and drinking – how much help you need with eating and drinking
Please tick the box that most closely describes the amount of support you will need from your Shared Lives carer/s.

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>A) I will need my Shared Lives carer(s) to give me a lot of help to eat and drink. My Shared Lives carer(s) will need to feed me and give me drinks. Includes peg feeding.</td>
</tr>
<tr>
<td>5</td>
<td>B) I will need my Shared Lives carer(s) to give me some help to eat and drink. I will need my Shared Lives carer(s) to prepare my meals, drinks and snacks.</td>
</tr>
<tr>
<td>3</td>
<td>C) I can eat and drink without support but will need help to make drinks and snacks.</td>
</tr>
<tr>
<td>0</td>
<td>D) I can make my own drinks and snacks without support.</td>
</tr>
</tbody>
</table>

4. Practical daily living- (e.g. shopping and household tasks such as cleaning, cooking, laundry, gardening etc)
Please tick the box that most closely describes the amount of support you will need from your Shared Lives carer/s.

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>A) I won’t be able to do anything about the house. My Shared Lives carer(s) will need to do all the household jobs and shopping.</td>
</tr>
<tr>
<td>4</td>
<td>B) I will need my Shared Lives carer(s) to give me a lot of help and/or encouragement with household jobs and shopping.</td>
</tr>
<tr>
<td>2</td>
<td>C) I can and will look after my own room and help with the jobs that need doing around the house. I will need help with shopping.</td>
</tr>
<tr>
<td>0</td>
<td>D) I can and will look after my own room. I will be involved in my own washing and ironing and can do my own personal shopping.</td>
</tr>
</tbody>
</table>

5. Managing money – the help and support you need to manage your money and finances
Please tick the box that most closely describes the amount of support you will need from your Shared Lives carer/s.

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>A) I can’t manage my own money or finances at all. I will need my Shared Lives carer(s) to manage my money for me.</td>
</tr>
<tr>
<td>6</td>
<td>C) I do understand a bit about money but will always need a lot of support from my Shared Lives carer(s) with going to the bank and/or shopping and looking after my money etc.</td>
</tr>
<tr>
<td>4</td>
<td>C) I will need some help from my Shared Lives carer(s) to look after my own money, banking and/or budgeting.</td>
</tr>
<tr>
<td>0</td>
<td>D) I can manage my own money and bank account. I can budget quite well.</td>
</tr>
</tbody>
</table>
6. Health and wellbeing – help you require to manage your long term medical condition (e.g. Chronic mental illness, diabetes, epilepsy, heart condition, stroke and medication management etc)

<table>
<thead>
<tr>
<th>Points</th>
<th>A) I will always need a lot of help from my Shared Lives carer(s) to manage my long term medical condition and to take my medication.</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>B) I can take my own medicine with support from my Shared Lives carer(s). I need a lot of support from my Shared Lives carer(s) to manage my long term medical condition, including making and attending appointments with me.</td>
</tr>
<tr>
<td>6</td>
<td>C) I can take my own medicine. I will need some support from my Shared Lives carer(s) in managing my long term medical conditions.</td>
</tr>
<tr>
<td>2</td>
<td>C) I can take my own medicine without any help and can manage my own medical appointments. I only need my Shared Lives carer(s) to keep an eye on my long term health.</td>
</tr>
</tbody>
</table>

7. Emotional wellbeing – support I need to look after my emotional well being (e.g. lack of confidence, depression, anxiety, grieving, frustrations and obsessions etc)

<table>
<thead>
<tr>
<th>Points</th>
<th>A) I need constant help from my Shared Lives carer(s) to try to stay emotionally well.</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>B) I often need help from my Shared Lives carer(s) to try to stay emotionally well.</td>
</tr>
<tr>
<td>8</td>
<td>C) I will need my Shared Lives carer(s) to keep an eye on my emotional wellbeing.</td>
</tr>
<tr>
<td>5</td>
<td>D) I am usually emotionally well.</td>
</tr>
</tbody>
</table>

8. Relationships and being included – support I need to do things in the local community (e.g. using local shops, library, church, pub and socialising with friends)

<table>
<thead>
<tr>
<th>Points</th>
<th>A) I always need support to try out new things in my local community and will need my Shared Lives carer(s) to arrange things for me and often to be with me. This may include help in socialising and making/maintaining friendships.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>B) I need support to go out more and will need my Shared Lives carer(s) to help me find new things to do and come with me until I feel comfortable.</td>
</tr>
<tr>
<td>7</td>
<td>C) I need some support from my Shared Lives carer(s) to</td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>
make new friends, keep in touch with old friends and help me organise my social life.

D) I can socialise, make new friends, keep in touch with old friends and find things to do locally without help. 0

9. Choice and Control – this is about who decides about every day choices – the support that you need to make day to day choices and decisions

<table>
<thead>
<tr>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Other people make most choices on my behalf. I will need my Shared Lives carer(s) to support me to begin to make personal choices, be able to tell people about them and take more control of my own life. 7</td>
</tr>
<tr>
<td>B) I will regularly need some support from my Shared Lives carer(s) to make choices and day to day decisions. 4</td>
</tr>
<tr>
<td>C) I make all the decisions but will sometimes need my Shared Lives carer(s) to give me some support and advise me. I will need support to build up my confidence and how I feel about myself. 2</td>
</tr>
<tr>
<td>D) I do not need help to make choices or decisions. I just need a bit of advice. I fully understand the decisions that I am making. 0</td>
</tr>
</tbody>
</table>

10. Taking risks – this is about staying safe both inside and outside your home (e.g. on the bus, using a gas cooker and crossing roads etc)

<table>
<thead>
<tr>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) My Shared Lives carer(s) will need to do a lot to make sure I stay safe. Without constant support I am likely to be in danger of harm 11</td>
</tr>
<tr>
<td>B) My Shared Lives carer(s) will need to spend quite a lot of time helping me to stay safe. There are some things that I do where my Shared Lives carer(s) will need to be with me so that I don't get harmed. 8</td>
</tr>
<tr>
<td>C) My Shared Lives carer(s) will sometimes need to help me think about the risks involved in the things I want to do and tell me how to stay safe. 5</td>
</tr>
<tr>
<td>D) I can take risks without coming to any harm without needing help. 0</td>
</tr>
</tbody>
</table>

11. Keeping in touch with family and friends – this is about how much support you need to keep you in touch with your family and friends (e.g. making visits, writing letters, on the phone etc)

<table>
<thead>
<tr>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) I need a lot of encouragement and support to stay in touch 15</td>
</tr>
</tbody>
</table>
with family and friends and will always need my Shared Lives carer(s) to organise this and may need them to come with me.

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>B) I want to stay in touch with family and friends but will need help from my Shared Lives carer(s) to make phone calls and arrange to meet.</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C) I will need some reminding from my Shared Lives carer(s) to stay in touch with my family and friends.</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D) I do not need or want any help in keeping in touch with my family and friends.</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12. Communication – this is about how much help you need with letting people know what you want or answering questions (e.g. needing someone who knows you well to help people understand what you are saying, needing help in filling in forms or answering letters)

<table>
<thead>
<tr>
<th></th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) I find it very difficult to make people understand me without help because of my communication difficulties. I will need a lot of help from my Shared Lives carer(s) to communicate with people who don’t know me well.</td>
<td>10</td>
</tr>
<tr>
<td>B) I can find it difficult to make people understand me and sometimes need help to understand them. I will often need help from my Shared Lives carer(s) with people I don’t know or where I feel uncomfortable.</td>
<td>8</td>
</tr>
<tr>
<td>C) I will need help from my Shared Lives carer(s) when I have to deal with forms, official letters or meetings.</td>
<td>4</td>
</tr>
<tr>
<td>D) I can easily get people to understand me and do not need any help.</td>
<td>0</td>
</tr>
</tbody>
</table>

13. Employment and/or education and leisure – this is about the support that you need from the Shared Lives carer to get a job, go to college or a class, or take part in leisure activities.

Note: Shared Lives carers are not expected to provide a day time service to the people placed with them (see Shared Lives Plus payment model). Shared Lives carers that are being asked to provide a day time service should be paid separately for this.

<table>
<thead>
<tr>
<th></th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) I will need support all of the time from my Shared Lives carer(s) so that I can work, learn things or take part in activities.</td>
<td>9</td>
</tr>
<tr>
<td>B) I will regularly need support from my Shared Lives carer(s) so that I can work, learn things or take part in activities.</td>
<td>5</td>
</tr>
<tr>
<td>C) I will need some support from my Shared Lives carer(s) to get myself organised so that I can keep a job, learn new things and take part in activities.</td>
<td>3</td>
</tr>
</tbody>
</table>
### 14. Getting about – this is about the amount of support that you need to get to places you want to go (e.g. work, college, swimming, day service and visiting family etc)

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>A) I will need my Shared Lives carer(s) to take me to the places I want to go.</td>
</tr>
<tr>
<td>4</td>
<td>D) I will often need my Shared Lives carer(s) to take me to the places I want to go.</td>
</tr>
<tr>
<td>2</td>
<td>C) I can travel on my own on journeys that I know but will need my Shared Lives carer(s) to take me at other times.</td>
</tr>
<tr>
<td>0</td>
<td>D) I can travel by myself without help most of the time.</td>
</tr>
<tr>
<td>0</td>
<td>E) I do not need any support to get and keep a job, go to college or a class and take part in activities.</td>
</tr>
</tbody>
</table>
Managing Transport Costs in ‘Long Term’ Shared Lives Arrangements

The transport needs of individuals supported by Shared Lives carer(s) vary greatly and often need to be met in a range of different ways. For some people, the use of public transport and/or taxis may play a significant role in developing independence. For others, either because of the nature of their disability, the lack of accessible transport or the location of the home of the Shared Lives carer, transport will need to be available by car, either the Shared Lives carer’s own or the individual’s (usually through their eligibility for a Motability vehicle). The person’s Service User Plan and the Shared Lives Arrangement Agreement should identify the principal ways in which their transport needs will be met and describe any agreed arrangements for covering the costs incurred.

This document highlights Shared Lives Plus’ view on who would usually be expected to pay transport costs and any issues to consider. Any arrangements agreed should reflect the usual activity of the household and the ordinary negotiations that occur within a household such as: is the Shared Lives carer travelling to town that day anyway? Is the trip planned specially for the service user?

The suggestions here are not prescriptive but should help Shared Lives carer(s) and service users, with support and agreement from other relevant parties, including the Shared Lives scheme, to reach decisions which should be recorded and reviewed.

Transport using Shared Lives carer’s own vehicle

<table>
<thead>
<tr>
<th>Journeys</th>
<th>Paid by service user</th>
<th>Paid by Shared Lives carer</th>
<th>Issues to be considered</th>
</tr>
</thead>
<tbody>
<tr>
<td>To medical appointments</td>
<td>Yes</td>
<td></td>
<td>Infrequent short journeys may be viewed as part of the Shared Lives carer payment</td>
</tr>
<tr>
<td>To meetings (e.g. person-centred planning or day service review)</td>
<td></td>
<td>Yes</td>
<td>Service User would not be expected to contribute if Shared Lives carer’s participation is required at meeting. Where possible the cost should be covered by the scheme or reflected in the payment the Shared Lives carer receives.</td>
</tr>
<tr>
<td>To visit relatives of the service user</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To social events (service user participating independently)</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To social events (Shared Lives carer supporting)</td>
<td>Yes</td>
<td></td>
<td>Costs to be shared if the Shared Lives carer would have been attending independently.</td>
</tr>
<tr>
<td>To respite (for people in long term Shared Lives arrangements)</td>
<td>Yes</td>
<td></td>
<td>Agreement should be reached between the main Shared Lives carer, respite carer and the scheme worker (and if appropriate Care Manager). In some cases e.g. Where the distance is long, the travel costs may need to be recovered from the scheme/Local Authority. Such agreements should be reached before the respite break starts.</td>
</tr>
<tr>
<td>To household social event e.g. Shared Lives carer’s family party</td>
<td>yes</td>
<td></td>
<td>The Service User could be expected to pay a proportionate amount or, since the Shared Lives carer(s) would be going anyway, they might be expected to cover the travel cost for the whole household.</td>
</tr>
</tbody>
</table>
### Journeys

<table>
<thead>
<tr>
<th>Journeys</th>
<th>Paid by service user</th>
<th>Paid by Shared Lives carer</th>
<th>Issues to be considered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days out with carer household</td>
<td>Yes</td>
<td>Yes</td>
<td>Costs should be shared proportionately unless the outing is only for the benefit of the service user.</td>
</tr>
<tr>
<td>Occasional/regular short breaks away</td>
<td>Yes</td>
<td>Yes</td>
<td>Costs should be shared proportionately unless the outing is only for the benefit of the service user.</td>
</tr>
<tr>
<td>To go on household holiday</td>
<td>Yes</td>
<td>Yes</td>
<td>Costs should be shared proportionately if this is a planned holiday for the whole family/household.</td>
</tr>
<tr>
<td>Leisure journeys during household holiday</td>
<td>Yes</td>
<td>Yes</td>
<td>As above</td>
</tr>
<tr>
<td>To go on holidays/short breaks independent of Shared Lives carer</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attending day service</td>
<td>Yes</td>
<td></td>
<td>If a service user is assessed as needing a day service, the location of the Shared Lives carer’s home and the transport available need to be considered in matching, but if the Shared Lives arrangement is agreed and the individual cannot afford the transport costs, the local authority should be responsible.</td>
</tr>
</tbody>
</table>

### Public transport

Shared Lives carer(s) supporting service users to use public transport should expect their costs to be paid by the service user if the trip is for the service user’s benefit only.

### Motability

1. Motability Operations and the relevant insurance company have recently clarified that a Shared Lives’ service user’s leased Motability car can be used as a ‘family car’ in the same way as it is permitted for ‘birth’ families and ‘foster’ families. Their terms and conditions however make clear that the vehicle must be predominantly being used for the benefit of the person who has the entitlement and their transport needs and wishes at any time must take priority.  

2. The decision about whether an eligible service user (entitled to the highest rate DLA mobility or in future the enhanced rate of PIP) living or wanting to live with a Shared Lives carer is able to apply for a Motability vehicle:

   a. If the service user has capacity then it is their decision – though if the car is to be driven by the Shared Lives carer they need to be asked to consider the views of the Shared Lives carer or be aware, if recently being referred to Shared Lives, that their decision may impact on the choice of Shared Lives carer(s) with whom they could be matched.

   b. If the service user does not have capacity, then a ‘best interests’ decision would need to be made (with Shared Lives carer involvement where they are already supporting the individual) about the decision regarding the individual having a Motability leased vehicle. In Scotland this may require an Intervention Order for Financial Matters under the Adults with Incapacity Act.

   c. If there is an advanced payment for the Motability vehicle being leased, this would normally be the financial responsibility of the service user whose eligibility for the high rate mobility component of DLA has enabled the leasing of the vehicle. If, however, a more expensive vehicle needs to be leased in order to accommodate...
a Shared Lives carer’s family then the Shared Lives carer could be expected to pay any difference in cost involved.

3. If a service user living in a Shared Lives arrangement has or intends to obtain a leased Motability vehicle and the individual (or those representing him/her) has agreed that the vehicle can be used as a ‘family car’, consideration needs to be given to the parties concerned drawing up guidelines together, regarding the usage of the car, to ensure the Shared Lives carer cannot be viewed at any time in the future as taking undue advantage of the situation.

4. In a situation where other service users in a Shared Lives household or the Shared Lives carer is benefitting from the use of a service user’s Motability leased vehicle, petrol costs for journeys could be shared between members of the household benefitting from the use of the Motability vehicle, excluding the service user, whose DLA mobility is being used to lease the vehicle.

5. Where the individual leasing the Motability Vehicle is the only service user in a Shared Lives household, he/she would pay petrol costs on journeys only for his/her benefit and the Shared Lives carer would pay all other petrol costs.

NB: If anyone is considering leasing a Motability vehicle you will have to make an application and be assessed for one of the two levels of the new Personal Independence Payment (PIP). If you are not awarded the Enhanced Rate of the Mobility Component of PIP, you will not be eligible to lease a vehicle on the Motability Scheme.

A person who has already leased a Motability vehicle through their entitlement to DLA mobility at the highest rate will have the lease terminated if they were assessed as not being entitled to the enhanced PIP allowance.

Additional issues
Shared Lives scheme workers in each area in conjunction with Shared Lives carer(s) and people using or living in Shared Lives arrangements where possible, should decide on the best method of reimbursing Shared Lives carer(s) for the cost of providing transport for anyone they support through Shared Lives. The geography of the area as well as other factors will mean that this needs to be a local decision.

Two suggested methods are:

A. A proportion of person using or living in the Shared Lives arrangement’s mobility component (possibly based on relevant mileage recorded by Shared Lives carer over 1 month) being paid to the Shared Lives carer depending on the amount of transport provided by him/her. The proportion should be agreed with the service user and/or his representative, the scheme worker and the Shared Lives carer and recorded in the Shared Lives Agreement.

Advantages:
- Reasonably ‘family friendly’ as costs for individual journeys do not constantly need to be calculated.
- Less on-going recording for the Shared Lives carer.

Disadvantages
- More workable for individuals in receipt of the mobility component of DLA.
- If only eligible for the lower rate mobility component of DLA, often there is not sufficient money to cover the cost of the transport being provided.

B. A mileage rate can be agreed within schemes that the person using or living in the Shared Lives arrangement pays to Shared Lives carer(s) for all journey made in the
Advantages
- Able to be the most accurate method as based on ‘real’ mileage.

Disadvantages
- Can be complicated when taking into account journeys for more than one service user and journeys that are to meet the needs of ‘the household’ rather than an individual service user.
- May not easily fit into ordinary family life.
- Requires regular recording by Shared Lives carer(s).

NB: It is important to note that if Shared Lives carer(s) receive monies from either service users or from the scheme towards transport costs these monies are to be included as part of the Shared Lives carer payment when the Shared Lives carer is completing their tax return.
Disputes - Protocols for Shared Lives Plus Role

What is a dispute?
A dispute is any situation which has developed between Shared Lives carers, either individually or as a group, and scheme worker(s) or management over an issue where, for whatever reason, it has not been possible to find a resolution in the normal day-to-day running of the Shared Lives scheme.

Statement of Principles
1. Shared Lives is a working partnership between all members of any scheme, including carers, scheme workers, managers and people using Shared Lives and their families.
2. Shared Lives Plus, as a membership body is open to all involved in Shared Lives. It provides information, assistance, guidance and support to Shared Lives carers, scheme workers and management and will not engage in any activity which will express preference for or act to the detriment of any or either side during a dispute, except where one party is clearly acting unlawfully or contrary to our Principles of Partnership and guidance.
3. Where there is a dispute, we see ourselves in a mediation role, supporting those involved on both sides, to work towards a sustainable and mutually agreed solution.
4. Shared Lives Plus is not a trade union, promoting only one side of the argument. Instead we will help all people involved to get things right for the benefit of people using Shared Lives and the integrity of the Shared Lives model.
5. All mediation and support will be carried out in a fair, open and transparent manner, whilst respecting the need to be discreet about private and sensitive affairs. We will not share confidential information without the permission of the relevant person (other than where this is necessary for the purpose of safeguarding a child or vulnerable adult), but can be trusted to be open and fair about our objectives.

How does it work?
1. Call Shared Lives Plus – 0151 227 3499 - where you will be put in touch with the appropriate member of staff to deal with your issue. Talk to them about the dispute and give them as many details as possible.
2. We will agree with you any next steps, which may include you: identifying the main issues; gathering information; writing a letter or email or requesting a meeting. We will be available to assist if requested with these steps and where appropriate and practical, attending any planned meeting, provided both parties agree.
3. We will write to you via email and confirm the next steps to be taken
4. On some occasions it may be necessary to meet in person. When this happens we will be sure to make clear to all parties involved the basis for the visit.
5. We will continue to work with both parties until there can be a mutually agreed resolution.

Our mediation role.
The mediation we offer is about helping Shared Lives carers (either individuals or groups) and scheme staff/management who are in dispute to arrive at mutually acceptable agreement and to assist them find ways of improving their future working relationship. As mediators we will take a neutral position but will be available to contribute information and/or advice based on the good practice which Shared Lives Plus promotes and the expectations of regulators.

Our support role.
We will help people to speak and have a voice. We will provide information and work with individuals (or groups) to help them identify the issues they have, and support them to put in writing or voice their concerns in a constructive way. We will also work with them on the steps they may need to take to make progress towards a resolution.

**Our representation role.**

Shared Lives Plus represents the collective wider views of carers, and scheme staff/management, to government, local authorities and other relevant agencies. Shared Lives Plus cannot act as an individual’s representative in any formal or legal setting. We will signpost you however towards other services which may be able to provide these services. In addition, carer members of Shared Lives Plus are, through the organisation’s own insurance cover, entitled to £25,000 of legal expenses to provide representation in the event of a criminal charge being made against them as a Shared Lives carer or de-approval proceedings being initiated by the Shared Lives Scheme.

<table>
<thead>
<tr>
<th>Examples</th>
<th>Our Possible Role</th>
</tr>
</thead>
</table>
| A group of carers are concerned about delays, sometimes of up to three months, in receiving carer payments. Approaches to the scheme and the finance department have not been successful. They want help from Shared Lives Plus to address this issue. | • Support carers to gather concrete evidence of the problem.  
• Assistance if needed to formulate a letter to scheme management requesting the problem be addressed in a reasonable timescale.  
• If unresolved, support to put in a formal complaint and referred to legal helpline. |
| A breakdown in communication between a carer and the Shared Lives scheme. The carer provides excellent support for the service user living with her, but over the last year will only accept minimal contact with the scheme. The carer does not see its value to her or the person she supports and promotes a negative view of the scheme both among other carers and externally. She blames this on ever-changing management, scheme staff and paperwork; she therefore has no confidence in the support and monitoring offered. The carer asks for support from Shared Lives Plus when the scheme management propose de-approval; she feels they fail to recognise their part in the difficulties that have arisen. | • Presence at a mediation meeting if all parties agree.  
• Support for each side to express their concerns.  
• Establish any common ground.  
• Agree areas where communication is needed and how this will be achieved.  
• Refer Shared Lives carer to the legal helpline and to explore use of legal expenses cover. |
Scheme management has introduced a new financial recording procedure for carers. Scheme workers have taken out the new paperwork to the carers they support and explained it to them. There has been a lot of negative feedback about the new system, which is creating a lot of ill-feeling between carers and scheme staff. The scheme management plans to meet with carers to discuss the situation but carers have told some scheme staff that they won’t be able to be open about their opposition, in case it affects the possibility of new Shared Lives arrangements. The scheme asks Shared Lives Plus for their help.

- Presence at a mediation meeting if all parties agree.
- Both parties supported to explain their position.
- Areas of common ground identified.
- Shared Lives Plus provides info. On regulatory requirements and examples of good practice financial processes developed in other schemes.
- Plan for joint review of new system by joint working party of carers and scheme staff.
Protocols and Agreements for Sharing Shared Lives Carers Between Schemes

Principles of Good Practice
1. Neighbouring schemes should discuss the principle of sharing Shared Lives carers.
2. The Shared Lives carers should talk to their schemes before approaching another scheme.
3. Where joint working is taking place then good communication between all parties concerned should be seen as critical to good practice.
4. The wishes and needs of the individual (and any other people already supported by the Shared Lives carer) should be central to any Shared Lives arrangement decision.
5. Accurate and current information about prospective persons to be involved in arrangements must be provided.
6. There needs to be clarity between Shared Lives schemes, who share Shared Lives carers, about their respective roles. This should be subject to written agreement.
7. There needs to be comprehensive and current Risk Assessment and Risk Management Plans.
8. Steps should be taken to avoid unnecessary duplication of paperwork and processes.
9. The role of Independent Panels should be seen as an important part of the decision making process regarding the sharing of Shared Lives carers between schemes. Any potential conflict of interest should be declared, particularly where some panel members may be drawn from a scheme with Shared Lives carers in common.

Shared Lives Carers’ Protocol
- If you are considering working for a second scheme then you should discuss this with your existing scheme worker and keep them advised of the progress of your application.
- You should also fully inform the scheme to which you are applying of your status with the existing scheme and include them as a referee as part of your application.
- If you are approved to work for more than one scheme and then you are approached to make an arrangement you must inform the other scheme as soon as this approach is made. This is to ensure that full consideration is given to the impact of any additional arrangements on any other person placed with you or on any plans which the other scheme may have for making a further arrangement with you.

Protocol for Joint Working between schemes
- Where an existing Shared Lives carer applies to become a Shared Lives carer for another scheme, this should trigger a Shared Lives carer review by the existing scheme. This review should be considered by the scheme’s Independent Panel so that any necessary changes to the current approval can be made and reflected in an amended Shared Lives Carer Agreement.
- For existing Shared Lives carers who are already approved by more than one scheme then a Shared Lives carer review should be conducted jointly by both schemes at the earliest opportunity and this be presented to the respective independent panels. If however, the independent panels arrive at differing views, then the scheme managers will work together to reach an agreement. Any conditions made will be reflected in amended Shared Lives carer agreements.
- Identify a lead scheme. This will normally be the scheme that first approved the Shared Lives carer/s.
- There needs to be an agreement in relation to each Shared Lives carer about how their learning needs will be met. Generally this will be facilitated through the lead scheme.
- It will be the responsibility of both schemes to ensure through negotiation that no Shared Lives carers are left by default without training and other learning opportunities.
- There needs to be a clear written agreement about the Shared Lives carers respite between the two schemes stating what the arrangements will be and how they will be funded.
- With regards to complaints there should be clarity about who is to conduct any investigation. In any event both schemes should be kept fully informed of any complaints made and of the outcomes from any investigation.
- Wherever possible joint Shared Lives carer reviews should take place. Where this is not possible a copy of the review report should be sent to the other scheme.
- Consultation between schemes should be seen as essential before making the decision about new Shared Lives arrangements in a Shared Lives household.
- Matching decisions should be agreed by both schemes and joint involvement in drawing up the arrangement agreement so as to avoid any conflict in expectation and outcomes for the individuals concerned.
- There must be an agreement regarding the frequency of monitoring visits to avoid unnecessary burden on the Shared Lives carer. Regardless of who visits, any information pertinent to a service user from the other scheme should be communicated back.
- Each scheme should ensure that the person placed by them has an arrangement review. Anything resulting from this which may impact on other persons placed should be communicated back to their scheme.
- Where there is an investigation which may lead to a Shared Lives carer being placed on the Disclosure and Barring Service list, it is critical the communication with other schemes starts immediately. Whilst only one scheme will be responsible for placing the person(s) on the DBS list the consequence will clearly impact on both schemes.
- There should be a shared responsibility for DBS procedures particularly around reporting and information sharing.
**Who Would be Expected to Pay for What?**

In everyone’s daily lives there are items we need to purchase and activities we want to do which cost money. The issue of who should be expected to cover these costs when someone lives in a Shared Lives arrangement can be both problematic and at times contentious. In order to assist both Shared Lives carers and schemes to reach decisions with service users (or their advocates) that are fair to all parties, we have worked with Shared Lives members to develop the guidance below. It is important to note that Shared Lives members believe there will always be a need for flexibility in this area and this guidance is not intended to create new rules but more to suggest an approach that we hope will be helpful to all concerned. For ‘grey areas’ dependent on individual circumstances, judgments need to be reached through discussion with relevant parties i.e. the service user and/ or their circle of support (e.g. family members, advocate, social worker, the Shared Lives carers, scheme representative) then the decision recorded.

<table>
<thead>
<tr>
<th>Payment for</th>
<th>By Service User</th>
<th>By Shared Lives carers</th>
<th>Comments</th>
<th>Potential issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities/entrance fees (service user’s)</td>
<td>Yes</td>
<td></td>
<td>For an activity only for the benefit of the service user he/she would be asked to pay the Shared Lives carers’ entrance fee (In some situations carers will go free or receive a discount). <em>(Evidence and a brief record would protect all parties)</em></td>
<td>Who makes the judgment of who is benefiting?</td>
</tr>
<tr>
<td>Activities/entrance fees for Shared Lives carers supporting</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proportion of Holiday costs when going as part of Shared Lives carers’ family/household</td>
<td>Yes</td>
<td></td>
<td>Service users would pay appropriate share of costs for petrol accommodation and other holiday related expenses. If a service user needs support with money management, a proposed budget for meals out etc could be agreed in advance and recorded</td>
<td>Can be difficult to calculate some elements on family holidays</td>
</tr>
<tr>
<td>Personally selected holiday for service user</td>
<td>Yes</td>
<td></td>
<td>If the service user is going on his/her chosen holiday and wants his/her Shared Lives carer to be the person to provide the support he/she needs he/she would be expected to cover both people’s essential holiday costs. <em>(Evidence and a brief record would protect all parties)</em></td>
<td>Clarity needed about which holiday costs are essential and in some cases for how many Shared Lives carers</td>
</tr>
<tr>
<td>Service user’s</td>
<td>Yes</td>
<td></td>
<td>Service user would not be expected to pay food and</td>
<td></td>
</tr>
<tr>
<td>Payment for</td>
<td>By Service User</td>
<td>By Shared Lives carers</td>
<td>Comments</td>
<td>Potential issues</td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>-----------------</td>
<td>------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>independent holiday (not to meet respite needs)</td>
<td></td>
<td></td>
<td><strong>utilities</strong> payment to long-term Shared Lives carers for this period</td>
<td>To be eligible for a grant the service user would need to be deemed as living in their own home therefore longer term Shared Lives arrangements may attract adaptation funding more easily</td>
</tr>
<tr>
<td>Disability equipment/adaptations</td>
<td></td>
<td></td>
<td>Grants through Social Services and/or housing departments can be available for adaptations and equipment with service users being financially assessed. Small pieces of equipment would be paid for by the service user</td>
<td></td>
</tr>
<tr>
<td>Snacks out with day service</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meals out with day services</td>
<td></td>
<td></td>
<td>If it has been agreed in the service user plan that a packed lunch is provided then an agreed contribution by the Shared Lives carers (cost of packed lunch) could be made if the service user on occasions chooses instead to have a meal out. If this occurs frequently then the service user should cover the cost of meals out.</td>
<td>A Shared Lives carers contribution is only appropriate if the Shared Lives carer receives a clear and realistic amount for food within the weekly service user contribution</td>
</tr>
<tr>
<td>Snacks out with Shared Lives carers</td>
<td>Yes</td>
<td>Yes</td>
<td>Each cover own costs unless Shared Lives carers invited by service user in which case he/she would pay</td>
<td>Can be difficult in family outing situations</td>
</tr>
<tr>
<td>Meals out with Shared Lives carers</td>
<td></td>
<td></td>
<td>• If only for Shared Lives carers convenience, Shared Lives carer pays.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• If a mutual arrangement each covers own cost.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• If at the service user’s special request then he/she could be expected to pay both for himself/herself and the Shared Lives carer/s (Evidence and a brief record would protect all parties)</td>
<td></td>
</tr>
<tr>
<td>Meals out without Shared Lives carers</td>
<td>Yes</td>
<td></td>
<td>Service user to pay own meals out if Shared Lives carer/s is expected to provide meals as part of Shared Lives arrangement and service user chooses to eat out.</td>
<td></td>
</tr>
<tr>
<td>Payment for</td>
<td>By Service User</td>
<td>By Shared Lives carers</td>
<td>Comments</td>
<td>Potential issues</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>-----------------</td>
<td>------------------------</td>
<td>----------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Day centre attendance fee (if applicable)</td>
<td>Yes</td>
<td></td>
<td>Service user should be financially assessed</td>
<td>Shared Lives carer agreements should be clear that day care is not the Shared Lives carers regular responsibility nor the funding of the service user’s daycare</td>
</tr>
<tr>
<td>Dietary requirements and non-prescribed health items or services e.g. cough syrup, chiropody</td>
<td>Yes</td>
<td></td>
<td>Any special dietary requirements for medical reasons that incur additional costs to Shared Lives carer/s should be taken into account when the initial carer/s payment is agreed (and at review times) with the scheme/care management. Non prescribed health items and chiropody costs would be met by the service user</td>
<td></td>
</tr>
<tr>
<td>Cigarettes</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drinks in pub with Shared Lives carers</td>
<td>Yes</td>
<td>Yes</td>
<td>If Service user with sufficient income is out with Shared Lives carers, encouragement to take a turn at buying a 'round' may be appropriate. Otherwise service user would buy own drinks</td>
<td></td>
</tr>
<tr>
<td>Clothes</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toiletries/ hairdresser</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birthday and Christmas gifts from service users</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payment for</td>
<td>By Service User</td>
<td>By Shared Lives carers</td>
<td>Comments</td>
<td>Potential issues</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------</td>
<td>-----------------------</td>
<td>----------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Furnishings/ decoration</td>
<td></td>
<td></td>
<td>Service users pay to live in a furnished/well decorated home but can be expected to purchase any additional items they want for their own room (e.g. additional shelving for CDs particular chair etc) and pay a contribution for redecoration of their room if the change relates to choice rather than need. <em>(Evidence and a brief record would protect all parties)</em></td>
<td>Disagreements about when ‘need’ and when ‘choice’ should be discussed with the scheme</td>
</tr>
<tr>
<td>Holiday home</td>
<td>Holiday home</td>
<td></td>
<td>Cost to be shared between all people present for rented accommodation. For Shared Lives carers owned property an agreed amount would be contributed by the service user based on the contribution they would make in similar rented accommodation. <em>(Recorded evidence would be needed to demonstrate that the service user has had choice both about the kind of holiday and regularity of visits to the holiday home in order protect all parties)</em></td>
<td></td>
</tr>
</tbody>
</table>

* Transport costs issues have been removed from this document and are being produced as separate guidance.*
Personal Budgets and Direct Payments in Shared Lives Arrangements

By far the simplest and most desirable way to use personal budgets and Direct Payments to purchase Shared Lives in England is for the individual to use their personal budget to purchase Shared Lives from the Shared Lives scheme. In the case of an independent scheme, the individual could take some or all of their personal budget as a cash Direct Payment to purchase Shared Lives. If the scheme is council-run, the individual would need to take their personal budget as a managed fund (although they could take any left over, after paying for Shared Lives, as a Direct Payment to purchase something else such as day support). If personal budgets and Direct Payments are used in this way, we can see no reason for a Shared Lives arrangement paid for through personal budgets/Direct Payments to be treated any differently by the regulator, employment tribunals, HMRC or insurers. Keeping it simple in this way is in everyone's best interests and is very much in the spirit of personalisation.

The complications arise where an individual is encouraged to use a Direct Payment to purchase care directly from the Shared Lives carer. Doing so does not in our view increase choice and control for the individual and it makes the role of the scheme much less clear, which brings a number of risks to the arrangement, including the risk that the arrangement is not lawful under social care provision regulations and that Shared Lives insurance and tax breaks may be invalid. A person is only providing regulated Shared Lives if they are doing so within the terms of a Shared Lives carer agreement which is arranged and monitored by a registered Shared Lives scheme.

This is because it is the registered persons (providers and managers) of Shared Lives schemes that CQC register and regulate. If a Shared Lives carer makes an individual arrangement for someone to move in with them and receive accommodation with personal care outside of the Shared Lives scheme arrangements then the carer should apply to CQC to register for the regulated activity of ‘accommodation for persons who require nursing or personal care’. The definition of Shared Lives carer in the HSCA 2008 (Regulated Activities) Regulations 2010 says that an “adult placement carer” means “an individual who, under the terms of a carer agreement, provides, or intends to provide, personal care for service users together with, where necessary, accommodation in the individual's home”. A “Shared Lives Carer Agreement” means “an agreement entered into between a person carrying on an adult placement scheme and an individual for the provision, by that individual, of personal care to a service user together with, where necessary, accommodation in the individual’s home”.

So we recommend against arrangements which involve directly paying a Shared Lives carer with a Direct Payment. However, we are aware of one or two areas where a council-run Shared Lives scheme in England has felt under pressure to set up such an arrangement, usually because someone elsewhere in the council wants to increase Direct Payment uptake figures. The view set out here expands a little on the guidance in A Shared Life of My Choice. We cannot offer certainty on these arrangements, not least because there are at least four areas of rules and regulations involved and they all operate in slightly different ways: care regulation; tax law; employment law and insurance.

As set out above, a genuine Shared Lives arrangement must always be set out and agreed by all the relevant parties in a Shared Lives agreement. If a Direct Payment is used to pay the Shared Lives carer directly, it is essential that there is a clear Shared Lives Arrangement Agreement in place in which all three parties (the individual, the Shared Lives carer and the scheme) agree that the care being purchased is arranged and monitored by the scheme, that the Shared Lives carer will have the same obligations to the scheme as they would in any other Shared Lives arrangement and that the scheme is ultimately responsible for quality and continuity of care (despite taking on that role and responsibility without receiving
a portion of the personal budget allocation to fund them to do so). It is unlikely that an independent scheme could carry out those monitoring and support roles without receiving funding to do so, nor would there be any purpose or benefit in them doing so: it would be far simpler for the Direct Payment to be used to purchase Shared Lives from the scheme in the usual way.

When a Direct Payment holder pays another individual to provide their care, we believe that HMRC has in all other cases taken the view that the carer is an employee of the Direct Payment holder (or of the person managing the Direct Payment on the individual's behalf). So in the case of a Direct Payment holder paying their Shared Lives carer directly, as set out above, it is hard to predict whether HMRC would recognise the carer as a self-employed Shared Lives carer, even if CQC were happy to define the arrangement as Shared Lives. Similarly, in the event of an employment dispute, such as, for instance, the scheme wanting to terminate the arrangement, it is hard to predict what the decision would be if the Shared Lives carer decided to appeal to an employment tribunal to claim that they were an employee of the service user and had been wrongfully dismissed. Our current insurers have also expressed some doubt about such arrangements, whereas if the care is purchased from the scheme as usual, they have expressed no doubts.

This is general advice and we always recommend that you seek advice about individual arrangements where you are in any doubt.
Ending a Placement
It is the policy of the Borough of Poole Shared Lives Scheme (Referred to as the ‘Scheme’) to ensure that, wherever possible, termination of the Placement is part of a planned process and is as positive an experience as possible for both the Service User and the Carer. This policy would be used in regard to Long Term placements, but could be implemented for respite placements if deemed necessary.

Note: This procedure is superseded by the ‘Safeguarding Procedure’ where a placement breaks down among allegations of abuse by the carer.

1. A first consideration is that all placements will eventually come to an end.

2. The reasons why a placement may end are many and varied and can include:
   - The Service User wishing to move to a different setting or area
   - A change in circumstance of the carer
   - Incompatibility between carer and Service User
   - A serious breach of the placement agreement on either side
   - Reassessed needs of the Service User due to changing health or abilities which cannot be met in the current placement
   - Decisions arising from the application of the safeguarding procedures
   - Death of the Service User or carer

3. Each Shared Lives Carer should be closely monitored and regularly reviewed by both the Social Care Worker and the Shared Lives Officer. This should enable the early identification of any consideration, which may be leading towards termination of the placement.

4. If the Service User wishes to move to a different setting or area then the carer should support the Service User to discuss this with the Shared Lives Officer or the Social Care Worker. A review should then be called to discuss this and if a decision is made that the Service User should move then the Scheme and the Social Care Worker should provide appropriate guidance/support to the Service User in making and realising their plan.

5. Should the carer’s circumstances change it is their responsibility to advise the scheme who will organise a review to consider what if any action may need to be taken. This may include ending the placement.

6. The tension that may exist around the possibility of a placement ending should always be recognised and support or advocacy given to the carer and Service User as appropriate.

7. Within two months of the ending of a placement a carer review should be held. The review should focus on the reasons for the ending of the placement and highlight any lessons to be learnt by the Scheme and make recommendations for the future development of the carer. A copy of this review should go to the line manager of the Shared Lives Officer.

8. In the event of a serious breach of the Placement Agreement on either side then the matter should be referred to the Shared Lives Officer’s Line Manager who should decide whether there are any reasons to bring the matter before the Panel. The Scheme should also ensure that the CQC are informed of any serious breach of the Placement Agreement.
9. Sometimes placements end with very little warning. In that event the first priority must be to ensure the safety and well being of the Service User. It will be important for the Shared Lives Officer to have a discussion with those concerned or left behind about what has happened, how they feel about it and any actions that need to be taken. This should ideally take place as soon as possible after the ending of the placement but in any event within two weeks. The Shared Lives Officer jointly with the Social Care Worker should hold the carer review within two months of the ending of the placement with the Service User (as in 7). A joint summary should be written highlighting the findings and then presented to the Community Team Manager and the Shared Lives Manager.

10. Where it is determined that a Service User is terminally ill it will be important to consider and record the wishes and feelings of the Shared Lives Carer, the Service User and the Service User’s family about the continuing of the placement and where this is to happen any additional support that will need to be provided e.g. palliative care.

11. In the event of the death of the Service User it is the Scheme and Social care Worker’s responsibility to inform the family and the CQC. The family have first responsibility for the registration of the death and for making funeral arrangements. Where there is no family then these responsibilities will revert to the Social care Worker.

12. Where a placement is terminated or at risk of being terminated as a result of allegations of abuse then reference should be made to the Adult Protection Procedure of the Borough of Poole.

13. In all cases where placement is terminated all records, benefits books and bankbooks are to be returned to the Scheme.

14. Clearing of the service user’s room. The Shared Lives carers need to inform Housing Benefit immediately. The Social Care worker will arrange removal of the Service User’s belongings from the house within 28 days.

15. In the event of the death of the Service User, the Shared Lives carer will be paid for a further 28 days, as with the notice period.
Section 3: Supporting people in their daily lives.

Communication, Choices and Decisions
The person using the Shared Lives scheme has the right to make informed choices and decisions. The Poole Shared Lives scheme therefore aims to encourage and support the person to make appropriate choices and decisions in all areas of their life.

We recognise the importance of communication and how this provides information about the person’s wishes and choices. Good communication is essential in order to create an environment of openness and trust.

Shared Lives carers aim to support a person in their daily life and in any activities and goals the person has chosen as part of the Service User plan. Communication is essential with all those involved in the person’s care in promoting their wellbeing and choice.

How will this happen?

- The Shared Lives carer(s) and Shared Lives worker will help the person to identify and make choices about the things they would like to do and achieve while having regard for their safety and well-being.
- Where there are difficulties for the person around communication we will support them to communicate in a way that best suits their needs.
- The Shared Lives carer(s) and Shared Lives worker will enable them to make use of specialist aids/interpreters/visual aids/special equipment where needed.
- Prior to the arrangement the scheme will provide information in a format that the person understands.
- With the person’s permission the scheme will seek guidance if required from the person’s family or other people who know the person well.
- The person’s communications needs will be recorded in the person’s Service User plan and reviewed accordingly.
- Where ever possible the person will be supported by an independent advocate who will when needed represent them and speak on their behalf.
- If any risks have been identified which may restrict the person’s choice these may be discussed with the person and/or their representative as part of their service user plan.

We will make every effort to enable the person to have choice and control in their life. However, if it appears the person does not have the capacity to make informed decisions we will discuss this with them (where possible), their family/representative and care manager.

Where a person lacks capacity we will follow the guidance under The Mental Capacity Act 2005.
**Family, Friends, Culture and Community**

People in Shared Lives arrangements have the opportunity to live an ordinary life in their community. This includes being able to maintain and develop personal and family relationships, pursue their own cultural and religious customs and be active members of their local community in ways that they wish.

**How will this happen?**

In order to make this happen Shared Lives carers will have been provided with the information about the person’s particular needs and wishes as outlined in the Service User Plan. In addition to this Shared Lives carers will undertake learning around a person’s human rights and develop an understanding on how best to support people in their daily lives.

Important information about friendships and relationships will be recorded in the Service User plan and areas where the person needs support from a Shared Lives carer will be identified.

This may include support with the following:

- making or receiving phone calls
- remembering or making arrangements for meeting up with someone
- remembering birthdays and/or shopping for cards or presents
- attending social and/or cultural and/or religious events that the person wishes to take part in
- shopping
- hospital and GP appointments
- chiropodist
- arranging a holiday

In a Shared Lives arrangement the person will be supported to continue to live their life in line with their cultural, religious beliefs and customs. This will be recorded in the Service User Plan and be taken into consideration when matching the service user with the Shared Lives carer(s). The Shared Lives carer(s) will be provided with information and guidance in order to understand and respect the person’s cultural and religious needs.

This may include support with the following:

- Communication
- Food and drink
- Periods of fasting
- Clothing
- Religious festivals including regular attendance at places of worship
- Contact with communities
- Personal care needs

The Poole Shared Lives scheme recognises the importance to a person to be able to continue or receive support in maintaining links with their family, friends and community and if they wish build new links and friendships.

Information about this will have been included in the person’s Service User Plan and may include the following:

- Social activities
- Day centre
- Clubs/groups
- Volunteering
- Employment
Education/colleges

The Shared Lives carer(s) will be provided with information about the person’s particular needs and wishes which are included in the Service User plan. This will provide a picture of what the person’s interests are, activities they like to do and the relationships that are important to them. If the person requires support from the Shared Lives carer(s) to maintain or develop any of the above, the plan might cover the following:

- Including the person in activities and events with the Shared Lives carer(s)/family
- Finding out about groups in the community that have similar interests
- Helping the person to join groups
- Identifying new activities
- Support in making arrangements for meeting up with people or attending groups
- Attending educational/ courses/colleges
- Finding and maintaining employment
- Helping the person to develop new skills
- Being politically active and voting
- Advocacy on the person’s behalf where there has been discrimination, antagonism etc.

In a Shared Lives setting friends and relatives will be welcome to telephone or visit the person. The Shared Lives carer(s) will respect the person’s choice and privacy in relation to this and the person’s family/friends will also be expected to act responsibly and show consideration to other people in the household.

If the person has made a choice not to have contact with their relatives or friends the Shared Lives carer(s) will respect their choice in exercising their rights.
Safe Friendships and Relationships

Friendships and relationships are important to everyone. The Poole Shared Lives scheme recognises each person’s right to lead the kind of life the person wants and their right to personal, intimate and family relationships. People in Shared Lives arrangements have the same opportunities to develop and maintain a range of relationships as anyone else in the community.

How will this happen?

Before starting any Shared Lives arrangements Shared Lives carers receive general information and training about people’s rights and how to support people in their daily lives.

Shared Lives carers will also be given information about a person's particular needs and wishes and a copy of their Service User Plan. This will tell them about the relevant friendships, relationships and interests the person already has and about their hopes and wishes for the future so that they can support the person in the way that the person wants.

The person will have the opportunity to share in the family life of their Shared Lives carer(s) and in the community links they already have. If the person wishes, their Shared Lives carer(s) will also support the person in building new links and relationships, by, for example, supporting the person:

- to find out about people or groups in the community that have similar interests to the person
- in making contacts
- in finding out what is available locally, and in trying new activities
- in getting a job or starting voluntary work

Friendships can sometimes turn into loving relationships or partnerships. This is a natural and positive part of life and the person’s Shared Lives carer(s) will respect the person’s choices, privacy and dignity in relation to these. Their friends and relatives will be welcome to visit, if the person is staying in the Shared Lives carer(s) home, and, as happens with most families, the person will also be expected to act reasonably and with consideration for other people in the household. (There is more information about house rules and individual responsibilities in their Shared Lives Arrangement Agreement.)

There are sometimes risks associated with relationships including the risks of abuse or neglect. The person’s right to lead the kind of life they want, with relationships that the person chooses, may sometimes have to be balanced with their right to be safeguarded from harm. There is more information about this in our policy on Safeguarding against Abuse and Neglect.

If the person requires support to understand the nature of relationships and how to stay healthy and safe within them, their Shared Lives carer(s) will provide this in a way that is sensitive to their needs and/or will ask for appropriate professional help with this with the person’s agreement.

A sexual relationship that the person has not consented to is wrong and illegal. If this appears to be happening, the implications will be discussed with the person so that the person can make an informed decision about what action to take. If the person does not have the capacity to give consent and/or to make choices and decisions about this, this will be discussed with their representative and/or Care Manager and/or other appropriate professionals, in order to make decisions and take actions that are in the person’s best interests. In these situations we will follow guidance in the Mental Capacity Act 2005 Code of
Practice. There is more information about this in our guidance on Making Choices, Decisions and Communication.

If at any time the person’s Shared Lives carer(s) becomes concerned that the person may be involved in an abusive friendship or relationship she/he will immediately inform their Shared Lives worker. The scheme will then follow the guidance for Safeguarding against Abuse and Neglect.

It is illegal for a care worker to have a sexual relationship with a person he or she is involved in providing care for if that person has a mental disorder. This applies to Shared Lives carers and Shared Lives workers and any incident or concerns about this will be reported to the Police.
Personal Care

Some people require support to meet their personal care needs. The Poole Shared Lives scheme understands the importance of responding to individual needs and preferences around this and of providing support in ways that maintain privacy, dignity and self-respect.

How will this happen?
Before providing any Shared Lives arrangements Shared Lives carer(s) receive information and training that enables them to provide personal care safely and sensitively.

This includes the following practices:
- closing doors and knocking before entering wherever possible to provide privacy
- allowing the person time on their own in the bathroom or toilet, wherever possible
- explaining clearly to the person what they are doing
- using respectful language
- being flexible about the times of bathing, getting up, going to bed, etc (within normal family schedules)
- enabling the person to do as much as possible for themselves

Shared Lives carer(s) will be made aware of an individual’s needs and preferences around personal care as these will be explained in the person’s Service User Plan and regularly reviewed as part of the Shared Lives arrangement. When the person expresses a preference this will be respected. If the person is not able to express a preference or make choices for themself, we will ask their family or representatives, or try to work out their preferences in other ways (such as Lifestyle Planning). As the person and their Shared Lives carer get to know each other this can lead to increased trust and confidence and they may be able to communicate in different ways at a later stage, even if not at first.

If a person’s cultural or religious customs have implications for their personal care, the Shared Lives carer will be properly informed about these. Wherever possible and when the person requests it, the Shared Lives carer(s) providing intimate care will be of their preferred gender.

If a person requires support with moving and handling, their Shared Lives carer(s) will be provided with specialist training and/or equipment to enable them to undertake this. These will be provided after assessment by an appropriate professional as will any technical aids or equipment to enable the person to do as much as possible for themself. The use of aids and equipment will be kept under review as part of the person’s Service User Plan and reassessments arranged when necessary.

When a person’s care is shared between a Shared Lives arrangement and the person’s family and/or other service provider, or between two different Shared Lives arrangements, their Shared Lives carer will work in partnership with the person’s family or other supporters or Shared Lives carer(s) in order to ensure that there is consistency and continuity of care.
Staying Healthy and Making Use of Health Resources

1. **Introduction**
   The Poole Shared Lives scheme recognises everyone will have an expectation to lead the kind of life they want and to have the same opportunities as other people in the community. This includes opportunities to enjoy good health and to access the resources that are available in community health, hospitals and other specialist facilities.

2. **How will this happen?**
   Before starting any Shared Lives arrangements Shared Lives carers receive training, learning opportunities and information about people’s rights and how to support people in their daily lives. This includes understanding the importance of enabling the person to do as much as possible for themselves in relation to their own health and wellbeing.

   It is important that the person is supported to maintain good health and stay as fit and healthy as possible. Support needs may include:

   - Information on nutrition and healthy eating
   - How to exercise safely in order to maintain fitness
   - Maintaining GP appointments
   - Information on Health and wellbeing clinics
   - Maintaining hospital appointments
   - Arranging and attending health screening or routine check ups
   - Advice and information on sexual health
   - Information on community resources

   In a Shared Lives arrangement the person, wherever possible, will be able to continue to see their own doctor or dentist and any other health professionals who are working with them. If this is not possible then alternative arrangements will be discussed with the person and/or their representative in order for them to have information that enables them to make choices on options available to them.

   As in all Shared Lives arrangements information about a person’s health and health care needs will be recorded in the following:

   - Service User Plan
   - Health care plan
   - Risk assessment

   If the person has any health care needs that have been identified in the Service User Plan the Shared Lives carer will be able to support the person in this by following any recommendations or guidance provided by the person’s health care professionals.

   Shared Lives carers can help the person (if required) to arrange and maintain appointments with those involved in their health care. If the person has communication difficulties it is usually the Shared Lives carer who supports them but in the event that an interpreter is required this can be arranged by the Shared Lives worker or care manager.

   If the person has been assessed under the Mental Capacity Act 2005 as lacking capacity to make an informed decision about any element of their medical treatment or healthcare this will be discussed with the person’s representative/family member(s), care manager and medical professionals to agree a way forward that is in their best interest. It must be remembered that an assessment under the Mental Capacity Act is an assessment of the person’s ability to make a particular decision; it is not a blanket assessment.
It is important to note that if a person has a learning disability they are entitled under NHS Guidelines to receive an annual health care check. This is usually arranged by the person’s GP and other health professionals.

In the event of the person in a Shared Lives arrangement having an accident or serious illness that adversely affects the person’s health, safety or wellbeing the Shared Lives carer will be responsible for informing the Shared Lives scheme immediately and record the details as required.

The Scheme will take responsibility for notifying the Care Quality Commission and/or other regulatory bodies when this is necessary.
Responding Positively to People whose Behaviour Challenges Services

The Poole Shared Lives scheme recognises that everyone has a right to lead the kind of life they want and to and have the same opportunities as other people in the community. We also recognise that some people have risks associated with their individual character, history or method of communication and that these risks need to be managed in ways that prevent harm to themselves (including their reputation) and/or harm to other people. It is important that Shared Lives carer(s) understand and balance these rights and risks when necessary, in order to support the person appropriately as well as safeguard him/her and others from harm.

How will this happen?

Before starting any Shared Lives arrangement Shared Lives carers receive information and training about people’s rights and how to support people in their daily lives. This includes enabling them to understand that the reasons for a person’s behaviour can be complex and can take time to understand. For example, the behaviour may be a way of:

- communicating something
- responding to pain
- dealing with certain situations
- expressing emotions or frustrations

If Shared Lives carers require specialist training and/or professional guidance in order to understand a person’s behaviour and how to respond to it, this will be provided before the Shared Lives arrangement begins and on an ongoing basis when necessary. The arrangement will not go ahead or continue unless:

- Shared Lives carers have the knowledge and skills to support the person safely and constructively
- they have clear written guidelines on how to do this.

The guidelines will describe:

- how to work positively with the person and carry out a support role safely and effectively
- what behaviours are seen as challenging
- how to avoid situations that trigger the behaviour
- possible warning signs and ways to defuse a situation
- when restrictive physical intervention can be used (if at all)
- the need for reporting and recording incidents

If the person sometimes acts in ways that might cause a significant risk to themselves or others this will be discussed with them/ their representative and actions agreed with them to remove or reduce the risks if necessary. If there are likely to be any restrictions on the person’s choices and freedoms schemes should refer to separate guidance on Restriction or Deprivation of Liberty in Shared Lives (Shared Lives guidance 3.8) which now apply in all settings. Where people have capacity full account needs to be taken of the Human Rights Act. These will also be discussed and agreed with the person / their representative as part of their Service user Plan. Their needs and wishes and the ways of meeting these will be regularly reviewed as part of their Service User Plan. This will happen at least once a year or more often if the person/ their representative requests it or their circumstances change.

If the person sometimes acts in ways that are abusive to other people this does not mean they cannot make use of a Shared Lives arrangement. However, other people have a right to live lives that are free from violence and/or abuse and/or harassment and bullying. The
person may not be able to start a Shared Lives arrangement or the arrangement may have to be brought to an end if their behaviour cannot be safely managed in the arrangement and/or the levels of risks for other people are unacceptably high.

The Shared Lives carer(s) will support the person in the daily life and activities and goals the person chooses as part of their Service User Plan. If the person requires support to speak up for themselves or to make choices and decisions, they will find more information about this in the scheme policies on Communication and on Making Choices and Decisions (Shared Lives Guidance 3.1. Communication Choices and Decisions).

The Shared Lives worker will visit the person and their Shared Lives carer(s) regularly in order to monitor the arrangement and make sure that everyone has the practical and professional help that may be needed. The Shared Lives carer(s) will record the details of any incidents and keep their Shared Lives worker informed about these. The Shared Lives worker will take responsibility for notifying if required the Care Quality Commission and/or other regulatory bodies of any events which adversely affect the person's health, safety or well-being when this is necessary.

**Restrictive Physical Intervention**

Restrictive physical intervention is a term that covers a range of actions and means using force (or the threat of force) to restrict a person’s movements or mobility, or to stop them from harming themselves, or from having dangerous or harmful contact with another person or the things around them, or to stop them from committing an offence. The use of force may involve bodily contact, mechanical devices or changes to the person’s environment and this guidance has been drawn up in line with government guidance.

People can sometimes become aggressive or violent towards themselves or others. The Poole Shared Lives scheme works to prevent this sort of occurrence if at all possible, but also prepares its Shared Lives carer(s) and Shared Lives workers to deal with these situations if they arise. Under common law Shared Lives carer(s) and Shared Lives workers have a duty of care and can take action when necessary to prevent harm to a person who is in a Shared Lives arrangement and/or to other people. The seriousness of this kind of action is understood by Shared Lives carer(s) and Shared Lives workers, so physical intervention is used only as a last resort and only in the person’s best interests.

**How will this happen?**
The Poole Shared Lives scheme provides information, training, guidance and support to Shared Lives carer(s) so that they understand:

- their responsibility to protect themselves and everyone in their households from injury or harm
- the principle of keeping the person’s best interests in mind at all times
- the possible causes of aggression or violence
- how to defuse a situation which could lead to aggression or violence
- how to manage aggressive situations in order to avoid the use of physical intervention
- that physical intervention can be used only as a last resort
- that the action taken or amount of force used must be the absolute minimum necessary and for the shortest possible time
- the need to do everything possible to prevent injury or distress and to preserve the person’s dignity
- that they can ask for police assistance, if necessary
that it is never acceptable to use physical intervention (including sedation) as a form of punishment, with unkind feelings towards the person, or for the convenience of the Shared Lives carer(s) or anyone else

- their legal position if they use restrictive physical intervention

- the need to record and report all such incidents to the scheme within 24 hours, with a copy of the written record being sent to the scheme as soon as possible.

If the person sometimes act in ways that might cause significant risk to themself or others physical intervention could become necessary in order to keep the person or other people safe, the ways of dealing with this will be explained in the Service User Plan. A risk assessment and risk management plan will be included as part of this and will be drawn up with the involvement of appropriate professionals and in accordance with DoLS guidance. This may require Court of Protection authority. The person’s Shared Lives carer(s) will also receive specialist training and specialist professional support for this aspect of their work.

After receiving a report about the use of physical intervention, the Shared Lives worker or scheme Manager will notify, if required, the Care Quality Commission within the required time frame. They will also make sure that the person, the person’s Shared Lives carer(s) and other people are provided with appropriate support following the incident, if needed.

The incident will be reviewed together with the person and/ or their representative, their Care Manager and/or other appropriate professionals. The aim will be to improve understanding of the incident and see whether any new or additional steps can be taken to prevent the same thing happening again. If there are any concerns about the appropriateness or effectiveness of the physical intervention, these will normally be addressed through ongoing training, support and supervision. However serious concerns may also be addressed through the procedures for Safeguarding against Abuse or Neglect. The person and/or their representative also has a right to raise concerns through the procedure for Complaints and Concerns (Shared Lives Guidance 6.3)

The scheme will keep a record of all incidents involving the use of restrictive physical intervention and this will be available for inspection by CQC and other regulatory bodies.

In some situations the type or frequency or length of use of physical interventions may need a court order to authorise this. There is more information about this in the scheme’s policy on Deprivation of Liberty.
Dealing with Emergencies and Crises

Introduction
Emergencies or crises can happen at any time in a Shared Lives arrangement. There are many reasons why a crisis may happen including a life event, or physical or emotional crises. Emergencies or crises could directly involve the service user or the Shared Lives carer/family. The most important thing is that everyone connected with the Shared Lives arrangement knows and understands what their role is and more importantly what to do when an emergency or crisis happens.

The Poole Shared Lives scheme aims to provide information to Shared Lives carers in order to deal safely and sensitively when an emergency or crisis occurs.

How will this happen?
The Poole Shared Lives scheme provides information, training and on-going support to Shared Lives carers so that they:

- Understand their role when an emergencies or crisis happens
- Understand the needs of the person using or living in the Shared Lives arrangement
- Understand the importance of reporting incidents
- Understand the role of Emergency Services NHS or Police
- Understand the role of Local Authority/Social Services/EDT (emergency duty team)
- Understand the scheme’s policies and procedures on Safeguarding
- Are able to respond to an emergency or crisis that is consistent with any recommendations within the Service User Plan.

All Shared Lives arrangements have procedures for reporting emergencies or crises to the Shared Lives scheme. This will include reporting any incidents or concerns to the scheme’s Out of Hours Service.

Depending on the severity of the emergency or crisis the Shared lives carer or Shared Lives scheme may need to contact emergency services directly such as:
- Ambulance
- Police
- Fire Services
- Mental health crisis team
- Local authority Adult Safeguarding Team
- Local authority Children and Young Persons’ Safeguarding Team
- GP
- NHS helpline

Emergency or crisis situations are often unexpected and can be stressful to manage. Whenever possible the Shared Lives carer and the Scheme will try to reduce any potential emergency or crisis developing for the service user. It is therefore important that any potential risk for the service user that could result in an emergency or crisis situation is recorded in the following:
- Service User Plan
- Risk assessment
- Health care plan
- Shared Lives Arrangement Agreement
- Other professional reports/information
As part of the Service User Plan and Shared Lives Arrangement Agreement contingency plans in the event of an emergency or crisis should be recorded. This might include information such as:

- Emergency contact numbers
- Family or friends’ contact numbers
- Schemes Out of Hours numbers
- Local Authority Emergency numbers
- Relevant information about the person’s wishes on who to contact
- Emergency accommodation and respite
- Alternative care arrangements

If the emergency or crisis affects the ability of the Shared Lives carer to continue providing a Shared Lives arrangement then the scheme, in consultation with the person using or living in the Shared Lives arrangement, family representatives, and care manager will explain the reasons why and assist in making alternative arrangements as quickly and as smoothly as possible.

It is the responsibility of the Shared Lives carer to inform the Shared Lives scheme immediately if an emergency or crisis happens and to record this in line with the scheme’s procedures on recording incidents.

It is the scheme’s responsibility to notify the Care Quality Commission.

This will include, where appropriate, informing other professionals involved in the person’s care.
**Palliative or End of Life Care, Death and Dying**

The Poole Shared Lives scheme recognises that the quality of care which people receive in their last days is just as important as the quality of life which they experienced before this. People living in Shared Lives arrangements are encouraged to say what they would like to happen when death approaches and also after they have died.

**How will this happen?**

If the person is ageing or ill and living with a Shared Lives carer(s), the person and the Shared Lives carer(s) will have the opportunity to discuss whether it is possible for the person to stay there and under what circumstances the person may need to move to a hospital or other place where more specialised care is available. In arriving at a decision consideration will need to be given to any other members of the household, the person’s family and friends when discussing the availability of palliative care schemes, when needed.

Shared Lives carers and Shared Lives workers will be open to discussion about death and dying and the person’s physical and emotional needs will be considered as part of the Service User Plan, as well as the person’s comfort and well-being in this situation. If the person’s needs are changing during the course of an illness, these will be reviewed promptly and whenever necessary in order to provide additional personal support or aids or appropriate input from other professionals or bereavement counsellor.

Throughout the person’s illness (and also in the event of an accident or unexpected death) the person’s Shared Lives carer(s) will respond in the same way as they would with any other family member and will contact the doctor and/or other health professionals or the emergency schemes as necessary. They will have received training, advice and ongoing support so that they know what to do in these situations.

During the person’s illness and/or death their Shared Lives carer(s) will respect the person’s privacy and dignity at all times. The Shared Lives carer(s) will receive additional support from the Shared Lives worker and other relevant professionals and so will members of their family and others in the household. The person’s own family and friends will be welcome to visit the person and will also be supported during this time.

The person’s Shared Lives carer(s) will respect the person’s religious and/or cultural preferences and will follow any particular instructions the person has left and/or will know who to contact after the person has died.

The person’s Shared Lives worker will take responsibility for notifying the Care Quality Commission of the person’s illness, when this is necessary, and if the person has died while in a Shared Lives arrangement.
Being missing from a Shared Lives arrangement

The Poole Shared Lives scheme has responsibilities to protect and promote the health, safety and well-being of people in Shared Lives arrangements. Mostly people will spend time out and about in the community without there being any cause for concern. However some people can be confused or easily disorientated and may become lost. There is also a chance of accidents or other mishaps, so Shared Lives carers need to know what to do if the person they are supporting does not come home when expected or appears to be missing.

How will this happen?

Because the people in Shared Lives arrangements are all different it is difficult to give definite rules about what Shared Lives carers should do when a person does not come home when expected or appears to be missing. For one person it might just mean s/he has missed the bus while for another person it could mean s/he is in great danger.

Just as happens in ordinary families, it is helpful if the person lets their Shared Lives carer(s) know if they are going out, roughly what their plans are and/or when they expect to be home again. This helps to avoid false alarms. If the person changes their plans, again it is helpful if the person lets their Shared Lives carer(s) know this.

If the person does not return when expected or appears to be missing the person’s Shared Lives carer(s) will:

- check around the house and garden and/or immediate neighbourhood
- try to contact the person on a mobile phone or some other way
- check with other people or places the person was planning on visiting (if known)
- check with the person’s friends or relatives to see if the person is with them
- contact the person’s Shared Lives worker or the scheme or the out-of-hours emergency service to let them know and to agree what further action is necessary
- inform the police if the person is likely to be at immediate risk, or when it has been agreed with the scheme or out-of-hours emergency service that this is appropriate
- provide the police with a description and any other information they may need (or, if appropriate, work closely with the person’s family to do this)

Once the person has been found, the Shared Lives carer(s) and/or Shared Lives worker will make sure that all relevant people are informed – such as the police, the person’s relatives, etc. The Shared Lives worker or scheme will also take responsibility for notifying, if required, the Care Quality Commission when the person is missing for more than 12 hours and when the person has been found again.

The Shared Lives carer(s) will support the person in the daily life and activities and goals the person chooses as part of their Service User Plan and will respect the person’s choices and freedom and dignity. If the person has a tendency to wander away or to get lost the risks around this will be properly assessed and a risk management plan will be included in the person’s Service User Plan. If there are likely to be any restrictions on the person’s choices and freedoms these will also be discussed and agreed with the person as part of the person’s Service User Plan.
Section 4: Health and Safety

The Health and Safety at Work Act 1974
The Poole Shared Lives scheme has a responsibility to safeguard the health and safety of everyone connected with it including: people who are using or living in Shared Lives arrangements; Shared Lives carers; others in the household; Shared Lives workers; Shared Lives scheme volunteers and any contractors or members of the public who come on its premises.

How will this happen?
There are many different laws relating to health and safety and one of the most important is The Health and Safety at Work Act 1974. Because Shared Lives carers are self employed the Act does not directly apply to them. However, there is a general duty of care which applies in all situations and this applies to the scheme’s responsibility to Shared Lives carers and people living with them. Broadly speaking, this means that everyone involved in supporting someone using or living in a Shared Lives arrangement needs to take steps to reduce the risk of the following things happening to everyone involved in the scheme, or to the general public:

- physical harm and injury
- illness
- trauma and mental health problems
- abuse or neglect
- damage to relationships and personal reputations
- damage to property, or loss of this (including theft)
- death

In addition, organisations which run Shared Lives schemes and Shared Lives scheme managers are responsible for making sure that Shared Lives workers are safe from the same kind of harms as listed above and that support is organised in a way that minimises any unnecessary and harmful risks.

All Shared Lives carers have personal responsibility for:

- ensuring their house is safe from any hazards including fire risks and risks of trips and falls
- working safely and efficiently
- following instructions for using any special equipment that the person needs, so that the person and they stay safe
- using protective clothing and other protective equipment where necessary
- reporting any accidents or dangerous occurrences that have led to injury or damage, or which could do so
- assisting in any investigations of accidents, in order to prevent the same thing happening in the future
- following agreed procedures for safe working

Shared Lives workers and Shared Lives carers are provided with training and information so that they understand: the importance of health and safety issues; the relevant legislation; their own responsibilities and the safe working practices that apply to them. Their continuing training needs are identified through supervision and regular review of their work and
through visits to Shared Lives arrangements.

**Health and Safety Checklist**

The health and safety checklist is attached below and should be completed by the Shared Lives worker together with the Shared Lives carer(s) to identify any areas of the home which may present a risk to health and safety in the home. The health and safety checklist should be completed annually as part of the Shared Lives carer assessment. Although the checklist focuses on the bedroom and communal areas used by the person in the Shared Lives arrangement, Shared Lives carers and the scheme worker will work together to consider and recognise any other risks or hazards which may impact on the safety of the whole household. Anything which comes to the attention of the scheme will need to be looked into. In cases where a conflict arises between the scheme’s wishes to check the whole property verses the Shared Lives carer’s right to privacy, then the scheme and the Shared Lives carer should try to come to agreement about how to move forward. Shared Lives carers or schemes that are members can also contact Shared Lives Plus for additional advice or support if there is any conflict regarding health and safety between the Shared Lives scheme and the Shared Lives carer.
## Shared Lives Carer Health and Safety Checklist

This checklist is to be completed as part of the Shared Lives carer assessment and then as part of the annual Shared Lives carer review. The health and safety checklist needs to be completed by the Shared Lives carer and Shared Lives worker together. If any health and safety issues are identified the Shared Lives worker and the Shared Lives carer will decide together how to resolve the issue and this will be recorded in the checklist below.

### Shared Lives Carer details

<table>
<thead>
<tr>
<th>Your name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Your address</td>
<td></td>
</tr>
<tr>
<td>Date you completed this checklist</td>
<td></td>
</tr>
<tr>
<td>Shared Lives worker who supported you</td>
<td></td>
</tr>
<tr>
<td>Reason for completing the checklist (e.g. Shared Lives carer assessment, ongoing monitoring, response to issue)</td>
<td></td>
</tr>
</tbody>
</table>

### Utilities

<table>
<thead>
<tr>
<th>Things to check</th>
<th>Yes</th>
<th>No</th>
<th>Action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are all electrical appliances fitted with a correctly fused three pin plug?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are your electric appliances serviced annually?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are sockets overloaded?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are your gas appliances safe and serviced annually by a gas safe registered engineer?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have a Carbon Monoxide detector near any gas appliances?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any trailing leads or extension cables that could be caught or tripped over?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is your fuse box fitted with RCD switches?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can the hot water temperature be controlled to prevent scalding?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Emergency Procedures

<table>
<thead>
<tr>
<th>Things to check</th>
<th>Yes</th>
<th>No</th>
<th>Action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have fire and smoke detectors fitted?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you maintain and test them</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Things to check</td>
<td>Yes</td>
<td>No</td>
<td>Action to be taken</td>
</tr>
<tr>
<td>----------------</td>
<td>-----</td>
<td>----</td>
<td>-------------------</td>
</tr>
<tr>
<td>Is the property suitable for the number of people who will be living/ staying there?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do all rooms have good ventilation?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are the lighting levels adequate in all used rooms?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you able to control the temp in all rooms and maintain the temp at a comfortable level?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do windows pose any risks? e.g. opening not restricted</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any smoking arrangement? (specific rooms, outside areas etc)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any animals (domestic or wild)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are the roads or railway near to you busy or dangerous?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any rules about locked doors or gates?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
<td>Action to be taken</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----</td>
<td>----</td>
<td>--------------------</td>
</tr>
<tr>
<td>Do you have any ‘out of bounds’ areas?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are any machinery, tools and garden equipment stored safely?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any ponds, garden features that could cause a hazard?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all rugs, mats or other floor coverings slip proof?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Could any of the rugs, mats or floor coverings constitute a tripping hazard?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all furniture and soft furnishings safe and undamaged?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all cleaning fluids and other substances kept in their original containers and in a safe place?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are open fires protected by a fireguard?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do all doors fit closely?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any guns or weapons, including ornamental ones? Where are they stored? Is a licence available?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are flammable items (e.g. video cassettes) stored away from sources of ignition?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Kitchen and food**

<table>
<thead>
<tr>
<th>Things to check</th>
<th>Yes</th>
<th>No</th>
<th>Action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is it obvious when your cooker or hobs are on?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the cooker have a “cool” door?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are kitchen work-surfaces and flooring kept clean and in good condition?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is food appropriately stored and the fridge and freezer kept at a safe temperature?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you and your household aware of the correct methods of food handling and hygiene?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Medication and health

<table>
<thead>
<tr>
<th>Things to check</th>
<th>Yes</th>
<th>No</th>
<th>Action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Could you be/are you required to handle or administer any medication?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are any of the medicines considered harmful or dangerous?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have a safe and secure place in which to store medication?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have procedures for handling blood, urine or any bodily fluids?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Might/are you required to aid a service user by moving or handling?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you aware of the correct methods for moving and handling?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### General

<table>
<thead>
<tr>
<th>Things to check</th>
<th>Yes</th>
<th>No</th>
<th>Action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you aware of all health and safety policies and procedures?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any other risks associated with the role that you have identified</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you identified any learning needs around health and safety?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you identified any support needs around health and safety issues?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you understand your legal responsibilities around health and safety issues?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Risk Assessment and Risk Management**

Each person using or living in a Shared Lives arrangement has the right to feel safe and secure while they are in the arrangement. They also have the right to choose the risks they want to take, as long as there is a sensible balance between the person’s individual needs and preferences, and the well-being of Shared Lives carers and their families or others in the household.

**How will this happen?**

Taking risks is a normal part of a lifestyle that maximises independence. The Shared Lives carer will support the person living in the Shared Lives arrangement to have the kind of life and experiences that the person wants, doing the things that are important to the person and enabling the person to take risks in a responsible way.

If everyday events and activities could involve some hazards or potential harm for the person or other people around them, the person will be able to discuss these risks with their Shared Lives carer(s) and/or Shared Lives worker (and other people when appropriate) and then, if necessary, agree actions for reducing those risks. This process is called risk assessment and risk management and the agreed actions become a risk management plan.

The person will usually have a risk assessment as part of their referral and introduction to Shared Lives, and this will be carried out by the person’s allocated worker. Any agreed risk management plan will be added to the person’s Service User Plan and becomes an essential part of this. The person will be given copies of their Service User Plan and also the written risk assessment and risk management plan.

The Poole Shared Lives scheme provides Shared Lives carers and Shared Lives workers with training, information and ongoing support to enable them to identify hazards and assess risks, to take actions to reduce or remove the risks when appropriate and to record discussions and decisions about this.

A copy of the person’s risk management plan will be given to other people who are involved in supporting the person and who need to know how to keep the person safe; or need to know how to keep other people around the person safe (including themselves).

Any risk assessment and risk management plan will be reviewed regularly and the person and/or the person’s representative will take part in the reviews. This will happen at least once a year, or more often if required, and will usually take place alongside a review of the person’s Service User Plan.

A risk assessment is also made of the person’s Shared Lives carer(s) home before they start supporting anyone in a Shared Lives arrangement, and action is taken when necessary to reduce any hazards at the home. This risk assessment of the Shared Lives carer(s) home is reviewed at least once a year (usually at the time of the Shared Lives Carer(s) annual review).

See Shared Lives Guidance 4.1 Health and Safety, which can be used to inform the use of any Risk assessment documentation used by the person’s scheme or required by the organisation to which they belong.
Safe Working Practices (Including Moving and Handling)

The Poole Shared Lives scheme promotes and safeguards the health, safety and welfare of everyone working in or using it, through its safe working practices. It is recognised that each individual has personal responsibilities for their health and safety, but the Shared Lives scheme has an overall responsibility for ensuring that its health and safety guidance is understood and acted on.

How will this happen?

Training

All new Shared Lives workers (including volunteers) and all new Shared Lives carers will receive training and information about health and safety as part of their induction. This will enable them to understand:

- their legal duty to take care of their own health and safety and the health and safety of others affected by their actions
- the scheme’s policies and procedures for health and safety
- their own responsibilities within those policies and procedures

They will also receive specific training related to their role, such as moving and handling, risk assessment, dementia etc. All training will be carried out, where required, by appropriately qualified people.

Working practices and ongoing training needs will be monitored through supervision and reviews of their work for Shared Lives workers and visits to Shared Lives arrangements for Shared Lives carers.

Risk assessments

Risk assessments are carried out when necessary, and recorded. They form the basis for procedures and decisions about safe working practices. Additional risk assessments will be carried out for particular “one off” activities as necessary, for example when maintenance or repair work is being undertaken on a property.

Moving and handling

Anyone whose work involves moving people or objects will be trained in techniques for avoiding injury.

Shared Lives carers who are likely to be helping people to move will be provided with training before any Shared Lives arrangements begin. They will not use any special aids or equipment until an appropriately qualified person has shown them how to do this properly and safely.

Service User Plans will contain information about how the individual likes to be moved and what equipment they need for this. A risk management plan will also be included so that both the individual and Shared Lives carer can avoid injury.

Lifting equipment will be in a safe condition to use and regularly inspected and maintained by the manufacturer.

Safety checks for gas and electrical appliances

Property Management will ensure that gas appliances and electrical supplies and appliances at the office(s) are checked at least once a year and maintained as necessary. Shared Lives carers are also required to have their gas systems checked every year by a Gas Safe registered gas fitter and to hold the necessary safety certificate for this. Shared Lives carers are required to check electrical appliances in their homes at least once a year.
Welfare facilities at offices
Property Management will ensure there are adequate facilities at the office(s), including washing and toilet facilities and rest / eating places for workers.

Other issues relating to offices
Materials will be stored in ways that minimise risks and racking will be suitable for the purpose and loads. Ladders and steps will be in good condition and inspected before being used. Users of computers and VDUs will have a 5-10 minute break after each hour of continuous use and careful attention will be paid to their seating arrangements. The Scheme Manager will regularly check workstations so that risks can be identified and managed. Regular maintenance checks are undertaken to identify possible hazards and any necessary remedial action and good housekeeping routines mean that trip hazards are dealt with promptly.

Contractors and visitors to offices
Contractors will be required to have insurance cover and to take full responsibility for complying with health and safety legislation. Visitors will be provided with any information necessary to stay safe during their visit.

Communication
Good communication is essential for safe working practices. The Shared Lives scheme has clear procedures for reporting accidents and dangerous occurrences and for learning from these. These and other events which adversely affect the well being and safety of people in Shared Lives arrangements will be reported to the Care Quality Commission and other regulatory bodies when required.
Accidents, Dangerous Occurrences and First Aid
The Poole Shared Lives scheme aims to promote the health, safety and wellbeing of everyone in a Shared Lives arrangement, Shared Lives workers and carers.

It is important that everyone has an awareness of how to deal with and prevent accidents occurring in the home or in the Shared Lives scheme’s premises.

Having an understanding of the basic principles of First Aid is equally important and could save lives.

**How will this happen?**
Shared Lives workers and Shared Lives carers are provided with training that gives them a good understanding of all relevant health and safety legislation, guidance, procedures and their responsibilities in law. They are also trained to watch out for any hazards that might lead to a fall, slip or trip, etc and to take immediate action to remove the hazard.

Shared Lives workers in conjunction with Shared Lives carers complete risk assessments on Shared Lives carers’ homes in order to identify potential hazards and how to take action to reduce these. Shared Lives carers homes are maintained in good order and gas appliances are checked annually. There is a legal requirement to regularly check electric appliances and to visually inspect wires, plugs and extension leads.

Shared Lives carers will record all accidents or dangerous occurrences which involves a person in a Shared Lives arrangement. Additionally, if there is an incident or accident involving the Shared Lives carer or member of their family which impacts on the Shared Lives arrangement then this should be reported to the scheme without delay. Any accidents or dangerous occurrences involving Shared Lives workers will be recorded by the manager of the scheme.

Accidents or dangerous occurrences involving Shared Lives workers will be recorded by the Shared Lives scheme manager. The scheme manager will take responsibility for ensuring that all accidents and dangerous occurrences are reported if required to the Care Quality Commission. The Shared Lives scheme manager understands the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

Each accident or dangerous occurrence will be reviewed with the Shared Lives carer by the Shared Lives worker and/or scheme manager in order to learn from the episode and take preventative action where necessary. Any action taken will be recorded by the Shared Lives worker. The reason why accidents and dangerous occurrences are recorded and reported is not to find someone to blame but to ensure that a safe environment is provided and to minimise the risk of injury in the future. Shared Lives carers and Shared Lives workers are aware of this.

**First Aid**
Shared Lives carers will be given basic first aid training. This will include an understanding of their own limitations and when it is appropriate to seek assistance from another person or professional who has been specially trained in first aid.

A first aid box will be available at the Shared Lives carer(s) home. It will be clearly labelled and show what is in the box.

Before giving any medication or dressings, the Shared Lives carer or trained first aider will check a person’s Service User Plan to find out if they have any special requirements and to make sure they do not have any allergies or other reasons why they should not receive
treatment.

The emergency services, GP or other health professional will be informed when appropriate and follow up treatment obtained when necessary. The person’s family or main support provider will also be informed when this is relevant to their situation.

The Shared Lives carer will record details of any accidents or injuries and will report them to the Shared Lives worker or scheme without delay. The Shared Lives scheme will inform the Care Quality Commission when required.

If an accident occurs on the Poole Shared Lives scheme’s premises first aid will be administered by the named first aider on duty (see list in all kitchens).
Introduction
This Code of Practice on Fire Safety was originally developed in 2004/5 in consultation with:

- Office of the Deputy Prime Minister
- Department of Health
- Fire Brigades Union
- Chief and Assistant Chief Fire Officers Association (now Chief Fire Officers Association)
- Local Government Employers Association
- National Care Standards Commission (now Care Quality Commission)
- National Association of Adult Placement Services (now Shared Lives Plus)

This current Code of Practice is a modified version of the original Fire Safety Code of Practice 2005 and takes account of both care regulatory and other regulation changes. The general principles which underpinned the original Code remain intact.

The care regulators in England, Wales and Northern Ireland do not directly inspect the premises of Shared Lives carers, but it should be noted that should they observe anything of significant concern when visiting a Shared Lives carer, when inspecting a Shared Lives scheme, then they may refer their concern back to the Shared Lives scheme or the if necessary the local Fire and Rescue Service. The Code of Practice supports Shared Lives Plus commitment to ensuring the safety of people in Shared Lives arrangements.

A Shared Lives carer is someone who offers accommodation and support in their own home to a person requiring support. A Shared Lives carer must be approved and supported by a Shared Lives scheme. A Shared Lives carer provides care or support up to three service users at any one time and all Shared Lives carers occupy traditional dwellings’.

People living with Shared Lives carers highly value the domesticity and homely nature of the arrangement. Private dwellings that are used for Shared Lives arrangements should not present an additional risk to life from fire when compared to a single-family dwelling. For these reasons there should be no need for fire precautions additional to those taken by a responsible householder.

The following guidance is in two parts
- Guidance to Shared Lives schemes
- Guidance to Shared Lives carers

1.1 Guidance to Shared Lives schemes
Shared Lives arrangements in England are excluded from The Licensing and Management of Houses in Multiple Occupation and other houses (Miscellaneous Provisions) (England) (Wales) Regulations 2006. These treat Shared Lives households as ordinary dwellings and are therefore excluded from regulatory requirements as long as no more than three people in England and two in Wales are accommodated at any one time.
The Shared Lives scheme and Shared Lives carer should be aware that additional fire precautions may be needed for a ‘non-standard house’ (i.e. a house on more than two storeys). The Shared Lives scheme, in such cases, should support the Shared Lives carer to take advice from the local Fire and Rescue Service.

**Fire Safety Policy**
The Shared Lives scheme manager is responsible for ensuring that scheme workers understand the Fire Safety Code of Practice and provide Shared Lives carers with the scheme policy and procedure on ‘Fire Safety’ and with any support and learning that they need to put the policy and procedure into practice.

**Shared Lives carer assessment**
The Shared Lives worker together with the prospective Shared Lives carer will carry out, as part of the assessment process, a health and safety and fire safety risk assessment of the prospective Shared Lives carer(s) home. This will be reviewed by the Shared Lives worker and will be included in the papers presented to the Shared Lives Panel which recommends whether the prospective Shared Lives carer can be approved. Any decision to approve a prospective Shared Lives carer will be made by the Shared Lives manager and be dependent on them providing a safe environment for any person placed with them.

**Special Circumstances**
The risk assessment carried out by the Shared Lives carer and Shared Lives worker may identify that an individual using or living in a Shared Lives arrangement will need additional fire precautions. For example, where the service user has mobility problems, which may seriously impede their safe evacuation from the house in the case of a fire or if they are inveterate smokers. In such cases the Shared Lives carer, with support from the Shared Lives scheme, will seek advice from the local Fire and Rescue Service. Where the service user’s bedroom is in the basement of the house there must be a direct escape route from the basement.

**Pre Shared Lives arrangement training**
- All approved Shared Lives carers will receive training and information to ensure they understand the relevant legislation and its practice implications including health and safety and fire safety, prior to a Shared Lives arrangement being set up in their home. This might include a home visit and advice from the Fire and Rescue Service.
- It is the responsibility of the Shared Lives scheme to ensure that Shared Lives carers understand and adhere to the Code of Practice on fire safety in Shared Lives schemes.

**Ongoing training and development**
- The Shared Lives scheme and the Shared Lives carer, as part of the annual review of the work of the Shared Lives carer, will together review the health and safety and fire safety risk assessment of the Shared Lives carer’s home.

**Shared Lives arrangement procedures**
- The Shared Lives scheme, with the Shared Lives carer and the service user and/or their representative, will develop a Service User Plan and arrangement agreement which describes the services and facilities to be provided by the Shared Lives carer and how these services will meet the service user’s changing needs.

The Plan will also:
Set out assessed risks and risk management strategies including a record of agreed actions to manage identified risks and hazards, and any advice necessary for people using or living in Shared Lives arrangements about their personal safety.

Include any identified fire safety risks specific to the individual person using or living in the Shared Lives arrangement (e.g.: where the person has limited mobility is a heavy smoker)

1.2 Guidance for Shared Lives carers

This Code of Practice on Fire Safety was originally developed in 2004/5 in consultation with:

- Office of the Deputy Prime Minister
- Department of Health
- Fire Brigades Union
- Chief and Assistant Chief Fire Officers Association (now Chief Fire Officers Association)
- Local Government Employers Association
- National Care Standards Commission (now Care Quality Commission)
- National Association of Adult Placement Services (now Shared Lives Plus)

This current Code of Practice is a modified version of the original Fire Safety Code of Practice 2005 and takes account of both care regulatory and other regulation changes. The general principles which underpinned the original Code remain intact.

The care regulators in England, Wales and Northern Ireland do not directly inspect the premises of Shared Lives carers, but it should be noted that should they observe anything of significant concern when visiting a Shared Lives carer, when inspecting a Shared Lives scheme, then they may refer their concern back to the Shared Lives scheme or the if necessary the local Fire and Rescue Service. The Code of Practice supports Shared Lives Plus commitment to ensuring the safety of people in Shared Lives arrangements.

A Shared Lives carer is someone who offers accommodation and support in their own home to a person requiring support. A Shared Lives carer must be approved and supported by a Shared Lives scheme. A Shared Lives carer provides care or support up to three service users at any one time and all Shared Lives carers occupy traditional dwellings'.

People living with Shared Lives carers highly value the domesticity and homely nature of the arrangement. Private dwellings that are used for Shared Lives arrangements should not present an additional risk to life from fire when compared to a single-family dwelling. For these reasons there should be no need for fire precautions additional to those taken by a responsible householder.

Fire Precautions in Shared Lives Arrangements

Fire Plan

It is important that Shared Lives carers know what to do in the event of a fire and that they make a fire plan. This should include:

- The immediate priority is the safe escape of all members of the household and firefighting should be avoided.
- An evacuation plan with an external assembly point.
- Escape routes that are known, unobstructed and free from trip hazards.
- The means of raising the alarm in the event of fire.
- How to call the Fire and Rescue Service in the event of fire.

Shared Lives carers need to ensure that the fire evacuation plan is explained to, understood by and practiced by each of the people being supported.
Escape Routes

- Escape from one or two story dwellings is generally simple. Therefore, it is unlikely that additional provisions will be necessary beyond ensuring that each habitable room either opens directly onto a hallway or stairway leading to the exit of the dwelling or that it has a window or door opening directly to open air through which escape could be made.
- All exits should open easily from the inside, preferably without the use of a key. Shared Lives carers are not, however, expected to compromise the security of their homes. Everyone in the household can be safe, as well as secure, provided that they make sure that they can easily open doors and windows. Keys for this purpose should be easily accessible and kept close to the exits. The evacuation plan should ensure that everyone in the household knows where such keys are kept. It is preferable that exit doors are not locked and are instead fitted with ‘Turnbuckles’ and that keys remain in window locks whilst the house is occupied.
- Common areas and escape routes should be kept free from any obstruction and should not be used to store any combustible material.

Special Circumstances

- The risk assessment carried out by the Shared Lives carer and Shared Lives worker may identify that an individual using or living in a Shared Lives arrangement will need additional fire precautions e.g. where the service user has mobility problems, which may seriously impede their safe evacuation from the house in the case of a fire or if they are inveterate smokers. In such cases the Shared Lives carer with support from the Shared Lives scheme will seek advice from the local Fire and Rescue Service.
- The Shared Lives carer should be aware that additional fire precautions may be needed for a ‘non-standard house’ (i.e. a house on more than three floors). Where the person living in the Shared Lives arrangement’s bedroom is in the basement of the house, there must be a direct escape route out of the house from the basement.
- The Shared Lives scheme, in such cases, should support the Shared Lives carer to take advice from the local Fire and Rescue Service.

Fire Warning Systems

It is considered sufficient for smoke alarms to be installed in circulation areas only. The recommended minimum is for ten-year smoke alarms with sealed battery units to be fitted. Where premises are fitted with smoke alarms which are battery powered with short life batteries these should be replaced with ten-year smoke alarms with sealed battery units.

Smoke alarms should be fitted as follows:

- In a dwelling that has people living in Shared Lives arrangements on more than one storey, there should be at least one self-contained smoke alarm at each available storey level. If more than one self-contained smoke alarm is required in the premises; consideration should be given to connecting them together, so that they all operate their warning signal if any one detector activates. The alarm signal must be capable of being heard throughout the building for all persons within the premises to react and take appropriate action required for their safety. This should only be necessary if the building is of such a size or design that the operation of one detector may not give sufficient warning audibility throughout the premises. The manufacturer’s instructions about the maximum number of alarms that can be interconnected should be followed.
- Each self-contained smoke alarm should be installed in accordance with the manufacturer’s instructions.
- Self-contained smoke alarms must be accessible to carry out routine maintenance, such as testing and cleaning, easily and safely. For this reason, a self-contained
Smoke alarm should not be fixed directly over a stair shaft or any other opening between floors.

- Smoke alarms should be tested weekly by using the test button on each smoke alarm, and be cleaned annually according to the manufacturers’ instructions.
- Mains-powered alarms are obviously to be preferred and will automatically be installed in newly-constructed dwellings under the Building Regulations.
- Where a mains-powered system is installed to replace a battery-operated system it should meet British Standard BS5839-6.
- The system should be installed by a competent person who should confirm that the system is installed in accordance with the British Standard. You will need a qualified electrician’s certificate when battery operated smoke alarms are replaced by a mains operated (hard wired) detection system.
- The wiring installation should conform to the most recent Institution of Electrical Engineering Wiring Regulations (BS EN 7671).

Reducing the Risk from Fire
Fire Fighting Equipment
As Shared Lives arrangements are in an ordinary domestic dwelling firefighting equipment is not required and Shared Lives carers should be reminded that, should a fire occur, their first priority is the safe evacuation of all occupants of the house.

Heating
- The use of portable heating devices having a naked flame should not be used except in emergency circumstances (e.g. power cuts, etc.). Where such devices are used in such circumstances, then they should always conform to the appropriate British Standard. On such occasions, the heater should be securely anchored in a safe and suitable position and away from draughts.
- Where a portable heating device is to be used, Shared Lives carers should carry out an assessment of risk, involving all members of the household, in order to ensure the safety of everybody occupying the home.
- If considered necessary to safeguard the occupants of the dwelling, a substantial guard constructed to BS8423:2002 specification and securely fixed in position should enclose solid fuel fires and open flame heating appliances. No part of the guard should be closer than 200mm from the heat source; otherwise the guard may get dangerously hot.
- Boilers and central heating systems should be serviced annually by a competent professional and in accordance with manufacturers’ or British Standards guidance. Gas installations should only be serviced by an engineer registered with the Gas Safe Register. The Health and Safety Executive website has the latest up to date guidance and can be viewed at [http://www.hse.gov.uk/gas/domestic/index.htm](http://www.hse.gov.uk/gas/domestic/index.htm). You can also check to whether someone is registered as a gas safe engineer and the types of work they are qualified to undertake at [http://www.gassaferegister.co.uk](http://www.gassaferegister.co.uk)
Cooking
- Shared Lives carers are strongly advised not to use traditional chip pans, as they are a major contributor to house fires. When deep frying, a thermostatically controlled deep fat fryer should be used.

Furniture and Furnishings
- When new furniture is purchased, it should be fire retardant and conform to the Furniture and Furnishings (Fire) (Safety) Regulations 1988 as amended. Fire retardancy means that the ease with which the furniture catches light and the speed with which it burns will be reduced. **It does not mean that the furniture will not burn.**
- Shared Lives carers should be aware, however, that if their furniture was made before 1988 (the date when the requirements for fire retardancy came into force) that it could be dangerous in a fire because it could catch light very easily and burn very quickly, and also give off toxic smoke.
- Household members should be asked to take extra care, especially if any of them are smokers, and care should be taken with matches and lighters. Both Shared Lives carers and people living in Shared Lives arrangements should take account of other advice concerning smoking in the household.

Electrical Wiring and power sockets
Electrical equipment is a significant cause of accidental fires. The main causes include:
- Overheating cables and equipment due to overloading or loose connections
- Incorrect installation or use of equipment
- Damaged or inadequate insulation on cables or wiring
- Combustible materials e.g. paper being placed close to electrical equipment or sockets which may give off heat (heat may be generated when equipment is operating normally or when equipment becomes hot due to a fault or inadequate ventilation) and arcing or sparking by electrical equipment.

There should be no obvious defects in the electrical wiring system:
- Sockets and switches should be securely fixed to the wall.
- Flex to electrical appliances should not be run under carpets or be positioned to cause a trip hazard.
- The use of multiple adapters should be discouraged. Only correctly fused extension leads should be used and be positioned to avoid being a tripping hazard.
- Fuses should be correctly rated for the appliance in use.

Bedtime Routines
A bedtime routine should be followed ensuring that gas and electrical appliances are turned off and that all smoking materials are safely extinguished. Careless use of cigarettes is a main cause of fire in the home and all ashtrays should be emptied in a non-combustible receptacle.
All room doors should be closed at night.
Control of Substances Hazardous to Health (COSHH)

The Poole Shared Lives scheme promotes and safeguards the health, safety and welfare of everyone working or using it, through its safe working practices. Using chemicals or other hazardous substances can put people’s health at risk and the law requires us to control the ways that people in our office(s) or involved in Shared Lives arrangements may be exposed to them.

How will this happen?

Care must be taken when handling any chemicals or substances that may be poisonous or bad for a person’s health. These are known as hazardous substances and manufacturers are required to provide special warning labels on the packaging or containers. Wherever possible the use of these hazardous substances will be avoided in Shared Lives arrangements and in our office(s).

Shared Lives workers and Shared Lives carers will be provided with training and information that enables them to:

- understand which substances may be dangerous and the importance of avoiding their use if possible
- recognise the warning labels and their different meanings
- assess the risks within Shared Lives arrangements and take action to reduce these
- know how to deal with hazardous substances if their use is necessary
- understand the importance of explaining the warning labels and dangers to people who are in Shared Lives arrangements.

When use of a hazardous substance is necessary:

- it will be stored in its original container
- it will be kept in a locked cupboard or a secure place away from children or other people who may not understand the dangers
- the instructions for use will be read and followed (including how to deal with accidental exposure)
- protective equipment such as gloves or masks will be used when required

Working practices will be regularly monitored by the Shared Lives worker through supervision and reviews and visits to Shared Lives arrangements.

Bacteria and other micro-organisms can also be hazardous to health. The procedures for dealing with these are included in our policies for Communicable Diseases and Infection Control and Food Safety and Nutrition.

Medicines are hazardous to health if taken in the wrong way, wrong amount or by the wrong person. The policy on Handling Medicines explains how these risks are managed.

Within the scheme’s office Property and Cleaning Services will take responsibility for ensuring that COSHH Regulations and relevant Approved Codes of Practice are followed. This will include completing COSHH risk assessments when necessary, updating these as and when required and informing workers about them. If hazardous chemicals are in use, the manufacturers’ safety data sheets will be obtained and stored in a COSHH file and workers will know where to find this.
Hygiene and Infection Control
The Poole Shared Lives scheme promotes and safeguards the health, safety and welfare of people involved in Shared Lives arrangements through its safe working practices. This includes taking action to prevent the spread of diseases and infections.

How will this happen?
Some diseases are easily spread and require particular actions to prevent this. The diseases include things like hepatitis, TB, measles, HIV/AIDS and MRSA.

Shared Lives carers will be provided with training and information so that they understand:

- how diseases and infections are spread and how to reduce the risk of this
- that the most effective way to control the spread of diseases and infections is through washing hands (see below)
- what immunisations or vaccinations are available
- the practice of ‘universal precautions’ (see below) and the need to use this whenever dealing with blood or bodily fluids

Shared Lives carers will be expected to follow good practice for washing hands and to encourage or help other people in their household to do the same.

This means washing hands:

- before eating or handling food
- after using the toilet
- after handling rubbish
- after coughing, sneezing or nose blowing
- before and after providing personal or intimate care for a person and between caring for different people
- before and after touching a sick or injured person
- after touching animals or animal waste

Alcohol hand gel will only be used in situations when hand washing is not possible or if specifically advised for use by a GP or health professional.

‘Universal precautions’ means treating all blood and bodily fluids as potentially infectious. Shared Lives carers will therefore be required to follow this procedure every time they are dealing with these:

- washing their hands before and after touching the person
- wearing protective clothing such as gloves and aprons and washing their hands again after removing the protective clothing
- changing gloves between each person
- covering their own cuts or broken skin with a waterproof dressing or gloves
- avoiding sharp objects if possible, or taking particular care when handling them or disposing of them
- disposing of ‘sharps’ in a special container (provided by the health professional that is responsible for treatment)
- clearing up spillages of blood or bodily fluid with hot, soapy water and disinfecting surfaces
- disposing of any contaminated waste in sealed bags, or according to advice from the GP or other health professional
- putting contaminated laundry into suitable bags before laundering
washing contaminated laundry in biological detergent and at a hot temperature (at least 80 degrees). If this is not possible the Royal College of Nursing recommends first soaking in cold water and biological washing powder and then washing in very hot water and washing powder.

A small number of people who have lived in long-stay hospitals are particularly at risk as carriers of the hepatitis B virus. As this is a known risk, anyone who is supporting a person who has lived in a hospital will be advised to contact his or her GP who will assess whether the vaccine for hepatitis B is required.

Some diseases and infections are ‘notifiable’ ones, which means that the Local Authority must be informed of an outbreak. Shared Lives carers will follow advice and instructions from the GP, if this becomes necessary.
Medication

The Poole Shared Lives scheme enables each person to take responsibility for their own medication wherever possible. However if this is not possible we will ensure that Shared Lives carers understand the principles behind the safe handling of medication, as well as the Shared Lives scheme’s procedures for the control, administration, recording, safe keeping, handling and disposal of medicines.

How will this happen?

Information about any medication a person requires; the extent to which a person can take responsibility for this; and/or any assistance a person needs will be included in the person’s Service User Plan. A risk assessment will be completed (and reviewed regularly) if this helps to establish how much responsibility the person can take and ensures their safety.

If medicines (prescribed and non-prescribed) are kept at the Shared Lives carers home, they will be stored in a lockable container/in a suitable place that is not affected by extreme heat or moisture. This may include asking each person to bring their medicines in a suitable container even if the person is responsible for them themselves, in order to make sure that other people in the house cannot take them, whether by accident or on purpose. If medicines need to be kept cool they will be kept in a clearly marked container on the top shelf of the refrigerator.

Shared Lives carers will receive training about the general principles of handling medicines before they begin any Shared Lives arrangements. There is no requirement from CQC for medication training to be provided from a registered health professional e.g. a pharmacist, or a doctor, or nurse. To meet CQC requirements any medication training that a Shared Lives carer receives must enable them to safely and effectively administer and manage the medication of the people using or living in a Shared Lives arrangement with the Shared Lives carer. Shared Live Plus have developed specific training for Shared Lives carers which covers the administration and management of medication for people using or living in Shared Lives arrangement. This training has been reviewed by CQC and meets their requirements and is available to download for free for any Shared Lives Plus member from the members area of the Shared Lives Plus website. In addition Shared Lives carers will also be able to receive specific training from a competent health professional about the person’s own medication or medical procedures, when this is appropriate. This training and subsequent assessment of their competence will be documented.

Shared Lives carers will not administer any non-prescribed medication, ‘home remedies’ or dressings without the guidance of a health professional, unless this has been explicitly included in the person’s Service User Plan or, in the case of first aid, if they have been specially trained for this.

Shared Lives carers will keep a record of any medicines which are stored for a person using or living in a Shared Lives arrangement and the date they are returned to a person. If the person’s Shared Lives carers are assisting a person with taking medication, or with helping the person remember to do this, they will record details of which medicines are taken and when and the dosage. They will also record occasions when the person has missed a dose (and the reason for this) or when the medicine may have been ineffective, for example, if the person has been vomiting. They will be provided with suitable charts or forms (Medicine Administration Records) on which all these details can be recorded and separate records will be kept for each person they are supporting. The information may be shared with the person’s GP or other relevant health professionals. They will also let the persons GP know how the person is responding to medication, in particular any unexpected changes that may be due to side effects of the medication.
Medicines will only be administered by Shared Lives carers if they are in their original containers or in a dosage system used by the person’s pharmacist and clearly labelled with their name, the dosage, instructions and expiry date. Medicines prescribed for a person will not be given to any other person or used for a different purpose. If any mistakes are made in administering medicines the persons Shared Lives carers will report this to the persons GP straight away and will take any remedial action the GP advises.

Shared Lives carers will return any surplus, unwanted, damaged or out-of-date medicines to a pharmacist for destruction, if they have been storing these on the person’s behalf, and will record this. If someone dies they will wait 7 days before returning their medicines. They will also make use of advice and guidance from a pharmacist, when appropriate, if they have queries about the person’s medication.

Arrangements for administration of the persons medication (including any risk assessments) will be reviewed regularly when the persons Service User Plan is reviewed, or more frequently if required.

The person’s dignity and privacy and preferences will be respected when they are given or taking medicines. The person has a right to give or withhold consent for any medical treatment or examinations. Shared Lives carers understand that they cannot do this on any persons behalf and nor can anyone else. If the person is unable to make decisions or give informed consent themselves, this will be discussed with a person’s doctor or dentist (and the persons representative, when appropriate) to agree a way forward that is within the law and in the persons best interests. In these situations we will follow guidance in the Mental Capacity Act 2005 Code of Practice.
# Medication Profile

<table>
<thead>
<tr>
<th>Client Name</th>
<th>Allergies</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Medication</th>
<th>Date medication prescribed</th>
<th>Name of prescriber (e.g. name of GP, Dentist)</th>
<th>Form of medication (e.g. tablet, liquid)</th>
<th>Route by which medication should be administered</th>
<th>Strength of medication</th>
<th>Dosage (frequency medication should be taken)</th>
<th>Info from pharmacist – special precautions/contraindications</th>
<th>Effect of medication</th>
<th>Date medication ended</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Shared Lives – Medicine Administration Chart

Name: ........................................ Date of Birth: .................. Address .................................................................................................................................

Doctor: ........................................................................................................ Doctor’s Phone Number ......................................................................................

Carer: ................................................................. Month................... Start Day ............... Sheet No ..............................................................

Allergies/Hypersensitivities: .................................................................................................................................

**NB Please initial each box when medication has been administered or enter code if not**

| Time | Medication | Dose | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|------|------------|------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|

R = Refused  M = Missed (other than refused)  D = Discontinued  V = vomiting or diarrhoea  A = Away  
P = Returned to Pharmacist/Destroyed (put date, initials and any comments or actions in the notes below)
# Notes

<table>
<thead>
<tr>
<th>Date</th>
<th>Initials</th>
<th>Comments</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Disposal of Medication

<table>
<thead>
<tr>
<th>Date</th>
<th>Client Name</th>
<th>Name, Form and Strength of Medicine</th>
<th>Quantity</th>
<th>Reason for disposal</th>
<th>Carer Signature</th>
<th>Accepted by (Pharmacist Signature)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Food Safety, Nutrition and Hydration

The Poole Shared Lives scheme promotes and safeguards the health, safety and wellbeing of people involved in Shared Lives arrangements through its safe working practices. Food is an important part of everybody’s daily lives and needs to be handled safely in order to prevent diseases or infections.

How will this happen?

A good balanced diet is important for people’s general health, while eating the food that the person likes and enjoys is just as important for their sense of well-being. Their Shared Lives carer(s) will support the person in leading the kind of life that the person wants.

A healthy diet along with regular exercise and weight control can help in reducing the risk of:

- Heart attacks
- Stroke
- Cancer
- Diabetes
- Obesity
- Malnutrition
- Skin disorders

Information about which foods the person likes or dislikes and any cultural, religious or dietary needs will be included in their Service User Plan. The person will be offered a variety of foods at mealtimes and will be able to help themselves to snacks and drinks when the person wants, paying particular attention where hydration may be an issue. Their Shared Lives carer(s) may encourage the person to eat well, when appropriate, but the final choice about what the person eats will be theirs.

If the person requires help with eating and drinking, their Shared Lives carer(s) will provide this in a sensitive and unhurried way that maintains their dignity and enables the person to do as much as possible for themselves.

Diseases and infections can be spread through the preparation, cooking and storage of food and the way that equipment is cleaned. Shared Lives carers will be provided with training and information so that they understand:

- good practice in handling foods
- how diseases and infections are spread and how to reduce the risk of this
- the most effective way to control the spread of diseases and infections is through washing hands. (There is more about this in our policy on Communicable Diseases and Infection Control)

Anyone in a Shared Lives arrangement who is involved in preparing or cooking food will be expected to wash and dry his/her hands:

- before starting to prepare foods
- after touching raw meat
- after touching the bin or handling rubbish
- after touching pets or handling their feeding bowls
- after going to the toilet or helping another person to do so
- after helping another person with their care needs

Other precautions include:
- separating raw meat from other foods at all times – for example, using separate chopping boards and storage containers and not allowing meat to touch or drip on to other foods in the fridge
- cooking foods until piping hot, including leftovers
- keeping worktops and chopping boards and other equipment clean
- storing foods correctly and monitoring the temperatures of fridges and freezers
- using foods before their ‘best by’ or ‘use by’ dates.

If the person is involved in the preparation and cooking of food as part of their Shared Lives arrangement, their Shared Lives carer(s) will explain and encourage and help the person to follow these safe practices too.
Lone Workers

The Poole Shared Lives scheme has a responsibility to safeguard the health and safety and well-being of people working in it. This includes times when people may be working alone at the office(s), making visits or supporting people in the community on their own. Taking some sensible precautions means the risks in these situations can be reduced.

How will this happen?

If Shared Lives workers are likely to be in a position when they are working alone in an office building (whether during the times the service is open or outside these times) a risk assessment will be completed and ways of reducing risks will be identified.

All Shared Lives workers will be provided with a copy of their risk assessment and risk management plan so that they can be prepared and take appropriate action if they find themselves alone in the building. This may include actions such as:

- identifying ways in and out and keeping these to a minimum
- not answering the door or telephones when the office is not open
- making sure that a colleague or family member knows where they are

If Shared Lives workers are making visits in the community which are thought to be hazardous, for example the home of a person who is known to be angry or a person known to have a history of violence, the risks will be assessed before they go ahead. The risks may be reduced by:

- taking a mobile phone
- being accompanied by a colleague
- making sure other people know exactly where they are going
- making arrangements to phone the office before and after the visit has been completed and having a contingency plan if this call doesn’t take place

If Shared Lives workers or carers are supporting a person whose behaviour is known to cause significant risks to themselves, the person or others, a risk management plan will be included as part of that person’s Service User Plan. If carers become aware of other risks when supporting clients they have a duty to report these to social workers and Shared Lives so can they be included on the client’s assessment and Service User Plan.

Shared Lives carers have a responsibility under health and safety legislation to:

- Take reasonable care of their own and other people’s safety
- Have an awareness of their surroundings and the possible threats to their personal safety when working alone
- Be involved in assessing risk and identifying safety measures
- Leave the working environment if there is an imminent danger to their safety
- Undertake and follow training provided to ensure their safety
- Follow Shared Lives policies and procedures set up to protect their safety
- Use equipment in accordance with the training given and not misuse it
- Tell Shared Lives when they have encountered a ‘near miss’ or have identified additional risks to their safety that were previously unidentified
- Report to Shared Lives any actual accidents or incidents that occur, using proper organisational procedure.

When taking clients out in the community Shared Lives carers should let someone know where they are going, ensure they have a mobile phone to hand and their Shared Lives ID in case of an emergency. Shared Lives carers should have an emergency procedure in place in case they become injured inside or outside their home, including supporting/teaching clients, who are able, how to dial 999 in an emergency.
Section 5: Safeguarding

Safeguarding Against Abuse and Neglect
The person using or living in the Shared Lives arrangement has a right to friendships and a variety of other kinds of relationships with other people. These are essential for everyone’s health and well-being and are usually positive experiences. However, there are sometimes risks associated with being in relationships including the risk of abuse or neglect so sometimes this has to be balanced with the person’s right to expect to be safe, to be protected and safeguarded from harm. The Poole Shared Lives scheme ensures that Shared Lives carer(s) and Shared Lives workers are alert to the possibility of abuse and neglect and can take action to safeguard the person (and/or other people) if necessary.

How will this happen?
In all areas there will be a locally-agreed, multi-agency policy and procedure for ‘Safeguarding Adults’. This will always be followed and the guidance in this scheme document is therefore complimentary.

For Borough of Poole’s multi-agency policy and procedure please refer to Bournemouth and Poole Safeguarding Adults Board website http://www.bpsafeguardingadultsboard.com/

Please also refer to Bournemouth and Poole Safeguarding Adults Board website for information on Whistleblowing.

Abuse can take many forms e.g. financial/physical/ sexual/psychological/discriminatory/ institutional etc. It usually takes place between people who have a relationship of some sort e.g. nurse and patient / worker and person using a service / appointee and person in receipt of welfare benefits / employer and employee / parent and son or daughter etc. In this document the word ‘relationship’ is used to describe all these different sorts of connections (rather than simply implying a sexual connection).

To reduce the risk of abuse, one of the most important things we can do is give the person information about what is or is not appropriate in different sorts of relationships and to ensure the person has the power to say ‘no’ when the person wants to. In Shared Lives arrangements the person will be supported to be in control of their life.

If the person is in a situation of actual or potential abuse or neglect, the Shared Lives Scheme will help the person to understand what is taking place and the harm that it may cause. We will also help the person access information about the options that are open to stop the abuse or neglect or to reduce harm. If the person does not have the capacity to give consent to the relationship or to make informed decisions about this, we will work with them, their family and/or representative and/or other professionals to make sure decisions and actions are taken in the their best interests and in line with the Mental Capacity Act 2005 Code Of Practice. (There is more information about this in our policy on Making Choices and Decisions.)

Information about the person is not generally shared with other people without that person’s agreement. However, in certain very particular circumstances, it may be necessary to override this principle i.e. when it is essential for the persons own health or safety or welfare or the health or safety or welfare of others. (There is more information about this in our policy on Confidentiality.) We will tell the person if we have to share information about them with other people, unless this puts the person at even greater risk, and the reasons for this.

All incidents or concerns about abuse or neglect will be investigated, and the Poole Shared Lives scheme will follow the Poole local authority multi-agency policy and procedure for
Safeguarding Adults. The extent and type of information-gathering or investigation will depend on the assessed risks to the person and other people, the person’s own wishes about this and decisions taken within Bournemouth and Poole Safeguarding Adults Board. In all cases careful records will be kept of the process, information gathered and decisions and outcomes. The person will be kept informed about what is happening throughout this process (unless this puts the person at even greater risk) and about the outcomes.

If Shared Lives carer(s) or Shared Lives workers become aware of an incident of abuse, or concerned about the possibility of abuse, they will use their judgement to take any action that is immediately required to protect the person and/ or meet their immediate needs for assistance and support. They will report the matter to the Shared Lives scheme manager scheme straight away, or if it is out of office hours, to the Shared Lives schemes parent organisation’s Emergency Duty Team.

The scheme manager will take responsibility for making sure a referral to Bournemouth Adult Social Care is put in place; also for informing any other relevant health or social care authorities including the Care Quality Commission as required. The police will always be informed if a crime has been committed and the health or safety or welfare of other vulnerable adults or children is at risk. Any internal investigation will be co-ordinated with a Police investigation or other forms of ‘Safeguarding Adults’ investigations, when required.

The scheme manager will work internally and with other professionals to ensure that the local multi-agency Borough of Poole Safeguarding Strategy is followed. This will include making sure that:

- the person is safe
- the risks to the person are properly assessed
- the person can say what action they would like taken, if any
- issues around consent, capacity and confidentiality are considered
- medical attention is obtained, if necessary
- a decision is made about whether to inform the Police
- any forensic evidence is kept, if necessary
- any risks to other vulnerable adults or children are evaluated and further action taken if necessary
- the person’s family / representative are informed, if appropriate
- the person’s rights to information, advocacy and support are met
- a plan is put in place to safeguard the person in the future

We will take positive action to safeguard the person through our procedures for assessment of their needs and for completing their Service User Plan. If any risks to the person’s safety are identified, a risk assessment and risk management plan will be completed and regularly reviewed. This will also happen if the person’s own behaviour sometimes causes risks of abuse towards other people.

We will also take positive action to safeguard the person through our recruitment and training for Shared Lives carer(s), and Shared Lives workers. They will be selected carefully, with references, Disclosure and Barring Service (DBS) (or equivalents in Scotland and Northern Ireland) and safety checks followed up before they begin working in this service. Before or soon after joining the Shared Lives scheme, they will receive training so that they understand and recognise the different types of abuse and know how to respond if they are concerned this may be happening to the person they support. This aspect of their work will continue to be developed and monitored through supervision, review and ongoing training. They will also receive information and training about how to protect themselves against allegations of abuse, through safe working practices.
If an allegation of abuse is made about a Shared Lives worker, the scheme manager will make sure:

- that a decision is made about whether she/he should continue with their work during the investigation
- that her/his right to information, advocacy and support are met
- that a referral is made to the Disclosure and Barring Service (DBS) in accordance with relevant Safeguarding legislation and procedures, when appropriate
- that if the allegation is upheld, the scheme's disciplinary procedure will be followed

If an allegation is made about a Shared Lives carer(s), the scheme manager will make sure:

- that a decision is taken about whether the Shared Lives arrangement and any other Shared Lives arrangements with the Shared Lives carer should continue while the investigation is underway
- that alternative arrangements are made for the person and any other people living in Shared Lives arrangements with the Shared Lives carer when necessary
- the Shared Lives carer(s) understands their rights to information, advocacy and support during the investigation and how these will be met
- that the Shared Lives carer is supported throughout the safeguarding process
- that a referral is made to the Disclosure and Barring Service (DBS) in accordance with relevant Safeguarding legislation and procedures, when appropriate
- that the work and approval of the Shared Lives carer(s) are reviewed after the investigation has been completed, if the allegation is upheld

The person has a right to lead a life that is free from abuse and neglect. Failure to report an incident or suspicion of abuse or neglect could therefore result in disciplinary proceedings for Shared Lives workers and in a review of approval for Shared Lives carer(s).

The scheme keeps a record of any allegations of abuse or neglect, which is available for inspection by the Care Quality Commission or other regulatory bodies.
In the case of an allegation of abuse or neglect against a Shared Lives carer or a member of their household

Note:
This Good Practice Guidance should be read in conjunction with:

- No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse (Department of Health, January 2000)
- In Safe Hands - Implementing adult protection procedures in Wales (July 2000 issued under Section 7 of the Local Authority Social Services Act 1970 and binding on local authorities) in their social service functions, to act under the guidance of the National Assembly for Wales
- The Adult Support and Protection (Scotland) Act 2007
- The Adult Support and Protection (Scotland) Act 2007 Code of Practice (October 2008)
- The Protection of Children and Vulnerable Adults (Northern Ireland) Order 2003
- Protocol for Joint Investigation of Alleged and Suspected Cases of Abuse of Vulnerable Adults – Northern Ireland
- Safeguarding Adults – A National Framework of Standards for good practice and outcomes in adult protection work (Association of Directors of Social Services, October 2005)
- The local multi-agency policy and procedures for protecting (or safeguarding) vulnerable adults from abuse
- Care Standards Act 2000 and associated standards and regulations for Shared Lives schemes in all four UK countries
- ‘Supporting People’ frameworks
- Any local inter-agency policy for Domestic Violence
- Any other procedures or contractual requirements relating to safe working practice in Shared Lives

Introduction
Shared Lives is a service provided by Shared Lives carers in local communities and is distinguished by the following features:

- Shared Lives arrangements are part of organised Shared Lives schemes that: approve and train the Shared Lives carers; receive referrals; match the needs of service users with Shared Lives carers and monitor the Shared Lives arrangements
- People using Shared Lives arrangements have the opportunity to be part of the Shared Lives carers family life and social networks
- Shared Lives carers can use their family home as a resource
- Shared Lives arrangements provide committed and consistent relationships
- The relationship between the Shared Lives carers and the person they support is of mutual benefit
- Shared Lives carers can support up to three people at any one time (In England and Wales 3 people, in Scotland 2 people)
- Shared Lives carers do not employ staff to provide care to the people placed with them

Shared Lives carers can provide:

- Long term accommodation and support
- Short breaks
- Day time support
Rehabilitative or intermediate support

The safety of individuals using Shared Lives services is of paramount concern to Shared Lives schemes and Shared Lives carers alike. Shared Lives scheme processes are designed to ensure as far as is possible the safety of Shared Lives arrangements. The assessment and approval process for new Shared Lives carers is lengthy and rigorous and is designed to ensure that the Shared Lives carers are able to offer safe care and/or support and have the skills and knowledge to carry out their role. The Shared Lives carers receive induction training prior to approval that meets the Care Certificate which covers in depth the adult protection responsibilities of Shared Lives carers. The Shared Lives scheme provides ongoing access to training and learning so that Shared Lives carers are able to maintain their skills and meet the changing needs of the people placed with them. The referral, matching support and monitoring processes aim to ensure that Shared Lives arrangements meet the needs and requirements of the person they support and are safe.

There is ‘zero tolerance’ of abuse or neglect of people in Shared Lives. In the event of an allegation of abuse against a Shared Lives carer all parties are committed to ensuring that the allegation is properly and sensitively investigated with the safety of the person placed being of central concern. It is important however that those investigating the allegation understand the Shared Lives model and take the circumstances within which Shared Lives operates into account in planning and implementing the investigation, and in drawing conclusions about the presence or absence of abuse in the Shared Lives Arrangement. In particular investigators need to recognise:

- The differences between residential care and Shared Lives and in particular, the domestic nature of Shared Lives. The approach to investigation of allegations against Shared Lives carers must be rigorous but should take account of the realities of normal family life.
- Shared Lives carers have a difficult and complex role. They are asked to share their lives and, in most cases, their homes with the people they support and to work with those people in accordance with: the key principles of Shared Lives; the requirements of the Service User Plan; the Shared Lives Arrangement Agreement; the Shared Lives scheme policies and procedures. Shared Lives carers are expected therefore to have both a professional and an informal and caring relationship with the people that they support. Those investigating the allegation need to recognise the tensions that exist between the professional and the informal caring role of the Shared Lives carers. Any judgement about the appropriateness of the boundaries between the Shared Lives carers and the person placed with them will need to take into account the particular requirements of Shared Lives.

Multi-agency policies and procedures are designed to ensure that allegations of abuse in any setting are investigated properly and sensitively and in order to achieve the best possible outcome for the person who is alleged to have been abused. Nevertheless the experience of many Shared Lives carers is that the investigative procedures can inadvertently damage valued Shared Lives arrangements and that this can be compounded where the investigator does not fully understand the way in which Shared Lives works.

This good practice guidance is intended for Shared Lives scheme managers and workers but may also be useful for local authority commissioners and local and health authority staff involved in safeguarding adults (adult protection) investigations. Shared Lives schemes have a duty of care to Shared Lives carers and the members of their household as well as to people in Shared Lives. This document therefore gives guidance for Shared Lives schemes on ways to enable Shared Lives carers to work safely as well as guidance on good practice where there has been an allegation of abuse. The aim of this guidance is to ensure the
safety of people in Shared Lives, to promote safe working practices and to minimise the
damage to valued Shared Lives arrangements where there has been an unfounded
allegation of abuse. It covers only those situations where allegations have been made that
Shared Lives carers or members of their household may be the perpetrators of abuse or
neglect. It does not cover other safeguarding adults situations which may arise outside
Shared Lives, nor general complaints about standards in Shared Lives arrangements, nor
routine difficulties in working relationships with Shared Lives carers.

Protocols to ensure co-ordination between the Shared Lives scheme procedures and
the local authority adult protection procedures

The Shared Lives scheme is required to have an explicit policy and procedure for dealing
with safeguarding adults (adult protection) concerns. This must be consistent with the multi-
agency policy and procedures agreed in their local authority area, and with the relevant
country standards and regulations applicable to Shared Lives schemes.

The Shared Lives scheme should ensure that Shared Lives is recognised and included in
the local authority’s own safeguarding adults (adult protection) procedures.

Where multi-agency and/or local authority policies and procedures do not cover the
particular circumstances and details arising in Shared Lives, the Shared Lives scheme
should agree a subsidiary protocol with the local authority safeguarding adult’s team or
nominated lead manager for adult protection issues. This protocol should record a shared
understanding of what constitutes abuse and what will trigger an adult protection
investigation and clarify:

- The role of the safeguarding adults (adult protection) team and/or care managers and
  the role of scheme and Shared Lives worker in the case of an allegation of abuse
  against a Shared Lives carer
- The co-ordination between any investigative or supportive roles to be undertaken by
  the Shared Lives scheme, care managers and/or other professionals.
- The relationship between the local authority investigation process and the scheme’s
  internal processes

The protocol should recognise the Shared Lives scheme’s responsibility to inform the
relevant regulatory body of all allegations of abuse or neglect and to keep them updated on
the progress and outcomes of investigations.

The protocol should also consider which local authority will undertake investigations when
service users originate from different areas, or when the Shared Lives carer lives outside the
normal catchment area for that authority.

Shared Lives practices designed to ensure Shared Lives arrangements’ safety and
safe working

Communication between all the people involved in the life of the person in the Shared
Lives arrangement

---

5 Definitions of abuse or neglect should be consistent with those in ‘No Secrets’ (DoH, 2000), In Safe Hands
(Wales) or the Adults Support & Protection (Scotland) Act 2007
6 The protocol should reflect the guidance in ‘No Secrets’ (England), In Safe Hands (Wales) or the Adult
Support and Protection (Scotland) Act 2007 on the triggers for an abuse investigation.
The Shared Lives scheme has a responsibility to encourage good communication between all those involved in the life of the person. This will ensure that concerns and worries are raised and dealt with immediately.

**Recruitment and preparation of Shared Lives carers**

**Pre-approval training** should include a module on safe working practice. This module should:

- Ensure prospective carers understand the vulnerability of a Shared Lives carer providing support in their own home
- Ensure understanding of the many ways that Shared Lives carers can be involved in adult protection situations
- Cover principles of safe working practice including: guidance on record keeping; the importance of keeping a diary; the value of keeping a copy of the diary and the importance of informing the Shared Lives scheme about incidents however small
- Use ‘real life’ examples of allegations
- Involve experienced Shared Lives carers (and where possible those that have experience of allegations being made against them) in training delivery
- Explain multi-agency, local authority and scheme processes that will be followed should an allegation be made against a Shared Lives carers
- Explain the role of scheme workers during any investigation of an allegation
- Provide information about ways in which Shared Lives carers can access independent support, advice, advocacy and the advantages of Shared Lives Plus membership and access to the legal helpline
- Ensure Shared Lives carers understand the financial implications should they be suspended from being a Shared Lives carer following an allegation against them
- Ensure Shared Lives carers understand the circumstances for referral to the DBS Barred List (POVA list) or the Central Barring Unit lists for children and protected adults (Scotland) and the implications of being placed on the list

**Post approval training** should include:

- Opportunities for Shared Lives carers to review and update safe working practices in light of their experience
- Opportunities for peer support including support groups

**The Shared Lives Carers Handbook** should contain:

- Details of the multi-agency, local authority and scheme processes including timescales that will be followed should there be an allegation of abuse
- Do’s and don’ts for safe working practice
- A clear code of practice for Shared Lives carers covering gifts, bequests and confidentiality
- Sources of advice, help and support should there be an allegation of abuse

**Referral, introductions and Shared Lives arrangement agreements**

**Referrals**

The Shared Lives scheme and its placing authorities should agree a procedure for referrals to the scheme. This should set out the referral process and clarify:

- Shared Lives carers are co professionals and must receive as much information as is available from all parties about the person to be placed before the Shared Lives arrangement is made.
- The type of information and the level of detail needed by Shared Lives carers in order to enable them to safely support the person placed with them.

**Information**

Shared Lives carers have a right to information which enables them to make informed choices and decisions concerning potential risks to themselves and others in their
households. Wherever Information sharing protocols exist or are encompassed in legislation should be followed. Where they do not exist then the following guidance should be followed:

- Information about the person will only be made available with their permission. The scheme must ensure however that the person understands that a decision to withhold information may affect the safety and quality of their Shared Lives arrangement and if the information is essential to ensuring the safety of the person the Shared Lives carers, their household and the scheme may not be able to accept their referral.

- The information that is made available to the Shared Lives carers about the person should be comprehensive. If in exceptional circumstances a judgment is made that information should be withheld for reasons of confidentiality, the referrer must ensure that information shared is sufficient to ensure that the safety and protection of all those involved in the Shared Lives Arrangement including the individual, the Shared Lives carer and members of their household. If the individual or professionals wish to withhold information the Shared Lives carer(s) should be informed that information has been withheld and as far as is possible the reasons for that decision.

- The information made available to the Shared Lives carers should include whether the person has had any previous experiences of being abused or has a history of abusing, or has made allegations of abuse in the past (regardless of whether those allegations were true or false). This information is most appropriately included as part of the risk assessment and should be accompanied by agreed procedures to ensure the safety of the person, the Shared Lives carers and their household.

**Confidentiality between Shared Lives carers:**

Shared Lives carers that support or have supported the same individual should be able to share relevant care information with each other on a ‘need to know’ basis.

**Safe care planning:**

Before the person is placed with the Shared Lives carers, there should be a comprehensive and up-to-date risk assessment for the person and clear guidance about ways in which the Shared Lives carers should work to minimise any identified risk. The risk assessment should take account of the person’s needs, temperament, history (including any history of previous allegations of abuse) and current relationships.

The risk assessment is not a static document. There should be a continuous review of risk in light of experience gained in the Shared Lives Arrangement. The Shared Lives scheme should ensure that the Shared Lives carer(s) has the skills and knowledge necessary to identify any new risk factor as it arises, and to understand when to respond to that identified risk themselves and when to seek guidance from the Shared Lives scheme.

The Shared Lives scheme should have separate written procedures on risk management which clarify responsibilities for undertaking and updating risk assessments.

**Service User Plans and Shared Lives Arrangement Agreements:**

Service User Plans and Shared Lives Arrangement Agreements should carefully record the ways in which the person’s needs (physical, practical, cultural and emotional) can be met safely and should be subject to an ongoing review.

**Good practice where there has been an allegation against Shared Lives carers**

The safety of the person in the Shared Lives arrangement is paramount. Any allegation made by or concerning the person must be reported in accordance with the locally agreed procedures. It is important however that the response to an allegation is not in itself abusive and does not damage a valued Shared Lives arrangement beyond repair.

The emotional impact of an allegation of abuse upon the Shared Lives carers should not be underestimated. This will be compounded if Shared Lives carers are given the impression
that they have been judged guilty of the allegation from the outset. The Shared Lives scheme has a responsibility to ensure that the Shared Lives carers are properly supported throughout the investigation that follows an allegation. This is particularly important where the Shared Lives scheme is not itself able to provide that support.

**Following the Initial Allegation**

Those investigating the initial allegation should:

- Take into account the particular nature of Shared Lives and should set the allegation within the context of normal family life.
- Be sensitive to the emotional state of the person making the allegation and allow opportunities for the person to withdraw or amend their allegation should they wish to do so.
- Ensure that they have all Shared Lives appropriate background information before beginning the investigation.

The response to the allegation should be measured and appropriate.

There should be clear criteria for when the person needs, for their own or the Shared Lives carer(s) safety, to be removed from the Shared Lives Arrangement. The Mental Health Act and the rarely used Section 47 of the National Assistance Act are the only powers under which a person can be removed from their home against their will. In all cases due regard should be given to the Mental Capacity Act and the Human Rights Act.

Scotland has powers in exceptional circumstances to temporarily remove a person to a place of safety and exclude the alleged perpetrator of abuse from access to them (Adult Support & Protection (Scotland) Act 2007 sections 14 – 17).

Whilst the immediate safety of a service user should be a first consideration arbitrary removal of a service user against their wishes could be viewed as unlawful and itself an abusive act:

- Removal from a Shared Lives Arrangement should not therefore be an automatic response to an allegation against the Shared Lives carers. Each case should be considered individually taking full account of the legal implications and there should be a multi agency decision based on an assessment of the balance of probability of risk to the person. The decision should take into account the wishes of both the person alleging that they have been abused and the Shared Lives carers.
- A decision to remove any other person placed with the Shared Lives carers should be exceptional and only be made after full consideration of the legal implications and an assessment of the balance of probability of risk to the person and should take into consideration the wishes of the person and the carers.
- The Shared Lives carers should be made aware by their Shared Lives scheme as soon as possible that an allegation has been made and is being investigated. It needs to be recognised that in some situations (particularly where there is a police investigation) this may not be immediately possible. Information may be delayed until initial investigations have been made.
- The Shared Lives carers should be given details of the allegation made against them in writing as soon as possible unless the investigation would be jeopardised by their having that information.
- Those investigating the allegation should be sensitive to the impact of any delay between the initial notification of the allegation and the first interview and should seek to minimise that delay.
- Shock can impair people’s ability to absorb information. Details of the allegation should therefore always be given verbally and in writing.

Where it is decided that the person should be moved from the Shared Lives Arrangement:
The Shared Lives carers should be informed as soon as possible that the decision has been made and the reasons for that decision.

The scheme should ensure that there is immediate contact with the Shared Lives carers (ideally from the Shared Lives carers own scheme worker).

The scheme should inform the Shared Lives carers of the process for the investigation of the allegation with timescales.

The scheme should recognise the Shared Lives carers need for emotional support. Where necessary the scheme should help the Shared Lives carers identify a source of independent support.

The Shared Lives carers should receive payment during the whole period of the investigation. The level of payment should ensure that the Shared Lives carers can maintain their income and may include arrangements that reflect a pro rata average of earnings over the previous 12 months.

During the Investigation

Timescales for the Investigation:
Timescales for the different stages of the investigation set by the local multi agency adult protection procedures should be clearly understood by everyone involved. It is recognised that these timescales may occasionally slip. It is important that the Shared Lives carer(s) is kept informed of any change in the timescales.

The negative impact upon the individual and the Shared Lives carers of a long drawn out investigation should be recognised and minimised although it is recognised this cannot always be avoided if there is a police investigation or criminal proceedings.

Support for the Shared Lives carers during the Investigation
The Shared Lives carer(s) has a right to receive ‘formal’ support throughout the period of the investigation whatever the potential outcome. Following the initial allegation, the scheme should identify who will provide support for the Shared Lives carer(s) during the investigation. The person providing support should be recognised by the Local Authority as having that role. This support can be provided by the scheme or by an independent person and if possible, the Shared Lives carer(s) should be able to choose the person who will provide them with support. The Shared Lives carers are strongly advised to have a solicitor present with them at all police interviews.

The person providing support during the investigation will:

- Provide the ‘information link’ between the local authority and the Shared Lives carers.
- With the exception of police interviews, attend all meetings and interviews with the Shared Lives carer(s) in order to provide support by ensuring that the content and implications have been understood by the Shared Lives carer(s). Where the Shared Lives carer(s) feel unable to attend a particular meeting, the person providing support should, with the Shared Lives carer(s) permission, be able to attend that meeting in order to ensure that the Shared Lives carer(s) remains fully informed.
- Keep in regular contact with the Shared carers during the investigation and update them on the stage that the process has reached.

---

7 Examples of schemes that already provide this financial support include Swindon, Oxfordshire, Blackburn and Blackpool
8 ‘Support’ in this context is distinct from representation or advocacy which will need to be provided independently of the Shared Lives scheme and the local authority
Inform the Shared Lives carer(s) about all meetings that are taking place, whether or not the Shared Lives carer(s) is part of the meeting. Information from the meetings will only be able to be passed on with the agreement of the Safeguarding adults (adult protection) conference. If the safeguarding adults (adult protection) conference decides that information from the meeting cannot be passed on to the Shared Lives carers, the Shared Lives carers should be told that information is being withheld.

Evidence that can be taken into account in the investigation
The scheme should ensure that investigators are aware of the sources of evidence available to the investigation:

- The Shared Lives carer(s) diary and any other relevant records should be made available to those investigating the allegation.
- The scheme’s prior knowledge of the carer(s) and of the Shared Lives arrangement, which may include the experience of other Shared Lives carers working for the Shared Lives scheme, should be accepted as evidence.
- Evidence should be factual and wherever possible corroborated by a third person.

Shared Lives carers response to the allegation
The Shared Lives scheme should encourage the Shared Lives carer(s) to write down their own account of the circumstances surrounding the allegation as far as the details of the allegation are known as soon as possible after the initial allegation.

Shared Lives carers should be given the opportunity to respond to the allegation against them as soon as possible.

- The Shared Lives scheme should ensure that the Shared Lives carer(s) have any support needed to write down their own account of the circumstances surrounding the allegation. Such support may be necessary for example for Shared Lives carers for whom English is not their first language.
- Shared Lives carers may not be able to give their own side of the story immediately if there is a possibility that the police take over the investigation.
- If the police or Crown Prosecution Service concludes that there is insufficient evidence or it is not in the public interest to proceed, the local authority safeguarding adults (adult protection) team will still carry out an investigation of the allegation and come to a formal conclusion. The local authority investigation will examine and weigh the evidence supporting or disproving the allegation. The investigating officer should provide the Shared Lives carer(s) with the opportunity to give their own account of the circumstances around the allegation as soon as possible and certainly before any formal conclusions are drawn.
- The conclusions from the adult protection investigation will be given to the Shared Lives scheme. Where the conclusions gives cause for concern about the care practice or ability of the Shared Lives carer(s) the Shared Lives scheme will carry out a carers review.

The conclusion of the Investigation
An investigation may have one of three outcomes:

- The allegation may be upheld
- The allegation may be ‘not proven’
- The Shared Lives carer(s) may be completely cleared of the allegation

Where the allegation is upheld
If the investigation has found that the Shared Lives carer(s) has caused a vulnerable person harm, application should be made to the Independent Safeguarding Authority for their
inclusion on the Barred List (POVA list) or in Scotland the Central Barring Unit for inclusion on the Protected Adults list. Scheme managers should take into account any recommendations of Safeguarding adults (adult protection) Conferences held under the local interagency safeguarding procedures when making this decision.

The Shared Lives scheme's Panel should review the work of the Shared Lives carer(s) in the light of the results of the investigation of the allegation and make a recommendation about continuing Shared Lives approval.

The Panel should base any recommendation about the continuing Shared Lives approval of the Shared Lives carers on the following:

- An up-to-date Shared Lives carers review report
- The Report of the investigation, including any conclusions and recommendations made
- Evidence from the Shared Lives carer(s)

Where the allegation is ‘not proven’:
A common conclusion of a multi-agency investigation is that the allegation has been ‘not proven’.

The scheme needs to recognise the impact of a ‘not proven’ conclusion upon the Shared Lives carer(s). Shared Lives carers can feel that they have been left in a state of limbo with concerns about their practice remaining unresolved. Schemes should ensure that a Shared Lives carers review is held and that the Shared Lives carer(s) understand the implications of a ‘not proven’ verdict and in particular:

- What has been recorded and where
- Whether the scheme intends to request the Panel to consider the Shared Lives carers review including:
  - the scheme’s recommendation regarding the Shared Lives carer’s approval status
  - Whether the Shared Lives carer(s) wishes to make a response

Where the Shared Lives carers is completely cleared:
In addition to receiving a copy of the investigative report, the Shared Lives carer(s) should be formally informed by letter that the allegation has not been upheld and that they have been completely cleared.

Ensuring that Shared Lives carers are always made aware that an allegation has been made
There are a number of examples of Shared Lives carers who have not been told that an allegation has been made against them, have been investigated and found it to be untrue or ‘not proven’ and that there is a file record to that effect. Shared Lives carers should always be made aware of any allegation made against them and the progress and conclusion of any investigation.

In all cases:
The Shared Lives carer(s) should be able to see the investigative team’s record of the allegation and subsequent investigation, recognising that some information from third parties may not be disclosed.

The Shared Lives carers should have the opportunity to record his/her own response to what has happened. The scheme should ask that this be included in the investigative team’s record.
The Shared Lives carer(s) should receive a written report from the Shared Lives scheme about the allegation, investigation and the conclusions from the investigation.

The Shared Lives carer(s) should be able to see the record kept by the scheme of the allegation and the conclusions from the investigation process. The Shared Lives carer(s) should have the opportunity to record his/her own response and to have this included in the scheme record.

**Following the investigation of an allegation of abuse**

Where the allegation has been found to be false or 'not proven':

- The scheme should recognise, whatever the outcome, the traumatic impact of an investigation upon the Shared Lives carer(s). Shared Lives carers should have the opportunity to reflect upon what has happened and to discuss changes in working practice through the Shared Lives carers review process. The scheme should provide free access to independent counselling for the Shared Lives carers if needed.
- The local authority should recognise the traumatic impact upon the service user of the investigation into the allegation of their abuse and the outcome from that investigation. It is important that independent support and if necessary counselling is provided for the service user and that they are helped to understand the implications and possible consequences of their allegation.
- Restoring a Shared Lives arrangement following investigation should be a consideration and should be approached taking full account of the wishes of both the Person and the shared lives carer(s).
- Where the Shared Lives arrangement has been reinstated, the scheme should work closely with the Shared Lives carers and the person to repair the relationship and restore trust.
- Where the Shared Lives carer(s) has not received their full payment during the investigation, any difference between the payment due and the actual payment should be refunded in full.
Safe Management of People’s Money, Valuables and Financial Affairs

The Poole Shared Lives scheme aims to encourage and enable a person using Shared Lives to be in control of their own life. This includes looking after their own money and managing their financial affairs while maintaining their rights to keep these matters private. However, many people in Shared Lives arrangements may sometimes need support with this from their Shared Lives carer and/or they may bring money or valuables to the Shared Lives carer’s home.

In order to protect them from financial abuse or the mishandling of their money and to protect Shared Lives carers from allegations of misconduct, it is important that appropriate procedures are followed and records are kept.

How will this happen?

Before starting any Shared Lives arrangements, Shared Lives carers will receive information and training so that they understand how to support the person living in the Shared Lives arrangement. This training will include: how to encourage people to do as much as possible for themselves; how to support people (if required) with budgeting, saving, shopping or other financial matters and how to safeguard the person and themselves.

The Shared Lives carer(s) will not be able to support the person with their finances unless this has been explicitly agreed in the individual’s Service User Plan.

Supporting an individual with their finances could include:

- accessing information about the person’s money on their behalf
- completing welfare benefits forms or replying to correspondence about this
- teaching the person to recognise different coins/notes or understand the value of money
- supporting the person to save for something special
- prompting and supporting the person to pay their regular bills
- supporting the person to budget
- helping the person to shop

If the person brings money with them when they visit their Shared Lives carer(s) and asks the Shared Lives carer(s) to look after it for them, the Shared Lives carer(s) will keep a written record of: the amount; what it is for (when applicable); the date and amount they give back to the person. They will also keep receipts and/or records of what the money was spent on if it has been agreed that they should spend it on the person’s behalf and/or when this is required as part of the person’s Service User Plan.

If the person asks their Shared Lives carer(s) to look after any valuable items for them, the Shared Lives carers will keep: a record of the date the person brought them; what the items are and when they were returned to the person.

The Shared Lives carer(s) and Shared Lives workers in the scheme will not normally be able to act as the person’s appointee for claiming welfare benefits or managing the person’s finances. If there is absolutely no alternative they will be required to keep full records of the income and outgoings, including copies of correspondence and receipts for all shopping or other payments made on the person’s behalf. The person and/or the person’s representative will be able to look at those records as well as auditors (people whose job it is to check the financial systems in this service).

Shared Lives carers will always keep their own money separate from people living with them. If Shared Lives carers pay any of the person’s money into an account, this has to be an account in the person’s own name. If there are two or three people living in a Shared
Lives arrangement each person’s accounts must be kept separate and their money kept in their personal bank account.

If the person’s Shared Lives worker is involved in carrying money or valuables to and from the person and/or the person’s family and/or the person’s Shared Lives carers, a receipt will be signed at each handover point and then kept on the person’s office file. All parties will be given a copy of the receipt(s) too.

Shared Lives carers and workers in this service must not:

- enter into personal financial transactions with the person
- accept money or gifts from the person or the person’s family (except for small token presents on birthdays, Christmas or similar festivals)
- borrow money from the person
- use the person’s telephone or other personal belongings for their own use
- influence the person on how they spend their money (e.g. to benefit the Shared Lives carer/family)
- be involved in drawing up or witnessing the person’s will.

For further information please refer to Borough of Poole’s Managing Other People’s Money Policy and Guidance:

Harassment and Bullying
The Poole Shared Lives scheme recognises that harassment, bullying and discrimination are unacceptable anywhere in the scheme, including in Shared Lives arrangements. If people in Shared Lives arrangements or Shared Lives carers or workers experience harassment or bullying they can raise the matter and be confident that action will be taken to deal with this.

How will this happen?
Harassment and bullying can be any form of inappropriate behaviour and/or actions and/or comments and/or physical contacts that are unwanted and cause offence or intimidation. This kind of behaviour is unlawful so if a Shared Lives worker in the scheme has been responsible it will lead to disciplinary proceedings. If Shared Lives carers have been responsible it will lead to a review of their approval. If a person in a Shared Lives arrangement has been responsible (or a member of their family) it may become necessary to end the Shared Lives arrangement.

If Shared Lives carers or Shared Lives workers experience this kind of behaviour they are encouraged to deal with this at an early stage by making it clear to the harasser, either verbally or in writing, that the behaviour is offensive and/or distressing and must stop. If the harassed person finds this is difficult to do, they can ask a friend or colleague to speak to the harasser on their behalf.

People in Shared Lives arrangements may require support to do this. This can be provided by their Shared Lives carer(s), by another person that they know or by a local advocacy service.

If an informal approach does not resolve the problem, the person who is being harassed can raise the matter with their Shared Lives worker or the scheme manager. If the complaint is about the Shared Lives worker, the scheme manager or if the matter is too embarrassing or difficult to talk about with them the person can approach the Responsible Individual for the service. The Shared Lives worker or manager will investigate the issue as quickly as possible following an appropriate procedure such as: Complaints and Concerns; Safeguarding against Abuse or Neglect or Disciplinary Proceedings.

Anyone raising concerns about harassment or bullying will be provided with emotional and/or practical support to deal with this. This will include consideration of legal action, where necessary. They will also be protected from reprisals and negative consequences as a result of raising the subject, provided they are doing this in good faith and are not acting maliciously.

The Poole Shared Lives scheme takes positive action to prevent incidents of harassment and bullying by providing Shared Lives carers and workers with information and training about the relevant legislation and about people’s rights to:

- be valued for their individual differences
- work and live in an environment that is free from bullying, harassment or discrimination
- be supported to challenge harassment or bullying
- complain without fear of being victimised

Shared Lives carers and workers are encouraged to be aware of their own behaviour and attitudes and ensure working practices are kept up-to-date through ongoing monitoring, supervision, reviews and training.
Section 6: Good practice throughout the service

Equality and Diversity

Introduction
All people have the same human rights. However the Poole Shared Lives scheme recognises that some individuals and groups can sometimes be discriminated against, for example on the grounds of race, religion, gender, sexual orientation, disability, HIV/AIDS, marital status, or age. We are committed to working in ways that value diversity and promote equality of opportunity and anti-discriminatory practice.

Definitions of Equality and Diversity are as follows:

- **Equality is a legal framework to protect against discrimination, promote equality of opportunity and foster good relations between people with ‘protected characteristics’**.
- **Diversity is the valuing of our individual differences and talents, creating a culture where everyone can participate, thrive and contribute**.
- **Diversity is multi-dimensional and includes, race, disability, class, economic status, age, gender and transgender, sexuality, faith and belief**.

How will this happen?
As part of their induction, Shared Lives carers and workers in this service will receive information and training about legislation relating to equal opportunities and about each person’s right to:

- live a meaningful and fulfilling life
- achieve all they can
- be valued for who they are, including their ethnic background, language, culture and faith
- be treated equally
- take part in ordinary living
- access services and resources available in the community
- live in an environment that is free from bullying, harassment or discrimination
- complain without fear of being victimised

Shared Lives workers and Shared Lives carers are encouraged to be aware of their own behaviour and attitudes. Their personal development will be promoted through regular review / appraisal of their work and individual training plans. Working practices will be kept up-to-date through ongoing monitoring, supervision and training and through learning from experiences and complaints and continually striving for improvement.

The Poole Shared Lives scheme makes sure that anyone who is interested in Shared Lives arrangements can access information by providing this in plain English and in a variety of other languages and formats as required. The criteria for who can be offered Shared Lives arrangements are explained in the scheme’s Statement of Purpose and arrangements for accessing the service are explained in our written policies and procedures for referrals, assessment of needs, matching and introductions. Shared Lives arrangements are not right for everyone and decisions and agreements are based on choice and whether we can meet a person’s needs.

Shared Lives carers
Applications to become a Shared Lives carer are actively encouraged from all sectors of the community and the Poole Shared Lives scheme advertises in different ways in order to achieve this. Shared Lives carer assessments aim to find evidence of whether the applicants
have the experiences and competences suitable for this role. This includes having awareness and understanding of a multi-cultural society, so applicants are asked about: their attitudes and values; their commitment to supporting people as equal members of the community and their ability to challenge prejudice and discrimination. The scheme manager’s approval decisions are based on information and evidence from the assessment and depend on whether the applicants can meet the needs of people choosing Shared Lives arrangements.

The Shared Lives Panel includes people who are or have opted for Shared Lives arrangements or who are or have been Shared Lives carers. Other members are recruited according to their particular areas of expertise and their relevance to Shared Lives, with the aim of having a useful cross-section of experiences. We aim to recruit members who reflect the population in the geographic area and/or the specialisms of this service.

When matching people who will be using or living in a Shared Lives arrangement to a Shared Lives carer the Poole Shared Lives scheme will consider a range of information to find the match that is most likely to be successful. Factors for a successful match will include: gender; age; interests; links to the community; ethnic origin; religion; health and plans for the future.

**Shared Lives workers**

Applications to work in the Poole Shared Lives scheme are actively encouraged from all sectors of the community. Written job descriptions and person specifications explain the essential and desirable experiences, skills and qualifications for the job. Recruitment will depend on references and completion of other safety checks as well as the candidate’s employment history and qualifications.

The Poole Shared Lives scheme’s office premises are accessible to all people and special equipment or reasonable adaptations can be provided for workers when necessary i.e. Braille computer, adjustable desk etc.

**All**

As part of evaluating whether the Shared Lives scheme is being effective in promoting equal opportunities and diversity the Poole Shared Lives scheme monitors: referrals; advertising; applications; assessment statistics and procedures. In order to do this we may ask people using Shared Lives to complete an Equal Opportunities/Diversity Monitoring form.
Standards of Conduct and Practice
The Poole Shared Lives scheme believes that Shared Lives carers and Shared Lives workers in the scheme (whether paid or voluntary) should act in a professional and competent manner at all times, keeping in mind the best interests of the people who are making use of Shared Lives arrangements.

How will this happen?
The Care Quality Commission has issued codes of conduct for all people who are managing or working in social care services. The Poole Shared Lives scheme meets the expectations in this code of conduct by:

- recruiting Shared Lives carers and Shared Lives workers who have the knowledge and skills for their jobs
- following up references and all necessary safety checks before they start work
- providing learning and development opportunities for them and making sure they understand their jobs and responsibilities
- having written guidance and procedures
- enabling Shared Lives carers and workers to report any concerns they may have about the running of the service or about the way that care and/or support is provided for people in Shared Lives arrangements
- making it clear that any form of bullying, harassment or discrimination is unacceptable and may result in disciplinary proceedings for workers or in a review of approval for Shared Lives carers

For people making use of Shared Lives schemes, Shared Lives carers and workers will:

- respect their human rights, different cultures and values
- enable them to make choices and decisions and to be in control of their own life
- treat them as an individual
- support them in doing as much as possible for themselves and maximise their independence
- respect their privacy and dignity
- keep information about them confidential, following the service’s Confidential policy and procedures
- take action to keep the person, themselves and other people safe following appropriate policies and procedures
- challenge dangerous, abusive or discriminatory behaviour
- work with each other and other professionals to support the person effectively

Shared Lives carers and workers will be required to take responsibility for:

- treating people with respect and courtesy, including people in Shared Lives arrangements and their relatives, colleagues and other professionals
- being honest, trustworthy, reliable and dependable
- working in a lawful, safe and effective manner
- taking up learning and development opportunities for themselves and contributing to learning and development opportunities for others
- informing their Shared Lives worker or scheme manager if they do not have the skills or confidence to carry out particular tasks
- making sure they do not work under the influence of drugs (apart from prescribed medicines) or excessive alcohol
- following the scheme’s written policies and procedures
- declaring anything that might cause a conflict of interest with their work in this service
promoting the work of the Poole Shared Lives scheme through their own good practice

Shared Lives carers and workers must not:

- abuse the trust of people in Shared Lives arrangements
- exploit people in Shared Lives arrangements or colleagues
- discriminate against people in Shared Lives arrangements or against colleagues, or condone discrimination from other people
- accept gifts or bequests from people in Shared Lives arrangements or their families
- form inappropriate personal relationships with people in Shared Lives arrangements
- behave in a way that damages the reputation of this service or social care in general

If Shared Lives carers or workers behave in a way that is dishonest, violent, indecent, abusive or discriminatory (even if not connected with their work) this may mean they are considered unsuitable to work in the Poole Shared Lives scheme.
Complaints and Concerns
The Poole Shared Lives scheme recognises the importance of learning from the experiences of people who are providing or making use of Shared Lives arrangements and of continually working to improve the scheme. It is especially important to learn from mistakes, so people in Shared Lives arrangements and/or their families or representatives and/or Shared Lives carers are encouraged to raise any concerns or complaints they may have, in order to make sure the same problem does not happen again and to improve the service for everyone using it.

How will this happen?
When the person first enquires about the Poole Shared Lives scheme they, and/or their representative will be given a range of information about the scheme, including Borough of Poole’s Complaints and Concerns procedure. This procedure will be included in the: Scheme Guide; Shared Lives Carer’s Handbook; Shared Lives Arrangement Agreement and summary information will feature in the Statement of Purpose.

If the person or their family / representative have any concerns or complaints, these can be discussed freely with their Shared Lives carer or Shared Lives worker. All concerns and complaints will be taken seriously and will be dealt with as quickly and sympathetically as possible so that the person will know the outcome within 28 days. The person does not have to be afraid to make a complaint as we really want to know about their experiences and try to improve the service in any way we can. The person can make a complaint in any way that suits them, for example in person or by phone, email, letter or by filling in the service’s complaints form.

If the concern or complaint is about something that is happening whilst the person is using or living in the Shared Lives arrangement their Shared Lives carers will try to sort things out with the person directly and will let the Shared Lives worker know the outcome. However, if the problem is not one they can deal with themselves or if the person is not satisfied with the action they have taken, they will pass the complaint on the Shared Lives worker or scheme manager without delay.

The Shared Lives worker or scheme manager will make sure that the issue is fully investigated and the person and/or their representative will be kept informed about what is happening during that time.

After a complaint has been looked into, a report or letter will be written to the person and/or their representative explaining the conclusions and what action will be taken. Where a full investigation has been necessary, it will also explain how the investigation was done and summarise the information that was gathered. If the complaint was about a particular person, that person will also be given a copy of the letter or report.

If the person and/or their representative are not satisfied with the investigation or outcomes, the person can take the matter further by following Borough of Poole’s Complaints and Concerns procedure.

We do our best to make sure that the complaints process is fair and that everyone involved in it is supported adequately. If the person and/or their representative would like independent support to help with raising a concern or pursuing a complaint, this can be obtained from Poole Advocacy Service (01202 422140).

This complaints procedure will also be followed if Shared Lives carers have any concerns or complaints. Shared Lives workers from the scheme will be able to make use of the procedure for Grievances.
If the complaint is about Shared Lives carers or other Shared Lives workers in the scheme, they will be informed about the nature of the complaint and be given an opportunity to respond. They will also be informed about sources of independent support in case this is useful to them. Any follow-up action required for workers will be addressed through supervision and for Shared Lives carers through a formal review of their work, with the review report being presented to the Shared Lives Panel.

All complaints and actions taken will be recorded and a summary will be available for inspection by the Care Quality Commission when required. Complaints and lessons to be learned from them will be discussed with workers in the service and Shared Lives carers when this is appropriate and within limits of confidentiality.

In some situations a concern or complaint may be dealt with more appropriately by another procedure, for example Safeguarding against Abuse or Neglect, or the Disciplinary Procedure. If this is the case the person will be told the reasons why an alternative procedure is being used and also given information about that procedure.

For further inform please refer to Comments, Compliments and Complaints on Borough of Poole website: www.poole.gov.uk/
Confidentiality
The Poole Shared Lives scheme understands that information is confidential when it has been spoken or given in private. Having accurate and up-to-date information about the person using the Shared Lives scheme is essential in order to deliver a scheme that can meet the person’s needs and wishes. As the information is very personal it is important that it is shared only with people who really need to know it.

How will this happen?
All information and records held by the Poole Shared Lives scheme are kept securely so that unauthorised persons cannot access them. This includes records kept by Shared Lives carers.

We will ask the person for permission before disclosing information about them to any other person or organisation. This usually happens only when the other person or organisation needs the information in order to provide the care or support required. Information that the person has given us in confidence will not be shared with the person’s family or friends against the person’s wishes.

In certain very limited circumstances we may have to share information about the person without the person’s agreement. This would be if it were essential for the person’s safety, or for the safety of others. In these circumstances we will explain why we have to do this and what information we are providing.

Shared Lives carers and Shared Lives workers will be provided with information and training so that they understand the importance of confidentiality and how to maintain this in their work. They will also be provided with guidance about when it is appropriate to share information. Any breach of confidentiality will be treated very seriously. It will be considered a disciplinary matter for Shared Lives workers, while for Shared Lives carer(s) this would result in a review of their approval by the scheme manager.

Shared Lives carers are entitled to confidentiality themselves. It will of course be necessary to share certain information about Shared Lives carer(s) with people who are considering a Shared Lives arrangement, who are already in one or with other professionals working with those people. We will usually do this with the knowledge and agreement of the Shared Lives carer(s). However, in exceptional situations, it may be necessary to share information without their agreement e.g. if there is risk of harm to people in Shared Lives arrangements or to other vulnerable adults/children or to prevent an offence being committed. In this event, the Shared Lives worker will inform the Shared Lives carer(s) and explain the reasons why it is necessary.

We will be able to provide a copy of this guidance on confidentiality for the person’s relatives or friends and to other professionals and organisations that we work with so that they understand when we can or cannot disclose personal information.

For further information on Data Protection Act 1998 go to:


Quality Assurance

The Poole Shared Lives scheme aims to run the service in ways that are in the best interests of people who are making use of Shared Lives arrangements. Each year as part of this process we review all the information we have about how the scheme is operating, in order to find ways of continuing to improve it. Their views are essential in helping us to know what is happening in the service, and in helping us to work out what needs to change.

The Poole Shared Lives scheme believes in setting and maintaining quality standards that are measurable and influence the scheme and its future development. In order to meet the quality and standards required, the scheme recognises the importance of having a process in which regular monitoring of its services is maintained.

How will this happen?
We have systems in place that enable us to monitor what is happening in Shared Lives arrangements and elsewhere in the scheme. This includes:

- Visiting the person and their Shared Lives carer, separately and together
- Asking the person using or living in the Shared Lives arrangement individually for their views when their Service User Plan and Shared Lives Arrangement Agreement are reviewed
- Using evidence from their Service User Plan and other life plans and records
- Using evidence from reviewing the work of their Shared Lives carer (including the person’s view of this)
- Keeping records of complaints, accidents and any other unusual occurrences such as incidents of abuse or use of physical restraint
- Evaluating training and development opportunities that have been provided
- Using a Shared Lives Panel for: independent scrutiny and quality assurance of Shared Lives schemes; assessments of new Shared Lives carers; the ongoing approval and de-approval of existing Shared Lives carers
- Using evidence from consultations and surveys involving the person and/or their family or representative, and/or Shared Lives Carers and/or Care Managers and/or other relevant professionals
- Looking at how many and why workers and Shared Lives carers have left the service
- Making use of information from inspections by the Care Quality Commission
- Feedback from the Shared Lives Panel
- Auditing or checking files

Having gathered together all the information from the monitoring during the year, this helps to inform us what needs to change and then make a plan of action for the next year.

The person will participate in this quality review of the service through their involvement in the continuous monitoring and reviews of particular aspects of the scheme that happen throughout the year.

A report on the quality review and its action plans will be made available if required for the Care Quality Commission. It will also be available for the person and/or their family / representative and/or Shared Lives carers.
Consultation and Participation in Running the Shared Lives Scheme

Introduction
The Poole Shared Lives scheme encourages and promotes the participation of people using or living in Shared Lives arrangements, Shared Lives carers and Shared Lives workers are in meaningful consultation about how the scheme should be run and about its ongoing development. It is important to provide mechanisms and opportunities that enable everyone who is part of a Shared Lives arrangement to voice their opinions about the scheme and suggest real and sustainable changes.

The Poole Shared Lives scheme believes that partnership-working with service users, Shared Lives carers and other significant partners is crucial in achieving success and development in all of its services.

The opinions and views of those involved in a Shared Lives arrangement are seen as vital to the quality assurance of the service and are therefore valued and respected.

How will this happen?
Everyone involved in a Shared Lives arrangement will have the opportunity to be involved in the monitoring, reviewing and improvement of services. This may be achieved by being:

- Consulted about their experiences of daily life in Shared Lives as someone being supported or as a Shared Lives Carer at reviews
- Enabled to give feedback or suggestions as a member of a Shared Lives group, either for people supported in Shared Lives arrangements or Shared Lives carers
- Being involved in the recruitment and selection of Shared Lives workers and/or Shared Lives carers in the scheme
- Encouraged to participate in planning and/or contributing to consultations or surveys aimed at evaluating people’s experience of Shared Lives either people who use Shared Lives services or Shared Lives carers

There are several ways the person using or living in a Shared Lives arrangement can take part in these activities, for example by:

- Contributing to surveys of levels of satisfaction amongst people in Shared Lives arrangements
- Being a representative on a Shared Lives panel
- Helping to interview prospective workers
- Joining in meetings with Shared Lives workers
- Being asked individually for their views when their Service User Plan and Shared Lives arrangement agreement are reviewed and whenever their Shared Lives carer’s work is reviewed
- Coming to meetings or discussion groups that are especially arranged for people in Shared Lives arrangements
- In the case of Shared Lives carers being given the opportunity to share experiences and concerns with other Shared Lives carers

In order to ensure that people understand that their views and opinions are important and valued it is necessary to continually promote involvement and consultation. This involves commitment to working with people using or living in a Shared Lives arrangement in a way that provides opportunity for feedback and suggestions that will influence how the service is provided and developed.

Involvement and consultation with people using or living in a Shared Lives arrangement
should always be structured with a clear focus. When this happens it provides the opportunity for people to express their wishes, choices and aspirations. It further develops positive partnerships with everyone and increases confidence for the person that they can make contribution and influence the service they receive.

The results of consultations and surveys will be published and made available to other interested people or organisations such as: families and/or representatives of people supported in Shared Lives arrangements; Care managers; the Care Quality Commission or other regulatory bodies.
Record Keeping, Access to Files and Information Sharing

Keeping records is an essential part of running a safe and efficient service. Any information that Poole Shared Lives scheme keeps about the person making use of a Shared Lives arrangement must be accurate and up-to-date and easily found when needed. It must also be kept securely and in ways that comply with laws about this, including the Data Protection Act 1998. The person has a right to know what information is being kept about them, to ask to see it and for it to be changed if it is incorrect. Other professionals and organisations may play an important part in the person’s life, as will their family, friends and representatives so on occasions we may need to share information with them in order to provide the person with a good service.

Record Keeping

Information will sometimes be recorded using paper and files, or it may be put on computer and kept electronically. These records are needed in order to help us deliver a Shared Lives scheme that is personalised to each individual who uses it. The records also enable us to show what actions have been taken in case the person or other people have any queries or complaints.

We only keep information which is important and relevant to the person’s Shared Lives arrangements. This includes:

- Their assessment of needs, Service User Plan, Shared Lives Arrangement Agreement, Care Plan, etc
- The dates the person starts and ends any Shared Lives arrangements
- The dates of visits or telephone conversations with their Shared Lives worker and any decisions or actions taken as a result
- Any accidents, serious illnesses or other adverse events affecting the person
- Any concerns or complaints about the services the person receives, or about their health and well-being and actions taken.

Shared Lives schemes should store all this information securely to prevent unauthorised people from getting access to any personal information about the person. In their office(s) the paper files are kept in lockable filing cabinets and our computers can only be accessed with a password. There are systems in place to protect against loss, damage or destruction of the paper and electronic files and of the information contained in them.

Shared Lives carers also have to keep copies of information about the person using or living in a Shared Lives arrangement and to record anything significant that happens to the person whilst the person is with them. They have to keep these records in a safe place too, to ensure that other people in their household do not read them or interfere with them. All Shared Lives carers are given training about record keeping and the importance of confidentiality before they start working in the service and the Shared Lives workers provide ongoing advice and assistance for them if necessary.

When the Shared Lives arrangement comes to an end, the Shared Lives carer’s records are returned to the scheme’s office and kept there with the rest of the information held about the person. All records are kept for 8 years after the person has ended their involvement with the Poole Shared Lives scheme and are then disposed of carefully and safely.

The person has a right to know what kind of information is being kept about them. Their Shared Lives worker can tell the person more about this. The person also has a right to see the actual files and information the scheme and their Shared Lives carer(s) have about them, whether on paper or on computer.
Access to Files
The person has a right to know what kind of information is required by this service and the ways in which it is written down and stored.

The person also has a right to see the actual information that the Shared Lives workers or Shared Lives carers have recorded about the person, whether on paper or on computer. The person can add notes or comments themself and ask for information to be changed or deleted if it is incorrect.

Wherever possible the Shared Lives workers and Shared Lives carers will involve the person and/or their representative in what is being written down and will discuss and show it to the person at the time. The person will be given copies of the most important records, such as their Service User Plan or Shared Lives Arrangement Agreement. The person can also ask for copies of other things if they wish.

Schemes may sometimes have information about the person which has been given to them by another person or organisation. If so the scheme will have to ask their permission before they can show it to the person and this could take a few weeks. Alternatively, the person can ask the people or organisations directly to show them the information they have written about the person. If the scheme has to withhold information from the person, they will tell the person the nature of the information and why they cannot show it to them.

If other people (such as a relative) ask to see the person’s files, the scheme will not permit this without the person’s agreement. However if the person has a formal advocate or other representative who is acting on their behalf, that person may be able to see all the information the scheme has recorded about the person, in the same way as the person themselves would.

During regulatory inspections Inspectors from the Care Quality Commission sometimes ask to see a few of the files of people who are using the Shared Lives scheme. This is part of their job which is to make sure that the scheme is being run properly including having proper arrangements for recording and storing information. The regulator treats all personal information as confidential. The person’s Shared Lives worker can tell the person using or living in a Shared Lives arrangement more about this if the person wishes or can arrange for the person to see their own file(s).

Shared Lives carers and Shared Lives workers are able to access the files containing information about themselves too.

Information Sharing
Sometimes it is necessary to co-ordinate the services we provide with other people that the person needs or wants to participate in their support. For example, the person may require support with their dental appointments, getting home from a club, going to college or need to transfer to or from hospital. We will do our best to communicate and work with the other people involved to ensure the person’s needs and wishes are met.

The person may sometimes want their relatives, friends or representatives to be involved in their care or support, or in decisions about this. They will be made welcome and the need for information, advice and support will be respected and responded to.

The person’s right to confidentiality will be respected throughout this process. Personal information will only be shared with their agreement or if it is necessary in order to prevent harm to the person or others.
The scheme has guidance on confidentiality that explains more about when they can or cannot share personal information. A copy is available for the person and can also be given to other people or organisations that the person is involved with.

For further information on Data Protection Act 1998 go to:


Smoking, Alcohol and Drugs

Smoking can be a serious fire risk and a serious health risk (to smokers and non-smokers) and is illegal in many places including the workplace. Certain drugs are illegal. Both alcohol and drugs can be a serious health hazard and affect people’s behaviour and relationships as well as their ability to do their job. All of these things mean that the Poole Shared Lives scheme has to take action to work within the law and to safeguard the health, safety and well-being of all people involved in Shared Lives arrangements.

Smoking

On 1 July 2007 legislation to reduce exposure to second-hand smoke in enclosed public places and workplaces came into effect in England. Similar comprehensive smoke-free legislation is also in force in Wales, Northern Ireland and Scotland. It is estimated that the smoke-free law will prevent significant numbers of deaths among non-smokers each year in the UK from heart disease, lung cancer, stroke and respiratory disease.

Shared Lives carers provide care and support to individuals matched to their particular skills, abilities and circumstances within their own homes. Private dwellings are not in general covered by the new smoke-free law. However, Shared Lives schemes and their approved carers should take steps to minimise the risks of exposure to second hand smoke where the Shared Lives carer, the person they support or both are smokers. Recognising that exposure to second hand smoke, also known as passive smoking, increases the risk of lung cancer, heart disease and other illnesses should be seen as central to this. Ventilation or separating smokers and non smokers within the same air space does not stop potentially dangerous exposure.

It should also be recognised that Shared Lives schemes have a general duty of care for their Shared Lives workers (which extends to wherever they are working), to Shared Lives carers and to people who use or live in Shared Lives arrangements. In turn Shared Lives carers have a duty of care to the people placed with them. This duty of care includes protecting the health of Shared Lives workers, Shared Lives carers and people using or living in a Shared Lives arrangement with them. It should be recognised that failure to take reasonable steps to protect the health of any of the parties could lead to legal action being brought by an affected person.

Further details can be found in 'Everything you need', guidance to the smoke free law. This has been distributed to businesses in UK and is also available on the website www.smokefreeengland.co.uk The following website also provides information for people wishing to give up smoking http://gosmokefree.nhs.uk The Royal College of Nursing have also produced some helpful guidance for domestic settings www.rcn.org.uk/__data/assets/pdf_file/0006/78702/003043.pdf These should be read alongside this guidance.

Aims of this guidance

- To reduce exposure to second hand smoke for Shared Lives workers, Shared Lives carers and people using or living in Shared Lives arrangements
- To encourage a healthier, safer living and working environment

Shared Lives carers

Shared Lives arrangements are made by sharing clear information about the needs, skills, likes and dislikes of the individuals involved. Though it may have been agreed that a person using or living in Shared Lives is happy to live or stay with a Shared Lives carer who smokes the new legislation gives us the opportunity to revisit such Arrangement Agreements to determine a safe and fair approach to each situation.

Where a Shared Lives carer or a member of their family smokes they should consider the
impact of this on the person using or living in the Shared Lives arrangement and discuss, with their Shared Lives worker and the person, what they can do to minimise the risk of second hand smoke on others.

Shared Lives Arrangement agreements should include the approach to smoking in vehicles in which the person using or living in a Shared Lives arrangement may travel.

An agreement should be drawn up outlining any particular arrangements.

**People using or living in Shared Lives arrangements**
Whether smoking is acceptable or not within a Shared Lives carer’s household, should be talked about at the start of a Shared Lives arrangement as part of the matching process. If the Shared Lives carer does not smoke but is prepared to provide an arrangement for someone who smokes it is usual practice for any arrangements to be recorded in the Shared Lives Arrangement Agreement and the Service User Plan.

In situations where the person and the Shared Lives carer smoke, it is a good idea to think about the impact of this on a household and consider whether or not there are steps that can be taken to minimise the impact of smoking on each other and on visitors to the house e.g.

**Shared Lives workers**
These issues should be discussed at placement reviews and any arrangements recorded.

**Shared Lives workers**
Shared Lives workers are governed by the smoke free policy which states that all work premises are designated smoke free areas. They also carry a general duty of care to those they come into contact with in the course of their work.

Shared Lives workers should not smoke in the homes of Shared Lives carers or in their cars, particularly if they are accompanied by anyone in the context of their work.

Shared Lives workers should not be asked to work in a smoky environment. Much of the Shared Lives worker’s role involves visiting Shared Lives carers and people living in Shared Lives arrangements in their own homes, so we would ask that Shared Lives carer’s homes remain smoke free, whilst the Shared Lives worker or other professionals connected to their role as a Shared Lives carer are visiting. Ideally Shared Lives carers, members of their family and the person living in the Shared Lives arrangement are asked not to smoke in the room where the meeting will take place for up to an hour before the start of the meeting.

**Further guidance on smoking, alcohol and drugs**
Each Shared Lives carer will have particular house rules for their own home and some of these may relate to smoking or drinking. The person will be given information about these house rules before making a decision to go ahead with a Shared Lives arrangement, so that the person can decide whether it is the right kind of Shared Lives arrangement for them. The information about house rules will also be written in their Shared Lives Arrangement Agreement. If the person disregards the house rules or the responsibilities they have in their Shared Lives Arrangement Agreement this may lead to the ending of the arrangement.

Shared Lives carers and Shared Lives workers in the scheme have to be able to undertake their work safely and competently at all times. For this reason their consumption of alcohol, medication or other substances must be limited so that they can be in full control of a working situation at all times. If they place the person and/or other people and/or themselves at risk by working when under the influence of alcohol or drugs, this will usually be considered a conduct or performance issue, in which case this will be dealt with through
disciplinary proceedings for Shared Lives workers and for Shared Lives carers through having their approval reviewed by the Shared Lives panel and the scheme manager. However, if patterns of absenteeism, poor health or behaviour point to a possible health issue such as dependency or addiction this will be raised with them and they will be advised to access the counselling and health services that are available to help with this. Time off will be allowed for Shared Lives workers in line with normal sickness procedures and a full performance review will take place when they return to work. Shared Lives carers may take a break from providing Shared Lives arrangements with a review of their approval at the end of this period.

If a Shared Lives worker is found to be under the influence of alcohol or drugs while at work, he/she will immediately be sent home. If Shared Lives carers are found to be under the influence of alcohol or drugs while supporting or caring for a person in a Shared Lives arrangement, the risks in the situation will be assessed and suitable alternative care and support arrangements made i.e. this could be a short-term arrangement covering a single incident or a longer-term arrangement if necessary.

Drinking moderate amounts of alcohol is a normal and enjoyable part of many people’s lives and the person has the right to make choices and lead the kind of life they want. However, if their own use of alcohol or drugs is affecting their behaviour and/or relationships in the Shared Lives arrangement their Shared Lives worker will discuss this with the person so that the person is able to understand all the possible consequences and have the opportunity to access the counselling and health services that can help the person if the person wishes. If the use of alcohol or drugs by their relatives or friends is causing a problem for the person and/or others in the Shared Lives arrangement, this will also be discussed with the person and/or their relatives or friends so that the possible consequences are fully understood. If the problem cannot be resolved, this may mean that the Shared Lives arrangement has to end.

People working in or visiting our office(s) will not be able to smoke in the building and may only smoke in the specially designated area.

The illegal use of drugs anywhere in the service will be reported. Where a person in a Shared Lives arrangement is in drugs recovery which involves the use of controlled drugs such as methadone then this will need to be under the supervision of an appropriate health professional.
Communication Choices and Decisions

You have the right to make informed choices and decisions while recognising the rights of other people to do the same. The Poole Shared Lives Service therefore aims to encourage and enable you to make choices and decisions in all areas of your life, while at the same time making sure that you are not pressurised or inappropriately influenced in those choices.

How will this happen?

The Poole Shared Lives Service will support you to have the kind of life or experiences that you want, doing the things that are important to you and enabling you to take responsible risks. Shared Lives Workers and Shared Lives Carers will work together and with others to make sure you have all the information, help and time you need for making choices and decisions.

The starting point for making informed choices and decisions is effective communication. We will ask about your preferred methods of communication when you are first referred to Shared Lives and will use these wherever possible in our work with you. If we need help to communicate with you, we will make use of interpreters / special equipment / visual aids etc as necessary and/or seek guidance from your family or other people who know you well.

If your first language is not English or you have other communication needs, we will try to find SL Carers who can communicate in your preferred way and/or find the specialist aids / interpreters / training required for the SL Carers to develop the necessary communication skills. A Shared Lives arrangement will not go ahead unless you and the SL Carers are confident that you can understand each other.

Your communication needs and arrangements will be explained in your Service User Plan and regularly reviewed as part of this.

When we provide you with information about the service this will be written in plain English or another language or format that you can easily understand or we may use an audiotape or a short film or some other way of communicating if you prefer.

We will also make sure that you have opportunities to tell us about your experiences in the service and your views on how it might be changed or improved. (There is more information about this in our policies on: Consultation and Participation in the Service; Continuous Improvement in the Service and Complaints and Concerns.)

It is important to have proper information when you make choices and decisions. SL Carers and SL Workers will do their best to provide information for you in a format or language that you can easily understand and keep. When you have a range of choices you will be given information about all the options. If necessary, you will also be given help to fully understand the options and choose the one that is right for you. You will have time to prepare for important events, as well as time to communicate your feelings, views and answers.

If you need support to speak up for yourself, this will be discussed as part of your Service User Plan. Support can be provided by your SL Carer and/or SL Worker, if appropriate, or by your family or friends or other representatives or by an independent advocate.

SL Carers will support you in the daily life, activities and goals you choose as part of your Service User Plan. If any risks have been identified these will be discussed with you and actions agreed with you to remove or reduce the risks if necessary. If there are likely to be any restrictions on your choices and freedoms these will also be discussed and agreed with you as part of your Service User Plan.
Every effort will be made to enable you to be in control of your life. However if it appears that you do not have the capacity to make an informed choice or decision, we will discuss this with your family or representative and relevant professionals and agree a way forward that is in your best interests. In these situations we will follow guidance in the Mental Capacity Act 2005 Code of Practice.

Good communication is essential throughout a service if it is to be run effectively and in the best interests of the people who are using it. We make sure that SL Carers and managers and workers have opportunities to communicate with each other as well as with you and other people in Shared Lives arrangements, through:

- Meetings or support groups for SL Carers and/or people in Shared Lives arrangements
- Shared training opportunities
- Sharing examples of good practice
- “buddying” arrangements between new and experienced SL Carers
Section 7: Recruiting, employing or assessing, reviewing and developing workers and Shared Lives carers

Learning and Development
The Poole Shared Lives scheme understands that learning and development are essential to the role of Shared Lives carers and Shared Lives workers who play a crucial role in promoting positive experiences and outcomes for people using or living in a Shared Lives arrangement and should have opportunities to develop their skills and knowledge.

Shared Lives workers and Shared Lives carers are recruited through a process which includes: taking up references; Disclosure and Barring Service checks, or their equivalents in Scotland and Northern Ireland; consideration of their previous experiences and working history. Selection depends on demonstrating they have the skills, knowledge and abilities to support people. Managers and Shared Lives workers may also be required to have relevant qualifications.

The Care regulators in all four countries require that people who use adult social care services will receive care and support from people who:

- Meet the Care Certificate in their country
- Meet any additional learning and or qualification requirements of that council
- Have the knowledge and skills to meet the care and support needs of any individual placed with them

The Poole Shared Lives scheme has a specific budget for training which is used for meeting the identified training and development needs of workers, Shared Lives carers and support carers.

Learning and development opportunities can take many forms, such as:

- Group learning led by suitably skilled people
- One-to-one input/individualised learning and development meetings
- Taking part in external training courses
- Shadowing more experienced people
- Peer group discussions
- Use of resources such as DVDs/online training courses/workbooks/reading materials/the internet
- Research
- Hearing about the experiences of people who uses services and their families

How will this happen?
Shared Lives Workers
All Shared Lives workers, including scheme managers, follow a planned programme for induction within their first 12 weeks that complies with the common induction standards of skills required by their sector. Linked to these are the knowledge and skills sets published by the worker modules in the Shared Lives learning pack in the members area of the Shared Lives Plus website.

The induction covers:

- values underpinning the service
- the Shared Lives scheme’s policies and procedures
- Shared Lives Plus guidance on the Shared Lives Plus website
- up-to-date knowledge and good practice guidance specific to Shared Lives
- how Shared Lives differs from other services
- the importance of listening to people who are using or living in Shared Lives Shared Lives arrangements and of the link between continuous development of Shared Lives workers and the continuous improvement of the quality of the scheme and outcomes
- the sharing of responsibility for continuous development between Shared Lives workers themselves and the service.

All Shared Lives workers, including scheme managers, have an annual appraisal of their work which includes identifying any learning and training needs and ways of meeting these. They will be entitled to at least 5 (pro rata) paid training or development days per year.

Each Shared Lives scheme is responsible for ensuring that training and development needs are met adequately within their own budgets. Some training may need to be bought in to meet specific needs and requirements.

Additionally, the Shared Lives Learning materials cover Shared Lives carers pre-approval and post-approval training. There is also a section on assessment, panel, and monitoring, to assist Shared Lives workers in the recruitment and support of Shared Lives carers.

**Shared Lives carers**

It is the responsibility of the Shared Lives scheme to compile training and development programmes suitable to meet the needs of Shared Lives carers and the training will, where appropriate, be specific to the service user group the Shared Lives carers will be supporting. If the scheme workers are not able to deliver the training themselves, then they should liaise closely with their training department.

Shared Lives Plus has produced a set of comprehensive training materials. These materials have been specifically written for Shared Lives and can be used by Shared Lives workers, training departments or the Shared Lives Plus independent trainers to work with Shared Lives carers or for groups of carers to undertake training under the aegis of a Shared Lives worker or trainer or an approved Shared Lives Plus trainer.

The training materials are all linked to the Care Certificate which are the standards that need to be demonstrated by anyone working in the social care industry. Additionally, all of the training materials have been mapped to the Shared Lives Plus 25 Skills and Knowledge Statements.

Some Shared Lives carers require back-up from Support carers to allow them to carry out their role – for example by providing a sitting or specialist support. All Support carers are assessed and checked by the scheme and their learning and development needs for their support role are jointly assessed and checked by the Shared Lives worker and the Shared Lives carer. Their induction may be specifically tailored to their role and the individual they will be supporting. However, if they are providing considerable levels of support they may be required to follow a programme that meets The Care Certificate.

Shared Lives carers should have a Shared Lives carer review at least once a year. The individual’s learning objectives are recorded and monitored throughout the year and increases in knowledge and competency are assessed and recorded through regular support, monitoring visits and the carer review process. Where appropriate, Shared Lives carers may have the opportunity to have their learning and competence assessed in order to gain nationally recognised qualifications.
All

Information about individual and collective training needs should be gathered together and analysed each year and training and development opportunities planned and delivered on the outcome.

Learning and development opportunities provided by the Shared Lives scheme are evaluated as part of the scheme’s annual quality assurance assessment, along with feedback received from people who use and live in Shared Lives arrangements, Shared Lives carers, Shared Lives workers and any other people involved in the scheme.
The Shared Lives Panel Guidance

The assessment, approval and ongoing approval of Shared Lives carers is a critical process that ensures the success, safety and effectiveness of Shared Lives for people who use or live in Shared Lives Arrangements. The Shared Lives Panel which provides independent scrutiny and quality assurance is integral to this process.

This document sets out comprehensive guidance on the Shared Lives panel processes that represent best practice in Shared Lives schemes throughout the UK.

The term ‘Adult Placement’ was replaced by the term ‘Shared Lives’ in April 2008. The new term has been used throughout this document except where existing legislation is cited in which case the original term of ‘Adult Placement’ has been used

Introduction

Shared Lives’ Panels play a key role in the approval of Shared Lives carers. They also have an important role in quality assuring the assessment process through:

- monitoring and reviewing the quality of work of Shared Lives workers during the assessment process
- providing feedback on the quality of Shared Lives carer applications
- identifying any problems with the Shared Lives carer assessment process
- ensuring that there is consistency of approach across the Shared Lives scheme, that the approach is fair to all applicants and it has been completed in a thorough and rigorous way.

Each Shared Lives scheme should have a Panel. The Panel is a group of interested and experienced people, appointed by the scheme, but operating independently of the scheme. This panel considers assessments of new Shared Lives carer applicants and makes recommendations about their approval. The Panel also makes recommendations about the ongoing approval of existing Shared Lives carers. As the scheme manager is registered with the relevant care regulator the overall decision for the approval of a new Shared Lives carer or the on-going approval of an existing Shared Lives carer is made by the scheme manager.

Regulators in England, Wales, Northern Ireland and Scotland play a role in ensuring that Shared Lives schemes are effective and work to an agreed standard, thereby ensuring the quality and safety of individual Shared Lives arrangements. Each of the four regulators works to slightly different regulations and standards but have broadly the same approach to the existence of Panels. This Guidance represents Shared Lives Plus’s view of best practice and should ensure compliance with regulation in all four countries of the UK.

Contents of the Panel guidance

1. The role and responsibilities of Panel
2. Shared Lives carer assessment
3. Counselling out Shared Lives carers during assessment
4. Shared Lives carer review
5. Panel composition
6. Panel numbers
7. Appointment of Panel members
8. Training of Panel members
9. Resignation and removal of Panel members
10. Frequency of meetings
11. Before the Panel meeting
12. Duration of Panel meetings
13. Panel meetings
14. Conflicts of interest
15. Approval of new Shared Lives carers - evidencing knowledge and skills
16. Panel recommendations
17. Challenging a Panel recommendation
18. Referral to Panel following Shared Lives carer Review
19. Removal of Shared Lives carer approval
20. Appeal against the scheme decision to remove approval
21. Recording and reporting
22. Disagreements within the Panel
23. Shared Lives support carers
24. Quality Assurance
25. Inspection by the Regulators in England, Wales, Scotland or Northern Ireland

Appendix A - Reference Documents
Appendix B – Person Specifications for Panel Chair and Panel Members
Appendix C – Guidance where there are concerns about Shared Lives carer conduct or work standards
Appendix D - Example of a Panel Record Form

1. The role and responsibilities of Panel
The primary role of the Panel is to provide independent scrutiny and a quality assurance process to the scheme regarding assessments for new Shared Lives carers and the ongoing approval and de-approval of existing Shared Lives carers. The scheme manager retains legal accountability for the final decision on the approval of new Shared Lives carers and the continuing approval of existing Shared Lives carers, but should seek the advice of the Panel and take full account of that advice in deciding whether a prospective Shared Lives carer should be newly or remain approved. This is a complex arrangement and in order for it to work effectively both the scheme and the Panel must be clear about each other’s role and responsibilities.

The four main responsibilities of the Panel are:

1. Making recommendations on the approval of new Shared Lives carers. For the approval of new Shared Lives carers the Panel is responsible for assessing the evidence of the applicant’s knowledge, experience, skills and values to determine if these are sufficient for the applicant to be recommended by the panel for approval as a Shared Lives carer by the scheme manager. A more detailed explanation of this process is provided in the sections of this guidance on:
   - Shared Lives carer assessment
   - Approval of new Shared Lives carers: Evidencing knowledge and skills

2. Changes to the approval status of a Shared Lives carer e.g. increased approval of a
Shared Lives carer from providing day support to being a long term Shared Lives carer or decrease in approval e.g. a significant change in the Shared Lives carer’s circumstances, or because there are concerns about their knowledge and skills or because an allegation against the Shared Lives carer has been made and investigated. A more detailed explanation of this process is provided in the section of this guidance which covers Shared Lives carer reviews.

3. De-approval of a Shared Lives carer with the scheme. A detailed explanation of this process is provided in the section of this guidance which covers removal of Shared Lives carer approval.

4. Quality assurance. More detail on this is included in the section of this guidance on quality assurance.

The Panel must have skilled and experienced members able to make recommendations based on the careful consideration of the evidence put before them. Panel members must understand the importance of their role and have the knowledge and skills to fulfil this. Scheme managers and Shared Lives workers need to ensure that the Panel has all the information and support that it needs to carry out its task effectively. The Panel must be able to make recommendations without interference or undue influence from the scheme.

The scheme manager must have confidence in the Panel and be prepared to act on its advice. At the same time the prospective carers must have the confidence that all the evidence will be considered carefully by the Panel and all recommendations made as a result will be objective and fair.

Scheme decisions about Shared Lives carer approval are decisions about access, or otherwise, to work. Neither the Panel nor the scheme is subject to employment law as Shared Lives carers are self employed. Some decisions made following consideration by the Panel could however be subject to appeal or challenge. It is therefore vital that Panel advice is evidence based and legally justifiable if challenged at a later date.

2. Shared Lives carer assessment
People who wish to become Shared Lives carers are taken through an assessment process by an allocated Shared Lives worker from the Shared Lives scheme. The allocated Shared Lives worker is known as the assessor. This Shared Lives worker spends time with the applicant explaining the process and giving them information about what it is like to work as a Shared Lives carer. Their approach should be safe, objective and professional, enabling the applicant to share personal information and recognise and develop their knowledge and skills.

The assessment process is lengthy and comprehensive and explores the person’s motivation for becoming a Shared Lives carer and what they can offer a person using or living in a Shared Lives arrangement. It also includes all the checks and references needed as part of ensuring that the person will provide safe support to people in Shared Lives arrangements. The process also considers any family, home and community within which the prospective Shared Lives carer/s lives. Finally the assessment considers the applicant’s knowledge and skills relevant to Shared Lives and gives the opportunity for them to learn and develop these as they work through the assessment process.

The assessment process results in a written assessment report or pack produced by the assessor. This report is presented to the Panel who advises on whether the potential carers should be approved to work with the scheme.
3. Counselling out applicants during assessment
On occasions the assessor may recognise at an early stage in the assessment that the applicant is unsuitable or that there are significant concerns about the applicant, their home or circumstances which may prevent their approval.

Schemes should have a clear policy, made available to prospective Shared Lives carers, which outlines the action the scheme will take in this event. This policy should strike a balance between ensuring that time and resources are not wasted in continuing to assess people who are clearly unsuitable and ensuring that the assessor does not unilaterally make a decision about unsuitability without providing an opportunity for the Panel to consider the applicants fitness to be a carer.

On occasions a potential Shared Lives carer and their scheme assessor may have differing views about lifestyle or values. If this situation is not acknowledged and carefully managed it could lead to the assessor making a subjective judgement that the potential Shared Lives carer is not suitable that is not supported by objective evidence. The scheme policy should ensure that it addresses the potential for personal clashes and where possible offers the carer an alternative person to continue their assessment.

Where the assessor is clear at an early stage in the assessment that the applicant is unlikely to meet approval requirements s/he would usually discuss these concerns with the applicant, giving clear evidence for the opinion and informing the applicant that it may not be in their best interests for the assessment to continue. When faced with clear evidence of this, prospective Shared Lives carers will normally decide not to proceed with the assessment. This process is often referred to as “counselling out”.

Unusually the applicant may decide to proceed with their assessment even after being given evidence of their unsuitability and informed that they are unlikely to gain approval. In this instance the assessor should be clear with the applicant that while the assessment will proceed and the assessment report written, the report is likely to contain evidence supporting a recommendation not to approve. The assessment report should be presented to the Panel as normal, who will give their independent view and recommendation about approval of the applicant.

The Shared Lives scheme must have an assessment process that generates evidence of the applicant’s suitability for being a Shared Lives carer. This evidence can be used by the scheme to demonstrate objectivity to the prospective applicant about why the scheme does not feel that the applicant would make a suitable Shared lives carer. If schemes have a more subjective approach to assessment which does not rely on clear evidence they may find it difficult to justify the final decision they make if it is challenged at a later date.

There may be situations where negative references or something from a Disclosure and Barring or other Criminal Records check give clear documentary evidence that an applicant is not suitable e.g. if a Criminal Records check highlights that a potential Shared Lives carer has a conviction for a serious offence against a vulnerable person or is otherwise barred from working in Social Care. In this instance the scheme should end the assessment process, informing the applicant of the evidence of their unsuitability.

4. Shared lives carer review
Every approved Shared Lives carer should have an allocated Shared Lives worker who is employed by a Shared Lives scheme. The Shared Lives worker is responsible for giving the Shared Lives carer and other household members the support that they need and also for monitoring their work.
The Shared Lives worker is also responsible for working with the Shared Lives carer to review the Shared Lives carer’s work every year, giving them advice, support, feedback and the opportunity to identify and plan to meet any learning and development needs. The Shared Lives carer may use the review to request a change in their approval status. The review also gives the Shared Lives carer the opportunity to comment upon the support and learning offered by the scheme and make suggestions for any improvement.

If the Shared Lives carer requests a change in their approval status their allocated Shared Lives worker will need to find out the reasons for this request. If the request is for a decrease in approval e.g. long term Shared Lives carer to short breaks or day support, then the Shared Lives carer and Shared Lives worker will need to look at the implications of this decision on any existing arrangements to ensure the people in these arrangements are not left without any support or somewhere to live. Shared Lives carers should provide the relevant amount of notice, as outlined in the Shared Lives carers agreement and Shared Lives arrangement agreements.

In the event that the request for reduced approval status is due to ill health or change in circumstances of the Shared Lives carer that impacts on their ability/ availability to provide care and support to people using or living in Shared Lives arrangements with them, then the scheme will look at this on a case by case basis, in partnership with the Shared Lives carer, to see if there is any support that can be provided to identify a course of action going forward.

When a Shared Lives carer requests an increase in their approval status e.g. day support or short breaks to long term support, they will need to work in partnership with their allocated Shared Lives worker to explain their reasons for wanting to change and to demonstrate they have the necessary knowledge, skills, experience and values to provide the care and support required of approval status they are applying for. A report will then be presented to Panel detailing this information and then the Panel will make a recommendation on the change in approval status. The scheme manager will make the final decision on any change in approval status of a Shared Lives carer.

Occasionally, in addition to the annual Shared Lives carer review, a review is held because of a significant change in the Shared Lives carer’s circumstances, because there are concerns about their knowledge and skills or because an allegation against the Shared Lives carer has been made and investigated.

In all cases the review process results in a written report giving clear evidence of the Shared Lives carer’s successes and challenges. In most cases the report will be jointly agreed between the scheme and the Shared Lives carer. Where the Shared Lives carer does not agree with the conclusions they will be invited to submit a separate response which will be included in the report.

**N.B. The review report only needs to be presented to the Panel where the Shared Lives carer and/or scheme is seeking a change in approval status or where circumstances, concerns about knowledge and skills or an upheld allegation affect the continuing approval of the Shared Lives carer.**

It is not necessary to present all review reports to the Panel but good practice would suggest that a summary report highlighting good news stories could be submitted on an annual basis.

**5. Panel composition**
The Shared Lives scheme is responsible for establishing the Panel and must ensure that their Panel has a Panel Chair. The Panel Chair should have the necessary skills and
experience, should ideally be independent of the organisation or, where this is not possible, should be a senior member of the organisation with no responsibility for managing anyone involved in the line management chain for the Shared Lives workers carrying out the assessment.

The scheme should also ensure that the Panel has a Vice Chair or identifies someone who will be willing and able to take on the role of chair if the Chair is unable to do so. The Vice Chair should have the same level of independence as the Chair.

Schemes should ensure that their Panel is made up primarily of people who are independent of the scheme. Panel members drawn from the Shared Lives scheme or its parent organisation should not be involved (either as a worker or a manager) in the assessment of prospective Shared Lives carers. Therefore people who are employed by the scheme or organisation can only be Panel Members as long as they are remote from anyone involved with the assessment process and are not responsible for the management of anyone who carries out assessments. People employed by the scheme or organisation should always be in a minority in any Panel meeting.

The Panel composition should, where possible, reflect the community served by the scheme, offering a balance of interests, skills, backgrounds and gender balance of its members.

The Panel should include people with experience as a Shared Lives carer and people who have used services but not those currently working for or supported by the scheme. People who have stayed with Shared Lives’ carers in the past or with Shared Lives carers who live out of the area served by the scheme would make good Panel members. If people who use or live in Shared Lives arrangements are not available the scheme could choose to invite people who use services other than Shared Lives. Shared Lives carers selected to be Panel members should have no current connection with the scheme e.g. they could be ex Shared Lives carers or Shared Lives carers from another scheme.

In considering the overall composition of the Panel and the identity of the Panel Chair the scheme Manager should take account of the way in which the Panel and its members will be seen by prospective carers and others. Whilst the scheme Manager may be clear that a Panel Member or Chair is not connected with the scheme or the assessment process this independence may be less clear to outsiders looking in. This is especially true if Panel members or the Chair works for the organisation or authority in any capacity. Prospective carers and stakeholders should have confidence in the independence and credibility of the Panel and this image (as much as reality) should be given high priority by the scheme when making decisions about Panel composition.

There are good examples of schemes or authorities who have joined together in a consortium to set up and manage a shared Panel. This ensures the Panel is independent of any one scheme, gives more opportunities for service users and carers to become involved and can assure the quality and consistency of panel decisions across an area or whole region.

Schemes should appoint an adviser to the Panel. The advisor should have a full understanding of the way in which the scheme operates, the legislative framework within which it works and have sufficient knowledge to answer any questions that Panel members might ask. Their role is to answer questions from Panel members and provide clarification about scheme policy, procedures and processes but they cannot participate in Panel decision making. In practice the Panel Adviser will usually be the manager of the Shared Lives scheme or an experienced scheme worker.

To summarise:
Panel should include

<table>
<thead>
<tr>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Panel Chair who is totally independent of the assessment process</td>
</tr>
<tr>
<td>A Vice Chair or someone who is able to undertake the role of chair when the chair themselves is not available</td>
</tr>
<tr>
<td>One or more Shared Lives carers who are no longer connected to the scheme or are connected to a different scheme</td>
</tr>
<tr>
<td>Users of care and support services</td>
</tr>
<tr>
<td>A balance of skills, interests and backgrounds amongst the Panel Members, reflecting the community within which the scheme operates</td>
</tr>
<tr>
<td>A balance of gender amongst the Panel Members</td>
</tr>
<tr>
<td>A majority of Panel Members who are not connected with the scheme in any way</td>
</tr>
<tr>
<td>A Panel Adviser who works for the scheme and who is not involved in Panel decision making</td>
</tr>
</tbody>
</table>

Panel could include

<table>
<thead>
<tr>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who work for the scheme or authority who are totally independent of the assessment process</td>
</tr>
<tr>
<td>One or more people who use or live in Shared Lives arrangements who are no longer connected to the scheme or are connected to a different scheme</td>
</tr>
<tr>
<td>People who have a family member who uses services</td>
</tr>
<tr>
<td>People who work for care services who are not connected to the scheme</td>
</tr>
<tr>
<td>People who work for voluntary or other organisations who are not connected with the scheme</td>
</tr>
<tr>
<td>Councillors or elected officials</td>
</tr>
<tr>
<td>People with a legitimate interest in care services and Shared Lives, who would have something to offer</td>
</tr>
<tr>
<td>Board members or Trustees of the organisation</td>
</tr>
</tbody>
</table>

6. Panel numbers

Schemes must determine in advance the minimum number of people on each Panel that it will accept as being quorate. Good practice suggests that this should be a minimum of four people with many schemes setting a minimum of five or more panel members. This number should not include the Panel Adviser who is not a member of the Panel. Having more than four Panel members ensures that many different views and experiences can contribute to the discussion and that the responsibility for any advice is shared between a larger group of people.

If the Panel is inducting new members or has members that are not yet confident in their role it should temporarily increase the number it requires to be quorate until the new member has gained skills and confidence.

If a Panel has too many members discussion becomes protracted, arriving at agreement can become unwieldy and Panel meetings lengthy and potentially unproductive. Schemes should therefore define in advance the maximum number of members on each Panel. Good practice suggests that this would be 6 or 7 people.

A Joint Panel that is working with more than one scheme is likely to look at approvals and reviews from a larger number of carers. The minimum number of Panel Members required is likely to be larger than for panels serving a single scheme.

Some schemes choose to recruit a large number of Panel members e.g. 10 or more but
require each member to attend only a proportion of the Panel meetings each year. This does reduce the burden on individual panel members but may lead to inconsistency in panel advice giving.

7. Appointment of Panel members
All Panel members should be recruited and selected using a transparent, fair and equitable process set down by the scheme. Sample person specifications for chair and members of Panels are attached as Appendix B.

The scheme should take up checks and references on prospective Panel members, including where appropriate a criminal record check. This would only apply where a Panel member has unsupervised access to people who use or live in Shared Lives or their records.

Panel Members should go through an induction process to ensure that they fully understand the sensitive nature of panel information and the importance of Panel in the care, support and protection of service users. They should also understand the importance of basing decisions on evidence of Shared Lives carer skills and knowledge and the action they should take if they are not satisfied with Panel procedures or advice.

This induction need not be delivered through a lengthy training course which can be time consuming for everyone, expensive and difficult to run for small numbers of people. Schemes could produce an induction/information pack for Panel members and this could be followed up with short learning sessions with the Panel Adviser and/or Panel Chair. It is good practice for new Panel members to attend one or two Panel meetings as an observer before engaging as a full member. Acting as an observer will give the new Panel member the opportunity to see and understand the actions of more experienced Panel members and ask questions to enable them to gain a fuller understanding of their Panel role. If new Panel members are acting as observers the Panel Chair or Adviser may need to make clear to them that they cannot be party to any recommendations made by the Panel.

Panel Members should receive written information about the scheme, scheme processes, their role as a Panel member, code of practice and expected conduct.

Panel Members should be appointed for a fixed period (usually 3 years) and should complete a probationary period before they are fully confirmed as members. The scheme should make the length of their appointment clear to new Panel members.

Smaller Shared Lives schemes may not have many assessment reports to consider and as a result may not convene their Panel very regularly. In this situation it may be appropriate for the recommended 3 year tenure for each Panel member to be extended to meet local need. If the Shared Lives scheme chooses to extend the tenure of Panel members they should ensure that the Panel’s practice is regularly reviewed to make sure it does not become too comfortable and inward looking.

8. Training Panel members
Prior to sitting on the Panel all Panel members should be provided with training from the scheme to understand:

- The context of Panel, why it is needed and how it represents best practice for schemes
- Panel roles, responsibilities and composition
- Panel operating processes
- Panel advice and recommendations
- Approval processes for new Shared Lives carers
- Shared Lives carer reviews requiring advice and recommendations from Panel
- The Panel’s involvement with Shared Lives carer de-approval
Values that underpin the panel

Shared Lives Plus have developed Panel training which is free for Shared Lives Plus scheme members and includes the above topics, handouts and practice Panel exercises. This is available from the members area of the Shared Lives Plus website, as part of the Shared Lives learning materials. Schemes can deliver this training themselves, or alternatively they can contact Shared Lives Plus to put them in contact with an approved trainer, who will deliver the training on their behalf.

In addition Panel members can also gain knowledge and expertise in how the Panel works by shadowing a Panel meeting, reading through the Shared Lives Plus Panel guidance document, or getting advice on being in the Panel from existing Panel members.

9. Resignation and removal of Panel members
The scheme should ensure that Panel Members understand the notice period expected should they decide to resign from their role. This information should be given to new Panel Members as part of their induction.

If concerns are expressed about a Panel Member, these should be discussed in the first instance with the Panel Chair. If the Chair is unable to resolve these concerns, the Chair should discuss them with the Shared Lives scheme Manager and an action plan to address those concerns agreed. If the concern is about the Panel Chair then the scheme Manager will need to address this in conjunction with his/her own line manager or a senior member of the organisation.

The ultimate sanction against a Panel Member is removal of their membership of the Panel. A procedure that outlines who can take this decision, how it is communicated to the Panel Member and the appeals process should be agreed by the organisation or scheme when the panel is established. This procedure should be made clear to new Panel Members at induction.

10. Frequency of meetings
The Panel should meet regularly to consider assessments of prospective carers and where appropriate reviews of existing carers.

Some schemes schedule Panel meetings for each 12 month period in advance. Planning in advance and publicising the dates to Shared Lives assessors and Panel members allows Panel Members to manage their diary and other commitments and will maximise panel attendance.

The frequency of Panel meetings will be determined by the ‘busyness’ of the scheme and the number of reports that the scheme needs Panel to consider taking into account guidance on the length of panel meetings (see section 13)

11. Before the Panel meeting
Panel Members should receive written reports for each potential Shared Lives carer being presented well in advance of the Panel meeting. This gives Panel Members enough time to consider each report in depth and plan any questions or issues they wish to raise.

These written reports should be accompanied by minutes or notes from the previous Panel meeting and an agenda for the forthcoming Panel meeting.

If Panel notes are sent to Panel members through the post they should be sent by registered or recorded post in order to assure the confidentiality of the carers detailed in the assessments. They should be marked “private and confidential” and addressed to the
named person. Some schemes choose to send out Panel notes, Shared Lives carer assessments and reviews by e-mail. If schemes use e-mail they should assure themselves of the security and privacy of their and the recipient’s system before doing so.

Where service users are included as Panel members they should be given an appropriate level of support in preparing for the Panel meeting.

12. Duration of Panel meetings
Each Panel meeting should have an agreed maximum duration. Excessively long Panel meetings may make it difficult to recruit and retain Panel members and will inevitably lead to a reduction in the quality of Panel advice giving. Panel members are likely to give less attention to each individual assessment or review report if they are asked to consider large numbers at one meeting. Overlong periods of time allocated to the consideration of each report may result in laboured or protracted discussion which detracts from the quality of advice giving.

For these reasons the maximum duration for a Panel Meeting should normally be no more than 2 or 3 hours. Each Shared Lives carer assessment or review should be given a notional allocated time for discussion and decision (experience suggests 15 minutes per assessment and 10 minutes per review). The comparatively short period of time allocated for discussion and advice will help to ensure that panel members read the information sent to them in advance. It will also enable the Panel Chair to manage the meeting effectively and to cut short any discussion that is irrelevant. Clearly in complex cases the above timescales will be inappropriate and there may be occasions when a particular situation is the only business of the Panel.

13. Panel meetings
The Panel Chair will manage the panel meetings with administrative support from the scheme as required and with advice from the Panel Adviser on request.

At the panel meeting the Shared Lives worker who carried out the assessment or review should be available to present the report, answer questions and clarify issues. The Shared Lives worker should also make their recommendation to Panel on the types of Shared Lives arrangements the applicant should be approved for e.g. day support, short breaks, or long term arrangement. In some instances if the assessor is not available it may be possible for a colleague or representative to present the report to Panel in their stead. This can only be effective if the representative has a good understanding of the issues in the report and is able to answer questions. As part of presenting the assessment of the prospective Shared Lives carer the assessor should also make a recommendation for approval

Schemes should offer prospective or existing Shared Lives carers the opportunity to be present at the panel meeting for the presentation of their assessment or review and (if they wish) to respond to any questions the Panel might have about the assessment/review report. Schemes should ensure that Shared Lives carers and applicants have time to think through the advantages and disadvantages of being at the panel meeting in person. Where Shared Lives carers choose to attend the panel meeting, schemes should provide them with all the information and support that they need to use the opportunity well.

Where the Panel is considering an assessment or review report with a conclusion that is not supported by the applicant or the Shared Lives carer, they should be offered the opportunity to attend the Panel meeting with a supporter or, in the case of an existing Shared Lives carer, a representative, including if requested and available a legal representative. They should be given sufficient notice of the meeting in order to arrange this.

During the meeting Panel members should be given the opportunity to ask questions and
clarify issues based on the report they have read and any comments from the person presenting the report. Good practice would indicate that the Panel Chair should ask each Panel member in turn to share any questions that they may have before the assessor and applicant or Shared Lives carer comes into the meeting. The Panel Chair should then ask all of the questions gathered from Panel members directly of the Shared Lives assessor and/or carer. This approach allows the Chair to filter any questions that may not be appropriate, avoid questions that are repetitious and allow the assessor and/or carer to provide information without feeling pressured from all sides.

Information provided by referees and the Criminal Record check is usually confidential between the third party and the Shared Lives scheme. It is not usual, or even practical given the amount of paperwork involved, for Shared Lives schemes to show Panel members copies of references. The Assessment Summary Form in the Shared Lives guidance on Shared Lives carer assessment allows the Shared Lives assessor to make a note of each referee, when their reference was received and the general tone of the reference. In the majority of situations this should be enough information to enable Panel to give their advice. Some schemes do choose to share certain references with Panel (for example employment or character references) as they believe this gives useful additional information. There might also be a request from Panel to see a copy of a reference where an issue has been highlighted or a potential difficulty raised. If schemes do go down the route of sharing references on a routine or even occasional basis they should always ensure that they have the permission of the prospective Shared Lives carer and the referee to do so.

The Panel will not be expected to make a recommendation when the assessment pack is not fully complete or outcomes from references and other checks are not available. In the light of this the Panel Chair should be given a clear mandate by the Shared Lives scheme to reject any assessment or review report that is felt to contain insufficient evidence or information or to be of a poor standard.

14. **Conflicts of interest**
If Panel Members already have an interest in or knowledge of a prospective Shared Lives carer they must declare this to the Panel Chair before the start of the Panel meeting.

The Panel Member must agree with the Panel Chair and the rest of the Panel members whether their interest or knowledge will affect their objectivity and if necessary they must agree to withdraw from the Panel while the particular person is discussed.

15. **Approval of new Shared Lives carers: Evidencing knowledge and skills**
The primary role of the Panel is one of quality assurance to assess the evidence of the prospective Shared Lives carer’s knowledge and skills and determine if this is sufficient for a new Shared Lives carer to be approved.

The knowledge and skills sections of the carer assessment pack in the Shared Lives Plus publication “Shared Lives Learning” set out in a series of 25 ‘statements’ the Shared Lives Plus view of the knowledge and skills required by a Shared Lives carer in order to carry out their work safely and well. 11 of these 25 knowledge and skills statements are evidenced in the Shared Lives carer assessment. The remaining 14 are evidenced through learning which Shared Lives carers get before approval or during their post approval induction to Shared Lives.

Assessment reports will be written by the Shared Lives worker about the applicant concerned. The evidence provided of the applicant’s knowledge and skills will be specific to the individual and reflect the particular applicant, their circumstances, motivations and experiences. Schemes should ensure that Panel Members understand the knowledge and skills required in order to be an effective carer. They should also ensure that Panel Members
are aware of different ways that these knowledge and skills can be evidenced. The specific knowledge and skills statements relevant to the assessment process can be found in Appendix D - Panel Record Form. The full list of knowledge and skills statements together with examples of different types of evidence can be found in the Shared Lives Plus publication “Shared Lives Learning”.

Panel Members must ensure that they look objectively at each Shared Lives carer assessment and consider each of the relevant knowledge and skills statements. For each statement they should consider whether the Shared Lives worker has provided them with sufficient evidence that the carer has the knowledge and skills required.

The following example illustrates the quality of evidence necessary to enable objective decision making:

Evidence given for a knowledge and skills statement that would appear insufficient

<table>
<thead>
<tr>
<th>Knowledge and skills statement</th>
<th>Assessor’s view of prospective Shared Lives carer’s knowledge and skills in this area</th>
<th>Evidence the worker has to support this view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicate effectively</td>
<td>Mary is a strong communicator who does not find it difficult to express her opinions</td>
<td>During the pre approval training Mary asked lots of questions and made lots of comments</td>
</tr>
<tr>
<td></td>
<td>Mary can communicate well with both children and adults</td>
<td>Throughout the assessment Mary engaged with me in a really positive way.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I have observed Mary when her grandchildren came to visit. Mary was very good with her youngest grandchild who is 15 months old.</td>
</tr>
</tbody>
</table>

Evidence given for the same knowledge and skills statement that would appear comprehensive

<table>
<thead>
<tr>
<th>Knowledge and skills statement</th>
<th>Assessor’s view of prospective Shared Lives carer’s knowledge and skills in this area</th>
<th>Evidence the worker has to support this view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicate effectively</td>
<td>Mary is a strong communicator who does not find it difficult to express her opinions</td>
<td>During the pre approval training Mary asked lots of questions. She worked well within the group and was very supportive of another group member who was nervous. At the end of the session she gave constructive feedback to the trainer by filling in the evaluation form in some depth.</td>
</tr>
<tr>
<td></td>
<td>Mary can communicate well with both children and adults</td>
<td>During the assessment I found Mary to be very open and willing to participate. She was able to tell me clearly her strengths and weaknesses and engage with me in a really positive way throughout.</td>
</tr>
<tr>
<td></td>
<td>Mary is an excellent listener who people come to when they have a problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mary would probably work well with a service user who did not use speech</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mary is confident when meeting new people and soon puts them at their ease</td>
<td></td>
</tr>
</tbody>
</table>
I have observed Mary when her grandchildren came to visit. The youngest is 15 months old and has limited speech. When the child became distressed and was unable to explain why, Mary patiently went through all possible problems until she had resolved the concern.

I spoke to Mary’s friend Kath who told me she had been through a “messy divorce” recently. She said that Mary was very supportive and was a really good listener when she needed someone to talk to.

Howard is one of Mary’s personal referees. In his reference he stated that Mary got on well with people from all walks of life. He also stated that she was a good listener.

In her “Day in the life” sheet Mary talks about visiting her elderly mum in a local nursing home. She explained that her mum has had a stroke and is difficult to understand. She talked about how she helped her mum to set up a photo album to help mum “talk” about her family to the staff at the home.

Mary attended a carer’s meeting to meet other carers in the area. After the meeting an experienced carer told me she thought Mary would make an excellent addition to the group as she had contributed her views to the group in a constructive way.

**Evidence can be** provided from a variety of sources and can include:

- Things the Shared Lives worker has observed
- Things the Shared Lives worker can evidence from talking to the prospective Shared Lives carer(s)
- Photographs or pictures
- Evidence of relevant hobbies or interests
- Evidence of relevant community or social involvement
- Evidence of voluntary work or other experience
- Community network map
- Comments, feedback or compliments from service users or their representatives – where there is an existing link
- Notes or records of assessment meetings
- Training or learning successfully completed
- Tests or exams passed
- References either in writing or in person
- Day in the life sheet
- Personal profile
- Application form
- Comments, feedback or compliments from friends, family or contacts of the prospective Shared Lives carer
Comments or feedback from regulators
Health and safety checklist

The prospective Shared Lives carer can contribute to the generation of good evidence of their skills and knowledge by participating fully in the assessment process and in any required training and by:

- giving full and comprehensive answers to questions asked
- communicating answers confidently
- compiling an assessment portfolio which is well structured and clearly presented
- demonstrating a good understanding of the issues raised throughout the assessment
- demonstrating critical and analytical skills in relation to the role of the Shared Lives carer
- demonstrating a critical awareness of how they can apply their knowledge & skills to the role as a direct care provider

16. **Panel recommendations**

The Panel should be given a clear mandate by the scheme setting out the recommendations that they can give when considering Shared Lives carer assessments and reviews and in what circumstances. The panel should ensure any recommendation given is in line with this scheme mandate.

When considering the assessment of new applicants the Panel may recommend:

**Recommended for approval of a Shared Lives carer**
This means that the Panel were satisfied that the evidence provided in the assessment pack fully demonstrates that the candidate has the skills, knowledge and experience to work as a Shared Lives carer.

**Recommended for approval with conditions:** Many schemes will choose to give their Panel the ability to recommend approval with conditions. Schemes who do this should give their Panel clear guidance so that all the advice they give is fair and equitable.

Conditions of approval could include the following:

- Limited number of people the prospective Shared Lives carer can support
- Gender of service users
- Client group the prospective Shared Lives carer can support e.g. older people
- Type of service the prospective Shared Lives carer can support e.g. long term support
- Approval to support a named person or people

All conditions recommended by the Panel should arise from clear evidence submitted as part of the Shared Lives carer assessment. The Panel and scheme should be clear that **matching decisions are the role of the scheme and not the role of the Panel.**

Any recommendation made by the Panel should be clear and specific and should detail exactly what level of approval is being recommended, e.g. “approval to provide long term support to one person with a learning disability”.

**Not recommended for approval:** This means the Panel Members have agreed that an applicant is not suitable or that checks and references have revealed something
unsatisfactory. For new applicants and where the recommendation of the Panel is in line with the recommendation of the assessor then a recommendation not to approve cannot be challenged and the scheme Manager will make his/her decision on the basis of that recommendation. In other cases see the section below on challenging a panel recommendation.

**Deferral:** This means that Panel Members were unable to reach a consensus. It may be that the assessment report was incomplete, references were insubstantial or equivocal or that it was felt that the applicant requires further training or experience to develop their knowledge and skills. In this case the situation should be explained fully to the applicant and a date agreed to present them to Panel again in the future. When an applicant is deferred the scheme should work, where appropriate with the applicant, to meet panel recommendations.

It should be noted that information gathered as a result of a deferral may change the original recommendation of the assessor and any such change in recommendation should be made explicit in returning to Panel.

17. **Challenging a Panel recommendation**
The scheme should have an agreed procedure to be followed should applicants wish to challenge a Panel recommendation not to approve. **A challenge is only possible where there is a disagreement between the recommendation of the assessor and the recommendation of the Panel.** This is because where the assessor has recommended in the Panel report that the applicant should not be approved; the Panel will have taken into account the applicant’s view and any evidence that they have submitted in support of that view in making their decision.

A request to reconsider should be made in writing by the individual concerned within ten working days of the Panel meeting. The request should outline the reasons that the applicant thinks that the decision was wrong and should include any additional evidence not submitted at the original Panel meeting.

The process for reconsidering the recommendation should involve, wherever possible, the Panel that made the original recommendation. This gives the Panel an opportunity to review its original advice and if appropriate modify its recommendation. The potential Shared Lives carer should be given the opportunity to be present at the Panel meeting with representation or support.

The decision of the scheme following the final Panel recommendation should be given in writing no longer than five working days following the panel meeting. A decision not to approve following a review of the original recommendation by the Panel should not be subject to any further appeal.

This process does not remove the right of the applicant to make a formal complaint about Panel processes using the organisation’s complaints procedure or to take action on the ground of alleged discrimination.

18. **Referral to Panel following Shared Lives carer review**
When an existing Shared Lives carer is referred back to Panel as a result of a Shared Lives carer review, recommendations will be tailored to the specific circumstances of the Shared Lives carer and the reason why their review has been presented to panel will need to be given. They could, however, include recommendations to:

- Increase approval
- Decrease approval
- Defer approval because of insufficient information, in which case current
approval status of a Shared Lives carer will remain until the review report is reconsidered.

- Make other changes in current approval
- Remove approval due to resignation, retirement or scheme recommendation

19. Removal of Shared Lives carer approval
The scheme manager is responsible for the approval of new Shared Lives carers, the continuing approval of existing Shared Lives carers and for decisions about the removal of a Shared Lives carer approval with a scheme.

Shared Lives carers are self-employed and are responsible for their own livelihood. However, removing their approval in effect removes their ability to have future arrangements from the Shared Lives scheme and denies them an opportunity to work. For this reason Panels and schemes need to approach the de-approval of Shared Lives carers with fairness and equity.

Schemes should establish a policy and guidance for Shared Lives carers and the Panel that is clear about the circumstances under which Shared Lives carers might face de-approval. See Appendix C ‘Guidance for schemes where there are concerns about the conduct or standard of work of a Shared Lives carer.’

This guidance should ensure that any decisions are based on clear evidence following an agreed process, are never subjective, unfair and are never taken lightly. The Shared Lives carer should always be given the opportunity to submit their own response to the scheme report, to be present at the panel meeting and to be accompanied by a representative, including if they wish a legal representative. The Shared Lives carer should have the opportunity to see the scheme report and submit a written response before the report is sent to Panel members. Any written response by the Shared Lives carer should be sent to Panel members at the same time as the scheme report.

Schemes should ensure that Shared Lives carers have access to a written appeals process should they disagree with the Panel recommendation and the subsequent decision by the scheme about their approval status.

Finally the guidance should be clear about the advice and support the scheme will give to ex Shared Lives carers wishing to reapply to the scheme if they have been de-approved in the past.

20. Appeal against the scheme decision to remove or change approval
The Local Authority or parent organisation responsible for the Shared Lives scheme should have in place a process for dealing with appeals against decisions to de-approve or change the approval of a Shared Lives carer. This will be similar to any procedure the organisation has for dealing with appeals against decisions taken on behalf of the authority or organisation in relation to individuals supported by the authority or organisation or, for dealing with appeals against disciplinary actions in relation to members of staff. These procedures should already meet standards of independence, transparency and fairness and could therefore be adapted to include appeals against decisions taken by the scheme on the Panel recommendation to remove or reduce the approval of existing Shared Lives carers.

For appeals by Shared Lives carers the procedure should automatically exclude Panel members involved in the original recommendation or those in the chain of management of the Shared Lives assessor as they could be considered not to be independent or accused of bias or conflict of interest.

At any appeal hearing the Shared Lives carer should be able to submit written evidence and
should have the opportunity to attend and bring someone to support them, including a legal representative.

21. **Recording and reporting**
There must be minutes or a record of each Panel meeting usually made by an administrative worker from within the Shared Lives scheme or parent organisation.

The minutes should record the key elements of each discussion and the advice given by the Panel together with the reasons for that advice. The minutes should include a record of any strong minority views held by Panel members. Many schemes require that the recommendation on each assessment or review is also written on the assessment or review report and dated and signed by the Panel Chair before the end of the Panel meeting.

For an example of a Panel record see Appendix D

A letter formally informing the Shared Lives carer of the Panel recommendation and any decision taken by the scheme based on that recommendation should be sent to each Shared Lives carer no later than five working days following the Panel meeting. The timescale for lodging any appeal should be clearly stated in the letter and a copy of the Process enclosed if appropriate. Any letter should be signed and sent by the scheme Manager or whoever is responsible in the organisation for making such decisions.

22. **Disagreements within the Panel**
Schemes should agree with their Panel Chair in advance what will happen if Panel members do not reach a unanimous decision. This should be formally recorded in the Panel mandate and other panel documentation.

In most cases Panels will arrive at a unanimous or majority view. Where a majority view exists then any minority views should be recorded and a recommendation may be made on this basis. It should be for the Chair to decide whether to present a recommendation on this basis with agreement of the whole Panel. Where there is no clear majority view then one of the following may be considered:

- A recommendation is not made and the report is referred to a later date and to a Panel with a different membership
- Panel requests further information from the assessor or possibly the Shared Lives carer in person and the recommendation is deferred until this is available

23. **Shared Lives support carers**
Shared Lives carers do not directly employ staff to provide care for the people that they support. Nevertheless schemes recognise that many Shared Lives carers, especially those supporting people with complex needs, will require help e.g. a sitting service or specialist support, from time to time, from another person in order to carry out their support/care role. Such support must be arranged through the scheme in order to ensure that the approval of the main Shared Lives carer is not compromised. Schemes will recruit, check and approve specially selected people to provide this support to the main Shared Lives carers and these people are known as Shared Lives support carers.

In practice Shared Lives support carers could be the friends and family of the main Shared Lives carer. Or, they may be specially recruited by the scheme to support one or more particular individuals. They work alongside the main Shared Lives carer helping them to meet the support needs of an individual and may also take over responsibility for a time in the absence of the main Shared Lives carer. Any support provided by the Shared Lives support carer will use the home of the main Shared Lives carer, rather than the home of the Shared Lives support carer. Shared Lives support carers should not be confused with respite
or short break Shared Lives carers who can provide short breaks to a range of people and use their own home as a resource, and should be regarded as Shared Lives carers in their own right.

Shared Lives schemes should have written guidelines for the approval of Shared Lives support carers. The approval process should include a formal assessment interview with potential Shared Lives support carers which focuses on their suitability to support the individual placed with the main Shared Lives carer. References will be taken up, a Criminal Records check carried out, and the training and information is provided to ensure the Shared Lives support carer can care safely and competently for the person in the Shared Lives arrangement.

The decision to approve the Shared Lives support carer can be taken by the scheme manager, or where the scheme Manager is also the assessor, their line manager. **The assessment report for the Shared Lives support carer does not have to be presented to Panel for recommendation before the decision to approve/not approve is made by the scheme manager.**

Shared Lives Plus has produced separate guidance on the assessment, training and approval of Shared Lives support carers.

### 24. Quality Assurance
Panels have an important quality assurance role in relation to the assessment and approval of Shared Lives carers. As well as providing valuable advice on the approval of Shared Lives carers their role should extend to include:

- The provision of feedback on the quality of assessment reports
- Providing feedback on the assessment and approval work of the Shared Lives workers
- Identifying problems with the assessment and approval process and making suggestions for change
- A monitoring role looking in the longer term at the consistency, objectivity and fairness of it’s advisory role
- Reviewing information on numbers of applicants (whether or not they proceed to assessment) in order to be able to quality assure Shared Lives processes and objectivity and to contribute to future planning.

### 25. Inspection by the Regulators in England, Wales, Scotland or Northern Ireland
Whilst it is only in Northern Ireland that the Panel is a regulatory requirement the care regulators, in all four countries may as part of a scheme inspection enquire about the function of the Panel particularly when considering what steps the scheme has taken to ensure that the assessment of Shared Lives carers is subject to independent quality assurance.
Appendix A
Reference Documents

- Safeguarding against abuse and neglect – Shared Lives guidance 5.1
- Recruitment and Assessment of Shared Lives carers – Shared Lives guidance 7.8
- Shared Lives support carers – Shared Lives guidance 7.10
- Shared Lives carer assessment training – Shared Lives Learning Section 1
- Panel Training - Shared Lives Learning section 1
Appendix B

Knowledge and Skills for a Chair of the Panel

A Panel Chair will need to know and understand the following:

<table>
<thead>
<tr>
<th>Knowledge / Skill</th>
<th>Essential/Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge of the social care sector</td>
<td>Essential</td>
</tr>
<tr>
<td>Knowledge of Shared Lives Services</td>
<td>Essential</td>
</tr>
<tr>
<td>How to facilitate and co-ordinate meetings:</td>
<td>Essential</td>
</tr>
<tr>
<td>- Draw together pertinent points from discussions in a timely way in order to</td>
<td></td>
</tr>
<tr>
<td>reach well-informed decisions that command consensus</td>
<td></td>
</tr>
<tr>
<td>- Allow sufficient time for important matters to be discussed, able to manage</td>
<td></td>
</tr>
<tr>
<td>time and maintain good pace</td>
<td></td>
</tr>
<tr>
<td>- Skilled in active listening, paraphrasing, questioning, and summarising key</td>
<td></td>
</tr>
<tr>
<td>points</td>
<td></td>
</tr>
<tr>
<td>- Skilled at achieving consensus and closing discussions</td>
<td></td>
</tr>
<tr>
<td>- Ability to ask probing questions that challenge own and others' assumptions</td>
<td></td>
</tr>
<tr>
<td>in a non-threatening manner</td>
<td></td>
</tr>
<tr>
<td>- Able to manage meetings in an orderly and effective manner</td>
<td></td>
</tr>
<tr>
<td>- Able to manage conflict between panel members and remain composed</td>
<td></td>
</tr>
<tr>
<td>- Knowledge of panel policies and procedures</td>
<td></td>
</tr>
<tr>
<td>- Able to consolidate large amounts of information and create coherent summaries</td>
<td></td>
</tr>
<tr>
<td>To be able to positively communicate and establish working relationships with</td>
<td>Essential</td>
</tr>
<tr>
<td>relevant colleagues and stakeholders and had the ability to demonstrate and ability</td>
<td></td>
</tr>
<tr>
<td>to:</td>
<td></td>
</tr>
<tr>
<td>- Listen dispassionately, intently and carefully</td>
<td></td>
</tr>
<tr>
<td>- Question when necessary to ensure understanding</td>
<td></td>
</tr>
<tr>
<td>- Is frank and open when communicating and is willing to admit areas in which</td>
<td></td>
</tr>
<tr>
<td>they lack the necessary skills or knowledge.</td>
<td></td>
</tr>
<tr>
<td>- Shows an understanding of the feelings and needs of others and is willing</td>
<td></td>
</tr>
<tr>
<td>to provide support or to take other actions as appropriate</td>
<td></td>
</tr>
<tr>
<td>Support colleagues and stakeholders in relation to panel decisions and activities</td>
<td>Essential</td>
</tr>
<tr>
<td>and to take account of their views, opinions and attitudes by having the skills to:</td>
<td></td>
</tr>
<tr>
<td>- Probe the facts</td>
<td></td>
</tr>
<tr>
<td>- Challenge assumptions</td>
<td></td>
</tr>
<tr>
<td>- Provide counter view points</td>
<td></td>
</tr>
<tr>
<td>- Ensure that discussions are penetrating</td>
<td></td>
</tr>
<tr>
<td>- Insist that sufficient and reliable information is taken account of</td>
<td></td>
</tr>
<tr>
<td>- Seek all possible relevant information from a variety of sources</td>
<td></td>
</tr>
<tr>
<td>Maintain proper focus on the panel’s key role and tasks and have the ability to</td>
<td>Essential</td>
</tr>
<tr>
<td>ensure that all issues effecting panel decisions are properly addressed by being</td>
<td></td>
</tr>
<tr>
<td>skilled at:</td>
<td></td>
</tr>
<tr>
<td>- Showing a readiness to take decisions and actions</td>
<td></td>
</tr>
<tr>
<td>- Being able to make up her/his mind</td>
<td></td>
</tr>
<tr>
<td>- Being able to make sensible decisions by weighing up evidence, consider</td>
<td></td>
</tr>
<tr>
<td>reasonable assumptions, and factual information</td>
<td></td>
</tr>
<tr>
<td>Seeks and acquires new knowledge and skills from multiple sources.</td>
<td>Desirable</td>
</tr>
<tr>
<td>Has the ability to accept risk and is prepared to make decisions that involve</td>
<td>Essential</td>
</tr>
<tr>
<td>calculated risk in order to achieve a desired benefit or advantage.</td>
<td></td>
</tr>
</tbody>
</table>
### Sample person specification for a member of the Panel

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>An understanding of care/support services</td>
<td>Essential</td>
</tr>
<tr>
<td>An understanding of Shared Lives</td>
<td>Essential</td>
</tr>
<tr>
<td>Previous experience of Shared Lives</td>
<td>Desirable</td>
</tr>
<tr>
<td>Effective interpersonal skills</td>
<td>Essential</td>
</tr>
<tr>
<td>Understanding of confidentiality</td>
<td>Essential</td>
</tr>
<tr>
<td>An open minded and non judgmental attitude</td>
<td>Essential</td>
</tr>
<tr>
<td>An understanding of the support needs of the users of the Shared Lives service</td>
<td>Essential</td>
</tr>
<tr>
<td>Confidence in own opinions and ability to voice these at meetings</td>
<td>Essential</td>
</tr>
<tr>
<td>Professional manner</td>
<td>Essential</td>
</tr>
<tr>
<td>Understanding of the role of panel</td>
<td>Desirable</td>
</tr>
<tr>
<td>Ability to keep to time constraints</td>
<td>Essential</td>
</tr>
</tbody>
</table>
Appendix C

Guidance for schemes where there are concerns about the conduct or standard of work of a Shared Lives carer

Purpose and scope
Shared Lives schemes are responsible for providing the encouragement and help that Shared Lives carers need to provide a good service to the people that they support. Schemes also have a duty to ensure that Shared Lives carers do their work well and in a way that demonstrates their commitment to the values underpinning Shared Lives.

This guidance is designed to help schemes ensure that Shared Lives carers maintain good standards of conduct and work. Where there are concerns about the way in which the Shared Lives carer is working, this guidance provides a fair and consistent approach to the alleged failure to maintain standards of conduct or work.

Finally the guidance should be clear about the advice and support the scheme will give to Shared Lives carers wishing to reapply to the scheme if they have been de-approved in the past.

There are common elements to the procedure used where there are concerns about conduct and standards of work. There are however some significant differences between the two processes and these have therefore been dealt with separately in the guidance.

Principles
1. Scheme workers and Shared Lives carers are equally responsible for and committed to upholding standards of work and conduct.

2. The Shared Lives carer agreement sets out the roles and responsibilities of the Shared Lives scheme and the Shared Lives carer and is a key tool in ensuring good standards of conduct and work in Shared Lives.

3. Minor breaches of the Shared Lives carer agreement by the Shared Lives carer or concerns about standards of work should be dealt with informally in the first instance. The aim should be to understand the reasons for the Shared Lives carer’s apparent failure to maintain standards and to identify ways in which the scheme can support the Shared Lives carer to do their work well.

4. Where concerns cannot be dealt with informally (because of the seriousness of the continuation of the concern): The scheme should ensure that the Shared Lives carer understands the nature of the concerns, the procedure that will be followed, timescales for the process and has an opportunity to put their own side of the story. Note that where there has been an allegation of abuse the scheme may be constrained in their communication with the Shared Lives carer by local adult protection rules.

5. Shared Lives carers are self-employed and are responsible for their own livelihood. However, removing their approval removes their ability to have future placements and in effect denies them an opportunity to work. For this reason Panels and schemes need to approach de approval of Shared Lives carers with fairness and equity and any decisions should be based on clear evidence following an agreed process and should never be subjective, unfair or taken lightly. A decision to remove approval can be taken to judicial review and the court will penalise organisations where there is an insufficiently transparent and equitable process in place or where the decision is not sufficiently supported by evidence.
6. The scheme’s registered manager will make a decision about the Shared Lives carer’s on-going approval with the scheme, using evidence from a written report and the recommendation from the Shared Lives carer’s allocated Shared Lives worker, along with the views and recommendations from the Shared Lives panel. The final decision to remove or continue approval with the scheme is made by the scheme’s registered manager. The Shared Lives carer will have had the opportunity to review the report in advance of the Panel meeting and to submit his/her own response. Both reports will have been made available to panel prior to the meeting. The Shared Lives carer will have the opportunity to present their own side of the story at the panel hearing and has the right to be accompanied by a friend or representative, including a legal representative.

7. The Shared Lives carer has the right to appeal against any decision to remove approval using the procedure outlined in the Shared Lives Panel Guidance. At any appeal hearing the Shared Lives carer should be able to submit written evidence and should have the opportunity to attend and bring someone to support them, including a legal representative.

Concerns about breaches of the Shared Lives carer agreement

1. **Informal Stage**
   1.1 The scheme worker has a responsibility to bring any concerns about breaches of the Shared Lives carer agreement to the attention of the Shared Lives carer as quickly as possible, as this can avoid the need for formal action.

   1.2 The scheme worker should meet the Shared Lives carer to explain the concerns and offer the opportunity to explain. The scheme worker should explore with the Shared Lives carer whether there are any underlying reasons for the breach and anything that the scheme can do through additional training or support.

   1.3 Where the Shared Lives carer has no, or insufficient, reasons for the breach the worker may decide to take no formal action but simply state and record their concerns.

   1.4 Where the breach of the Shared Lives carer agreement is serious or is persistent then the worker may decide that they need to take formal action. In that situation the following procedure will apply:

2. **Investigation**
   2.1 The scheme worker should carefully investigate the alleged breach of the Shared Lives carer agreement, before starting any formal proceedings. The extent of this investigation will depend upon the nature of the breach and may for instance be relatively simple for minor breaches of confidentiality and more complicated where the carer or a member of their household has been subject to criminal prosecution.

   2.2 The investigation should include an informal meeting with the Shared Lives carer concerned. The reason for the meeting should always be made clear.

   2.3 Should the Shared Lives carer refuse to attend or co-operate with such a meeting, the scheme manager will decide whether to arrange a carer Review on the facts available, without information from the Shared Lives carer.

3. **Shared Lives carer review meeting**
   3.1 If, after investigation, the scheme Manager is satisfied that there is a case to answer, a Shared Lives carer review meeting will be held.
3.2 The scheme manager should contact the Shared Lives carer to arrange a suitable time for the review meeting. The date, time and place for the meeting should be confirmed in a letter sent or handed to the Shared Lives carer.

3.3 The letter will explain the specific allegations against the Shared Lives carer and their right to be accompanied by a friend or representative. It will also say who will conduct the review meeting.

3.4 The Shared Lives carer and/or his/her companion have the right to see copies of all relevant documents or records necessary to prepare their case. They will not however have access to information provided in confidence by or to a third party.

3.5 The review meeting will be conducted by the scheme manager.

4 Conclusions and actions from the review meeting

4.1 Following the review meeting, the scheme manager will decide:

- Whether the Shared Lives carer has breached the terms of the Shared Lives carer agreement
- The underlying reasons for the breach and any mitigating factors
- Whether there is help that the scheme could provide (e.g. additional support or training) to enable the Shared Lives carers to avoid further breaches of the Shared Lives carer agreement
- Whether the breach is so serious and/or persistent as to merit removal of approval

4.2 A copy of the report of the review meeting, including the scheme manager’s conclusions, will be sent to the Shared Lives carer for their comments.

4.3 The review report (including comments from the Shared Lives carer and their allocated Shared Lives worker) will be presented to the Shared Lives Panel for consideration. The Shared Lives carer has the right to be present at the Panel meeting and to be supported by a friend or representative (including a legal representative). The Shared Lives carer will have the opportunity to present their case for continuing approval to the Panel, if they wish to do so.

4.4 The Panel will consider:

- The views and perspective of the Shared Lives carer
- The relevant Shared Lives worker’s report about the breaches of the Shared Lives carer agreement which have occurred by the Shared Lives carer, what the scheme has done to support the Shared Lives carer to understand and resolve these issues, and the recommendation from the Shared Lives worker about the on-going approval status of the Shared Lives carer
- Evidence from the scheme manager’s review report and their view about the on-going approval status of the Shared Lives carer

The panel will then make a recommendation about the on-going approval of Shared Lives carer based on the information presented above. Their recommendation will be one of the following:

- Continuing approval (where appropriate with identified help from the scheme)
- Decreasing approval (if for example the Panel considers that the breach of the carer agreement was the result of over work)
- Removal of approval
4.5 The registered scheme manager has legal accountability for the final decision on the continuing approval of Shared Lives carers, but they should take full account of the advice and recommendations of the Panel when making a final decision on whether to allow continuing approval, decreased approval or removal approval.

5 Appeals
5.1 The Shared Lives carer has the right to appeal against any decision to remove approval using the procedure outlined in the section of this guidance called ‘Appeal against the scheme decision to remove or change approval’

CONCERNS ABOUT STANDARDS OF WORK
6 Informal Discussion
6.1 Any concerns about standards of work should ideally be dealt with informally in the first instance.

6.2 The scheme worker should meet the Shared Lives carer to explain his/her concerns. This can be done as part of a normal support visit or at a separate meeting.

6.3 The scheme worker should explain his/her concerns clearly, with concrete examples where possible. The Shared Lives carer should be given ample opportunity to state his/her point of view.

6.4 If it becomes clear that the Shared Lives carer’s conduct has contributed to their poor standard of work then action may need to be taken under the procedure designed to maintain good standards of conduct.

6.5 Where there are no obvious conduct implications, the scheme worker should explore and agree with the Shared Lives carer ways to help them to improve their work, including learning and development opportunities. The scheme worker should agree a date for review of progress and explain clearly the possible consequences of any failure to improve their standard or work.

6.6 A record of the meeting should be made by the scheme worker and agreed with the Shared Lives carer. Copies should be kept by the scheme and the Shared Lives carer.

7 Formal procedure
7.1 Where the informal approach has not proved successful or standards of work have been so poor that implications for the person supported are serious, a Shared Lives carer review meeting should be held.

7.2 The scheme manager should contact the Shared Lives carer to arrange a suitable time for the review meeting. The date, time and place for the meeting should be confirmed in a letter sent or handed to the Shared Lives carer.

7.3 The letter will explain the specific concerns about the Shared Lives carer’s standard of work and their right to be accompanied by a friend or representative. It will also say who will conduct the review meeting.

7.4 The review meeting will be conducted by the scheme manager.

7.5 At the review meeting the scheme manager should:

- Ensure that the Shared Lives carer understands the standard of work that is expected
7.4 A copy of the report of the review meeting, including the expectations of the Shared Lives carer, the actions that will be undertaken by the scheme to help the carer to improve their standard of work and the date to review progress, will be sent to the Shared Lives carer for their comment.

7.5 Where there is evidence at the next or subsequent review meetings that there has been little or no improvement in the Shared Lives carer’s standard of work and that the scheme has put all agreed actions in place to help the Shared Lives carer to improve, the scheme manager may recommend removal of approval.

7.6 A copy of the scheme manager’s report, including copies of the reports of the carer Review meetings, will be sent to the Shared Lives carer for their comments.

8. The review report (including comments from the Shared Lives carer and their allocated Shared Lives worker) will be presented to the Shared Lives Panel for consideration. The Shared Lives carer has the right to be present at the Panel meeting and to be supported by a friend or representative (including a legal representative). The Shared Lives carer will have the opportunity to present their case for continuing approval to the Panel, if they wish to do so.

7.7 The Panel will consider:
- The views and perspective of the Shared Lives carer
- The relevant Shared Lives worker’s report about the breaches of the Shared Lives carer agreement which have occurred by the Shared Lives carer, what the scheme has done to support the Shared Lives carer to understand and resolve these issues, and the recommendation from the Shared Lives worker about the on-going approval status of the Shared Lives carer
- Evidence from the scheme manager’s review report and their view about the on-going approval status of the Shared Lives carer

The panel will then make a recommendation about the on-going approval of the Shared Lives carer based on the information presented above. Their recommendation will be one of the following:

- Continuing approval (where appropriate with identified help from the scheme)
- Decreasing approval (if for example the Panel considers that the breach of the carer agreement was the result of over work)
- Removal of approval

7.8 The registered scheme manager has legal accountability for the final decision on the continuing approval of Shared Lives carers, but they should take full account of the advice and recommendations of the Panel when making a final decision on whether to allow continuing approval, decreased approval or removal approval.

7.9 Only in exceptional circumstances will the Shared Lives carer lose approval as a result of a single example of poor work. Where, however, the actual or potential consequences of the single instance of poor work are extremely serious and a warning is not appropriate approval may be immediately suspended, prior to a report to Panel recommending removal of approval.
7.10 The Shared Lives carer has the right to appeal against any loss of approval using the procedure outlined in the section of this guidance called ‘Appeal against the scheme decision to remove or change approval’.
Appendix D

Example of a Panel record form

<table>
<thead>
<tr>
<th>Name of Shared Lives carer(s)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for presentation to panel</td>
<td></td>
</tr>
<tr>
<td>Person presenting to panel</td>
<td></td>
</tr>
<tr>
<td>Date of panel</td>
<td></td>
</tr>
<tr>
<td>Panel adviser present (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Panel members present</td>
<td></td>
</tr>
</tbody>
</table>

Record of discussion

<table>
<thead>
<tr>
<th>Knowledge and skills considered</th>
<th>Evidence identified and any gaps in knowledge and skills</th>
<th>Evidence is sufficient to meet standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand and challenge prejudice, discrimination and oppression.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand and balance the needs and lifestyles of all people in the household.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicate effectively.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide a healthy and safe place to stay.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand and respect confidentiality and privacy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Build positive relationships with other people.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Keep clear and accurate records.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Support people to access education, employment and leisure facilities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand Shared Lives including roles and responsibilities of carers and schemes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand policies, procedures and legal requirements and work positively with the Shared Lives scheme to put these into practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support people to manage their finances.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Recommendation (please tick ✓)**

<table>
<thead>
<tr>
<th>Approve</th>
<th>Approve with conditions</th>
<th>Defer</th>
<th>Not Approve</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* see initial assessment for scheme recommendations

Signature of panel chair:

Date:

Decision confirmed (scheme manager or senior manager):

Date:
Approaches for the recruitment of Shared Lives Carers

Introduction
Shared Lives carers are an essential part of any Shared Lives scheme. They come from a range of backgrounds and bring different skills and experiences with them. It is this diversity of Shared Lives carers that supports the successful matching of Shared Lives carers with service users. The bigger and more diverse the pool of Shared Lives carers the more successful the matching process is likely to be something that all Shared Lives carers have in common is passion and commitment to making a difference to the lives of vulnerable people living in their community.

Recruitment approaches
Shared Lives is still not a well-known model of care and many people are not aware what Shared Lives is or how they could get involved. A range of methods should therefore be used to target potential Shared Lives carers and raise the model’s profile. Below are some methods that could be employed. They are in no particular order of importance or success rate

Posters and leaflets
Leaflets and posters could be put up in places accessed by the community. This may include, but not exclusive of:

- GP surgeries
- Vet’s surgeries
- Libraries
- Community Centres
- Waiting areas such as hospital waiting rooms, physiotherapy departments etc.
- Carers’ centres
- One Stop Shops
- Council offices
- Housing Associations
- Third Sector organisations including Community and voluntary sector organisations
- Community notice boards

Leaflets should be attractive to the eye with photos and short case studies wherever possible. They should not be text heavy and should include sufficient information to generate public interest.

Existing Shared Lives carers
Existing Shared Lives carers are the biggest champions of Shared Lives in their communities. All schemes report ‘word of mouth’ as being the most successful recruitment route for Shared Lives carers. Children and other relatives of existing carers can often be interested in following in the Shared Lives carers’ footsteps.
Participation and ‘high visibility’ of Shared Lives carers at training sessions, conferences and seminars can raise the profile of Shared Lives Plus amongst other potential carers and organisations.

Formalising existing arrangements
This may include speaking to teams that manage transition for children in foster care. Existing foster carers could become Shared Lives carers when the child reaches adulthood.
Shared Lives carers that run small residential settings in their own homes for three or less people and feel weighed down by excessive regulation may be interested in becoming Shared Lives carers instead.

There are a number of informal arrangements in the community that the Shared Lives scheme could formalise by ensuring that they operate in line with relevant regulation and are appropriately remunerated for their work.

**Targeting specific professions**

Individuals in specific professions are more likely in being interested in becoming Shared Lives carers. Shared Lives may be something that they take on in addition to their existing responsibilities. However, high unemployment levels and threats of redundancies may lead to some individuals taking on the role of a Shared Lives carer as their main employment role. Being aware of imminent changes in the local work environment can assist with planning and appropriately targeting different groups.

Some of these professions may include:

- Support Workers
- Foster carers/ ex-foster carers
- Social Workers
- Personal Assistants
- Care workers

Students on specific courses such as Health and Social care courses could also be a potential route to recruit Shared Lives carers.

**Media**

Adverts in the press, the radio and local TV can yield some interest in the community.

To avoid advert costs, schemes could run feature stories with case studies instead. They could also target papers produced and delivered by the Local Authority. Although the media are often interested in unusual care arrangements and scenarios, it is important that stories represent the ordinary living nature of Shared Lives living.

**Family carers**

Targeting family carers could have a twofold impact. Family carers, particularly older carers may be interested in seeking alternative care provision for the person they care for including a Shared Lives arrangement. Others may be interested in providing support to an additional person(s) or becoming shared Lives carers when their existing caring responsibilities come to an end. Family carers already have the expertise of providing care and can easily see themselves in this role. Becoming Shared Lives carers can also provide them with an additional and often much needed income.
Get to know your audience
Consult with existing carers on what motivated them to become Shared Lives carers and what recommendations they have on attracting more carers. Schemes could also consult with carers on their adverts and future recruitment ideas.

Schemes starting up or schemes wishing to target carer groups from a specific background could run consultation sessions with local community groups on what they feel would work in terms of advertising.

When running consultations, schemes should acknowledge that everybody’s time is extremely valuable and offer something to the participants in return to their time.

If schemes can’t speak to community members directly, they can provide presentations to staff teams and ask them to disseminate the message to them. Places of worship, community groups and community groups can be a good starting point to gain contact with people in your community.

Outreach into the community
It can be difficult to concisely describe the Shared Lives model of care in a leaflet or poster. Speaking directly to the community can be more effective in painting an accurate picture of what Shared Lives is about and at the same time answering potential Shared Lives carers’ questions.

Schemes could compile a list of local events and also local activities and visit these to run brief discussions with participants. Involve Shared Lives carers in your outreach activities, as they will already know many members of the community and they can also act as ‘buddies’ for informal chats with people who are interested in joining the scheme. They can share their personal experiences with potential Shared Lives carers and give a realistic view of what it entails; the lows and the highs.

Service users and brokers of care
With the wider understanding and promotion of Citizen Directed Support, many service users will be seeking their own care with the use of personal budgets and direct payments. A number of organisations have come in to support service users through this process and as a result they may be aware of individuals in the community who provide care and could be interested in becoming Shared Lives carers.

Other marketing tools
There are other marketing tools such as having a clear brand, a website, a presence in the local press etc. which may not be a direct part of a recruitment strategy but may yield interest from the local community and give the scheme a professionalised image.

A clear brand can turn a scheme into a household name, a real part of the local community and local services.
Conveying your message

- Using case studies and videos can be very useful in demonstrating clearly what a Shared Lives arrangement looks like.
- Inviting a Shared Lives carer to talk about their experience during presentations or discussion groups can really bring Shared Lives to life.
- Schemes in partnership with Shared Lives carers could run open days or other events that invite local community to find out more about Shared Lives.

Recruitment checklist

<table>
<thead>
<tr>
<th>Question</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>What is your aim? How many Shared Lives carers are you seeking to recruit?</td>
<td></td>
</tr>
<tr>
<td>Who is your target audience? How much do you know about them? How could you find out more?</td>
<td></td>
</tr>
<tr>
<td>What is your budget? Can you afford to run newspaper adverts, organise events etc.?</td>
<td></td>
</tr>
<tr>
<td>Who can help out? Could existing carers support you?</td>
<td></td>
</tr>
<tr>
<td>Are there any other organisations that could support your scheme to reach out to specific groups?</td>
<td></td>
</tr>
<tr>
<td>Do you have an exciting leaflet, poster, power point presentation, video, case studies etc.?</td>
<td></td>
</tr>
<tr>
<td>What are the upcoming events, team meetings etc. where you could provide presentations?</td>
<td></td>
</tr>
<tr>
<td>What are the venues that attract the local population? Could you put up a stall?</td>
<td></td>
</tr>
<tr>
<td>What are the activities that attract the local population? Could you have 10mins of their time to introduce Shared Lives?</td>
<td></td>
</tr>
<tr>
<td>Are you sure that the communication material is clear and that you are targeting the right people?</td>
<td></td>
</tr>
<tr>
<td>Do you have a clear plan in place?</td>
<td></td>
</tr>
</tbody>
</table>
Indirect advertising approaches:
- Newspaper, TV & radio adverts
- Leaflets
- Posters

Direct advertising approaches:
- Leaflet drops by team at local events, local venues etc.
- Focus groups & presentations to local community groups
- Presentations to teams of

Presentation

Formalising existing arrangements

POOL OF POTENTIAL CARERS

BRANDING – FEATURE ARTICLES – WEBSITE – EVENTS
Recruitment and Assessment of Shared Lives Carers

The Poole Shared Lives scheme aims to provide good quality support and/or care to people in Shared Lives arrangements. An important part of making this happen is making sure that Shared Lives carers have the skills, knowledge and abilities to support each person effectively. The recruitment and assessment of Shared Lives carers has therefore been designed with this in mind. The scheme is committed to recruiting and assessing Shared Lives carers in ways that promote equality of opportunity and anti-discriminatory practice.

How will this happen?

Shared Lives carers are recruited through a process which includes:
- Attending a pre-application meeting
- Completion of an application form
- Proof of identity including a recent photograph
- Checking whether the person has the right to work in the UK
- Taking up at least 2 written personal references from people who have known them at least 2 years (including visiting at least one)
- A reference from their last employer
- If the person has worked in social care before, checking why they left their last job
- Obtaining confirmation that they are physically and mentally fit to carry out their role
- Requesting confirmation that they have their landlord or mortgage lenders permission to provide a Shared Lives arrangement at their address and/or is not in arrears with their rent or mortgage
- Checking whether they have a valid driving licence, where relevant
- Carrying out a criminal record checks and other required safeguarding checks. For schemes in England and Wales advice on DBS checks can be found at: https://www.gov.uk/disclosure-barring-service-check/overview
- A full assessment (see assessment form below)
- Completion of the programme of induction training which is necessary before approval
- Recommendation for approval by the Shared Lives Panel
- Satisfactory completion of a probationary period of 6 months

Prospective Shared Lives carers are given a copy of the written guidelines for the assessment and approval process and information about how to challenge a decision not to approve them.

The assessment of Shared Lives carers covers:
- Their personal backgrounds and life histories
- Their home
- Their family and community links
- Their previous experiences and educational and working histories, including explanation for any gaps in their working history
- What kinds of care and/or support they are able to offer (including any specific limitations to this)
- Evidence of the knowledge and skills and abilities which will enable them to support a person in a Shared Lives arrangement.

The assessment report will be discussed with prospective Shared Lives carers and they will have the opportunity to comment or add to it before it is presented to the Shared Lives Panel. They will also be given a copy of the final report.

People who use the service are involved in the assessment and approval of Shared Lives carers through:
Feedback to Shared Lives workers during shadowing and as part of the approval process

Shared Lives carers will have the opportunity to continue to develop their knowledge and skills through ongoing / post-approval training, through regular monitoring and support visits from their Shared Lives Worker and through an annual review of their work which will include an individual learning and development plan.

If the Shared Lives support carers are recruited to provide back-up for a person’s main Shared Lives carer, the application process will include all the same steps, references and safety checks as for the Shared Lives carers (see above). It will also include at least one assessment interview covering: their experiences and skills; relationship with the person in the Shared Lives arrangement; their understanding of the person’s needs; their training needs and how these will be met. The scheme manager or other senior member of staff will be responsible for approving Support Carers.

The induction and other learning and development opportunities for Support Carers are described in the policy Learning and Development for Shared Lives carers, Workers and Managers.

**Shared Lives carer recruitment and assessment process**

The Shared Lives scheme’s selection process should be open, user focused and equal for everyone who applies to be a Shared Lives carer. The process should ensure that Shared Lives carers have the competencies and qualities required to meet the service user’s needs and to carry out the tasks they are expected to do, and that they meet the standards of conduct and practice and any qualification requirements set by the sector skills council for the country.

The selection process requires successful completion of the following:

- Pre-application home visit
- Completion of a carer application form
- Satisfactory reference checks
- Completion of a pre-approval training programme
- Completion of programme of assessment
- A recommendation for approval from the Shared Lives Panel. Where schemes do not have a Shared Lives panel, an alternative quality assurance process will be required to ensure that the approval process for a potential Shared Lives carer is fair, transparent and equitable.
- Confirmation of approval by the scheme manager or other designated senior manager

The documents which support the Shared Lives carer assessment process are

- Pre Assessment record
- Shared Lives carer application form
- Shared Lives carer assessment form
## Record of Pre-assessment meeting

<table>
<thead>
<tr>
<th>Name of applicants</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Phone number</td>
<td></td>
</tr>
<tr>
<td>email</td>
<td></td>
</tr>
<tr>
<td>Assessor/ Shared Lives worker</td>
<td>Date of visit</td>
</tr>
</tbody>
</table>

### Information given about Shared Lives (Shared Lives)

- The role of the Shared Lives scheme
- Aims and objectives
- The role of the Shared Lives carer
- Scheme policies and procedures
- People who use the Shared Lives scheme
- Regulation of the Shared Lives

### Information about the selection process

- The application and assessment process to becoming a Shared Lives carer

### Shared Lives worker notes
- Training and learning
- Approval with the scheme and the Shared Lives panel

<table>
<thead>
<tr>
<th>Advice given by Shared Lives worker/assessor</th>
<th>Shared Lives worker notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Suitability</td>
<td></td>
</tr>
<tr>
<td>- Household and property</td>
<td></td>
</tr>
<tr>
<td>- Skills, knowledge and experience</td>
<td></td>
</tr>
<tr>
<td>- Potential</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The accommodation</th>
<th>Shared Lives worker notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>- The Shared Lives carer’s home</td>
<td></td>
</tr>
<tr>
<td>- Available rooms and proposed sleeping arrangements</td>
<td></td>
</tr>
<tr>
<td>- Regulations</td>
<td></td>
</tr>
<tr>
<td>- Limitations</td>
<td></td>
</tr>
<tr>
<td>- Potential matching issues linked to accommodation</td>
<td></td>
</tr>
</tbody>
</table>

| Any questions or concerns                   |                           |

<p>| Shared Lives carer applicant                |                           |</p>
<table>
<thead>
<tr>
<th>Other members of the household</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Shared Lives worker</td>
<td></td>
</tr>
<tr>
<td>Agreeing the way forward</td>
<td></td>
</tr>
</tbody>
</table>
2. Applicant details
Questions about date of birth, ethnicity, languages spoken, and religion practiced are asked by the scheme for the purpose of helping us match you to a person using or living in Shared Lives.

<table>
<thead>
<tr>
<th></th>
<th>1st Applicant</th>
<th>2nd Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surname</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Known as</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Former names</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length of time at this address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you own of rent the property?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Previous address if at current property for less than 5 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home telephone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work telephone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mobile number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E-mail address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary language spoken</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any other languages spoken</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Religion or faith group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practicing or non-practicing</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Other members of your household

<table>
<thead>
<tr>
<th>Children under 18 living in the household</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name</td>
</tr>
<tr>
<td>------------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Adults (including grown up children) living in the household</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name</td>
</tr>
<tr>
<td>------------</td>
</tr>
</tbody>
</table>
## Adults (including grown up children) living in the household

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Gender</th>
<th>Date of birth</th>
<th>Ethnicity</th>
<th>Relationship to applicant/s</th>
<th>Details of current employment or education</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Details of other children (under 18) living elsewhere

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Gender (M/F)</th>
<th>Date of birth / death</th>
<th>Ethnicity</th>
<th>Relationship to applicant/s</th>
<th>Other details</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Current employment

<table>
<thead>
<tr>
<th>Current employment or profession</th>
<th>Applicant 1</th>
<th>Applicant 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current employer (if any)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date started</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current hours of work</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5. Previous work or voluntary experience

**Applicant 1**

<table>
<thead>
<tr>
<th>Name and address of organisation</th>
<th>Dates From</th>
<th>To</th>
<th>Job/volunteering title</th>
<th>Please describe the duties and responsibilities of your role</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Applicant 2

<table>
<thead>
<tr>
<th>Name and address of organisation</th>
<th>Dates From</th>
<th>To</th>
<th>Job/volunteering title</th>
<th>Please describe the duties and responsibilities of your role</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
6. Tell us more about you and what support would you like to provide

<table>
<thead>
<tr>
<th></th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Applicant</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>What are your hobbies and interests?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you drive?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have access to a vehicle (please provide details)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have any pets (please provide details)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Why do you want to become a Shared Lives carer?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you have to offer as a Shared Lives carer e.g. skills, life experiences, values, family and social networks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>--------</td>
<td></td>
</tr>
<tr>
<td>What kind of support would you like to provide?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. long term, short term, day support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What age range/s of person would you like to support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many people would you like to support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have a preference of the gender of the person you would support?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any specific needs you are able to support?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any specific needs you are unable to support?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
6. History

Have you or any other member of the household previously applied to become a Shared Lives carer, foster carer, adopter or child minder?

Yes ☐  No ☐

If yes, please give details of

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date</th>
<th>Name and address of organisation applied to</th>
<th>Type of application</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you or any other member of the household previously been a provider regulated by CQC, the Care Inspectorate, RQIA or CSSIW

Yes ☐  No ☐

If yes, please give details of

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date</th>
<th>Name of organisation applied to</th>
<th>Type of application</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you or any other member of the household been involved in any family court proceedings or in any proceedings about children and/or family?

Yes ☐  No ☐

If yes, please give date/s, court and brief details:
<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Court</th>
<th>Court order made (if applicable)</th>
<th>Name of children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. References

<table>
<thead>
<tr>
<th></th>
<th>1st Applicant</th>
<th>2nd Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please note the name, address and telephone number of your GP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employer’s reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please note the name, address and telephone number of your GP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal references</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please give details of two people who you have known for more than 2 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State name and address and telephone number. Also how long they have known you and in what capacity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please note</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relatives or partners cannot act as personal referees</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. Consent and agreements

Applicant 1
(please write full name) on the line below and then sign your name after each of the statements below

__________________________
I declare that I have no criminal convictions or (delete as applicable) / I have criminal convictions that I (even those that are deemed to be spent) am willing to discuss

__________________________
I declare that I know of no conflict of interest that may affect my application as a Shared Lives carer or (delete as applicable) / I am aware of a potential conflict of interest that may affect my application as a Shared Lives carer that I am willing to discuss

__________________________
I consent for detailed checks and references to be taken up to support my application to become a Shared Lives carer. I understand that these checks could involve information about myself of a confidential medical and personal nature.

__________________________
I consent for information about me to be kept by the Shared Lives scheme both in paper and on a computer database

__________________________
I consent to information being passed by the scheme to the regulatory body as required

__________________________
I am eligible to work in the UK and my NI number is:

Signature of applicant                Date
Applicant 2
(please write full name) on the line below and then sign your name after each of the statements below

I declare that I have no criminal convictions or (delete as applicable) / I have criminal convictions that I (even those that are deemed to be spent) am willing to discuss

I declare that I know of no conflict of interest that may affect my application as a Shared Lives carer or (delete as applicable) / I am aware of a potential conflict of interest that may affect my application as a Shared Lives carer that I am willing to discuss

I consent for detailed checks and references to be taken up to support my application to become a Shared Lives carer. I understand that these checks could involve information about myself of a confidential medical and personal nature.

I consent for information about me to be kept by the Shared Lives scheme both in paper and on a computer database

I consent to information being passed by the scheme to the regulatory body as required

I am eligible to work in the UK and my NI number is:

| Signature of applicant | Date |
**Equal Opportunities Monitoring Form**

The scheme wishes to better understand both the age and the increasing variety of backgrounds of its carers. We then will be able to plan how to meet any changing demands for Shared Lives and how to best support our Shared Lives carers and the people they support.

We would ask each applicant to complete this form and return it with your application (in a separate envelope if you wish). This information will be separated on receipt and held in confidence and the Shared Lives panel will not see it. There is no obligation to complete this form and not doing so will have no effect upon your application.

The information we would like is:

<table>
<thead>
<tr>
<th>Shared Lives scheme you are applying to:</th>
<th>Country:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year of Birth:</td>
<td>Gender:</td>
</tr>
</tbody>
</table>

We would also be grateful if you could circle the relevant options below.

Are you registered disabled or consider yourself to have a disability  Yes  No

<table>
<thead>
<tr>
<th>1st carer</th>
<th>2nd carer</th>
<th>1st carer</th>
<th>2nd carer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>ETHNICITY</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>1</td>
<td>White British</td>
<td>9</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>White Irish</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>Any Other White Background</td>
<td>11</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>Mixed White and Black Caribbean</td>
<td>12</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>Mixed White and Black African</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ethnicity</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>-----------</td>
<td>---</td>
</tr>
<tr>
<td>6</td>
<td>6</td>
<td>Mixed White and Asian</td>
<td>14</td>
</tr>
<tr>
<td>7</td>
<td>7</td>
<td>Any Other Mixed Background</td>
<td>15</td>
</tr>
<tr>
<td>8</td>
<td>8</td>
<td>Asian or British Indian</td>
<td>16</td>
</tr>
</tbody>
</table>

**RELIGION**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Religion</th>
<th></th>
<th></th>
<th>Religion</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>20</td>
<td>Christian</td>
<td>24</td>
<td>24</td>
<td>Buddhist</td>
</tr>
<tr>
<td>21</td>
<td>21</td>
<td>Hindu</td>
<td>25</td>
<td>25</td>
<td>Jewish</td>
</tr>
<tr>
<td>22</td>
<td>22</td>
<td>Muslim</td>
<td>26</td>
<td>26</td>
<td>Sikh</td>
</tr>
<tr>
<td>23</td>
<td>23</td>
<td>Any other religion (please state)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SEXUALITY**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Sexuality</th>
<th></th>
<th></th>
<th>Sexuality</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>30</td>
<td>Bisexual</td>
<td>33</td>
<td>33</td>
<td>Gay Man</td>
</tr>
<tr>
<td>31</td>
<td>31</td>
<td>Lesbian/Gay Woman</td>
<td>34</td>
<td>34</td>
<td>Heterosexual/Straight</td>
</tr>
<tr>
<td>32</td>
<td>32</td>
<td>Transgender</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Shared Lives Carer Assessment Form for New Applicants

This document is to be completed by the Shared Lives worker and should be used in conjunction with the Shared Lives carer application form.

1. **Shared Lives scheme**

<table>
<thead>
<tr>
<th>Name of assessor</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Scheme/Line manager</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Phone number</td>
<td></td>
</tr>
<tr>
<td>E-mail</td>
<td></td>
</tr>
</tbody>
</table>

2. **Names of applicants to be approved**

<table>
<thead>
<tr>
<th>Name of applicant 1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of applicant 2</td>
<td></td>
</tr>
</tbody>
</table>

3. **Meetings, training and experience to support application to be a Shared Lives carer**

3.1. **Meetings and interviews with applicant/s**

<table>
<thead>
<tr>
<th>Date</th>
<th>Location of meeting</th>
<th>Topics Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Shared Lives worker summary, comments and feedback**


### 3.2 Meetings and interviews with other household members

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting with</th>
<th>Relationship to applicant/s</th>
<th>Topics covered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback

### 3.3 Meetings and interviews with other people, e.g. friends, family, referees

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting with</th>
<th>Relationship to applicant/s</th>
<th>Topics covered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback

### 3.4 Training or learning done by applicant(s) as part of assessment

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Method and subject of learning</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback
3.5. Voluntary work or other experience gained by applicant(s) as part of assessment

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Experience gained</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback

---

3.6. Meetings attended by applicant(s) as part of assessment

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Meeting attended</th>
<th>Topics covered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback

---

3.7. Written information given to applicant(s) as part of assessment

<table>
<thead>
<tr>
<th>Date</th>
<th>Written information given</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Shared Lives worker summary, comments and feedback
4. Approval sought

Approval being sought including service user group, numbers of people to support, age, gender, type of services to be offered, is approval for a named person

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Specific needs applicant is able to support

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Specific needs applicant is unable to support

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
Private and confidential

Personal profile

Please outline below a profile of you as a person. Think about your strengths and weaknesses, your likes and dislikes, your dreams and fears and what motivates you. If you find it difficult to write about yourself, maybe outline how you think your friends and family would describe you. This exercise is designed to give a picture to the Shared Lives worker and independent panel of the sort of person you are and what makes you tick. This is important if you are to share your life and/or household with a disabled or vulnerable person as a Shared Lives carer. Use as little or as much of the space as you like and feel free to write it by hand or type it, whichever suits you best.
## 5. Other members of the household

<table>
<thead>
<tr>
<th>Understanding of Shared Lives and implications to the household</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Willingness and ability of members of the household to be Shared Lives support carers</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
</table>

## 6. Accommodation and locality

<table>
<thead>
<tr>
<th>Details of the accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of property, description of the property, accessibility, garden or outside space, proposed sleeping arrangements, bathrooms and toilets, details of the local area</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
</table>

### 7. Community and Relationships

**Details of the local community and supplicant relationships**

- Detail local amenities and facilities available locally
- Any relevant community groups operating locally
- Shared Lives carer community networks and network map completed
- Friends and family of the Shared Lives carer who wish to support the Shared Lives arrangement
- Stability of the relationships between the main applicants (if relevant)
- Relationship between household members
- Family lifestyles (day in the life completed)

**Assessor comments**
8. Transport

**Details of transport arrangements**
- Is the applicant/s able to drive
- Do they have access to a vehicle
- Age and type of vehicle
- Local public transport availability

<table>
<thead>
<tr>
<th>Assessors comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

9. People who can support the Shared Lives carer (family friends and others identified who may be able to support the Shared Lives carer)

<table>
<thead>
<tr>
<th>Names of any people who could be a Shared Lives support carer to the main applicant/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support they can offer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessor comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
10. Evidencing knowledge and skills of the applicant/s

10.1. Where and how Shared Lives carers live

<table>
<thead>
<tr>
<th>Balance the needs and lifestyles of all people in the household</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessor’s view of applicant(s) knowledge and skills in this area</td>
<td></td>
</tr>
<tr>
<td>Evidence the assessor has to support this view</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide a healthy and safe place to stay</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessor’s view of applicant(s) knowledge and skills in this area</td>
<td></td>
</tr>
<tr>
<td>Evidence the assessor has to support this view</td>
<td></td>
</tr>
</tbody>
</table>

10.2. Personal skills

<table>
<thead>
<tr>
<th>Communicate effectively</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessor’s view of applicant(s) knowledge and skills in this area</td>
<td></td>
</tr>
<tr>
<td>Evidence the assessor has to support this view</td>
<td></td>
</tr>
<tr>
<td>Build positive relationships with other people</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Assessor’s view of applicant(s) knowledge and skills in this area</td>
<td></td>
</tr>
<tr>
<td>Evidence the assessor has to support this view</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Support people to manage their finances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessor’s view of applicant(s) knowledge and skills in this area</td>
</tr>
<tr>
<td>Evidence the assessor has to support this view</td>
</tr>
</tbody>
</table>

| Support people to access education, employment and leisure facilities |
|------------------------------------------------|---|
| Assessor’s view of applicant(s) knowledge and skills in this area |
| Evidence the assessor has to support this view |
### 10.3. Values

#### Understand and challenge prejudice, discrimination and oppression

<table>
<thead>
<tr>
<th>Assessor’s view of applicant(s) knowledge and skills in this area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence the assessor has to support this view</td>
</tr>
</tbody>
</table>

#### Understand and respect confidentiality and privacy

<table>
<thead>
<tr>
<th>Assessor’s view of applicant(s) knowledge and skills in this area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence the assessor has to support this view</td>
</tr>
</tbody>
</table>

### 10.4. Working with Shared Lives

#### Keep clear and accurate records

<table>
<thead>
<tr>
<th>Assessor’s view of applicant(s) knowledge and skills in this area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence the assessor has to support this view</td>
</tr>
</tbody>
</table>
Understand Shared Lives including roles and responsibilities of Shared Lives carers and schemes
Assessor’s view of applicant(s) knowledge and skills in this area

Evidence the assessor has to support this view

Understand policies, procedures and legal requirements and work positively with Shared Lives scheme to put these into practice
Assessor’s view of applicant(s) knowledge and skills in this area

Evidence the assessor has to support this view

11. Record of checks and references
11.1. Identity

<table>
<thead>
<tr>
<th>Identity</th>
<th>1st Applicant</th>
<th>2nd Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date birth certificate seen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birth certificate number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of photographic evidence of identity seen e.g. passport</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Passport number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date passport seen and verified</td>
<td></td>
<td></td>
</tr>
<tr>
<td>National insurance number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marriage certificate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(to be seen only where the name has changed as a result)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Date marriage certificate seen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evidence of divorce (decree absolute)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date evidence of divorce seen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If applicants have registered a civil partnership, date certificate seen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil partnership number</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 11.2. Checks

<table>
<thead>
<tr>
<th>Protection of vulnerable adults check (if not part of Criminal Record Check)</th>
<th>Applicant 1</th>
<th>Applicant 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enhanced DBS check (England and Wales) or enhanced PVG in Scotland</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Check employment history to account for all gaps and address all issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (if any)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 11.3. References

<table>
<thead>
<tr>
<th><strong>First personal reference</strong></th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Applicant</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person completing reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organisation name and address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date reference completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary of reference</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Second personal reference</strong></th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Applicant</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person completing reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organisation name and address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date reference completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary of reference</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Medical reference</strong></th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Applicant</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person completing reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current employer reference (if applicable)</strong></td>
<td><strong>1st Applicant</strong></td>
<td><strong>2nd Applicant</strong></td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>-------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Name of person completing the reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date Reference/s seen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary of reference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shared Lives worker summary, comments and feedback</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 11.4 Accommodation

<table>
<thead>
<tr>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire Service check completed</td>
<td></td>
</tr>
<tr>
<td>Health and safety checklist completed</td>
<td></td>
</tr>
<tr>
<td>Confirmation that Mortgage lender or landlord in agreement</td>
<td></td>
</tr>
<tr>
<td>Adequate buildings and contents insurance cover</td>
<td></td>
</tr>
<tr>
<td>Shared Lives worker summary, comments and feedback</td>
<td></td>
</tr>
</tbody>
</table>

## 11.5 Transport

<table>
<thead>
<tr>
<th>Date seen</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle registration number</td>
<td></td>
</tr>
<tr>
<td>Current road tax</td>
<td></td>
</tr>
<tr>
<td>Current insurance cover</td>
<td></td>
</tr>
<tr>
<td>Current MOT</td>
<td></td>
</tr>
<tr>
<td>Driving license/s</td>
<td></td>
</tr>
</tbody>
</table>
### Summary of attached information

<table>
<thead>
<tr>
<th>Supporting information attached as part of the assessment pack</th>
<th>Tick if attached as part of this assessment</th>
<th>Attachment number in assessment pack</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application form</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment report</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal reference 1 for 1&lt;sup&gt;st&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal reference 1 for 2&lt;sup&gt;nd&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal reference 2 for 1&lt;sup&gt;st&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal reference 2 for 2&lt;sup&gt;nd&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current employer reference 1&lt;sup&gt;st&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current employer reference 2&lt;sup&gt;nd&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Past employer reference 1&lt;sup&gt;st&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Past employer reference 2&lt;sup&gt;nd&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed checks and references record</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed health and safety checklist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community connections map</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal profile done by 1&lt;sup&gt;st&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal profile done by 2&lt;sup&gt;nd&lt;/sup&gt; applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day in the life of written outline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire Service check</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 12. Assessor's summary and recommendations

<table>
<thead>
<tr>
<th>Summary of applicant/s family circumstances</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Summary of applicant(s) strengths including knowledge, skills, experience and emotional resilience to work as a Shared Lives carer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any other issues</td>
</tr>
<tr>
<td>Summary of learning and development needs</td>
</tr>
<tr>
<td>Summary of matching considerations</td>
</tr>
<tr>
<td>Recommendation of assessor</td>
</tr>
</tbody>
</table>
### 13. Comments from applicants

<table>
<thead>
<tr>
<th>Comments from 1&lt;sup&gt;st&lt;/sup&gt; Applicant on this assessment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of signature</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comments from 2&lt;sup&gt;nd&lt;/sup&gt; Applicant on this assessment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of signature</td>
<td></td>
</tr>
</tbody>
</table>
14. Comments and recommendation from Panel

<table>
<thead>
<tr>
<th>Comments and/or recommendation from panel</th>
<th>1st Applicant</th>
<th>2nd Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature (Panel Chair)

Date

15. Shared Lives scheme manager’s decision

<table>
<thead>
<tr>
<th>Comments and decision of scheme manager regarding approval</th>
<th>1st Applicant</th>
<th>2nd Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Shared Lives Carer Agreement

The Shared Lives carer agreement outlines the role and responsibilities of the Shared Lives carer(s) in working with the Shared Lives scheme and the role and responsibilities that the Shared Lives scheme has in supporting and working with the Shared Lives carer(s). It also sets out the terms and conditions for the Shared Lives carer(s) approved by the Shared Lives scheme.

Terminology used in the Shared Lives carer’s agreement

**Person** means the person requiring support who will be using or living in the Shared Lives arrangement.

**A Shared Lives carer** is a person who, under the terms of a Shared Lives carer agreement provides, or intends to provide, personal care and support. They share their home and their family (and/or community) life and, where necessary, provide accommodation to the person using or living in a Shared Lives arrangement. In Shared Lives day support arrangements, this can be using the home as a base and then visiting the community. The use of the term ‘and/or community’ above takes account of: ‘and’ - that all Shared Lives involves sharing the community life of the Shared Lives carer; ‘or’ - that some Shared Lives carers (e.g. single Shared Lives carers who do not have regular contact with their families) may not consider themselves as having a ‘family life’ to share.

**Shared Lives workers** are individuals employed by a Shared Lives scheme and who have the competencies, qualities and experience needed to carry out the necessary tasks of the scheme including Shared Lives carer recruitment, approval and training; setting up, supporting, monitoring, and reviewing of Shared Lives arrangements.

**Shared Lives scheme manager** is registered with the relevant care regulator and has overall responsibility for the quality and safety of care and support of all Shared Lives arrangements within their Shared Lives scheme. The scheme manager has legal accountability for the final decision on approval of new Shared Lives carers, continuing approval and de-approval of exiting Shared Lives carers.

**Shared Lives schemes** are run by local authorities, health trusts or independent (profit-making or non-profit making) organisations. All Shared Lives schemes are responsible for recruiting and training Shared Lives carers; matching people with suitable Shared Lives carers; making Shared Lives arrangements and providing ongoing support and monitoring of Shared Lives arrangements. The care they provide is mainly for people aged 18+ and in some cases 16+ where they meet the eligibility for adult services or in Scotland are a supported lodging scheme.

**Shared Lives arrangement agreement** is a written agreement made in relation to each individual Shared Lives arrangement. It is an agreement between the person who will be making use of or living in a Shared Lives arrangement, the Shared Lives carer, the scheme and anyone involved in commissioning the service (care manager, social worker, and family member). The agreement incorporates the responsibilities and expectations of all those involved in the arrangement and includes details of the plan of care for the person using the service. It must be signed by all relevant parties before the commencement of the Shared Lives arrangement.

This is a Shared Lives carer’s agreement between

........................................................................................................................................................................

(Name of Shared Lives carer(s))
(Name of Shared Lives service)

The Shared Lives carer(s) agrees:

1. To work in accordance with the aims and objectives of the Shared Lives scheme and its standards of conduct and practice.

2. To support any person using Shared Lives to live the life that they want, to be part of the community, to share family life with the Shared Lives carer(s) and to feel good, stay well and keep safe.

3. To treat the person with respect and dignity and support any person placed into a Shared Lives arrangement to express their views and make choices and decisions.

4. To follow all the Shared Lives scheme’s written policies and procedures and guidelines copies of which are provided in the Shared Lives carer’s Handbook.

5. To promote and protect the health, safety and welfare of any person placed, themselves and others in their household.

6. To receive referrals only through the Shared Lives scheme and to co-operate with the Shared Lives scheme’s procedures for matching and introductions.

7. Not to enter into any private arrangements with individuals or their representatives without the prior agreement of the scheme

8. Not to enter into any arrangement with any other Shared Lives scheme without the prior agreement of the Poole Shared Lives scheme

9. To enter into a Shared Lives arrangement only when they believe that they can meet the person’s assessed needs.

10. To work with the person as outlined in their Service User Plan and the Shared Lives arrangement agreement

11. To agree any daily routines and house rules to the person prior to any introductions to a new Shared Lives arrangement.

12. To enable the person to follow their religious and/or cultural customs.

13. To work in line with any written risk assessment or risk management plan, inform the Shared Lives worker of any additional / newly identified risks for the person and work with the Shared Lives worker and others to find ways to manage those risks.

14. To identify any change in the needs of the person and bring this to the attention of the Shared Lives worker and/or other relevant professionals.

15. To keep and maintain records about the person, their care and/or support, the safekeeping of their money or valuables.
16. To cooperate with the scheme and or any service delegated by them in carrying out health, safety and fire safety checks on their property. Health and safety checks should be seen as a joint exercise between the scheme and the Shared Lives carer and should be reviewed annually and should be done in a way to ensure the safety of all members of the household.

17. To keep records about the person in a secure place and to return all these personal records to the Shared Lives scheme when the arrangement comes to an end.

18. Not to disclose any personal information about the person without his/her agreement, or the agreement of the Shared Lives scheme, or being in line with the Shared Lives scheme’s policy on Confidentiality. This applies regardless of whether the person is in a Shared Lives arrangement, or away from the arrangement, or after the arrangement has ended. Any breaches of confidentiality will be treated as a very serious matter and may lead to the ending of the Shared Lives carer’s approval with the Shared Lives scheme.

19. To inform the Shared Lives scheme straight away about any allegations or concerns or suspicions about the possibility of abuse or neglect relating to the person and to follow the Shared Lives scheme’s guidance on Safeguarding against Abuse and Neglect.

20. Not to use any form of physical restraint on the person unless it is the only means of keeping the person or others around him/her safe and is in line with the Shared Lives service’s guidance for Safe Caring and Restraint. Any incident involving the use of physical restraint must be reported to the Shared Lives service within 24 hours.

21. To follow the Shared Lives scheme’s guidance for Handling Medicines whenever the Shared Lives carer is involved in the safe keeping, handling, recording or administering of medicines to a person, as well as following individual guidelines contained in the person’s Service User Plan.

22. Before considering any use of Shared Lives support carers, to discuss and agree these with the Shared Lives worker. The Shared Lives scheme must check and approve the Shared Lives support carer and the arrangements will be recorded in the Service User Plan and/or Shared Lives Arrangement Agreement. Shared Lives carers are not able to directly employ staff to provide care to the person.

23. To work positively and co-operatively with the person’s family and/or representative and with professionals or other people involved in the life of the person.

24. To engage positively with the regular support and monitoring visits by the Shared Lives worker, allowing access to their homes at all reasonable times.

25. To take up any agreed training or learning opportunities provided by the Shared Lives scheme which are designed to meet the Shared Lives carer’s individual development needs.

26. To take part positively in any reviews concerning the person and in Shared Lives carer reviews.

27. To inform the person about planned visits by the Shared Lives worker and, where appropriate, the Inspector from the CQC.

28. To take part positively in any meetings with the above Inspector(s) who are part of the
29. To inform the Shared Lives scheme (or out-of-hours emergency service) within 24 hours of any serious accident or incident involving the person, including:

- any serious infectious disease in the Shared Lives carer’s home;
- any serious accident or injury or illness of the person;
- any event that may have an adverse effect on the person;
- any theft or burglary in the Shared Lives carer’s home;
- any incident concerning the person which is reported to or investigated by the police;
- any complaint or allegation made by the person against the Shared Lives carer or any other person or against the Shared Lives scheme;
- any unexplained absence of the person from the Shared Lives carer’s home;
- any formal restraint which may restrict or deprive the person of their liberty
- admission to hospital
- the death of the person;

And to confirm any verbal notification in writing

30. To inform the Shared Lives scheme as soon as possible, even if they do not have anyone in a Shared Lives arrangement at the time, of:

- any arrests, cautions or warnings, criminal or civil convictions or motoring penalties;
- any proposed change of address;
- any proposed change of accommodation;
- any change in the composition of the household;
- any change in personal circumstances that may affect their ability to support the person;
- any proposal to have time away from their caring role

and to confirm any verbal notification in writing.

31. To maintain insurance cover that meets the requirements of the Shared Lives service. Specifically:

- public liability insurance (copy to be provided to the service)
- household insurance (copy to be provided to the service)
- motor vehicle insurance (copy to be provided to the service)

32. To fulfil their responsibilities as self-employed people for tax and national insurance purposes.

33. To endeavour to make time for themselves and their family and have regular time apart from the person, when appropriate.

34. To make use of the Shared Lives scheme’s whistleblowing procedure if they have any cause for concern about the conduct or practice of other Shared Lives carers, Shared Lives workers, volunteers or the scheme manager in the Shared Lives scheme, or about the way the Shared Lives scheme operates.

35. To make use of the Shared Lives scheme’s complaints procedure if they believe the Shared Lives scheme has breached any of its responsibilities or if they are dissatisfied with any aspect of the scheme.
36. To end a Shared Lives arrangement by giving written notice to the Shared Lives service of at least 4 weeks.

37. To give 4 weeks' notice in writing to the Shared Lives scheme if they wish to end this Shared Lives Carers Agreement and their work with the Shared Lives scheme.

38. To not act as an appointee for the person.

39. Motability cars should not be used by carers for any purposes other than supporting the client.

The Shared Lives scheme agrees:

1. To provide Shared Lives carers with written information about the aims and objectives and operation of the Shared Lives scheme and the standards of conduct and practice required of them in their role as a Shared Lives carer.

2. To provide a Shared Lives carer's Handbook with essential information and reference documents including copies of relevant policies, procedures and guidelines, and to make sure through training and explanation that the information is understood and easily found in the Handbook.

3. To provide the person who is in a Shared Lives arrangement with essential information about the Shared Lives scheme in a language or format that they can easily understand.

4. To provide information and/or training to Shared Lives carers so that they understand and can fulfil their legal responsibilities, follow safe working practices and support the person effectively.

5. To allocate a named Shared Lives worker to each Shared Lives carer who will be responsible for their ongoing support and for the monitoring and reviewing of their role.

6. To match people referred to the Shared Lives scheme with appropriate Shared Lives carer(s) and facilitate their introduction to the Shared Lives carer(s) and their household/family in line with the Shared Lives scheme's policies and procedures for Matching and Introductions.

7. To make sure before the start of a new Shared Lives arrangement that Shared Lives carers are provided with comprehensive information about the person including a copy of an up-to-date assessment of their needs and wishes and a risk assessment.

8. To make sure before the start of a new Shared Lives arrangement that a Service User Plan and Shared Lives Arrangement Agreement have been agreed with the person, their family or representative if appropriate, the Social worker/Care Co-ordinator, the Shared Lives carer and the Shared Lives scheme.

9. If a new Shared Lives arrangement has been made in an emergency, to provide the Shared Lives carer with enough information about the person to ensure his/her safety and the safety of the Shared Lives carer and others in their household and then to make sure that a Shared Lives Arrangement Agreement and Service User Plan and other documents are provided within 5 working days.
10. To ensure that Shared Lives carers have the skills and knowledge to meet the changing needs of the person, by providing regular support and monitoring visits and reviews as well as training and/or information and/or other development opportunities as required.

11. To provide ongoing support to the Shared Lives carer(s) and to monitor the Shared Lives arrangement through telephone contact and regular visits at a frequency agreed with the Shared Lives carer (but at least three monthly). Unannounced visits may be made to the Shared Lives carer’s home if there are any serious concerns about a Shared Lives arrangement, or the care or support that the Shared Lives carer is providing.

12. To obtain feedback about the Shared Lives arrangement and the Shared Lives carer’s work from the person and/or their family or representative and from professionals that are involved with the person.

13. To provide the Shared Lives carer(s) with clear information about emergency and out-of-hours support that is available to them.

14. To make sure that the Shared Lives carer(s) are able to access any specialist training and/or information and/or aids or equipment that they need to carry out their tasks effectively.

15. To help the person and/or Shared Lives carer(s) to obtain any specialist support or services required by the person.

16. To make sure that any identified unmet needs of the person are brought to the attention of the relevant professionals.

17. To review the Shared Lives arrangement at least annually or whenever there are significant changes in the health or circumstances of the person or the Shared Lives carer(s).

18. To monitor and review the work of the Shared Lives carer at least once a year and to agree an individual learning and development plan for the year ahead, where appropriate.

19. To review and revise the approval status of the Shared Lives carer where agreed and appropriate.

20. To provide written confirmation to the Shared Lives carer(s) of the fee to be paid for each person that they are supporting and how this payment will be made; what the payment is made up of; how any additional costs will be met; and if and how the fee will be altered for any period when direct support is not being provided by the Shared Lives carer e.g. during short breaks

21. To provide support to the Shared Lives carer(s) in obtaining the monies that are due, should there be delay or difficulty

22. To ensure that for the first four weeks absence of the person living in a Shared Lives arrangement because of a hospital stay, Shared Lives carers are continued to be paid in full (recognising that Shared Lives carers will continue to be involved in supporting the person in hospital).
23. To ensure that from four weeks absence of the person living in a Shared Lives arrangement because of a hospital stay, the Shared Lives carers are continued to be paid for accommodation and support but not for board. Where accommodation is funded through housing benefit local authorities will need to consider making an ex gratia payment to cover the loss of income from housing benefit. This arrangement will be reviewed every four weeks until the person returns home or the arrangement ends.

24. To enable Shared Lives carers that are providing longer term accommodation and support to have regular breaks from their caring role, up to a maximum of 6 weeks per year.

25. To promptly investigate all concerns or complaints about the Shared Lives carer by following relevant Shared Lives scheme policies and procedures. This includes alleged breaches of standards of conduct or practice, or breaches of the Shared Lives carer Agreement, or allegations of abuse or neglect.

26. To follow the Borough of Poole multi-agency policy and procedure for Safeguarding Adults as well as the Shared Lives scheme’s policy and procedure for this if there are any concerns or allegations or suspicions of abuse or neglect relating to a person in a Shared Lives arrangement. All such concerns will be investigated.

27. To ensure that if an allegation of abuse has been made against an Shared Lives carer, the Shared Lives carer:
   - Is given clear information about the relevant procedures and their right to legal advice and/or other forms of independent advocacy.
   - Continues to receive support from the Shared Lives scheme.
   - If they are a Shared Lives Plus member, the contact information for someone within Shared Lives Plus who can provide information, advice and support during the allegation.

28. To facilitate peer support between Shared Lives carers, including meetings or learning and development opportunities; this will include asking Shared Lives carers to share their contact details with other Shared Lives carers in the scheme.

29. To end a Shared Lives arrangement having regard to the needs and wishes of the person placed and where appropriate the Mental Capacity Act and Human Rights Act (right to family life) by giving written notice of at least 4 weeks.

30. To end this Shared Lives carers agreement and the Shared Lives carer’s work with the Shared Lives scheme after:
   - a review of the Shared Lives carer has been undertaken by the Shared Lives scheme and
   - on advice from the Shared Lives panel and
   - by giving 4 weeks’ notice in writing to the Shared Lives carer(s).

The Shared Lives carer will be given written information about the reasons for the decision as well as information about how to appeal against this.
I/We ......................................................................................................................................................................
(Name of Shared Lives carer(s))

have read and understand the Shared Lives carer’s agreement between me/us and
......................................................................................................................................................................
(Name of Shared Lives scheme)

and agree to undertake the carer’s responsibilities outlined in this Shared Lives carer’s agreement in so far as it is reasonably possible.

Signature (Shared Lives carer 1): ..........................................................
Date: ..........................................................

Signature (Shared Lives carer 2): ..........................................................
Date: ..........................................................

I ..........................................................................................................................................................................
(Name of Shared Lives worker)

acting on behalf of ..........................................................
(Name of Shared Lives scheme)

agrees to undertake the Shared Lives scheme’s responsibilities outlined in this Shared Lives carers agreement in so far as it is reasonably possible.

Signature(s): ..........................................................
Date: ..........................................................
Guidance on Shared Lives Support Carers

Introduction

1. As a Shared Lives arrangement is intended to provide the individual with a shared life experience with the home and family life of the Shared Lives carer(s) it will normally be assumed that most of their needs, including any personal care needs, will be met by the Shared Lives carer(s). However, it should be recognised that each individual will have needs and a life that extends beyond that of the Shared Lives carer and a proper account of this and how the person will need to be supported in this will need to be included in any plan for the placement. This may involve the person taking part in day time activity outside of the Shared Lives arrangement or going on holiday without their Shared Lives carer but with support. Occasionally they may have high levels of care where some additional support alongside the Shared Lives carer may be appropriate. Support carers may be identified to fulfil some of these additional support needs.

2. Shared Lives carers are part of a paid for regulated workforce and as such do need significant breaks from their caring responsibilities. This may range from having just a few hours off in an evening through to going away on holiday on their own. How the needs of the person in the Shared Lives arrangement are met during these times should be determined on an individual basis and take account of the wishes of the individual. If, for example, the person living in the Shared Lives arrangement wishes to remain at home whilst the Shared Lives carer is away then a Shared Lives support carer who is known to them may live in and substitute for the Shared Lives carer.

3. This guidance is intended to draw a distinction between those Shared Lives carers who have a primary role in providing support and/or care to individuals using Shared Lives arrangements and those Shared Lives support carers who are in a supportive role to them. The term Shared Lives carers will only include approved Shared Lives carers who use their home as a base for the provision of short breaks or respite care, longer term care or day time support. In all cases they will have been approved by the scheme as Shared Lives carers and have a primary caring role in relation to the individual supported.

4. Shared Lives support carers are people who are identified from within the family and community network of the main Shared Lives carer or from elsewhere to provide additional support to or substitute for the Shared Lives carer in the main carer’s home or using that as their base. They will have a specifically defined role in relation to the support they give which will be defined and agreed by the scheme. This does not affect the ordinary (unpaid) friendships and relationships people using Shared Lives may have in their community.

5. There is nothing to prevent approved Shared Lives carers, with the agreement of the scheme, also acting in the role of Shared Lives support carer to other approved Shared Lives carers, without the requirement for further formal approval by the scheme.

Definition of a Shared Lives support carer
6. A Shared Lives support carer is someone on whom the main Shared Lives carer may rely to help them meet the requirements of the Shared Lives arrangement agreement or the individuals personal plan either by:
  ▶ providing additional support alongside the Shared Lives carer, or
  ▶ Substituting for the Shared Lives carer when they are not available.

This may apply whether the Shared Lives support carer is paid or not and assumes that they have agreed to take on a particular responsibility. An example of how a Shared Lives support carer may be used is attached as Appendix 2

7. A Shared Lives support carer is not:
  ▶ a member of the household who has no formal/informal role other than as a family member;
  ▶ someone who is voluntarily supporting the wishes and aspirations of the service user e.g. a neighbour accompanying the person to access a local facility;
  ▶ a member of the person’s own family;

8. Shared Lives support carers have a defined role relating to a duty of care rather than a non-specific or unfocussed role.

9. Anyone other than a Shared Lives carer receiving a payment to provide support or personal care in a Shared Lives arrangement is likely to be a Shared Lives support carer.

10. Shared Lives support carers provide support using the main Shared Lives carer’s home as a base.

Additional Considerations

11. **Someone who may be called upon to support in an emergency or unusual circumstance does not necessarily have to be formally designated as a Shared Lives support carer.** Shared Lives Plus recommends that the following risk-related questions are used in order to determine whether or not the person should be regarded as a Shared Lives support carer:
  ▶ Will the person need personal care?
  ▶ Will the care/support last for more than a day or overnight?
  ▶ Will the person supporting be alone with the person supported for more than a day?
  ▶ Does the person to be supported have capacity under the relevant mental capacity legislation for the country?

N.B: It is conceivable that as part of everyday life any member of the public may find themselves needing to act in an emergency to protect the safety of others. Where it has not been possible to anticipate a situation then people should be expected to act reasonably to ensure the safety of everyone concerned.

12. If the person has no personal care needs, the support is one-off, does not involve an overnight stay of more than one night in any one month, will be provided in a place where others are about and the person supported is able to communicate their wishes then it should not be necessary to designate the person as a Shared Lives support carer.
13. If the person has personal care needs which the supporter is expected to meet, and involves an overnight stay or time alone with the supporter and the person to be supported lacks capacity, then the person providing support should be designated as a Shared Lives support carer.

14. For situations that fall between these two extremes a balanced judgement will need to be made about whether the person should be regarded as a Support carer. This judgement will need to take into account the balance of probability of risk to the safety, wellbeing or security of both the person being supported and the supporter.

Recruitment
15. Shared Lives support carers can be identified either by the Shared Lives carer or the scheme. Identification most commonly will take place:
- During the Shared Lives carer assessment when the scheme and potential carer think about the key people that will be relied on to support the work of the Shared Lives carer.
- In response to a particular need for additional support.
- Where the scheme is looking to provide more effective support to their Shared Lives carers. In this situation Shared Lives support carers may be part of a bank of Shared Lives support carers who can be deployed flexibly to support either specific or a group of Shared Lives carers.


Assessment of Shared Lives support carers
17. The assessment process should include:
- Completion of an application form
- Checking proof of identity – including right to work in the UK.
- Obtaining references and checks as outlined in Appendix 1.
- A Criminal Record check – following appropriate guidance from the DBS in England and Wales and equivalent body in Scotland and Northern Ireland
- One or more interviews – as suggested in Appendix 1.

A proportionate approach needs to be adopted which focuses on providing evidence that the applicant has the knowledge and skills required to meet the needs of the named individual to be supported and which takes into account the level of support they will be giving and whether that support will be provided alone or in the company of the main Shared Lives carer. It should also take into account the quality of any relationship between the potential support carer and the person to be supported and their wishes and feelings about the support to be provided. Any Shared Lives support carer(s) substituting overnight for the Shared Lives carer, other than an already approved Shared Lives carer should be subject to the full assessment process as outlined in Appendix 1.

Meeting the learning needs of the Shared Lives support carer
18. The focus should be on ensuring that the Shared Lives support carer has the knowledge and skill needed to provide high quality and safe support to the individual:
- Any learning needs of the applicant should be identified as part of the assessment process.
- The applicant’s values and principles should be explored as part of the assessment process.
The approach should be practical – shadowing, if appropriate, and identifying and utilising transferrable skills gained in other family, life and/or work situations.

Learning from the main Shared Lives carer and the person being supported about how to meet their needs.

**Shared Lives support carer approval**

19. There are no regulatory requirements to involve the Shared Lives Panel in the approval process for Support carers.

20. Approval should be by the scheme Manager or a designated person from the scheme who is not the assessor.

**Payments to and employment status of Support carers**

21. The scheme should have written guidelines on the level of payments to be made to Shared Lives support carers. Across the UK payments range from expenses only (volunteer Shared Lives support carers) to payment levels equivalent to that of the main Shared Lives carer. Where Support carers are paid as employees it should be noted that the National Minimum Wage will apply.

22. Method of payment employment and tax:
   - Any payment should be paid direct to the Shared Lives support carers by the scheme and usually this will be on a casual employment basis.
   - Where the Shared Lives support carer is substituting for the main carer by living in at the Shared Lives carers home whilst the Shared Lives carer is away then the scheme should take full responsibility both for agreeing and funding the arrangement taking account of any applicable employment law.
   - NB If the payment were included in the fee paid to the main Shared Lives carer to be passed on to the Shared Lives support carer this would risk the Shared Lives carer being seen as an employer of the Shared Lives support carer. This could have a consequent impact upon tax and National Insurance treatment and public and employer insurance requirements and also give them all of the responsibilities of an employer. It could also risk them being viewed by the Regulator as a Care Home with all of the consequences attached to that.
   - Including Shared Lives support carer’s charges within the main Shared Lives carer’s fees will also increase the likelihood of the main carer’s payment being above the agreed amount under HMRC’s simplified tax arrangement and therefore that carer becoming liable to pay tax.
   - The amount should be fair, reasonable and proportionate to the level of support given.
   - The amount payable needs to be clearly stated.

*N.B. There is a need to clarify whether a Shared Lives support carer can be treated as self-employed and Shared Lives Plus are currently seeking legal advice on this matter.*

23. Any income, no matter how small, received for providing any type of work including care and/or support may be declarable to HMRC. This will either be through the PAYE system as a full time part time or casual employee or by self declaration as a self employed person registered with HMRC. Determination of whether someone is directly or self employed is subject to guidance by HMRC. Key questions which can help determine whether someone is employed or self employed are listed below and more detailed guidance can be found at: [www.hmrc.gov.uk/employment-status/#1](http://www.hmrc.gov.uk/employment-status/#1)
“As a general guide as to whether a worker is an employee or self-employed; if the answer is ‘Yes’ to all of the following questions, then the worker is probably an employee:

- Do they have to do the work themselves?
- Can someone tell them at any time what to do, where to carry out the work or when and how to do it?
- Can they work a set amount of hours?
- Can someone move them from task to task?
- Are they paid by the hour, week, or month?
- Can they get overtime pay or bonus payment?

If the answer is ‘Yes’ to all of the following questions, it will usually mean that the worker is self-employed:

- Can they hire someone to do the work or engage helpers at their own expense?
- Do they risk their own money?
- Do they provide the main items of equipment they need to do their job, not just the small tools that many employees provide for themselves?
- Do they agree to do a job for a fixed price regardless of how long the job may take?
- Can they decide what work to do, how and when to do the work and where to provide the services?
- Do they regularly work for a number of different people?
- Do they have to correct unsatisfactory work in their own time and at their own expense?” (Extract from www.hmrc.gov.uk/employment-status/#1)

In the majority of cases paid Support carers will have employed status.

NB Separate guidance on Shared Lives carer payments is available

**Insurance**

24. Shared Lives support carers will need to be covered by public liability insurance. The Shared Lives scheme and the main Shared Lives carer should check to see whether this is the case and under what circumstances the Shared Lives support carer is covered by any insurance:

- Shared Lives Plus’ recommended public liability insurance policy gives public liability cover for the main carer/s and any Shared Lives support carers identified in the Shared Lives arrangement agreement, the Service Users Plan or other similar document
- Across the UK, many schemes (or their host organisation or local authority) provide the public liability cover for Shared Lives support carers.
- Shared Lives support carers that are not included in a Shared Lives carer’s policy or not covered by the scheme’s policy will need their own public liability cover. Shared Lives Plus’ insurance brokers Towergate can advise on this

**Support, monitoring, review**

25. Support and monitoring should be proportionate to the level and frequency of support provided by the Shared Lives support carer but should help to ensure that s/he is not isolated and has opportunities to take part in key scheme activities e.g. Shared Lives carer support groups, social events, newsletters, learning opportunities(proportionate to level of involvement).

26. Opportunities for assessing the performance of the Shared Lives support carer could be provided by:

- Regular monitoring visits (particularly including visits when the main Shared Lives carer is away).
- Feedback from the Shared Lives carer at the end of each period of support.
Consideration within the Shared Lives carer’s review (which provides an opportunity to evaluate the quality of the support provided by the Support carer) and in placement reviews.

Agreements with Shared Lives support carers
27. There should be an individual support carer agreement (based on the Shared Lives carer agreement) which should include:
   - Terms and conditions (a simplified version of carer agreement);
   - Performance expectations, monitoring, disputes and termination;
   - Level and method of payment.

   Where the Shared Lives support carer is directly employed by the scheme, then the terms and conditions will be those that are standard for casual employees.

28. General terms should also be included in the main Shared Lives carer agreement. These terms should include:
   - The level of support that will be provided to the Shared Lives carer.
   - How that support will be arranged, including any flexibilities to be attached to the arrangement.
   - The cost of that (if any) to the Shared Lives carer.

29. Specific terms of support for the individual should be included as a section of the Shared Lives arrangement agreement.

Arranging Support
30. Arrangements which rely upon large input from Shared Lives support carers can indicate that there has been an incorrect assumption in putting a care package together that Shared Lives can offer 24/7 support. A Shared Lives arrangement can provide home and family life, and then there should be separate consideration given during care planning processes to the provision of any day support to which the individual is eligible. It is unlikely to be in the individual’s interests, nor a reasonable expectation of a Shared Lives carer, that substantial day support is provided by the same Shared Lives carer. Instead this should be sourced separately or the scheme may be able to offer day support from another Shared Lives carer. Shared Lives support carers should in most instances only be used to directly support or substitute for the main Shared Lives carer.

31. The arrangements for the level of support provided by the Support carer(s) to the main Shared Lives carer should be agreed and endorsed by the scheme and should:
   - set out the amount of time and level of support to be given ensuring that consideration be given to the need to build in flexibility
   - specify that any overnight absence of the main Shared Lives carer must be notified to the scheme;
   - make it clear that any serious incidents occurring during a period of support by the Shared Lives support carer must be notified to the scheme in accordance with any regulatory requirement;
   - Specify that whilst the need for additional support may come from the Shared Lives carer the scheme is responsible for agreeing with whoever is paying the level of any additional support to be given.
Appendix 1

Recruitment of Shared Lives support carer’s
Where a person has been identified as a Shared Lives support carer the following process should be followed:

Shared Lives application form
The Shared Lives support carer application form should include:
- basic information on the applicant
- previous addresses (if lived in present address less than 5 years)
- A formal declaration by the applicant of any criminal or civil convictions including current proceedings and those deemed to be spent – or information required by the DBS in England, Wales or Northern Ireland or Disclosure Scotland
- Written consent from the applicant for the appropriate checks and references to be taken up
- A statement on the form which alerts the applicant to the fact that information will be kept on a computer database.

References and checks
The Shared Lives scheme should only approve Shared Lives support carers who have regular and unsupervised contact with service users following successful completion of checks and satisfactory references and the following:
- original formal proof of identity and right to work in the UK;
- Health Checklist and follow up GP reference only where appropriate;
- Personal references, (employer’s reference, at the discretion of the Shared Lives scheme).
- Disclosure check, if eligible and any other Safeguarding check required by regulation.

Assessment interview(s)
The Shared Lives scheme should have an agreed format for the assessment interview, which should be provided in writing at the time of application. This should include:
- an assessment of the skills and experience of the applicant;
- the current relationship between the applicant and the person in the shared lives arrangement to whom they will be offering support;
- the applicant’s understanding of the care needs of the person to whom they will be offering support and an assessment of their ability to meet those needs;
- an assessment of any learning needs and how those needs are to be met.

Preparation and Information
The Shared Lives scheme should provide applicants with the necessary information and training to ensure that their support to the person in the placement is of a high quality and compliant with relevant legislation.

Approval
The Shared Lives scheme should have written guidelines for the approval process and a copy of these guidelines should be given to the applicant. The decision as to approval should be made by a suitably qualified and experienced person, usually the scheme Manager. The person approving should never also be the assessor.
Appendix 2

Shared Lives support carers – a practical example

John and Jane are Shared Lives carers with three people living with them. All three are people with mental health problems. Two have capacity and one needs assistance with major decisions from an advocate. If John and Jane want to go on holiday without the people living with them they are given choice about whether they wish to stay at home with a Support carer living in or to have a break elsewhere. Usually their choice is to remain at home. John and Jane have Support carers who are from their family and neighbourhood who can fulfil this role and who have been approved to do this by the scheme. Everyone is happy with this arrangement and for John and Jane they are leaving the people with trusted friends or family who are also known to the service users. For the people themselves they are able to carry on their lives uninterrupted. This arrangement also works for trips out where one person either may not want to join in a family outing. It also works where one person needs to be taken somewhere and either John or Jane aren’t around to stay with the others.

John and Jane’s scheme does not pay the full fee amount to a Shared Lives support carer on the basis that some bits that make up a fee such as living expenses/household bills are still being paid by the main carer whilst they are away. The main Shared Lives carer validates a claim for payment for the time spent and this is submitted to the scheme. Payment is then made direct to the Support carer. An agreed amount of total support is agreed as part of the arrangement agreement but this can be used flexibly, which works well for everyone. John and Jane know that if things change then the amount of support they can use could increase or decrease. John and Jane keep a diary record of the amount of support they use and when they are going to be away for more than a week they are required to inform the scheme. They also ensure that the Support carers are able to contact them or the scheme whilst they are away.

One of the people living with Jane and John is a keen supporter of the local rugby club. One of the neighbours who is well known to the person and John and Jane takes the person with him to the home games. This is not treated as a Support carer arrangement but as an ordinary friendship.
Supporting and Reviewing Shared Lives Carers

The Poole Shared Lives scheme values its Shared Lives carers and depends on them to provide good quality support and care to people in Shared Lives arrangements. We therefore regularly review the work of Shared Lives carers and provide ongoing support for them in order to make sure they have the resources, skills and knowledge to fulfil their responsibilities and meet the needs of the people they are supporting.

How will this happen?

The role and responsibilities of Shared Lives carers are outlined in the Shared Lives carer agreement, together with those of the Scheme. The support that Shared Lives carers can expect from the Scheme includes:

- induction training or other learning opportunities which meet the requirements of the sector skills council for the country’s common induction standards
- a full review of their work and approval status at least once a year (and more often if necessary) which includes a learning and development plan for the coming year
- ongoing learning and development opportunities which can be tailored to the Shared Lives carer’s individual learning style
- having a named Shared Lives Worker
- regular telephone calls and visits (at least once every 3 months) from their own Shared Lives Worker
- regular reviews of the person’s Service User Plan and Shared Lives arrangement agreement so that the person’s changing needs and wishes can be responded to, including whether the arrangement should continue
- the provision of a Shared Lives carer’s handbook containing essential information about the aims and objectives and operation of the service and reference documents including copies of relevant guidance and procedures
- regular breaks up to a maximum of 6 weeks per year for Shared Lives carers who are providing long-term accommodation and support for a person
- facilitating peer support between Shared Lives carers including meetings

The annual review will cover:

- the Shared Lives carers’ work with each person they have been supporting
- feedback from the person(s) using or living in Shared Lives arrangements with the Shared Lives carer, and feedback from their family or representative and their Care Manager and other relevant professionals
- an overview of the Shared Lives carers’ achievements during the past year
- any outstanding objectives or actions from the previous year
- the records they have been keeping
- evidence of maintaining and continuing to develop the knowledge and skills required for their work
- their learning and development needs for the coming year and how these will be met
- their accommodation and updating of any risk assessments relating to this
- their current health and lifestyle and family circumstances
- the views of others in their family or household
- any required update of formal checks
- the categories of their approval and whether these should be changed
- their experiences of being part of the Scheme and any comments or suggestions they have for improving the service.

Shared Lives carers will be given a copy of written guidelines for the review and the date will be arranged well ahead so that they have an opportunity to prepare for this. They will also be able to comment or add to the written report of the review and will be given a copy of the final report.
Additional reviews will be carried out if any serious complaints or concerns have been expressed about the working practices or conduct of the Shared Lives carers, or if an allegation of abuse or neglect has been made against them and upheld after investigation, or if their health or family circumstances have changed significantly.

If the review of the Shared Lives carers indicates that there may be reasons to change or end their approval the review report will be presented to the Shared Lives Panel for a recommendation which will inform a decision by the Scheme manager or other senior manager. The Shared Lives carers will be given information about their right to appeal against the decision and how to do this.
<table>
<thead>
<tr>
<th>Name of Carer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Shared Lives Officer:</td>
</tr>
<tr>
<td>Date of last monitoring:</td>
</tr>
<tr>
<td>Date of this monitoring:</td>
</tr>
<tr>
<td>People spoken with:</td>
</tr>
<tr>
<td>Type of Contact:</td>
</tr>
<tr>
<td>Long Term Client Name</td>
</tr>
<tr>
<td>----------------------</td>
</tr>
<tr>
<td>Agreed Goals</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Outcomes Achieved</th>
<th>Outcomes outstanding</th>
<th>Planned Actions/ New Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staying Safe</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effective Wellbeing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Well-led</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long Term Client Name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agreed Goals</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Staying Safe</th>
<th>Outcomes Achieved</th>
<th>Outcomes outstanding</th>
<th>Planned Actions/ New Outcomes</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Effective Wellbeing</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Caring</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Responsive</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Well-led</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long Term Client Name</td>
</tr>
<tr>
<td>-----------------------</td>
</tr>
<tr>
<td>Agreed Goals</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Outcomes Achieved</th>
<th>Outcomes outstanding</th>
<th>Planned Actions/ New Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staying Safe</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effective Wellbeing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Well-led</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respite placement in last 3 months</td>
<td>Please list Clients who stayed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>--------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Please give examples from your practice</td>
<td>Outcomes Achieved</td>
<td>Outcomes outstanding</td>
<td>Planned Actions/ New Outcomes</td>
</tr>
<tr>
<td>Staying Safe</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effective Well being</td>
<td></td>
<td></td>
<td>.</td>
</tr>
<tr>
<td>Responsive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Well-led</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Introductions during the last 3 months</td>
<td>Conclusions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>-------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Continuous Professional Development incl. attendance at Carers Meeting</th>
<th>Dates:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Completed</td>
<td></td>
</tr>
<tr>
<td>Training needs identified</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Changes in Household or Services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Any other issues e.g. Safeguarding concerns</td>
</tr>
<tr>
<td>--------------------------------------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Annual Leave Requests</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Carer feedback of Scheme support and Carers meetings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Officer Signature:</th>
<th>Carer Signature:</th>
<th>Date of next Meeting:</th>
</tr>
</thead>
</table>
### Shared Lives Carer Annual Review

<table>
<thead>
<tr>
<th>Name of Carer</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address of Carer</td>
<td></td>
</tr>
</tbody>
</table>

| Name of Shared Lives Officer |  |
| Date of last Review |  |
| Date of this Meeting |  |

| Named Support Workers linked to Carer |  |

<table>
<thead>
<tr>
<th>Type of Registration</th>
<th>□ Long Term</th>
<th>□ Short Term Respite</th>
<th>□ Both</th>
<th>□ Support Work</th>
<th>No. of Service Users approved for per type of Registration</th>
<th>Long Term</th>
<th>Respite</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Names of Service Users who are linked with this carer</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
</tr>
</thead>
</table>
Since the last support and monitoring visit, how is the Service User supported to experience care that is:

<table>
<thead>
<tr>
<th>STAYING SAFE</th>
<th>By safe, we mean that people are protected from abuse and avoidable harm. In Shared Lives this means that people are supported to make informed choices and take risks and are protected from physical, psychological and emotional harm, abuse, discrimination and neglect.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic Wellbeing</td>
<td>Supported to manage money, budget, complete benefit forms, financial audits of ledgers and mental capacity assessments.</td>
</tr>
<tr>
<td>Medication Safety</td>
<td>Prompting or administration, MARS chart completion, check of controlled medication, Storage, prescription reordering, Risk assessments, mental capacity assessment.</td>
</tr>
<tr>
<td>Living in a safe and clean environment:</td>
<td>Hygiene and infection control measures, fire safety, and accessibility of home, H&amp;S, risk assessments. Care records completed and incidences noted. Equipment, food hygiene</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EFFECTIVE WELL BEING</th>
<th>By effective, we mean that people’s care, treatment and support achieves positive outcomes, promotes a good quality of life and is based on the best available evidence. In Shared Lives, this means that people are supported to live their lives in the way that they choose and experience the best possible health and quality of life outcomes.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have sensitive and individualised person centred care:</td>
<td>Support Plan review, Outcomes led, person centred, Personal care with respect &amp; dignity, cultural needs are acknowledged, assistive technology, confidentiality, working with Partners</td>
</tr>
<tr>
<td>Keep well, healthy and risks are managed:</td>
<td>Medical health monitored, general fitness, diet, risk and behaviour management, registered with GP, dentist, optician and Chiropodist</td>
</tr>
</tbody>
</table>
**CARING**

By caring, we mean that carers involve and treat people with compassion, kindness, dignity and respect. In Shared Lives, this means that people, their families and carers experience care that is empowering and provided by staff that treat people with dignity, respect and compassion.

| Service Users are able to express their views & make choices: | Listened to, communication methods, Activities, clothes, food & drink choices, MCA, empowered and Best Interest decisions, given information in appropriate formats, |
| Service Users are empowered, encouraged to be independent and can do meaningful activities in the community and make a positive contribution. | Able to make choices, learn independent living skills and develop new skill’s, choose activities they want to do, participate in the community such as attend social clubs, do voluntary or paid work. Promotion of dignity & respect. |
| Develop and maintain relationships: | Contact with family, friends, opportunities to develop new friendships and social groups, Integrate as part of SL family, being included and involved in family activities. |

**RESPONSIVE**

By responsive, we mean that services are organised so that they meet people’s needs. In Shared Lives this means that people get the care they need, are listened to and have their rights and diverse circumstances respected.

| Expression of Service User views | MCA record, Views are listened to, respite survey returns, Support Plans reviewed, visits, end of life, |
| Family Carer’s views | Respite feedback, participation in client annual reviews, ongoing support needs, placement developments and future plans |
| Issues | Communication, telephone calls, e-mails, reports, Social Worker feedback, meeting essential standards |
**WELL-LED**  
By well-led, we mean that the leadership, management and governance of the organisation assures the delivery of high-quality, person-centred care, which supports learning and innovation, and promotes an open and fair culture. 

In Shared Lives, this means that management and leadership encourage and deliver an open, fair, transparent, supporting and challenging culture at all levels.

<table>
<thead>
<tr>
<th>Scheme</th>
<th>Comments</th>
<th>Action By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Changes in legislation, practice, guidance, information, client engagement</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Carer</th>
<th>Comments</th>
<th>Action By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Carers health and wellbeing, change in circumstances, issues impacting clients or scheme, support requirements, annual leave, Carers meetings, Training, candour, information sharing</td>
<td></td>
</tr>
</tbody>
</table>

**Training completed since last review:**

**Impact of continuous professional development on supporting people and service provision:**

**New Training needs:**

---

**Shared Lives Records Audit**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Comments</th>
<th>Action By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placement Agreement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service User Plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication Records</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Licence Agreements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risk Assessments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Records</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transport Recording Form</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Carer Profile

<table>
<thead>
<tr>
<th>Annual Leave</th>
</tr>
</thead>
</table>

## Health and Safety Documentation

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Comments</th>
<th>Action By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Liability Insurance cert.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Car Insurance cert.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gas Safety cert.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>House and Content Insurance cert.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DBS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pets risk assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire evacuation plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health and Safety check</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Carer feedback

<table>
<thead>
<tr>
<th>By whom</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>What is going well?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Areas for improvements?</td>
</tr>
<tr>
<td>Any advice/ support required?</td>
</tr>
<tr>
<td>Are you satisfied with the Support from the Scheme?</td>
</tr>
</tbody>
</table>
### Evaluation of last years action plan

<table>
<thead>
<tr>
<th>What was the plan?</th>
<th>Has this been achieved?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Action plan

<table>
<thead>
<tr>
<th>What are your Aims and Goals for next year?</th>
<th>By whom</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Service User feedback

General Feedback from Commissioners, Clients and Families and Advocates including compliments or complaints:
<table>
<thead>
<tr>
<th>Shared Lives Officer feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Registered Manager feedback</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Monitoring form completed by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Review</td>
</tr>
<tr>
<td>Carer Signature</td>
</tr>
</tbody>
</table>
Close Family as Shared Lives Carers

There is no regulatory reason for a close family member to not be approved as a Shared Lives carer in England, Scotland or Northern Ireland. In Wales the regulation is different and it states that family members cannot be a Shared Lives carer for another family member.

Although there are risks and issues which would need to be addressed if this were to happen, for some people a Shared Lives arrangement with a close family member is what the person would chose and may result in the best outcomes for the individual.

Close family members who apply to be Shared Lives carers in order to support their relative, may do so in order to be assured of having on-going support and advice both for themselves and the relative they care for. The Shared Lives carer payment may also clearly be a contributory factor for family members applying to become Shared Lives carers.

However, introducing a social care element into a family dynamic may be problematic. For example, attending training, having to keep records, such as financial and medication, may not be seen as part of normal family life and some family members may be reluctant to see this as a necessary part of their role. Some family members may find it difficult to be challenged on their approach to supporting their relative.

It should also be borne in mind by schemes that the person living with a close family member will not be eligible for Housing Benefit which has implications for the funding of the Shared Lives arrangement.

There could be occasions when it is necessary, for whatever reason, to end the Shared Lives arrangement and this could result in the very significant risk that an individual's most important family relationships being affected or put under pressure.
Contact Information