

Shared Lives, micro-enterprise and Homeshare supporting older people

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Introduction to our members' work

Shared Lives Plus is the UK network of family-based or very small scale care, support and inclusion approaches for disabled or older people. We are all about ordinary people and families contributing to the care and support of others, sometimes in extraordinary ways. Our membership includes **Shared Lives** carers and coordinators, **Homeshare** schemes and **micro-enterprises**.

Our 4,500 members build small-scale solutions around individuals and families so that people can:

- take control of their services and of their lives
- pursue ordinary lives within their chosen families and relationships
- contribute to and be valued by their communities.

The UK is only just grasping the potential gains from families and communities contributing to the well-being of people with support needs, and of those people being active, valued citizens.

In **Shared Lives**, an adult (16+) who needs support and/or accommodation becomes a regular visitor to, or moves in with, a registered Shared Lives carer. Together, they share family and community life. In many cases the individual becomes a settled part of a supportive family, although Shared Lives is also used as day support, as breaks for unpaid family carers, as home from hospital care and as a stepping stone for someone to get their own place. Uniquely, Shared Lives carers and those they care for are matched for compatibility and then develop real relationships, with the carer acting as 'extended family', so that someone can live at the heart of their community in a supportive family setting.

Shared Lives is used by older people, people with learning disabilities, people with mental health problems, care leavers, disabled children becoming young adults, parents with learning disabilities and their children, people who misuse substances and (ex-)offenders. There are already 8,000 Shared Lives carers in the UK, recruited, trained and approved by 152 local schemes, which are regulated by the government's social care inspectors. In 2010, England's care inspectors, CQC, gave 38% of Shared Lives schemes the top rating of excellent (three star): double the percentages for other forms of regulated care. When people labelled 'challenging' have moved from care homes or 'assessment and referral units' into Shared Lives households, annual savings of up to £50,000 per person have been realised. The average saving is £13,000 per person. CQC, logged 3,473 safeguarding alerts and 39,115 safeguarding concerns related to social care provision in England 2011/12. Of those, 109 concerns and just one alert arose from Shared Lives.

We also support a network of social care **micro-enterprises**, set up by front line workers and by disabled or older people themselves. They typically have five or fewer workers or volunteers and provide social care, housing, leisure, health, food or transport services: whatever local people need to live their lives. Some are funded through personal budgets or people's own money; some by vo-

lunteering. Some are owned jointly by people who deliver and people who use the service. They can be highly tailored to the needs of local people and very 'lean', with most of their resources in front-line delivery. They resist 'scaling up' but can be 'scaled out': the conditions created in which many more people can use their knowledge of what good care looks like to set up and sustain a viable enterprise

Many micro-enterprises operate "below the radar" of councils and the NHS and they can face barriers in regulation or commissioning practices, which we help them to tackle, working with our sister organisation, Community Catalysts (see below).

Homeshare is where someone who needs some help or companionship to continue to live independently in their own home is matched with someone who has a housing need and can provide a little support. "Householders" are often older people who have a few support needs or have become isolated or anxious about living alone. "Homesharers" are often younger people, students, or key public service workers who cannot afford housing where they work, but are happy to provide an agreed level of low level help or companionship. They help out but pay no or reduced rent and contribute to household bills.

More case studies and articles are available on request and at:

- www.SharedLivesPlus.org.uk and www.communitycatalysts.co.uk
- The Telegraph: <http://goo.gl/gM3lq>
- The Guardian: <http://bit.ly/fhHV3L> and <http://goo.gl/clzS4> (parents with learning disabilities)
- Community Care magazine: <http://bit.ly/9I50Ki> (dementia short breaks service)
- The Social Care Institute for Excellence (video): <http://bit.ly/gpUJkM>
- Our blog: <http://alexfoxblog.wordpress.com>

Our offer

Shared Lives Plus helps our members to work together to survive and thrive, providing support, training, events, resources, research programmes, access to insurance, and the means to influence policy makers. Our members include 4,500 Shared Lives carers, 152 local Shared Lives schemes, 140 micro-enterprises and 10 Homeshare organisations, right across the UK.

We work alongside our sister organisation, Community Catalysts, a social enterprise set up by Shared Lives Plus in 2010. Around 40 councils, health trusts and large providers have worked with Community Catalysts to create the conditions in which micro entrepreneurs can survive and flourish. Around 90% of micro-enterprises fail, but with Community Catalysts' support, only 17% fail over three years. In one area 125 jobs and 40 volunteering opportunities were created, supporting 850 local people. In another, micro-enterprise day support resulted in significantly increased satisfaction, alongside 25% savings, compared to traditional day services. Community Catalysts also supports Shared Lives commissioners and providers to expand and develop their local scheme.

We believe the UK can only effectively tackle big problems like social isolation and falling social care budgets, through harnessing the resources and skills of ordinary families and communities. Our members show how we could make new use of family homes instead of expensive institutions. They all work on a small or family-sized scale and they show how personal relationships can be more effective than professional/client transactions. A number of articles set out our vision for personalisation which builds more upon people's relationships and which offer lessons from the personalisation of social care for others sectors: Personalisation: lessons from social care, RSA: <http://goo.gl/QSIDg>; Redesigning the front end of social care: <http://goo.gl/dcxzh>; Working locally:

micro-enterprises and building community assets, for NHS Confederation's Uneasy Consensus series: <http://goo.gl/YO81j>.

Shared Lives and older people

National projects on Shared Lives and older people

Shared Lives Plus delivered a three year project developing and raising awareness of Shared Lives for older family carers in Scotland, which led to the development of some new services and a DVD produced by older family carers and Shared Lives carers: <http://bit.ly/ViZ6hx>.

Shared Lives Plus member, Shared Lives South West (<http://sharedlivesw.org.uk>), along with Innovations in Dementia, both based in Devon, with Esmée Fairbairn Foundation funding, are providing training and developing good practice and resources for Shared Lives services for people with dementia. This project has helped to raise the profile of Shared Lives support for people with dementia and increased interest amongst schemes in England in developing such services.

PSSRU (Kent University) are currently researching the outcomes of Shared Lives for older people.

Shared Lives as short breaks and day support for older people

There are number of established Shared Lives schemes for older people in which an older person visits a Shared Lives carer in the carer's own home, instead of visiting a day centre, or in which an older person stays overnight with a Shared Lives carer. For instance, ASA Lincolnshire's At Home Day Resource for people with dementia, established with carer's grant funding, provides support from 10am – 3pm, delivered in the Shared Lives carer's home and the local community. The ASA matching process ensures participants are compatible, with a specially trained and supervised Shared Lives carer supporting up to three people, depending on people's needs. Some people use the service to maintain skills like cooking, gardening, or simply eating together and using cutlery. Isolated older people welcome the manageable social experience in a consistent, familiar setting.

The service also provides a break for family carers. Family carers and providers use a book to share information about the day's activities and any issues. The service is offered to clients with mild to moderate dementia, but the rapport which people build up with their Shared Lives carer means that support can continue as their dementia progresses, in one case for eight years.

Community Care examined the Time to Share breaks service in Falkirk: "Celia is generosity itself. She and Roy get on like a house on fire," says Mary Willis of the relationship between her husband and their Time to Share carer, Celia McKechnie. "She includes Roy in everything the family do; he gets a front seat at the Highland shows they go to. Her husband is a good musician and Roy plays the African drums so there is a connection there. Celia takes him out a huge amount and he is treated like one of the family." Roy currently visits McKechnie three or four times a year, and although Mary says this may increase as she gets older, she adds: "I hope to put off residential care forever." Full story: <http://bit.ly/bbBc3Y>.

Home from hospital support for older people

There is huge potential to develop Shared Lives as a form of intermediate ('reablement') care. At present, intermediate care usually focuses solely upon helping somebody to regain their physical health and mobility. But returning home to face isolation is unlikely to result in a happy and healthy life. Some older people need to stay in hospitals several times, each time becoming less likely to return home. In contrast, the older person could receive their intermediate care not in a succession of institutions, but in the same family home, with a Shared Lives carer with whom they have be-

come familiar. That Shared Lives carer can continue to provide overnight stays or day support when the individual returns to their own home, and knowing who will be providing home from hospital care should another stay be necessary will remove some of the anxiety of repeated hospitalisation. Crucially, the Shared Lives carer will pay as much attention to isolation and friendships as they will to physical support, ensuring that someone not only returns to their house, but also to somewhere which feels like home.

Live-in Shared Lives support arrangements for older people

Live in support arrangements are rarer at present for older people, but there are some. In Powys, H was an 84 year old woman living on her own in a small rural community. She had suffered from dementia for some years and was receiving some informal support from R, who would visit twice a day to make sure that she had taken her medication, had some food, lit her fire etc. Over the past winter, R was becoming increasingly concerned as H was letting her fire go out, not eating regularly, becoming more disorientated and struggling with her personal care. R alerted social services which resulted in R being trained and approved as a Shared Lives carer with the Powys Shared Lives Scheme. H had been a visitor to R's house for over 50 years and had known R's husband all his life and R for over 13 years. She moved in with R and the familiarity meant that she felt at home straight away. As she did not have to move away to receive support, H was able to keep all of her friendships and connections.

Micro-enterprises and older people

Community Catalysts have worked with a number of successful micro-enterprises which are bringing personalised support to older people or helping older people to develop their own enterprise. Examples are below. In 2011, Shared Lives Plus worked with three government Departments (Health; Business, Innovation and Skills; Transport) to remove restrictive regulations which had forced micro-enterprises to register as mini-cab firms if workers used their own cars to help older people get out and about. See *A Map for Micro-enterprise* at www.SharedLivesPlus.org.uk.

Home Support Service.

With support from Community Catalysts, Barbara set up Home Support service three years ago to deliver personal care and domestic support to older people in their own homes, which can include other support such as helping them with their shopping. Barbara and her three staff provide this support to 23 older people within a rural locality, all of whom receive Direct Payments.

Barbara decided to set up her own venture after becoming disillusioned with her employers taking on more care packages than they had capacity for and service users being supported by a succession of strangers. In contrast, Barbara keeps her service small-scale so that she can meet with everyone supported at least once a week. Barbara personally delivers the service to a new service user for at least two weeks before introducing them to the member of her staff team she feels is best suited to their needs.

Irene commented that she had been wary at the outset due to a poor service from an previous larger provider, but that she felt comfortable straight away and that she has been pleased with the service and particularly happy to be consulted personally about her needs and wishes and involved in the development of the service. The service's consistency means that people's dignity is protected, and they do not have to re-explain what they need every day.

Companions

Companions is a micro-home care service established with help from Community Catalysts to provide consistent, responsive and flexible care for a small group of older people, who pay for the service from personal budgets or their own money. Companions 'aim to be there for older people when friends and family can't'. It was founded by Yvonne and Susan who were frustrated that, as care workers, they were limited to providing a set menu of tasks from fixed care plans and that care was often rushed and impersonal when what people really wanted was a chat.

Companions have 11 members of staff supporting currently 23 customers, the majority of which have dementia. They like to match staff to customers as much as possible and keep change to a minimum. They provide companionship, help with daily tasks in and out of the house, support people in their local community for meals out, to meet friends, shopping or to attend appointments.

Doris doesn't use the service on a set basis and likes the out of hours option: "Companions are very flexible and come when I need them." Doris likes someone to be around when she has a bath. Yvonne fulfils that role but she doesn't just sit around, "she tidies and sweeps up". Sometimes Yvonne will shop for Doris on the way to her house; sometimes Doris prefers Yvonne to support her to shop for herself. The service costs Doris £11 per hour, which she feels is cheaper than other, less responsive services she has used in the past.

Homeshare

War veteran Marjory, 92, shares her house with Heather, 26, a nursing student. Heather gives 10 hours' help a week, cooking three or four times and doing light cleaning. They have been Home-sharing since 2010, as reported in The Guardian (<http://goo.gl/725rj>):

MT I've been to see people who were in homes and I thought, I couldn't bear that. You're surrounded by people you don't really want to talk to. My daughter-in-law, Patience, found out about Homeshare because I was on my own and I think they were a bit worried.

HL I came round for a cup of tea with Marjory and Patience, and we just got on really well. It was really quick – we only had one meeting. This is Marjory's house and it was quite intimidating for me to move into someone else's home. It's not like sharing with people my own age, where it's, "That's my space" and, "That's my cupboard", but she's so lovely and extremely welcoming.

MT We have our spats, don't we?

HL We do, we have our disagreements and things, like throwing away mouldy fruit...

MT Oh yes, she's a menace in that way. They're just getting ripe, then Heather throws them out...

HL And waste not, want not... It's an odd role to be in, because you're not family and you're not just a lodger, and I think it can be difficult at first finding out where the lines are drawn and the boundaries are. But not for us – I think it's worked well, we've both got an affection for each other.

MT Yes, you're my friend. A bossy one, but still my friend.