

Since the first 'adult placements' over 40 years ago, Shared Lives has grown into a flexible, personal model of care. One which draws its strength not only from the individuals and organisations within it, but from the connections between the different parts of the network. Here's an illustrated guide to how it all fits together.

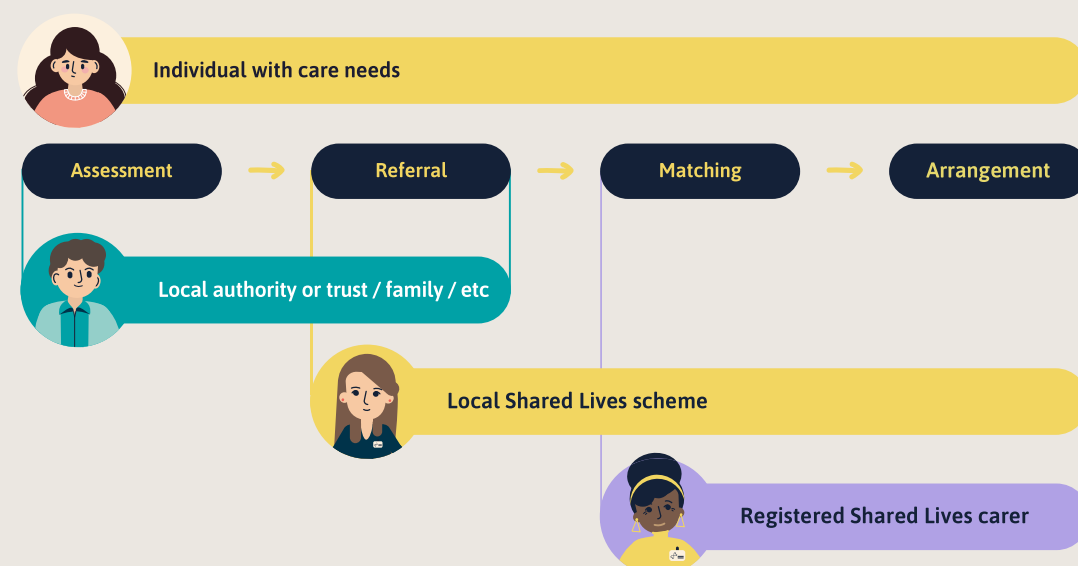
## Shared Lives and the supported person



At the centre of every Shared Lives arrangement is someone who needs support. They are given this support by a network of people and organisations which could include, social services, the NHS, charities, the DWP, their friends and family, personal assistants, and of course their Shared Lives scheme and carer.

Shared Lives arrangements can last for years, or even decades, but they have to start somewhere, and the path to Shared Lives goes through several steps.

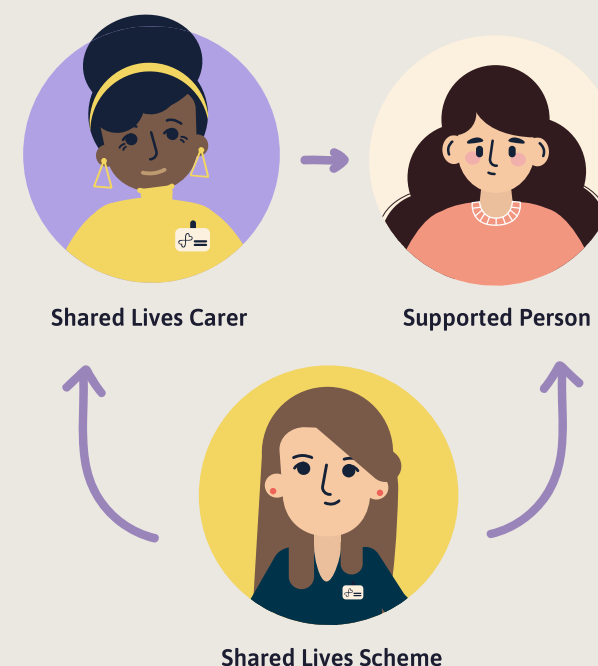
## The path to Shared Lives



In almost all cases, the path to Shared Lives begins with an assessment of someone's needs. This could be a formal assessment by a local authority, NHS, or HSC trust, or sometimes an informal assessment by the person's family, or the person themselves.

The person looking for support is then referred to a local Shared Lives scheme. From there the scheme begins the matching process, introducing suitable Shared Lives carers, and giving all participants the time and space to get to know each other, before making a long-term commitment.

## The role of the Shared Lives scheme



Shared Lives is a specific form of care, defined by the care regulator in each nation (Care Quality Commission, Care Inspectorate Scotland, Care Inspectorate Wales and the Regulation and Quality Improvement Authority) as a service provided by a Shared Lives scheme.

So, while Shared Lives carers are the people delivering Shared Lives care, the scheme, as the provider, carries the administrative and regulatory burden.

Once everyone is happy to go ahead with the match, an arrangement agreement is drawn up between the person using the service, the Shared Lives carer, the scheme, and anyone else involved in commissioning the service (e.g. a family member).

Every path, every arrangement, and every network of support is unique. But they all share the crucial element - the Shared Lives schemes and values of personal matching and mutual benefit.

Some elements of Shared Lives support are what are known as 'regulated activities'. For instance, helping someone with washing or bathing - either physically, or through prompting and supervision - falls under the regulated activity of 'personal care'.

Schemes that provide personal care must, by law, be registered with the care regulator, and regularly inspected. However, individual Shared Lives carers do not need to be registered with the care regulator, because they are assessed, approved and supported by the scheme.

Schemes are also legally responsible for the quality and safety of care in each of their Shared Lives arrangements. It is their duty to monitor care and safeguard those receiving care.

Schemes are responsible for:

- Recruiting, assessing, approving and training Shared Lives carers
- Matching people who need support with suitable Shared Lives carers
- Supporting and monitoring Shared Lives arrangements

## Shared Lives schemes around the UK

**There are 150 Shared Lives schemes in the UK. Two thirds are run directly by the local authority in an area, and the rest are independently run by charities or a Community Interest Company (CIC).**

Since most Shared Lives arrangements are funded through the local authority/Health and Social Care Trust (HSC) social care provision, there is often a strong link between the location of a Shared Lives scheme and the boundaries of the local authority/HSC. In many cases there is one scheme per local authority/HSC and one local authority/HSC per scheme - but it's not like that everywhere.

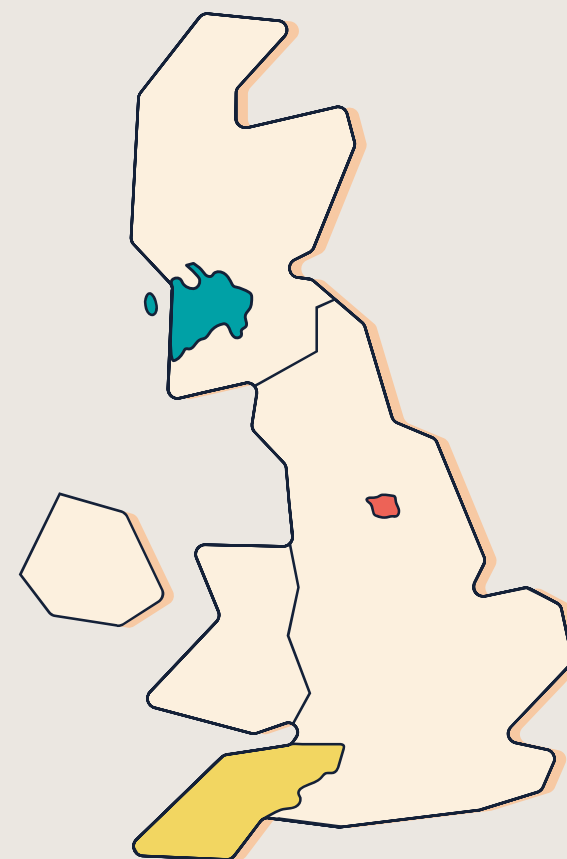
Some schemes cover a large geographic area and more than one local authority, like Shared Lives South West and Cornerstone in Scotland. Other areas, like Leeds, have more than one Shared Lives scheme. And there are still a few places in the UK where there is no Shared Lives provision at all.

Schemes vary considerably in size too. There are some schemes with just a handful of Shared Lives carers supporting a handful of people, and others with more than 200 Shared Lives carers or 300 supported people. Some schemes have a sizeable proportion of carers who only do day support or short breaks, while others only have carers who offer long term support.

Since Shared Lives can be suitable for people with a wide range of support needs, different schemes can have vastly different profiles. **75%** of people supported in Shared Lives in England have support needs related to a learning disability, autism, or Asperger's, but in Scotland, **50%** of people living or visiting a Shared Lives carer have support needs related to old age or dementia. And while people with support needs related to mental ill health make up only **2%** of placements in Scotland, they account for **7%** of placements in England and more than **10%** in Wales.

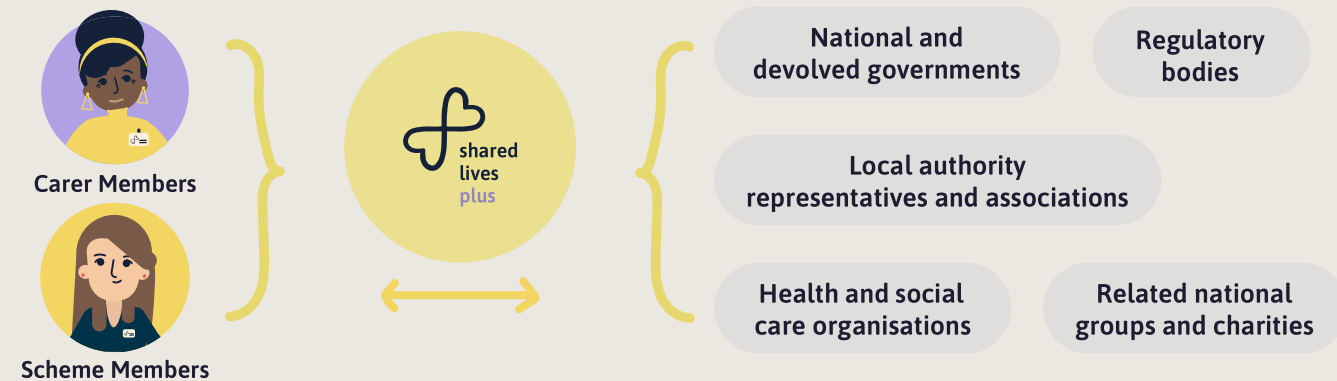
With this much variety, there really is no such thing as a 'typical' Shared Lives scheme, but that's not necessarily a bad thing. Trying to standardise every Shared Lives scheme would be like trying to standardise every Shared Lives arrangement. The strength of the model is in its flexibility, and in the ability of the network to adapt to the needs of the individuals it supports.

Everyone supported in Shared Lives should be able to expect the same high standard of care, and every Shared Lives carer should feel confident and secure in their role, wherever they are in the country – and that's where we come in.



- Cornerstone ● Leeds
- Shared Lives South West

## Shared Lives Plus



Shared Lives Plus is the only membership charity working for Shared Lives carers and schemes across the whole of the UK. We're here to provide a central hub of support and information for the rest of the network - including Shared Lives schemes and carers, social workers, regulatory bodies, and government ministers.

We talk to our members to understand what's happening at a local level, we connect schemes and carers to each other to share and develop best practice, and we provide a

national voice, and single point of reference, for people outside Shared Lives.

We want to grow Shared Lives into a popular mainstream option for people across the UK, and we are delighted that Sajid Javid the Secretary of State for Health and Social Care has enthusiastically supported the Shared Lives model. In his recent speech on health and social care reform he announced that the government "will work with local authorities to help grow their Shared Lives scheme".

## Shared Lives ... And?

Despite the name, Shared Lives is only one part of what we do. Our mission is to build communities where everyone lives a full life regardless of the support they need, and our vision is a kinder, stronger society built on sharing our lives and our homes.

