

# West Berkshire Shared Lives Carers Guidance



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## 1. Introduction

This document provides guidance to Carers on the West Berkshire Council Shared Lives service.

The Shared Lives scheme supports Shared Lives Carers to offer a family based environment to individuals based upon unique interests, experiences and needs. We work with individuals with a variety of needs ranging from physical disability, mental health issues, dementia and individuals with a learning disability. We also work with young people through transition into adult services.

The [Statement of Purpose](#) sets out our aims and objectives, and Carers will be provided with a copy.

Before starting any Shared Lives arrangements, we are committed to ensuring that Shared Lives Carers receive general information and key training about people's rights and how to support people in their daily Lives.

The Service User's assessment of needs will be the starting point for developing a plan which details their Shared Lives arrangement and support that is required. This is called a '**placement plan**', and is a key document in understanding information about the Service User's particular needs and wishes. The plan will be agreed between the Service User and / or their representative, the Shared Lives Carer and the Shared Lives Officer

The plan and the arrangement will be reviewed regularly (at least once every year), which means that if the Service User's needs or wishes change over time, then the plan and / or the arrangement can be changed too.

There are also a number of separate guidance documents around key specific areas which Shared Lives Carers need to familiarise themselves and these include:

- [Lone Working](#)
- [Management of Medicines](#)
- [Management of Money](#)
- [Managing Concerns around Conduct](#)
- [Record Keeping](#)
- [Safeguarding and Deprivation of Liberty Safeguards \(DoLS\)](#)

If Shared Lives Carers do not follow the guidance in these procedures and / or the placement plan, this may be treated as a breach of their Carer's Agreement and / or your human rights, and their approval will be reviewed by the Approval Panel.

West Berkshire Shared Lives service will be open and honest with all Service Users when things go wrong with their care. This is in line with [CQC Regulation 20 Duty of Candour](#).

For Shared Lives Officers there are additional '**Procedures for Shared Lives arrangements**'.

## 2. Communication

People may use different languages or methods of communication for a variety of reasons and can mean that the people who are supporting them sometimes have difficulties in understanding them.

We recognise that being able to communicate is essential for taking part in, being in control of daily life and for influencing how services are delivered. The Shared Lives Service therefore aims to find ways to communicate effectively, and to provide help for anyone providing or using Shared Lives arrangements when this is required.

### How will this happen?

We will ask about the Service User's preferred methods of communication when they first get involved with the service and will use these wherever possible in our work with them. If we need help to communicate with the Service User, we will make use of interpreters / special equipment / visual aids / etc. as necessary, and / or seek guidance from their family or other people who know them well.

If the Service User's first language is not English or they have other communication needs, we will try to find Shared Lives Carers who can communicate in their preferred way and / or find the specialist aids / interpreters / training required for the Shared Lives Carers to develop the necessary communication skills. A Shared Lives arrangement will not go ahead unless the Service User and the Shared Lives Carers are confident that they can understand each other.

The Service User's communication needs and arrangements will be explained in their **placement plan**, and regularly reviewed as part of this.

When we provide the Service User with information about the service, this will be written in plain English or another language or format that they can easily understand or we may use an audiotape or a short film or some other way of communicating if they prefer.

It is important to have proper information when the Service User makes choices and decisions.

*Refer to Section 3 – Making Choices and decisions*

We will also make sure that the Service User has opportunities to tell us about their experiences in the service and their views on how it might be changed or improved.

*Refer to Section 28 Consultation and Participation in the Service.*

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 Shared Lives Carers, Managers and Workers have opportunities to communicate with each other, as well as with the Service User and other people in Shared Lives arrangements through:

- Meetings or support groups for Shared Lives Carers and / or Service Users in Shared Lives arrangements.
- Shared training opportunities.
- Sharing examples of good practice.
- Buddying' arrangements between new and experienced Shared Lives Carers.

A Buddy is an experienced Shared Lives carer and is available to mentor new carers with a telephone support or can meet up. During the new carers induction the Shared Lives Scheme will introduce them to their buddy and they can exchange contact details.

### 3. Making Choices and Decisions

Service Users have the right to make informed choices and decisions while recognising the rights of other people to do the same.

The Shared Lives service therefore aims to encourage and enable Service Users to make choices and decisions in all areas of their life, while at the same time making sure that they are not pressurised or inappropriately influenced in those choices.

#### How will this happen?

The Shared Lives service will support Service Users to have the kind of life or experiences that they want, doing the things that are important to them and enabling them to take responsible risks. Shared Lives Officers and Shared Lives Carers will work together and with others to make sure that Service Users have all the information, help and time they need for making choices and decisions.

The starting point for making informed choices and decisions is effective communication – [Refer to Section 2 communication](#).

It is important to have good information to make an informed decision. We will do our best to provide information in a format or language that they can easily understand and keep. When there is a range of choices information will be given about all the options. If necessary they will also be given help to fully understand the options and choose the one that is right for them.

If the Service User needs support to speak up for them, this will be discussed and detailed as part of their **placement plan**. Support can be provided by their Shared Lives Carer and / or Shared Lives Officer, if appropriate, and by family, friends or other representatives. Where required we make contact with people or organisations that can provide independent advocacy to provide support.

We will work closely with the Service User's advocate or anyone else who helps them to speak up for themselves in order to ensure that their best interests and needs are met at all times.

Shared Lives Carers will support the Service User in the daily life and activities and goals they choose as part of their placement plan. If any risks have been identified these will be discussed with the Service User and actions agreed with them to remove or reduce the risks if necessary. [Refer to Section 18 Risk Assessment](#)

If there are likely to be any restrictions on their choices and freedoms, these will also be discussed and agreed with them as part of their placement plan.

[Refer to Carers guidance Safeguarding and Deprivation of Liberty Safeguards \(DoLS\)](#)

## 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 and other people in their household all get on well together.

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 enable them 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 and risk management
- The skills, knowledge and experience of the Shared Lives carer
- The personal interests that the person and the Shared Lives carer have
- The location of the Shared Lives carer home
- The facilities and accommodation the Shared Lives carer(s) can offer the person
- The cultures and faiths that are important to the person and the Shared Lives carer

If we find any Shared Lives carers whose skills can be matched with the person's needs, we will give the person and the person's representative information about all of them in the format that can be understood by the person. 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 the person's 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 to find out more about each other and to see for themselves whether the person has things in common after all. This kind of visit is called an introduction and is part of the matching process.

It will not cause a problem if either the person or the Shared Lives carer 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.

- Meet the Shared Lives carer and other members of their family and get to know them better
- 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

- 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 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 can call a halt to the introductions at any point if they do not feel the arrangement will be suitable after all.

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 before the person goes there. The person's Shared Lives officer will explain more about this if it affects the person.

### **Capacity to make choices and decisions**

Every effort will be made to enable the Service User to be in control of their life. However if it appears that they do not have the capacity to make an informed choice or decision, we will discuss this with their family or representative and relevant professionals to agree a way forward that is in the Service User's best interests.

Carers should ensure that where there are any concerns about capacity to make decisions are discussed with a Shared Lives Officer. In these situations we will follow guidance in the Mental Capacity Act 2005 Code of Practice.

## **4. Contact with Family and Friends**

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 in ways that they wish.

### **How will this happen?**

The **placement plan** will tell the Shared Lives Carer about the relevant friendships and relationships the Service User already has, whether they require support to maintain or develop them and, if so, the ways they would like their Shared Lives Carer to provide this support.

For example this could be support with:

- 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 they wish to take part in.



If the Service User is staying in the Shared Lives Carer's home, the Service User's friends and relatives will be welcome to telephone and / or visit. The Shared Lives Carer will respect the Service User's choices and privacy in relation to these and, as happens with most families, the Service User 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 the placement agreement.)

### **Unwanted contact with family / friends**

If there are particular people the Service User does not wish to see or have contact with, their Shared Lives Carer will support them in making informed choices about this and in exercising their rights. [Refer to section 3 - Making Choices and Decisions.](#)

[Section 7 - Safe Friendships and Relationships](#) details how Shared Lives Carers can support the Service User in developing new contacts and friendships in the community.

## **5. Cultural, Religious and Identity Customs**

The Shared Lives service welcomes people from minority ethnic groups and different social, cultural or religious backgrounds. We understand the importance of responding to the Service User's individual needs, beliefs and preference and of maintaining links with their cultural and faith communities as and when they wish.

### **How will this happen?**

The Service User **placement plan** will detail any particular cultural or religious customs that are important and how these will be met.

In Shared Lives arrangements, Service Users will be able to continue to live their life in keeping with their own cultural and religious customs. The following areas will be covered when we are considering these particular needs and preferences in order to match Service Users with Shared Lives Carers who can support them appropriately:

- Communication.
- Food and drink, including preparation and other dietary or fasting needs.
- Personal care.
- Clothing.
- Daily routines.
- Opportunities for worship.
- Important rituals and festivals.
- Contacts within the communities.
- Whether Service Users need support from someone of the same sex (regardless of personal care or not).

If we are unable to find a suitable Shared Lives Carer we will let the Service User know the reasons.

Service Users' cultural and religious customs will be respected and responded to by:

- Making sure we understand the issues, including having access to guidance from their family / community workers / members of the same or similar cultural or faith communities when necessary.

- Making sure that their Shared Lives Carers are properly informed about these.
- Including information about their customs and beliefs and preferences in their placement plan, and about how the Shared Lives Carers will support them in maintaining these.

## 6. Daily Life and Inclusion in the Community

The Shared Lives service recognises Service Users' right to lead the kind of life they want. This includes having the same opportunities to join in local, social and community activities as anyone else in the community, to take part in valued and fulfilling activities (including paid employment if they wish) and to develop new skills and / or continue with their education or training.

### How will this happen?

The Service User **placement plan** will detail the relevant interests, activities and relationships the Service User already takes part in, as well as their hopes and wishes for the future. If the Service User requires support to maintain or develop any of these, it will explain how they would like their Shared Lives Carers to do this. For example they can provide support to Service Users with:

- Including them in activities and events that Shared Lives Carers take part in themselves.
- Finding out about people or groups in the community that have similar interests to them.
- Making contact with those people or groups.
- Trying new activities.
- Keeping in touch with their family and friends.
- Remembering or making arrangements for meeting up with people or groups.
- Attending educational and / or social and / or cultural and / or religious events.
- Being politically active and voting.
- Getting or keeping a job or starting voluntary work.
- Enabling them to develop new skills and / or practise using them at home or elsewhere.
- Communication.
- Pursuing their rights with people or organisations that harass them or discriminate against them.

Shared Lives Carers will respect the Service User's right to make choices and decisions for themselves and will work together with other people and professionals to support them in leading the kind of life they want and achieving the goals they choose as part of their placement plan.

If any risks have been identified these will be discussed with them and actions agreed with them to remove or reduce the risks if necessary. If there are likely to be any restrictions on their choices and freedoms, these will also be discussed and agreed with them as part of their placement plan. Their needs and wishes and the ways of meeting these will be regularly reviewed as part of their placement plan. This will be at least once a year, or more often if they request it or their circumstances change.

[Refer to Section 18 Risk Assessment](#)

## 7. Safe Friendships and Relationships

Friendships and relationships are important to everyone. The Shared Lives Service recognises the Service User's right to lead the kind of life they want 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?

Service Users will have the opportunity to share in the family life and in the community links of their Shared Lives Carers.

The Service User **placement plan** will detail information about the relevant friendships / relationships and interests the Service User already has, as well as about their hopes and wishes for the future so that they can be supported in the way that they want. They will be supported in maintaining and building new links and relationships, for example:

- Supporting them in maintaining contact with existing friendships / relationships.
- Supporting them to find out about people or groups in the community that have similar interests to them.

Service Users' friends and relatives will be welcome to visit, if the Service Users are staying in the Shared Lives Carer's home. As happens with most families, Service Users will also be expected to act reasonably and with consideration for other people in the household. (More information about house rules and individual responsibilities are detailed in the Service User's Shared Lives Agreement.)

Friendships can sometimes turn into loving relationships or partnerships. This is a natural and positive part of life; Shared Lives Carers will respect their Service Users' choices, privacy and dignity in relation to these.

There are sometimes risks associated with relationships including the risks of abuse or neglect. The Service User's right to lead the kind of life they want, with relationships that they choose, may sometimes have to be balanced with their right to be safeguarded from harm. If the Service User requires support to understand the nature of relationships and how to stay healthy and safe within them, their Shared Lives Carer will provide this in a way that is sensitive to the Service User's needs and / or will ask for appropriate professional help with this. [Refer to Section 3 Making Choices and decisions](#)

A sexual relationship that the Service User has not consented to is against the law. If at any time the Shared Lives Carer becomes concerned that the Service User may be involved in an abusive friendship or relationship, the Carer will talk to the Service User and explain that they will have to inform the Shared Lives Officer. The Scheme will then follow the procedure for safeguarding against abuse and neglect.

[Refer to Carers guidance Safeguarding and Deprivation of Liberty Safeguards \(DoLS\)](#)

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 Officers and any incident or concerns about this will be reported to the Police.

## 8. Safe use of the internet and social media

The use of the internet and social media has expanded exponentially over the past few years around 91% of 16 to 24 year olds use social networking sites, a positive experience for most. However with access to these sites comes the potential for online bullying, risk of being targeted for grooming and exposure to inappropriate content. Additional vulnerabilities such as: learning disabilities, mental health issues means that these risks increase.

These notes have been written to not only guide the Carer through offering support to vulnerable Service Users but to also prompt their own online safety. The Shared Lives Scheme has access to some easy read guides for staying safe online which are Shared with the Service Users

The following guidance comes from [www.saferinternet.org.uk](http://www.saferinternet.org.uk)

### Having a conversation:

- Discuss the need to be aware of risks associated with using the internet and social media.
- Ask about the sites and apps they like and what they enjoy doing online.
- Ask them about how they stay safe online; what tips do they have for you, where did they learn them from. Do they know what information is OK and not OK to share?
- Ask them if they know where to go for help, where to find safety advice on individual sites, how to find and use the privacy settings and how to report or block people.

### Tips for Everyone:

- Protect your online reputation: use the tools provided by online services to manage your digital footprints and 'think before you post'. Content posted online can last forever and could be Shared publically by anyone.
- Know where to find help: Understand how to report to service providers and use blocking and deleting tools. If something happens that upsets you online it's never too late to tell someone.
- Don't give in to Pressure: If you lose your inhibitions you've lost control. Once you've pressed send you can't take it back
- Respect the Law: use reliable services and know how to legally access the music, film and TV you want.
- Acknowledge your sources: Use trustworthy content and remember to give credit when using other people's work / ideas.
- Never Share Passwords
- Don't give personal information to someone who you have met on the internet
- Make sure you are not breaking the law
- Use an Anti Virus software
- Consider using Parental Controls for enabling online access
- Never stay logged in to sites on shared computers

## Guidance for Shared Lives Carers

Employees and those associated with the Council should be mindful that anything posted on social media sites, even where privacy settings have been used, could become publicly available. When posting comments, opinions, photos and/or videos on social media sites they should take care that they do not do anything that breaches confidentiality, which could bring the Council into disrepute or which breaches Council policies.

Business networking sites (e.g. LinkedIn) require the User to give information about their employer and job role, and this profile information and comments posted can be seen by a wider range of people than those directly known by the User. Extra care should be taken when posting comments on these sites.

It is recommended that Council employees should not be 'friends' with Service Users who are vulnerable adults or children, as this could be regarded as a safeguarding issue. Shared Lives Officers are therefore unable to be friends with Service Users over social media sites.

There may also be an issue if a Shared Lives Officer is 'friends' with a Shared Lives Carer on Social Networking Sites as Service Users may have access to the status of Shared Lives Officers via the Carers personal page.

### Examples of unacceptable use of private social media

The following list provides examples of behaviour which the Council would consider unacceptable and could lead to disciplinary action being taken against an employee.

Please note this list is **not** exhaustive:

- Posting things that bring the Council into disrepute or could result in legal challenge
- Posting things that would breach council policy
- Use of the Council's logo/ giving the impression that you are expressing Council view.
- Divulging confidential information about, or belonging to the Council.
- Make offensive or discriminatory comments / posts about the Council, Service Users, managers or colleagues. This may amount to cyber-bullying, harassment or defamation

### Posting Photographs and Images as Shared Lives Carers

*Posting personal details e.g. addresses / phone numbers of Service Users or posting contact details or photographs of colleagues without their permission is not acceptable practice.*

Shared Lives Carers are actively encouraged to include Service Users within their family life. This may lead to times of uncertainty about the best practice and inclusion of vulnerable adults in family based activities and events posted onto social media pages.

We realise that there may be occasions when Carers, Service Users and family members may wish to share pictures from significant events and times. If the picture is not inappropriate and the Service User is happy to be included then this should not cause any issues. Please note that some family members or other advocate of the Service User may have differing views on the posting of such photographs. If you are uncertain at all about the appropriateness of an image please discuss with your Shared Lives officer.

There may be times when you may be asked to remove certain photos or images from your social media pages even though they may be deemed as appropriate. If an image is viewed to be inappropriate this will be discussed with the Carer and further action may be taken if deemed necessary.

## 9. Personal Care

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

### How will this happen?

Shared Lives Carers 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.
- Using protective clothing and other protective equipment where necessary.
- Using appropriate moving and handling equipment where required.

Service User's individual needs and preferences around personal care will be explained in their **placement plan** and regularly reviewed as part of this. When the Service User expresses a preference, this will be respected. If the Service User is not able to express a preference or make choices for themselves, we will ask their family or representative and relevant professionals to agree a way forward that is in the Service User's best interests.

If the Service User's cultural or religious customs have implications for their personal care, their Shared Lives Carer will be properly informed about these. Wherever possible and when requested, the Shared Lives Carer providing intimate care will be of their preferred gender.

Where any support is required with moving and handling this will be detailed in the **placement plan**. The Shared Lives Carer will be provided with specialist training and / or equipment to enable them to undertake this safely. Any equipment / aids will only be provided after assessment by an appropriate professional and will be kept under review and reassessments arranged when necessary.

When care is Shared between the Shared Lives arrangement and the Service User's family and / or other service provider, the Shared Lives Carer will work in partnership with their other supporters in order to ensure that there is consistency and continuity of care.

## 10. Staying Healthy and Making Use of Health Resources

The Shared Lives service recognises that everyone has a right 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 for this in community health, hospitals and other specialist facilities.

### How will this happen?

Shared Lives Carers training includes understanding the importance of enabling the Service User to do as much as possible for themselves in relation to their own health and health care, e.g. having up-to-date information about health issues, making informed choices about following a balanced diet, taking appropriate exercise or participating in health screening or routine check-ups.

In a Shared Lives arrangement, the Service User will be able to continue to see their own doctor, dentist and other health professionals working with them wherever possible. If the Service User is staying with their Shared Lives Carer and is too far away for this, we will discuss and agree other arrangements. The Service User will also be able to access other NHS resources in the area such as having hearing or sight tests when required.

Any health needs will be described in the **placement plan**, roles of any health professionals who are involved will be included. The plan will detail the ways that the Service User would like their Shared Lives Carer to support them, this includes:

- Support required to make and keep appointments. This includes communicating and understanding information about appointments.
- Where assistance is required with a treatment or rehabilitation programme, Shared Lives Carer's will follow the directions given by the relevant professionals.
- Support to use any aids or special equipment to help them to do as much as possible for themselves; these will be provided after assessment from an appropriate professional and reviewed regularly.
- Support in the management of any medicines  
[Refer to Management of Medicines procedure](#)

If the Service User has any queries about their health or medication that their Shared Lives Carers cannot answer, the Shared Lives Carers will help the Service User to get information from their GP, a pharmacist or other relevant health professional.

If the Service User becomes unwell or is in need of assessment and / or therapeutic intervention from a health professional, this will be discussed with the Service User so that they can make an informed decision about a referral. If the Service User does not appear to be able to make an informed decision, this will be discussed with their family and / or representative / relevant professionals to agree a way forward that is in the Service User's best interests.

[Refer to section 3 - Making Choices and Decisions,](#)

If the Service User has any accidents, serious illnesses or other events that adversely affect their health, safety or well-being, their Shared Lives Carer will record the details and let their Shared Lives Worker or the scheme know without delay. The scheme will take responsibility for notifying the Care Quality Commission (CQC) and / or other regulatory bodies when this is necessary.

## 11. Working with and Responding Positively to People who Challenge Services

We recognise that some people have risks associated with their individual character, history or method of communication, these risks need to be managed in ways that prevent harm to the person (including their reputation) and / or harm to other people.

It is important that Shared Lives Carers understand and balance these rights and risks when necessary, in order to support the person appropriately, as well as to safeguard them and others from harm.

**Refer to Section 18 Risk Assessment and Risk Management**

### How will this happen?

Shared Lives Carers training 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, as well as how to respond to it, then this will be provided before the arrangement begins and on an ongoing basis when necessary.

Clear written guidelines will be provided on:

- 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 Service User 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.

The **placement plan** will detail any particular behaviours that may present risks and the agreed response; these will be regularly reviewed as part of their placement plan

If there are likely to be any restrictions on their choices and freedoms, these will also be discussed and agreed with them / their representative as part of their **placement plan**. If West Berkshire Council Shared Lives believe that a restriction imposed in a Shared Lives arrangement could amount to a person being deprived of their liberty, the Deprivation of Liberty process will need to be followed.

**Refer to Carers guidance Safeguarding and Deprivation of Liberty Safeguards (DoLS)**



If the Service User 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 / harassment / bullying. The Service User 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.

Shared Lives Officers will visit the Service User and their Shared Lives Carers regularly, in order to monitor the arrangement and make sure that they both have the practical and professional help that may be needed. The Shared Lives Carer will record the details of any incidents and keep the Service User's Shared Lives Officer informed about these.

The Service User's Shared Lives Officer ensures that the registered manager is updated and notification to CQC and / or other regulatory bodies of any events which adversely affect the Service User's health, safety or well-being are submitted when this is necessary.

## 12. Dealing with Emergencies and Crises

People's Lives can include unexpected events and / or unexpected responses to events, either of which can cause emergencies and crises.

The Shared Lives service aims to equip its Shared Lives Carers to deal safely and sensitively with these situations.

### How will this happen?

The Shared Lives service provides information, training and ongoing support to Shared Lives Carers so that they:

- Understand the need to communicate clearly and support the Service User and others in their household at these times.
- Understand their responsibility to protect the Service User and / or themselves / other people, if necessary.
- Have a working knowledge of all the scheme's policies and procedures and can apply relevant ones even in unexpected situations.
- Understand the need to record the details of any emergency or crisis affecting the Service User and the need to inform the Shared Lives Worker or scheme without delay.
- Are aware of the types of help that are available in the community to deal with emergencies and how to contact these.

We also ensure that Shared Lives Carers have easy access to support from Shared Lives Officers during office hours, by providing mobile phones and running a duty service.

Out of office hours support is provided by the **Emergency Duty Team (EDT) on 01344 786543.**

If you require further advice or assistance then call the out of hours **West Berkshire Manager On-Call on 01635 503483**

The Service User's **placement plan** will include details of who to contact in an emergency or crisis. If there are particular aspects of the Service User's health or behaviour which are known to potentially cause an emergency or crisis, the risks will be assessed and a risk management plan will be in place. [Refer to section 18 - Risk Assessment and Risk Management](#)

The Shared Lives scheme will be responsible for notifying the Care Quality Commission and other regulatory bodies about an emergency or crisis when this is necessary.

If the emergency or crisis is one that affects the Shared Lives Carer's ability to continue providing a Shared Lives arrangement for the Service User, we will explain the reasons for this and work with the Service User and / or their family / representative and their Care Manager / other professionals in order to make alternative arrangements as quickly and as smoothly as possible.

### **13. Key holding and Entering / Leaving a Person's Home**

The Shared Lives service sometimes provides 'kinship' support for people within their own homes, rather than in the homes of the Shared Lives Carers.

If an arrangement is made for the Shared Lives Carers to look after or hold a key to the Service User's home, it is important that the Service User's security is safeguarded and that the Shared Lives Carers follow procedures which protect themselves and the person.

#### **How will this happen?**

The Shared Lives service is to enable and / or support people in Shared Lives arrangements to take responsibility for the keys and security in their own homes whenever possible. However, it is recognised that some individuals may require greater assistance in maintaining security and / or may require some independent way for people to get into their home (such as in an emergency).

Shared Lives Carers will only take on this role if it is agreed and recorded as part of the Service User's **placement plan**.

If this applies to the Service User, their placement plan will explain:

- Why the keys are being held on their behalf.
- Under what circumstances the keys can be used.
- The procedures to be followed when the Shared Lives Carers enter or leave the Service User's home (which will always include knocking or ringing first and asking for permission to come in).

In some situations the Service User's Shared Lives Carers may need some form of proof of identity, e.g. if they are a part of a team of people who are supporting the Service User. In these situations we will provide the Shared Lives Carers with an appropriate form of photographic ID, to confirm that they are part of the Shared Lives service.

The keys will be kept in a locked and secure place in the Shared Lives Carer's home when they are not in use, and will be returned to the Service User when the Shared Lives arrangement ends or when the Service User no longer requires this type of support. The need for key holding will be reviewed whenever the placement plan is reviewed.

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

- The Service User's legal and human rights.
- Their responsibilities to act in the Service User's best interests and to protect them from harm, and for the Shared Lives Carers to protect themselves from allegations of misconduct.
- The importance of confidentiality and security.

The need to inform the Service User's Shared Lives Officer straight away if they have any concerns about the Service User's safety or security (e.g. if a set of keys has been lost).

#### **14. Being Missing from a Shared Lives Arrangement**

The Shared Lives service has responsibilities to protect and promote the health and safety and well-being of people in Shared Lives arrangements. Most will spend time out and about in the community without causing any concerns, however, some people may be confused or easily disorientated and so can become lost. There is also a chance of accidents or other mishaps, therefore 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?**

Arrangements for people in Shared Lives are all different so 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 he / she has missed the bus, while for another person it could mean he / she is in great danger.

Just as happens in ordinary families, it is helpful if the Service User lets their Shared Lives Carer know if they are going out, they have their mobile phone and roughly know what their plans are and / or when they expect to be home again. This helps to avoid false alarms. If the Service User changes their plans, again it is helpful if they let their Shared Lives Carer know this.

If the Service User does not return when expected or appears to be missing, their Shared Lives Carer will:

- Check around the house and garden and / or immediate neighbourhood.
- Try to contact the Service User on a mobile phone or some other way.
- Check with the person or place the Service User was visiting (if known).
- Check with the Service User's friends or relatives to see if they are with them.
- Contact the Service User's Shared Lives Officer or the scheme or the Emergency Duty Team to let them know and to agree what further action is necessary.
- Inform the Police if the Service User is likely to be at immediate risk or when it has been agreed with the scheme or Emergency Duty Team that this is appropriate.
- Provide the Police with a description and any other information they may need (or, if appropriate, work closely with the Service User's family to do this).

Once the Service User has been found, the Shared Lives Carer and / or Shared Lives Officer will make sure that all relevant people are informed – such as the Police, the Service User's relatives, etc.

Shared Lives Officer will also take responsibility for notifying the CQC when the Service User is missing for more than 12 hours and when the Service User has been found again.

If the Service User 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 their **placement plan**. If there are likely to be any restrictions on the Service User's choices and freedoms, these will also be discussed and agreed with them as part of their placement plan.

## 15. Palliative Care, Death and Dying

The Shared Lives service 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 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 Service User is ageing or ill and living with a Shared Lives Carer, the Service User will have the opportunity to discuss whether it is possible for them to stay there and under what circumstances they may need to move to a hospital or other placement where more specialised care is available. In arriving at a decision, consideration will need to be given to any other members of the household and the availability of palliative care services when needed.

Shared Lives Carers and Shared Lives Officers will be open to discussion about death and dying. The Service User's physical and emotional needs will be considered as part of their Placement Plan, as well as their comfort and well-being in this situation. If the Service User'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 counsellors.

Throughout a Service User's illness (and also in the event of an accident or unexpected death), the Shared Lives Carers 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 services as necessary. The Shared Lives Carers will have received training, advice and ongoing support, so that they know what to do in these situations.

During the Service User's illness and / or death, their Shared Lives Carers will respect their privacy and dignity at all times. The Shared Lives Carers will receive additional support from the Shared Lives Officers and other relevant professionals, and so will members of the Service User's family and others in the household. Family and friends of the Service User will also be supported during this time and will be welcome to visit.

The Shared Lives Carer will respect the Service User's religious and / or cultural preferences, and will follow any particular instructions the Service User has left or will know who to contact after they have died.

The Shared Lives Officer will take responsibility for notifying the CQC of the Service User's illness, when this is necessary, and if the Service User has died while in a Shared Lives arrangement.

## **Death of a an individual whilst in the care of a Shared Lives Carer**

In the event of the death of an individual whilst in the care of a Shared Lives Carer, the Shared Lives Carer knows what to do and understands his/her legal and regulatory responsibilities. Shared Lives will ensure that the Shared Lives carer receives the practical and emotional support that they need over this period, which may include sign posting to bereavement counselling.

### **Procedure**

#### **If the individual dies whilst at the home of the Shared Lives Carer**

Shared Lives will ensure, through advice and ongoing support that the Shared Lives carer knows what to do should the individual placed with them die as the result of a serious illness or accident. In that event:

- a) The Shared Lives carer must respond to the illness or accident in the same way as he/she would with any family member and contact the doctor or emergency services.
- b) Where the Shared Lives carer has had time to contact a doctor or the emergency services, the doctor or member of the emergency services may already have been in attendance when the person died. If, however, this is not the case the Shared Lives carer should contact a doctor immediately on discovering that the individual has died.
- c) The doctor will confirm the death of the individual. S/he will either:
  - i. Sign the death certificate (where the death is expected and the doctor has been in attendance throughout the illness) or
  - ii. Arrange for a post mortem (in the case of an unexpected death). The doctor may also call the police where the death is unexpected.

The Shared Lives carer has no legal responsibility for the person after their death. S/he should contact the person's next of kin as soon as possible after the person has died. If no post mortem is required, the next-of-kin will arrange for an undertaker of their choice to remove the person's body. If the person has no relatives the local authority is responsible for making the funeral arrangements. In that situation the Shared Lives Carer should ask the doctor or police officer to ring an undertaker to collect the person's body.

#### **If the individual dies whilst in hospital**

1. If an individual dies in hospital, the doctor at the hospital will confirm their death. The doctor will also plan for the post mortem if one is needed.
2. The Shared Lives Carer may have been named as the contact person when the individual was admitted to hospital. In that case, the hospital will contact them if the individual dies in their absence. The hospital may ask the Shared Lives carer to contact any relatives of the person as this may be more appropriate.

#### **Wherever the individual dies**

1. The Shared Lives carer should contact Shared Lives as soon as possible after the death of the person placed with them and within 24 hours of the death.
2. If a regulated activity under CQC registration, Shared Lives will contact CQC within 24 hours of the notification from the Shared Lives carer. CQC notification finder.
3. Arrangement to contact the purchaser and the benefits agency will be agreed.

4. If the person was placed on a long-term basis with the Shared Lives carer: a. Shared Lives and Shared Lives carer will liaise with the person's next of kin to ensure that everyone important in the life of the person is informed of their death. Where there is no next of kin Shared Lives will support the Shared Lives carer to ensure that everyone is informed.

Once immediate arrangements have been made, Shared Lives will support the Shared Lives carer to register the death of the person in the placement if required.

### **Benefits and funeral expenses**

Family members, if they are still in contact with the person placed with Shared Lives, will usually wish to pay for and arrange the funeral.

Where there is no close family, then if the person placed:

- a. Is receiving benefits and has died in hospital, the health authority or health trust has a responsibility to cover the cost of the funeral.
- b. Is receiving benefits and has died anywhere other than in hospital, the local authority has the responsibility to arrange and cover the cost of the funeral.

### **The Limits of the Shared Lives Carer's Legal Responsibility**

Shared Lives will ensure that the Shared Lives carer understands the limits of their legal responsibility and the pitfalls that they need to avoid. In particular Shared Lives will ensure that the Shared Lives carer knows that they should **not**:

- Contact a funeral director directly (it should be left for the family, doctor or local authority to do so). If a carer, contacts a funeral director they are voluntarily taking personal responsibility for any funeral or other costs.
- Sign anything. To do so means taking personal responsibility for the adult after their death.
- Withdraw cash on the individual's behalf after their death.
- Give the individual's benefits information to anyone else (e.g.: the hospital or next of kin) even if they request them.

### **Support to the Shared Lives Carer**

Shared Lives recognises that it is always traumatic and difficult when someone dies, but even more so when the person has lived as part of the family.

Shared Lives carers may find that they are giving support to grieving relatives and friends and need to ensure they take time for themselves and ask for the help and support that they need.

Shared Lives will ensure that the Shared Lives carer has both the practical and the emotional support they need at this difficult time. The Shared Lives worker will also engage the support of other agencies if that is appropriate and helpful to the Shared Lives carer.

## **16. Health and Safety (The Health & Safety at Work Act 1974)**

The Shared Lives service has a responsibility to safeguard the health and safety of everyone connected with it, namely the people who are using the Shared Lives service, Shared Lives Carers and others in their households, the workers in the service (whether employed or 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. Broadly speaking, this means that everyone involved in supporting the Service User needs to try to reduce the risk of the following things happening to the Service User 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, employers and managers have responsibility to make sure that workers are safe from the same kind of harms as listed above, and that the Service User's support is organised in a way that minimises any unnecessary and harmful risks.

People who are supporting you have personal responsibility for:

- Working safely and efficiently.
- Following instructions for using any special equipment that you need, so that you 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 Carers and Workers 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.

## 17. Hygiene and Infection Control

The 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 Coronavirus, 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:

- 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
- Following guidance from Public Health, Government and NHS
- wearing protective clothing such as gloves, face masks, aprons and washing their hands again after removing the protective clothing
- changing gloves and masks between each person and
- 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 in to 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.

If you become unwell from a disease or infection, please report this to the Shared Lives Scheme.



Shared Lives Carers should make their Shared Lives Officer aware of their Covid-19 vaccination status. If a Carer has decided not to receive the Covid-19 vaccination, extra precautions will need to be implemented.

## 18. Risk Assessment and Risk Management

Service Users have the right to feel safe and secure while you are in a Shared Lives arrangement. They also have the right to choose the risks they want to take, as long as there is a sensible balance between their individual needs and preferences and the well-being of Shared Lives Carers, their families or others in the household.

### How will this happen?

Taking risks is a normal part of a lifestyle that maximises independence. Shared Lives Carers will support Service Users to have the kind of life and experiences that they want, in doing the things that are important to them, as well as enabling them to take risks in a responsible way.

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

Service Users will usually have a risk assessment as part of their referral and introduction to Shared Lives, and this will be carried out by their referring Care Manager and Shared Lives Officer. Any agreed risk management plan will be added to the Service User's **placement plan** and becomes an essential part of this. The Service User will be given copies of the placement plan, the written risk assessment and risk management plan.

The Shared Lives Service provides Shared Lives Carers and Shared Lives Officers with training, information and ongoing support. This will enable them to identify hazards and assess risks. It will also enable them to take actions to reduce or remove the risks when appropriate, as well as to record discussions and decisions about this.

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

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

If the Shared Lives Carer identifies any additional risks then they should inform the Shared Lives team so that appropriate action can be taken.

A risk assessment is also made of the 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).

## 19. Safe Working Practices (including Moving and Handling)

The Shared Lives service 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 service has an overall responsibility for ensuring that its health and safety policies are understood and acted on.

### How will this happen?

#### Training

All new 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 service'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, etc. All training will be carried out by appropriately qualified people.

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

#### 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, e.g. a specific activity is planned, 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.

**Placement plans** will contain information about how the Service User 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**

Shared Lives Carers are required to have their gas systems checked every year by a Gas Safe Registered gas engineer and hold the necessary safety certificate for this and to check electrical appliances in their homes on a regular basis / at least once a year.

## **Communication**

Good communication is essential for safe working practices. The service has clear procedures for reporting accidents and dangerous occurrences, and for learning from these.

Accidents, dangerous occurrences and other events which adversely affect the well-being / safety of people in Shared Lives arrangements will be reported to the CQC, as well as to other regulatory bodies when required.

## **20. Accidents and Dangerous Occurrences**

The Shared Lives service aims to promote the health, safety and welfare of people in Shared Lives arrangements and who work in the service. We do our best to prevent accidents and dangerous occurrences through our policies, procedures and practices. We deal with accidents and dangerous occurrences promptly and effectively, as well learning from any that happen.

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.

### **How will this happen?**

Shared Lives Carers and Workers are provided with training that gives them a good understanding of all relevant health and safety legislation, guidance, policies, 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 Carers annually complete risk assessments on their homes in order to identify potential hazards and take action to reduce these. Their homes are maintained in good order, and the safety of gas is to be checked yearly with evidence of a gas safe certificate. A home safety check is carried out yearly, these checks are around the Shared Lives Carers home and carried out by the Shared Lives Officer, actions may be noted during these checks. **(Refer to Section 19 Safe working practices)**

Shared Lives Carers will record all accidents or dangerous occurrences involving the Service User or other people in Shared Lives arrangements, or to themselves and their families if this is in connection with their work.

They will report them to the Shared Lives Team without delay.

If the Service User requires first aid as a result of an accident in a Shared Lives arrangement, this will be provided by someone who has been appropriately trained.

The **Shared Lives Registered Manager** will take responsibility for ensuring that all accidents and dangerous occurrences are reported to the necessary regulatory authorities (such as the CQC or the Health and Safety Executive), if required. The Shared Lives

Registered Manager is familiar with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

Each accident or dangerous occurrence will be reviewed in order to learn from the episode and take preventative action where necessary. Any action taken will be recorded.

## 21. First Aid

The Shared Lives service aims to promote the health, safety and welfare of people in Shared Lives arrangements. If an accident or other incident means that the Service User requires first aid, this will be administered by people who have been trained to do this.

### How will this happen?

Shared Lives Carers will be given basic information about first aid as part of their initial training. This will include an understanding of their 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 the Service User any medication or dressings, the Shared Lives Carer and / or trained first aider will check the Service User's **placement plan** to find out if the Service User has any special requirements, as well as to make sure the Service User does not have any allergies or other reasons why they should not receive treatment.

The emergency services or the Service User's GP or other health professional will be informed when appropriate and follow up treatment obtained when necessary. The Service User'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 scheme will inform the CQC when required.

## 22. Fire Safety

[Fire Safety in Adult Placements: A code of practice](#) has been agreed for Shared Lives services. This Code of Practice sets out the minimum level of necessary fire precautions in domestic homes used for Shared Lives. All Shared Lives Workers should have a working knowledge of this and a copy is in your Carer's handbook.

A summary of the main points that people in Shared Lives arrangements may find useful to know are included below.

The Shared Lives service promotes and safeguards the health, safety and welfare of everyone working in or using it, through its safe working practices. The possibility of fire is a significant risk to everyone, whether at home or at work, so a strategy is required for minimising the risk.

## How will this happen?

Shared Lives Carers receive training and information about fire safety before they begin any Shared Lives arrangements.

The Service User's **placement plan** will detail any special fire risks that have been identified (for instance, if the Service User has limited mobility or if they are a heavy smoker), and where appropriate a risk management plan for this. A Home safe and well visit with the Fire Brigade is to be arranged before offering a Shared Lives placement and discussed during a home safety check, especially when additional fire risks are identified. This visits are to be arranged by your Shared Lives Officer, through the fire service within your local authority.

The Shared Lives Carer and Shared Lives Officer will have made a plan of what to do if there is a fire at their house during a home safety check.

This will include knowing:

- How to raise the alarm in the house so that everyone can get out quickly. Checking that smoke alarms are in good working order and tested regularly.
- Where escape routes are and keeping these unobstructed.
- How to call the Fire and Rescue Service.
- Where the fire fighting equipment is kept in the house and how to use this safely.

The Shared Lives Carer will tell the Service User about the fire plan when they first come to stay, and will remind the Service User about it from time to time.

The Shared Lives Carer's home will have at least one smoke alarm on each floor. The Shared Lives Carer will test these every week and the batteries will be replaced at least once a year. A fire blanket will also be kept in the home.

Shared Lives Carers will take care that all portable heaters, boilers, central heating systems and other electrical or gas appliances will be checked or serviced regularly and used in safe ways. Any fireguards or equipment kept should meet national standards.

If there are any unusual circumstances about the Shared Lives Carer's home, or about the risks for the Service User and other people in the home, these will be discussed with the local Fire and Rescue Service and their advice followed.

If a fire breaks out, the Shared Lives Carer's first priority will be to make sure that the Service User and everyone else gets out of the house safely if safe to do so. If this is not possible the Shared Lives Carer ensures the Fire Brigade are aware of who is in the property and in which room.

## 23. Food safety and nutrition

The Shared Lives service promotes and safeguards the health, safety and welfare 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 the Service User's general health, while eating the food that they like and enjoy is just as important for their sense of well-being. The Service User will be supported in leading the kind of life that they want by the Shared Lives Carer.

Information about which foods the Service User likes or dislikes and any cultural, religious or dietary needs will be included in their **placement plan**. The Service User will be offered a variety of foods at mealtimes and will be able to help themselves to snacks and drinks when they want. Shared Lives Carer(s) may encourage Service Users to eat well, when appropriate, although the Service Users have the final choice about what they eat.

If Service Users require help with eating and drinking, their Shared Lives Carer(s) will provide this in a sensitive and unhurried way that maintains Service Users' dignity and enables Service Users to do as much as possible for themselves.

Diseases and infections can be spread through the preparation, cooking and storage of food, as well as 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.
- That the most effective way to control the spread of diseases and infections is through washing hands.

Anyone in a Shared Lives arrangement who is involved in preparing or cooking food will be expected to wash and dry their hands as follows:

- Before starting to prepare foods.
- After touching raw meat.
- After touching the bin or handling rubbish, touching pets / 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, e.g. using separate chopping boards and storage containers, as well as not allowing meat to touch or drip on to other foods in the fridge.
- Cooking foods until piping hot, including leftovers.
- Keeping worktops, 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 Service Users are involved in the preparation and cooking of food as part of their Shared Lives arrangement, their Shared Lives Carers will explain, encourage and help them to follow these safe practices too.

## 24. Aggression towards Shared Lives Carers and Workers in the Service

Everybody has a right to lead a life that is free from violence, aggression and abuse. This includes Shared Lives Carers and Workers who are employed or volunteering in the Shared Lives service; the Shared Lives service therefore has a responsibility to make sure they are protected from this kind of behaviour during the course of their work.

### How will this happen?

The Shared Lives service will provide information and / or training to everyone involved in Shared Lives arrangements, so that they understand that violence and aggression (whether verbal or physical) towards Shared Lives Carers and Workers is not acceptable and will be treated very seriously. The Shared Lives Agreement will include information about the likely consequences of this sort of behaviour.

The Shared Lives Registered Manager and Shared Lives Workers will be aware of legislation, guidance and good practice around issues of violence / aggression. In addition they and Shared Lives Carers will be provided with information and training. This will help them understand the causes of aggressive behaviour and how to defuse or manage situations giving rise to this. It will also help them understand their responsibilities to safeguard themselves and other people from harm.

[Refer to Section 10 – Working and responding positively to people who challenge](#)

If the Service User sometimes acts in ways that might cause significant risk to others, then the ways of dealing with this will be explained in their placement plan. A risk assessment and risk management plan will be included as part of this. The Shared Lives Carer(s) will also receive specialist training and appropriate professional support if this is required.

If Shared Lives Carers or Workers are subject to violence or aggression during their work, they will be provided with any necessary support following the incident. This includes support to consider reporting the incident to the Police.

If a Service User in a Shared Lives arrangement has acted in a violent or aggressive manner towards their Shared Lives Carer, consideration will also be given to whether the arrangement should continue. Any decision to end an arrangement will involve the Service User and / or their representative, their Care Manager, the Shared Lives Carer and Shared Lives Officer.

All incidents of violence or aggression towards Shared Lives Carers and / or Workers will be recorded, with Shared Lives Carers being required to notify the scheme without delay. The procedure for Accidents and Dangerous Occurrences will also be followed, where appropriate. All incidents will be reviewed, so that lessons can be learned and actions taken to reduce the risks of a similar event happening again.

## 25. Harassment and Bullying

The Shared Lives Service recognises that harassment, bullying and discrimination are unacceptable anywhere in the service. If people in Shared Lives arrangements or Shared Lives Carers / 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 / comments / physical contacts that are unwanted and cause offence or intimidation. This kind of behaviour is unlawful, so if a worker in the service 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 (or a member of their family) has been responsible, it may become necessary to end the arrangement.

If Shared Lives Carers or 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 that it must stop. If this is difficult for them 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 or other people 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 their Manager. 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 Shared Lives service takes positive action to prevent incidents of harassment and bullying. This is done by providing Shared Lives Carers and Workers with information / 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. Working practices are kept up-to-date through ongoing monitoring, supervision, reviews and training.

***Refer to Carers Guidance – Managing Concerns about conduct***

## **26. Smoking and the Use of Alcohol and Drugs in the Service**

Smoking can be a serious fire risk, a serious health risk (to smokers and non-smokers) and is illegal in some places. Certain drugs are illegal. Both alcohol and drugs can be a serious health hazard, affecting people's behaviour, relationships and their ability to do their job. Therefore the Shared Lives service has to take action to work within the law, as well as to safeguard the health, safety and well-being of people using / working in the service.

### **How will this happen?**

Amongst the things that will be taken into consideration, when we match a person with a suitable Shared Lives Carer, will be whether the potential Service User is a smoker and whether they have any preferences about being in a situation with other people who smoke.



If the potential Service User is a smoker, a risk assessment and risk management plan will be included and reviewed as part of their **placement plan**, in order to make sure the fire and health risks are minimised in the Shared Lives arrangement. If the Service User wishes to give up smoking, their Shared Lives Carers can provide support in this and / or in accessing the counselling / health services that are available to help with this.

Drinking moderate amounts of alcohol is a normal and enjoyable part of many people's Lives; the Service User has the right to make choices and lead the kind of life they want.

However if their 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 Service User so that the Service User is able to understand all the possible consequences. The Service User will have the opportunity to access the counselling and health services that can help them if they wish. If the use of alcohol or drugs by the Service User's relatives or friends is causing a problem for the Service User and / or others in the Shared Lives arrangement, this will also be discussed with the Service User 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.

### **Respecting house rules**

Each Shared Lives Carer will have particular house rules for their own home and some of these may relate to smoking or drinking. The potential Service User will be given information about house rules before making a decision to go ahead with a Shared Lives arrangement. The potential Service User can then decide whether it is the right kind of arrangement for them. The information about house rules will also be written in a Service User's **Shared Lives Agreement**.

If a Service User disregards the house rules or the responsibilities they have in the Shared Lives Agreement, this will be discussed and may lead to the ending of the arrangement.

Shared Lives Carer's are not to allow any Service User to use or bring any illegal substances into their homes. If a Shared Lives Carer has any concerns that a Service User in their care is misusing illegal drugs inside the home the Shared Lives Carer should immediately contact the Shared Lives Officer or Emergency Duty Service (Out Of Hours). Shared Lives should be the first point of contact if you come across/find and illegal drugs within the home, you will then be advised of the next steps to follow based on individual circumstances. A Shared Lives Carer is to not handle any illegal substances that is found within their property. A Shared Lives Carer are not to participate with any purchasing or distributing of illegal substances.

### **Working safely**

Shared Lives Carers and Workers in the service 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 a Service User and / or other people / 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 by Shared Lives Carers having their approval reviewed by the Approval Panel, or disciplinary proceedings for Shared Lives Workers.

If a Shared Lives Carer is found to be under the influence of alcohol or drugs while supporting or caring for a Service User, the risks in the situation will be assessed and suitable alternative care arrangements made. (This could be a short-term arrangement covering a single incident, or a longer-term arrangement if necessary.)

People working in or visiting our office(s) will not be able to smoke in the building.

The use of illegal drugs anywhere in the service will be investigated and dealt with accordingly. This may mean reporting to the Police.

## **27. Whistleblowing**

The Shared Lives Service promotes the health, safety and well-being of all the people who are part of it or using it. One way of doing this is to make sure that the people who are working in the service can report any concerns they have about the way the service is run, or about the way that care or support is provided for people in Shared Lives arrangements.

### **How will this happen?**

People who are working in a service are sometimes in a position to notice poor or bad practice. It is really important that they feel they can report this without worrying about whether they will be blamed or punished in some way for bringing attention to the issue.

The Shared Lives Service will protect Shared Lives Carers or other workers from reprisals and negative consequences, provided they are raising their concerns in good faith and are not acting maliciously.

The kinds of concerns might be:

- A criminal offence.
- Abuse of someone in a Shared Lives arrangement.
- Endangering the health or safety of people.
- The standard of care falling below acceptable levels.
- Breaches of confidentiality.
- Theft or misuse of money.
- Misconduct of Shared Lives Carers or Workers in the service.

Shared Lives Carers with concerns should contact their Shared Lives Worker or the Shared Lives Registered Manager who will try to resolve the problem informally if possible. If this isn't possible, or the matter is very serious, an appropriate formal procedure will be followed, e.g. this could be the procedure for Complaints and Concerns, or for Safeguarding against Abuse or Neglect, or disciplinary proceedings.

The concern will be investigated and the Shared Lives Carer who has raised the concern will be told the outcome. If they cannot be told the outcome for legal reasons or for reasons of confidentiality, they will still receive confirmation that the investigation has been completed and the reasons why no further information can be shared.

If the Shared Lives Carer is not satisfied that the concern has been looked in to properly and appropriate action taken, they can report the matter outside the service, e.g. to the CQC or relevant care regulator or other relevant regulatory body.

There is also a charity that provides information and assistance for people in this position called 'Public Concern at Work'. Contact number 0207 404 6609.

## 28. Confidentiality

The Shared Lives service understands that information is confidential when it has been spoken or given in private. Having accurate and up-to-date information about the Service User is essential in order to deliver a service that can meet their needs and wishes. As that information is very personal, it is important that it is Shared only with people who really need to know it.

### *Refer to Carers procedure for Record Keeping*

#### How will this happen?

All information and records held by the Shared Lives service are kept securely so that unauthorised persons cannot access them. This includes records kept by Shared Lives Carers. The scheme keeps personal records in line with GDPR regulations.

We will ask the Service User for permission before disclosing information about them to another person or organisation. This usually happens only when the other person or organisation needs the information, in order to provide the Service User with the care or support they require. Information that the Service User has given us in confidence will not be shared with their family or friends against their wishes.

In certain very limited circumstances, we may have to share information about the Service User without their agreement. This would be if it were essential for their 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 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 Carers this would result in a review of their approval.

Shared Lives Carers are entitled to confidentiality themselves. It will of course be necessary to share certain information about Shared Lives Carers with people who **are** considering a Shared Lives arrangement or 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 Carers. 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 or children, or to prevent an offence being committed. In this event, the Shared Lives Worker will inform the Shared Lives Carers and explain the reasons why it is necessary.

## 29. Data Protection

### Handling confidential information

It is very important that Shared Lives Carers have full information about the people they support. It is essential that you let the Shared Lives service know if you feel you do not know enough about a person, in order to make an informed decision about whether to offer them a home or support them appropriately.

All staff and Shared Lives Carers have to give an undertaking to safeguard this confidential information. Staff do this by signing a '**confidentiality agreement**' form; Shared Lives Carers agree to uphold the confidentiality of information as part of their **Shared Lives Carer Agreement**.

Friends and neighbours who show curiosity / ask questions about the person's background should be helped to understand that both the person the Shared Lives Carer supports and the Shared Lives Carer's family have a right to reasonable privacy, and that Shared Lives Carers need to maintain confidentiality. If the Shared Lives Carer has any doubts about what information can be shared and what has to remain confidential, please raise this with their supervising Shared Lives Officer.

It is also supportive to talk with the person the Shared Lives Carer supports and help them decide what to say when questions are asked.

During a person's Shared Lives arrangement, the Shared Lives Carer will receive written information about the person they support, the Shared Lives Agreement form and notes from planning meetings / reviews. Records should be kept securely at all times.

***Refer to Carers procedure for Record Keeping***

### Publicity and the Service User

When considering any publicity, it is important to remember that the Service User's written permission / consent needs to be obtained. If there are any queries about their capacity to provide this permission, the Shared Lives Carer needs to liaise with their Shared Lives Officer prior to any publicity being undertaken.

If the Service User has achieved something, e.g. like being in a winning sports team, it is quite proper in most cases that they receive appropriate publicity, but the Shared Lives Carer should always seek advice from their supervising Shared Lives Officer to ensure that this is actually appropriate in the individual circumstances.

This applies to any group activity which the Service User is taking part in and which receives publicity, e.g. if there was to be a newspaper feature article on their work placement. Such publicity should not, of course, identify them as being in the Shared Lives scheme. There would generally be no reason to shield them from such publicity unless, of course, there were exceptional circumstances in their background, which make this inadvisable or would make the Service User vulnerable.

If the press, radio, TV, etc., contacts the Shared Lives Carer directly about the person they support or any publicity which identifies the Service User as being in a Shared Lives arrangement, the Shared Lives Carer should always refer to their supervising Shared Lives Worker or the Service User's Care Manager. If there is likely to be major publicity over several days, e.g. if a person is missing from their home, the Press and Information Officer and senior staff of the Communities Directorate will usually coordinate any enquiries. The Shared Lives Carer should never make comments to the media about a Service User they support, unless specifically authorised by the Shared Lives Registered Manager to do so. The Shared Lives Carer is also advised to consult their supervising Shared Lives Officer, before making any statement to the media which relates to the Shared Lives service.

### **30. Consultation and Participation in the service**

We aim to run the Shared Lives service in ways that are in the best interests of Service Users who are making use of Shared Lives arrangements. Service Users and Shared Lives Carers have a right to have their complaints, comments and ideas about running the service listened to and respected. It is therefore important that they are encouraged and helped to make their views known about any aspect of the service, and that they can take part in decisions affecting it.

#### **How will this happen?**

The Service User and Shared Lives Carers will have the opportunity to take part in managing, reviewing and improving the service in the following ways:

- Being consulted about their experiences of daily life in the Shared Lives arrangement.
- Being involved in reviewing existing working practices, policies and procedures, or in drawing up new ones.
- Being involved in the recruitment / selection of Shared Lives Carers and / or volunteers / Shared Lives Workers in the service.
- Being involved in the training and development of Shared Lives Carers and / or Shared Lives Workers.
- Planning consultations or surveys.
- Monitoring the quality of the service.
- Developing plans for the future.

There are several ways to take part in these activities, e.g. by:

- Coming to meetings or discussion groups that are specially arranged for people in Shared Lives arrangements.(either Service User groups or Shared Live Carer groups)
- Joining in meetings with Shared Lives Workers.
- Contributing to surveys of levels of satisfaction amongst people in Shared Lives arrangements.
- Being asked individually for their views when their placement plan and Shared Lives Agreement are reviewed, and whenever their Shared Lives Carer's work is reviewed.
- Being a representative on the Approval Panel.
- Helping to interview prospective Shared Lives Workers.
- Being involved in reviewing Shared Lives Workers, when their probationary period is coming to an end or annual appraisals are due.

Information that the Service User needs in order to take part will be provided in a format that they can easily understand. If they require support to take part, this can be provided by workers in the service, an independent person, a local advocacy service, an interpreter, etc.

The Service User's family and / or representative will have separate but similar opportunities to make their views known too.

The Service User and / or other people in Shared Lives arrangements will be provided with information about the outcomes when they have been consulted, taken part in surveys and been involved in reviewing / developing or changing the service in other ways. The results of consultations and surveys will also be published and made available to other interested people or organisations such as the Service User's family and / or representative, Care Managers or the CQC / other regulatory bodies as appropriate.

### 31. Equal Opportunities

All people have the same human rights. However, the Shared Lives service recognises that some individuals and groups can sometimes be discriminated against, e.g. on the grounds of race, religion, gender, sexual orientation, disability, HIV / AIDS status, marital status or age. We are committed to working in ways that promote equality of opportunity and anti-discriminatory practice. This applies in the community, to Shared Lives arrangements and the recruitment of Shared Lives Carers or Workers in this service.

#### How will this happen?

As part of their induction, Shared Lives Carers and Workers in this service will receive information and training about the legislation relating to equal opportunities and about the Service User's rights 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 Carers and Workers are encouraged to be aware of their own behaviour and attitudes. Their personal development is promoted through regular review / appraisal of their work and individual training plans. Working practices are kept up-to-date through a number of ways. These include ongoing monitoring, supervision and training. Learning from experiences and complaints is also important. The service is also continually striving for improvement.

We make sure that anyone who is interested in Shared Lives arrangements can access information by providing this in plain English, as well as in a variety of other languages and formats when required. The criteria for who can be offered Shared Lives arrangements are explained in our **Statement of Purpose**. Arrangements for accessing the service are explained in our '**Procedures for Shared Lives arrangements**'.

Shared Lives arrangements are not suitable for everyone, but the decisions about this are based on whether we can meet a person's needs rather than on their individual differences.

Applications to become a Shared Lives Carer are actively encouraged from a wide range of people. We advertise in different ways in order to reach a cross-section of community interests. Assessments aim to find evidence of whether the applicants have the experiences and competences required for this role. This includes having awareness and understanding of a multi-cultural society. Applicants are asked about their attitudes and values, their commitment to support people as equal members of the community and their ability to encourage people to behave without prejudice or unacceptable discrimination. Approval decisions are based on information and evidence from the assessment; they depend on whether the applicants can meet the needs of people requiring Shared Lives arrangements.

The Approval Panel consists of people who are or have been making use of Shared Lives arrangements, or who are or have been Shared Lives Carers. Other members are recruited according to their particular areas of expertise and the relevance to Shared Lives, with the aim of having a useful cross-section of experiences. Decisions about suitability are based on potential members' knowledge and experiences relating to Shared Lives. We aim to recruit members that reflect the population in the geographic area and / or the specialism's of this service.

When matching people who have been referred for a Shared Lives arrangement with available Shared Lives Carers, a range of issues will be considered in order to find the match that is most likely to be successful. The most important issue will be whether the Shared Lives Carer can meet the needs of the person, but other factors will include, e.g. their ethnic origin, religion, health, gender, age, interests, links to the community and plans for the future.

Applications to work in this service (whether paid or voluntary) are also welcome from a wide range of people. Written job descriptions together with person specifications, explain the essential experience, desirable experiences, skills and qualifications for the job. Recruitment will depend on references, completion of other safety checks, employment history and qualifications. As part of evaluating whether we are being effective in promoting equal opportunities, we monitor our referrals, advertising, applications, assessment statistics and procedures. In order to do this, we may ask that an equal opportunities form is completed. Our office premises are accessible to all people and special equipment or reasonable adaptations can be provided for workers when necessary, e.g. Braille, computer, adjustable desk, etc.

### 32. Helpful phone numbers

Shared Lives carers may find it useful to record the telephone numbers and other contact details of the most relevant services in the space below

Name	Address	Phone Number
WBSL Office	The Phoenix Resource Centre Newtown Road Newbury RG14 7EB	01635 520175
EDT (Emergency Duty Tm)		01344 351999
West Berkshire On-Call Manager	ON-Call divert	01635 503483
WestCall (Out of Hours emergency GP)	Newbury Community Hospital London Road, Benham Hill, Thatcham RG18 3AS	111
Police Non-Emergency		101
Crisis Mental Health Team		0300 365 2000
Adult Social Care WBC		01635 503050
Boots Northbrook Street		01635 40396
Boots Retail Park		01635 552570
Bracknell CTPLD		01344 311737
Citizens Advice West Berkshire		01635 864245
Campion Unit Prospect Park		01189 605276
Castle School post 16		01635 42976
Community Mental Health Tm		01635 292020
Community Furniture Project		01635 43933
Greenfield Hse Resource Centre		01189 432074
Growing 4 All		01635 297200
Growing Together		01635 299949
Hungerford Resource Centre		01488 682601
Interakt, Tsippy McAuliffe		07900 867704
Joint Care Provider Service (Leaving hospital team)		01635 503173
Link - Up		01635 778120
Little House		01344 451226
WBC Main office		01635 551111
Maximising Independence		01635 503173
West Berkshire Mencap		01635 41464
Newbury College		01635 845000
Newbury CTPLD Health Tm		01635 503551



NHS Direct		111
Phoenix Resource Centre		01635 520150
Prospect Park Hospital		01189 605000
Reading CTPLD		0118 553742
Reading Shared Lives		01189 373700
Royal Berkshire Hospital		0118 3225111
The Advocacy People		0330 440 9000
Yume Project		01635 292474

33. **Appendix 1 – Statement of Purpose**
34. **Appendix 2 - Carers Guidance – Lone Working**
35. **Appendix 3 – Carers Guidance – Management of Medicines**
36. **Appendix 4 – Carers Guidance – Management of Money**
37. **Appendix 5 – Carers Guidance – Managing Concerns around conduct**
38. **Appendix 6 – Carers Guidance – Record Keeping**
39. **Appendix 7 – Carers Guidance – Safeguarding & DoLS**