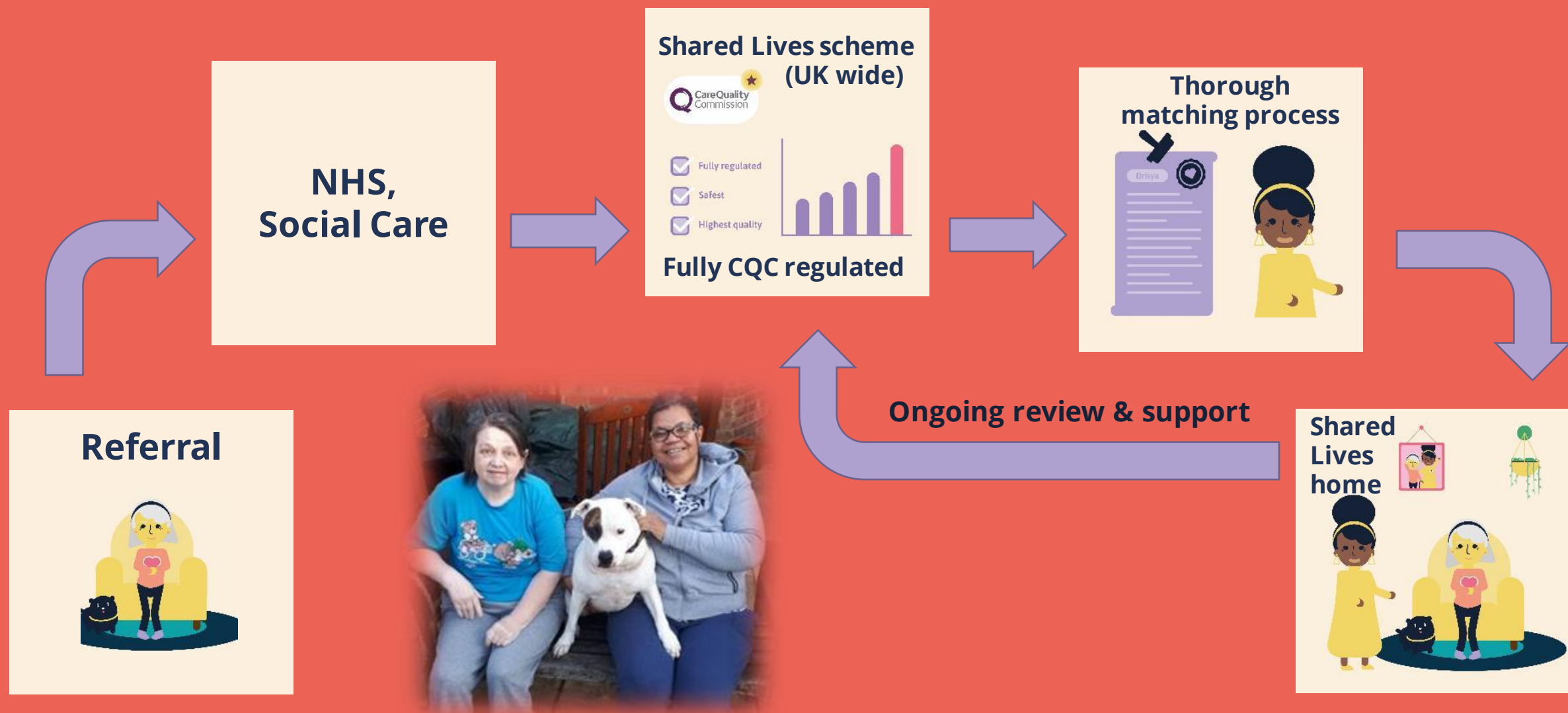


Shared Lives Plus East ADASS



How Shared Lives works



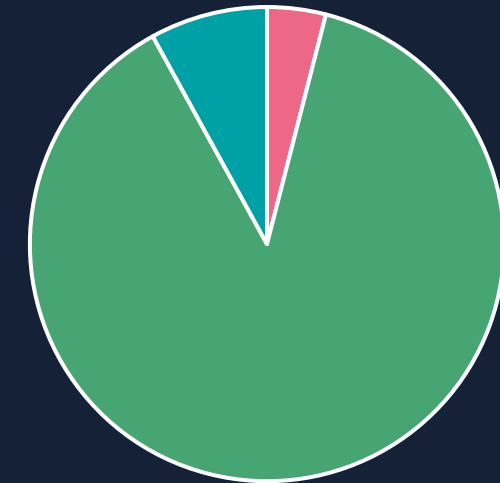


Evidence



- National outcomes tool
- CQC: 96% good/outstanding
- £16-34,000 per person lower cost
- Quality Framework, Charter
- 40 year track record

Shared Lives scheme CQC ratings



■ Inadequate ■ Requires improvement ■ Good ■ Outstanding



Shared Lives stats (2021)



In the UK:

- 142 Shared Lives schemes
- 9,000 Shared Lives carers enable...
- 12,500 people to enjoy lives with people they've chosen and who have chosen them.

Shared Lives carers support:

- 8,500 people with a learning disability
- 660 people with autism
- 460 people living with dementia
- 590 people with a physical impairment
- 950 people with mental ill health



Shared Lives is consistently rated by the CQC as the safest and highest quality form of care, with 98% of schemes rated good or outstanding

Shared Lives stats East ADASS



Key statistics and comparisons

	Live-in	% of Total in area	Short breaks or day support	% of Total in area	Carers offering live-in & day support	% of Total in area
Cambridgeshire	9	40.91%	13	59.09%	0	0.00%
Essex	68	87.18%	10	12.82%	0	0.00%
Hertfordshire	61	55.45%	49	44.55%	0	0.00%
Bedford	13	92.86%	1	7.14%	1	7.14%
Southend	27	69.23%	12	30.77%	0	0.00%
PSS Norfolk & Suffolk	208	94.12%	13	5.88%	6	2.71%
Macintyre Central Bedfordshire	0	0.00%	5	31.25%	12	75.00%
Milton Keynes	11	18.33%	19	31.67%	30	50.00%
Better together (Havering & Thurrock)	83	89.25%	3	3.23%	7	7.53%
	480	73.51%	125	19.14%	56	8.58%

Nationally

- 65% of our support is for live in arrangements
- 23% for short breaks/day
- 12% carers offer both

Shared Lives stats East ADASS



Key statistics and comparisons

National Cumulative	Total	% Against Cumulative Figures
Autism / Asperger's syndrome	790	3.85%
Older age (-dementia)	547	0.00%
Dementia	226	0.92%
Learning disability	7262	77.06%
Mental health	730	3.49%
Physical impairment	475	1.65%
Substance misuse	29	0.00%
Health needs / hospital discharge	35	2.57%
Sensory impairment	139	1.10%
HIV / AIDS	2	0.00%
Dual diagnosis (mental health & learning disability)	409	7.16%
Acquired brain injury	56	0.92%
Profound & Multiple Learning Difficulties	120	1.10%
Domestic abuse	17	0.18%
Other	113	0.00%
Total Number of Support Needs	10950	

Nationally support needs

- **67% learning disability,**
- **6% autism or Asperger's,**
- **7% mental ill health,**
- **3% associated with older age,**
- **2% people with dementia,**
- **4% people with a physical impairment,**

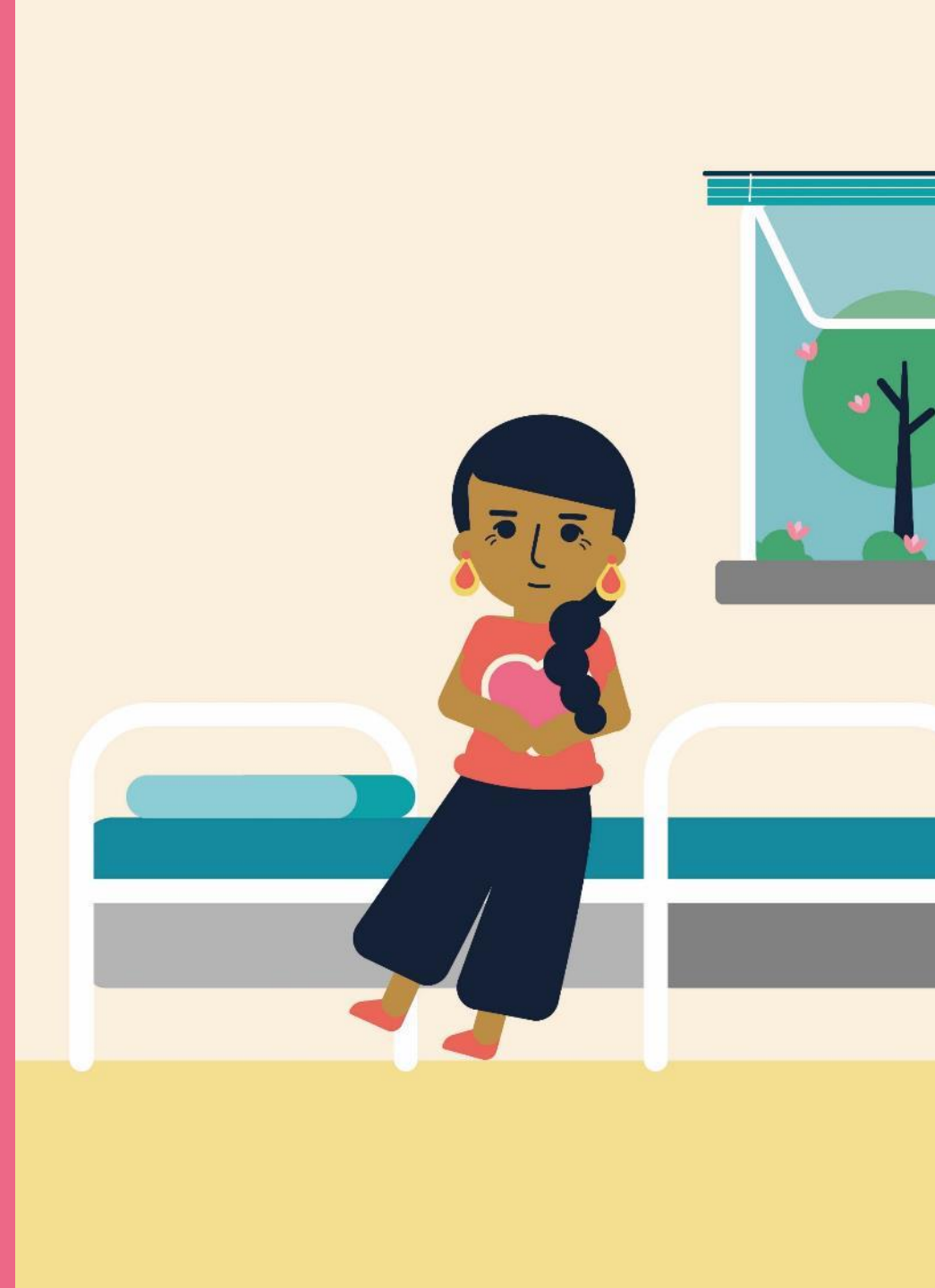
Diversifying Shared Lives

- Young people in transition
- People with mental ill health
- Older people/people living with dementia
- Care leavers (DfE)
- Survivors of domestic abuse
- Hospital discharge
- People with long term health conditions



Shared Lives in health

- NHS England personalised care partnership
- Intermediate Care project funded by DHSC & charity
- High potential health areas:
 - Acquired brain injury
 - Mental ill health
 - Stroke
 - Dementia
- Joint report on lessons:
Personalised Care and Shared Lives



Transforming Social Care



There are great examples of different models that have been implemented to meet people's needs. **For example, Shared Lives schemes have been scaled up across the country to offer greater flexibility and more community-based care**



Mollie's story

Twenty-year-old Mollie moved in with her carer Mae through a Shared Lives scheme. Together, they share family and community life and Mollie receives personal care and support in a place that feels like home.

Mollie explains, "I'd been in crisis throughout my life and then I reached breaking point. I couldn't manage basic life skills."

When Mollie's social worker offered her the Shared Lives scheme, she chose to move in with Mae, an approved carer. Mollie lives in an annexe so has a place of her own, but with the full support of Mae and her family.

Since moving in, Mollie has grown in confidence. "I am more positive and talkative," she says. "I have a job working in a supermarket. I have friends my own age. I'm learning to drive. I am learning to cook, I do my own washing and I'm learning how to run a house, pay bills and clean my space."

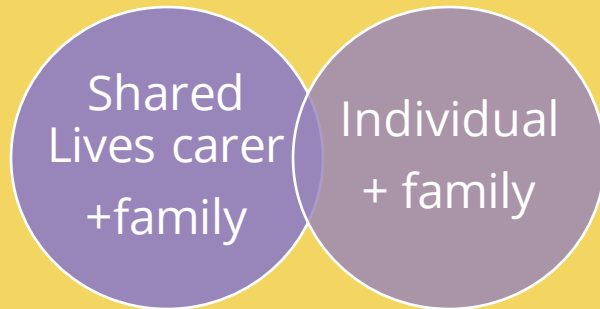
Mollie's new environment has helped her overcome many of the challenges she previously faced. "My mental health has improved, I feel proud of myself and I make my own choices," she says. She hopes other young adults with autism would have

P46 White Paper Providing the Right Care, in the Right Place at the Right Time

Care that finds and connects people's strengths and assets

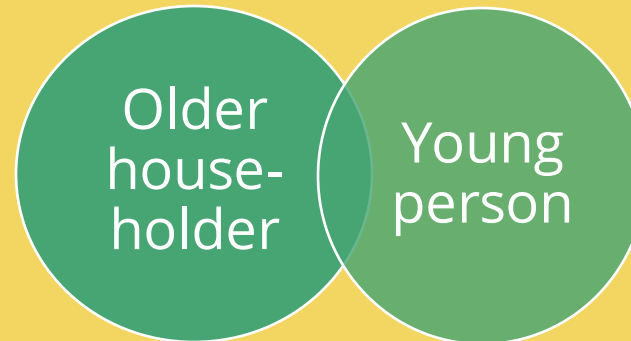
Shared Lives:

"Just one of the family."



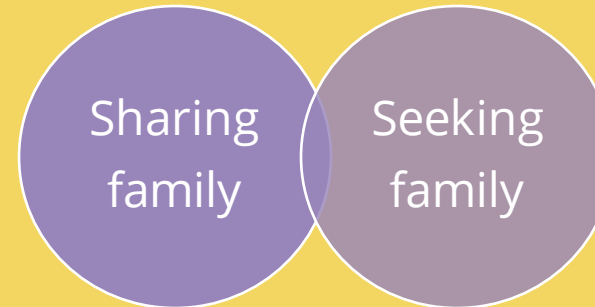
Homeshare:

"I have a new friend and a place to call home"



Family by Family

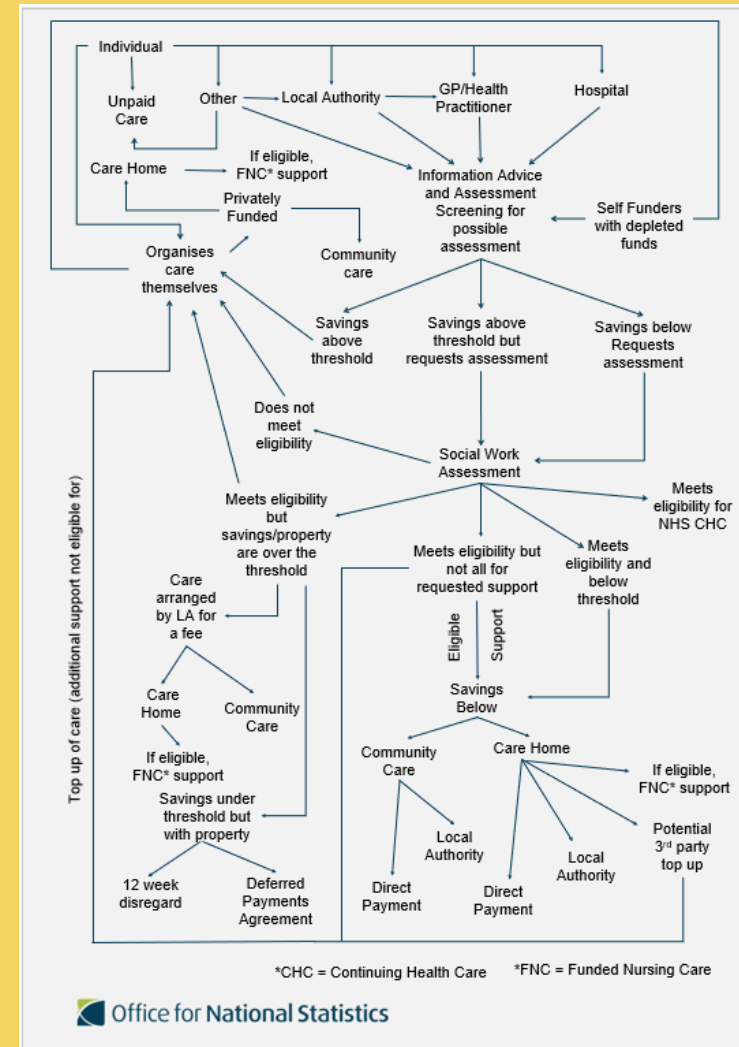
"We never thought this life was possible"



3 Feb 22



VS



Local context is vital:

- Understanding Shared Lives model and individual schemes
- Local context: where all partners/schemes are – support and resources required
- Local priorities/ drivers for Shared lives



NE ADASS

- Regional vision
- Innovation/ learning/ development
- Package based approach:
 - Diversification
 - Scheme capacity
 - Cost benefit
 - Marketing support
- Awareness and understanding – people with lived experience



Comms and marketing

- Regional/framework approach
- Acorn analysis – individual & regional
- Comms audit – each LA
- Messaging aligned to objectives
- Marketing collateral – case studies or animation
- Regional media awareness
- Social media activity



Some discussion points

- Are there any regional v national variations which would help with growth, development and diversification
- What helps us think and act 'asset-based' and how will this help us develop Shared Lives? What gets in the way of working in this way?
- How well do you know your local context including the local schemes and the system and service changes needed to make it happen?
- How else can Shared Lives Plus Support you?

What is Homeshare?

Homeshare enables unrelated people to share their lives for mutual benefit.

Homeshare is a reciprocal arrangement where both the Homesharer and the Householder have **something they need** and **something they can give** to the Homeshare relationship.





The HSUK Network

- 21 Homeshare programmes across UK
 - Delivery organisations are Charities, CICs and Local Authorities'
 - 1000+ participants in 2021
- Support to start-up and grow
 - Good Practice Guide and Quality Assurance Framework
 - Community of Practice
 - National campaigns and media opportunities
 - Resources, tools and templates

• Growing!

Key messages: Older people and their families

A local Homeshare service in Norfolk would:

- Reduce loneliness and isolation.
- help people to remain living independently at home for longer.
- offer the reassurance of an overnight presence.
- help younger people find affordable safe accommodation.
- Most older people (63%) surveyed would consider signing up to a local Homeshare provider.





Key messages: Voluntary and Community Sector



A local Homeshare service in Norfolk would:

- help older people unable to access support with low level daily living needs.
- help to keep people living independently in their own homes for longer.
- help to combat loneliness and isolation.
- help people to be less dependent on health and social care services and their families.
- help to support older people to engage with existing community services.

Discussion points

What can we do to encourage the set up and successful delivery of Homehare in the region?

What barriers can we remove to support more people to participate across the East of England?

How else can Shared Lives Plus support you?





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