

I am writing in response to your call for evidence on local government's response to an ageing society. As part of the call you refer to looking at innovative and new ways of designing services to meet the needs of older people, which are developed in partnership with older people and local communities.

Shared Lives is a little known form of social care which has been mostly used for people with learning difficulties and mental health issues. There is some support given to older people and the number of schemes offering arrangements to older people is growing but is nowhere near its full potential. Shared Lives schemes in Moray in Scotland and in the South West of England provide substantial services for older people and those living with dementia and have demonstrated what can be achieved using the Shared Lives model for these groups of people.

Shared Lives is a regulated form of social care delivered by Shared Lives carers who are approved by a CQC-registered scheme. Shared Lives enables people to live life to the full in their community, without having to live alone or in a care home. Individuals who need support are matched with compatible Shared Lives carers and families, who support and include an adult in their family and community life.

Shared Lives carers are recruited and approved through a rigorous assessment process which is itself subject to quality assurance by an independent panel. Shared Lives carers help people to develop independent living skills, friendships and roots in their community.

Shared Lives South West working with people living with dementia

Shared Lives South West and Innovations in Dementia jointly delivered a national project all about how Shared Lives could support people with dementia and their family carers. Funded by the Esmee Fairbairn Foundation for three years, the project worked with four Shared Lives schemes on five sites, and with the wider network of Shared Lives schemes in England. The main objectives of the project were:

- to gather evidence about how Shared Lives services could support people with dementia and their carers
- to enable the sharing of good practice amongst Shared Lives schemes who support people with dementia
- to develop training materials for schemes and Shared Lives carers about how to support someone with dementia in a Shared Lives setting

Specifically trained Shared Lives carers offer short breaks, typically a day support service or a 1-3 day overnight break, to people with mild to moderate dementia who are living in the community, usually supported by family carers. Shared Lives South West has developed two specialist services for people with dementia, one in Torbay and one in Cornwall with a small number of carers in Devon also offering support to people with dementia.

Shared Lives may include:

- long term accommodation and support or
- short breaks or other time limited live-in support such as intermediate care or
- day time support involving the sharing of home and family (and/or community) life of the Shared Lives carer or
- 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

Traditionally Shared Lives has worked predominantly with people with learning disabilities and mental health problems, but there are examples where successful arrangements have been made with people in later life and those living with dementia and a handful of services which have specialised successfully in this. Traditional approaches to supporting older people are not consistently helping older people to live the lives they want and there is a strong desire for affordable models which offer real choice.

Shared Lives provides highly personalised arrangements where decisions about support and care are made in partnership with the service user. This also ensures that wherever possible the service user and the Shared Lives carer share the same interests and that the Shared Lives carer can support the service user to pursue their hobbies and interests and help them remain part of the community.

- Schemes recruit Shared Lives carers specifically to work with older people
- The matching process takes into account service users' wishes on where they want to live and the type of household they want to live in.
- As in any Shared Lives arrangement, the Shared Lives carers and individual get to know each other gradually and have to feel there is a 'match'
- The older person visits the Shared Lives carer for day support or overnight breaks.
- The Shared Lives carer uses their home as a base, going out into the community as the individual wishes, but may also visit the individual in their home
- The Shared Lives carer's family and friends who get to know the older person. The
- Shared Lives carer encourages the older person to meet new people, keep up with their existing interests and activities

Many older people experience loneliness and isolation, which in turn have a detrimental effect on their health and wellbeing. This can lead to early admission into residential care, which for many is either unnecessary or should only be for a short period of time, not as a lasting arrangement, but drifts into permanency. There is a high financial cost to this as well as a cost to the individual in terms of their independence and sense of worth and wellbeing.

Daphne, who is aged 93 and has a personal budget, is a user of Shared Lives through Adults Supporting Adult (ASA).

A typical week for Daphne starts by using the At Home Day Resource, which is a weekly activity (10-3pm) where Daphne visits Julie, a Shared Lives carer, at her home. The two of them play games and enjoy a break from the norm.

When Daphne's family goes on holiday, she is able to stay with Viv, a short breaks provider. This is a holiday in itself for Daphne, who wanted to stay over during her first meeting with Viv. Her lovely home and friendly cats won Daphne over immediately. These breaks throughout the year allow Daphne's daughter and son-in-law to visit their grandchildren, enjoy short holidays and catch up with personal affairs.

The family were able to meet providers to decide whether or not they, along with Daphne, were happy with the match provided by ASA. This gave them the peace of mind and gave Daphne independence and choice.

The Care Act 2014 has put the emphasis on the preventative duty of commissioners and introduces a more positive approach towards building on people's resilience and the support networks around them.

- The Shared Lives approach to care, support and inclusion demonstrates a 'strengths-based' approach, focussing on what someone can do rather than their needs and frailties.
- Shared Lives can build a support network through day support and short breaks that can help commissioners in their duty of 'preventing, reducing or delaying the need for care and support' by being flexible and responding quickly to changing care needs.
- Clause 1 of the Act makes promoting individual well-being the driving force behind care and support. Through enabling the service user to be involved in part of their care planning and encouraging them to be fully engaged with all aspects of their care, Shared Lives put individual well-being at the centre of provision.
- Shared Lives' strength in providing bespoke local arrangements also makes it suitable to support small numbers of clients with multiple and complex needs – clients that other care settings struggle to accommodate in a cost-effective manner

For older people living with dementia, Shared Lives:

- Provides a familiar home from home for short breaks or day provision, reducing the confusion caused by new environments
- The Shared Lives carer and their family are well known to the service user, reducing the number of new or unknown people they encounter
- Shared Lives carers are introduced at an early stage in the development of the dementia, offering a personalised service to support the family and enable them to remain together for as long as possible.

Shared Lives can contribute to an improved quality of life in older age and demonstrable benefits for people feeling alone and the associated health problems. Shared Lives is new to working with older people in significant numbers, but the proven track record of working with people with learning disabilities shows what Shared Lives can achieve for individuals seeking support.

Costs of Shared Lives for older people

People using Shared Lives have access to the full range of available benefits, as well as very often being eligible for a local authority financial support. Funding may go directly from the local authority to the care provider or the individual user may be on a personal budget, which often provides more flexibility. As with all forms of personal care, there is also a financial assessment which may mean that some aspects of the care received would be paid for by the service user or their family. There may also be services that Shared Lives offer that the service user and their family carers decide to pay for themselves, such as the holidays and breaks service.

Brigita is an older lady from Eastern Europe, who had been living in unsuitable, overcrowded shared accommodation, and had been working in hotels. She was given an initial 6 week short break with Shared Lives, after which it was hoped that she would then be well enough to present as homeless. Due to her frailty this was extended to a 3 month placement.

She tells everyone how grateful she is to her Shared Lives family for the support and friendship they give her. As an isolated woman in this country, who speaks very little English, Shared Lives has been a really important part of her recovery, especially the fact she was able to live as part of a family, and not have to worry about anything but getting better

Shared Lives offers demonstrable saving on placements for people with learning disabilities and mental health issues saving local authorities £26,000 a year for a full time arrangement for someone with learning disabilities and £8,000 for someone with mental health issues (Social Finance: Investing in Shared Lives 2013). Shared Lives has not yet developed the volume of services to older people to produce evidence of the financial savings that could be available. However the indications are that although savings are unlikely to be large as those quoted for other service users, especially as older people attract a much lower Resource Allocation from local authorities, Shared Lives would be financially competitive.

Shared Lives would also be a viable model for delivering intermediate care, especially home from hospital services where this could provide an alternative to residential or local hospital placements when the older person was unable to go home. Using Shared Lives would enable the service user to remain embedded in their community and enable them to grow in confidence, doing small household tasks and getting back to their usual pastimes in preparation to going home. Because the model is so flexible, Shared Lives would be able to offer on-going support for as long as needed, reducing re-admission to hospital.