

Virtual Visit to Shared Lives Stoke

19 July 2021 – 23 July 2021

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SharedLives
Stoke-on-Trent



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Executive Summary

Due to the outbreak of the Coronavirus Pandemic and the former suspension of the Enter and View Programme, Healthwatch Stoke-on-Trent took the opportunity to pilot a series of virtual visits to ensure that public conversations, experiences and concerns can continually be shared with their local Healthwatch. Our Virtual Visit Programme was designed to gain perspective on respective health and social care services by providing an anonymous opportunity for service users, staff, relatives and managers to talk about their experiences centred on the planning and delivery of the related service. All engagements with participants were done remotely with no face to face interaction. Information was shared via phone calls and survey questionnaires.

The report details our recommendations and acknowledgements, a background, the methodology utilised, an overview of findings and a selection of experiences from management, staff, service users, professionals and relatives.

Upon completion of collaborative engagement with Shared Lives Stoke, Healthwatch Stoke-on-Trent organised an announced virtual visit to Shared Lives Stoke between 19 July 2021 and 23 July 2021. The rationale for the virtual visit was to capture the experiences and opinions of managers, service users, carers, professionals and relatives associated with the scheme, to identify what works well, not so well and what could be improved to enhance the quality of service delivery.

The manager of Shared Lives Stoke disseminated visit details to carers, service users, professionals and relatives to assemble interested participants. To engage and collect the respective grouped experiences qualitative research was utilised by way of questionnaires and semi-structured interviews.

18 individuals participated and shared personal experiences. The 18 outcomes were shaped and discussed in the largely positive findings around the following 5 quality measures:

- COVID-19 Safety
- Effectiveness of Care
- Communication
- Leadership and Management
- Adaption and Responsiveness

The report features the positive delivery of service at Shared Lives Stoke and the adapted service adjustments during COVID-19, but it should be noted that there are **5 recommendations** for consideration which are based upon participant opinions.

The Shared Lives project looks for carers who can welcome an adult with learning disabilities into their home to live - very similar to fostering a child. They will be people who need support to become part of a real family, instead of living in residential care or being cared for by a team of support workers.

Background

Who was involved

- 3 HW SOT Representatives
- 3 Service Users
- 4 Shared Lives Carers
- 4 Relatives
- 3 Management
- 4 External Professionals

Service details

Shared Lives Offices
The meadows
Wrenbury Crescent
Berry Hill
Stoke-on-Trent
Staffordshire
ST2 9JZ

Reason for visit

This visit was one a series of virtual visits to health and social care services in Stoke-on-Trent. With the aim to collect evidence of what works well and what could be improved to make people's experiences better. An opportunity for people to share experiences and opinions.

Visit details

19 July 2021 - 23 July 2021

Announced visit

No declarations of interest

Phone calls

Online surveys

Service description

Stoke on Trent City Council has a Shared Lives Scheme within its Learning Disability Provider Team. Shared Lives Stoke is a unique person centred approach which finds alternative accommodation for those people that are eligible for the service.

Numbers and figures

22 approved carers registered with Shared Lives Stoke

11 households

6 of **11** households currently caring for an individual

Disclaimer: This report relates only to the service viewed on the date(s) of the visit and is representative of the views of the service users, relatives, manager and coordinators and external professionals who contributed to the interviews and questionnaires between the noted dates.

Methodology

In response and adaptation to the Coronavirus Pandemic, Healthwatch Stoke-on-Trent introduced a new remote approach to monitor and engage with health and social care services, including those connected to the service. Our visit operated virtually; telephone semi-structured interviews and survey questionnaires.

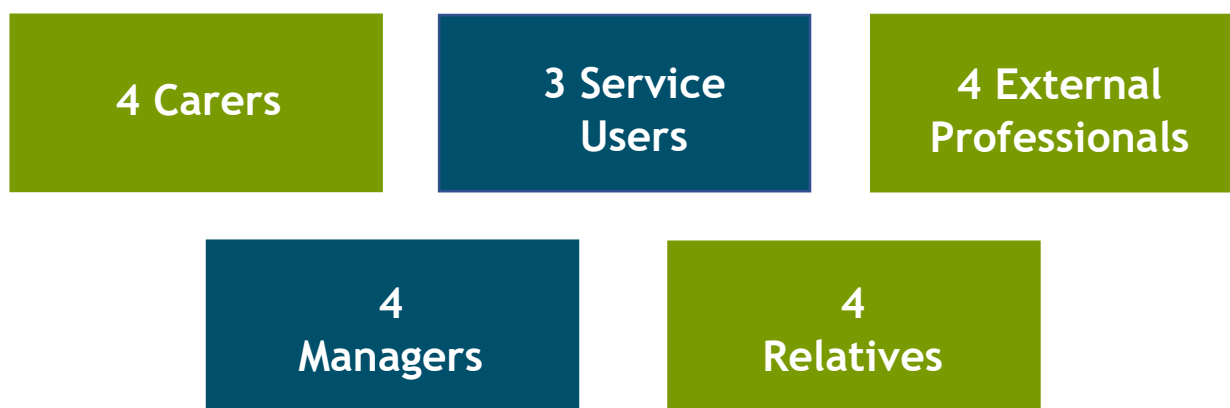
Our visit was an announced visit with full support and cooperation of Shared Lives Stoke to facilitate the visit. Initially, we had a virtual meeting with Shared Lives Stoke to discuss logistical planning, who would be involved, how to promote equality and inclusion and how to best collect experiences from a range of participants with different perspectives and needs.

The Shared Lives Stoke manager agreed to collate a list of willing participants associated with Shared Lives Stoke, which encompassed management and coordinators, service users, carers, professionals and relatives. Enlisted participants were later shared with Healthwatch Stoke-on-Trent authorised representatives to connect with and conduct telephone interviews. Participants that did not wish to complete telephone interviews completed an online survey. There were five distinctive surveys and semi-structured interview guides created to ensure questions being asked were relevant to participants' understanding and requirements. Each of which were made up of open questions, numerical approximations and judgement grades.

Our planned visit grouped questions around the following aspects of care provision:

- COVID-19 Safety
- Effectiveness of Care
- Communication
- Leadership and Management
- Adaption and Responsiveness

All returning data was analysed on Snap Surveys Software to provide an accurate account of individual experiences and opinions which enabled a factual findings summary. During the visit we consulted with:



What we Found

COVID-19 Safety

We analysed the collective experiences of service users, managers, carers, professionals and relatives regarding COVID-19 safety procedures put in place by Shared Lives Stoke. Insight into the 18 responses reflects five distinctive viewpoints, yet it is clear that the experiences indicate positive leadership and assured control around the safety of COVID-19.

100% of service users were still able to access medical care during COVID-19

100% of external professionals had no welfare concerns within the last 6 months

Service users described their care during COVID-19 as:

33% Excellent

33% Good

33% mixed views

In view of the service user who had mixed views around care during COVID-19, the rationale for this being limited activities which led to increasing boredom. This may be an **opportunity for Shared Lives Stoke to further strengthen open conversations** with the aim to capture a deeper layer of service users feedback. However, it should be noted that during COVID-19 many social activities have limited freedom and opportunity. Consequently safety precautions have been a non-negotiable priority for Shared Lives Stoke. Shared Lives Stoke carers believed that they implemented COVID-19 measures effectively which led to some sacrifices being made. Considering this, both the carers and service users viewpoints sub-consciously align to safeguard the welfare of respective individuals.

Despite the Coronavirus Pandemic implications **100% of carers were happy with COVID-19 guided support**, which included full PPE and lateral flow tests supplied with supplementary training for those who required further reassurance. Questionnaires and close contact between coordinators and carers was constant to review COVID-19 symptoms. It should be noted that no carers had COVID-19 whilst supporting a service user.

75% of carers were happy with COVID-19 related training and preparation received and deemed it to be very thorough. **15% had mixed views** because they found online training a challenge. Looking ahead, Shared Lives Stoke could look to identify preferred training methods when it is deemed safe and look to offer tailer continuous professional development courses (CPD) for the carers learning and development dependent on the carers needs.

Effectiveness of Care

Service users, relatives and professionals deemed the **effectiveness of care to be of a good standard**. Overall, service users felt safe within the home and were happy with the quality of food provided, as well as the space and facilities within the home. The vast majority of conversations with all participants confirmed the care quality is well safeguarded and monitored to ensure that quality and improvement is continuously reviewed. In addition, the accessibility of all home facilities and interiors are well assessed to ensure that the service users needs can be fulfilled without significant sacrifice.

100% of service users felt safe within their home

100% of professionals deemed care quality to be excellent

100% of Shared Lives Stoke carers were clear on safeguarding procedures

Conversations with carers and service users reflected positive support provided. There appears to be a healthy relationship between service user ownership and empowerment and regulated support. For example:

“The person I care for has a passion for doing their own washing, ironing and tidying the clothes away. The diet is well monitored and I prepare meals to make sure there is a healthy balance. I support with hygiene maintenance too such as cleaning teeth.”

“We administer medication on a regular basis and constantly review with the Share Lives Coordinator.”

In contrast, when asking **what changes could be made to improve the care**, and in particular the transition for service users integrating with Shared Lives Stoke carers, a relative shared they believed additional time should be made for the service user and carers to ensure that carers do fully understand service users personality traits and recognise behavioural needs prior to placements. This may be an opportunity for Shared Lives Stoke to establish a deeper integrated phased plan with the service user and carer to agree timescales and transition expectations.

Furthermore, the referral process from social workers to the Shared Lives Stoke scheme could be improved to assure a more rigorous placement selection for service users. We identified that due to an unsuitable placement, both the carer and service user were displeased with the incompatible match and consequential unsettlement. Therefore, a higher priority area for Shared Lives Stoke is to address the **occasional underperformance of unrealistic referrals** being made into the scheme.

Communication

All participating groups reflected and agreed that the communication received from Shared Lives Stoke is mostly effective and timely. Moreover, communication was described as regular and consistent with meaningful updates regarding changes on critical health needs, such as medication.

Carers acknowledged the positive support available from Shared Lives Coordinators, who have assisted with digital learning during the pandemic.

100% of relatives happy with communication received from service provider

100% of carers communicate regularly with coordinators through catch up sessions

Despite this positive appraisal, **one carer raised a dispute regarding communication**. This was because of a range of changes to scheme related social activities to adhere to COVID-19. A carer felt that the service user was informed of respective changes ahead of the carer which led to confusion and misunderstanding. The carer suggested that any shared information should be mutually shared between service user and carer. Therefore, it may be beneficial to review communication strategies in place to inform and update all parties collectively.

Furthermore, an **improvement suggestion** raised by a service user was for the carer to listen to personal activity choice desires. At times the service user felt that they aren't listened to. Consequently, the service user would prefer to be involved within the social activity decision making, where and when possible.

100% of professionals were satisfied with communication methods applied during COVID-19

75% of service users communicate their needs well with carers

It should be noted that Shared Lives Stoke had **excellent feedback around being listened to** and acting on concerns raised. Secure messages are also used when dealing with sensitive data which pleased many carers and relatives, while there is a great deal of consideration when communicating. For example:

“The coordinator always texts me before a phone call because the service user does not like me being on the phone when they are around.”

“The Shared Lives Stoke team are always available to talk and listen. You're never made to feel like a problem.”

Leadership and Management

The manager of Shared Lives Stoke has been in position since the implementation of the scheme approximately 3 years ago. The manager and coordinators appreciated that the previous 12 months have been challenging which has required ongoing learning and development to administer care safely. Some of the **challenges noted** were around respite, inappropriate referrals, training adaptations and quality monitoring.

Nevertheless, management and coordinators demonstrated active forward planning and resilient team cohesion to satisfy COVID-19 requirements, such as PPE and testing. This undoubtedly mirrored carer awareness as all carers were aware of COVID-19 testing procedures and national guidelines to abide by. In support of this up to date training for carers has been provided to enhance knowledge and bolster performance confidence. Although, a carer indicated that they would be eager to receive more **frequent text messages to highlight training or personal development** (CPD) courses to enrol onto.

“Training is extremely thorough and the coordinators keep a close eye on carers to make sure that we understand.”

“All of the training that we need has been provided to us.”

“I would like to receive text messages so that I can consider taking further relevant courses.”

Shared Lives Stoke is monitored **well by management and coordinators** to include home assessments, quality assurance and general welfare checks of service user needs. The management appear to have created a service structure with an ambiance of family orientation to ensure that all service users are cared in line with that primary approach. All feedback confirmed respective participants are content with service monitoring.

Connected professionals, carers, relatives and service users shared unanimous feedback that the relationships they have with management and coordinators is excellent. All individuals felt valued and listened to by management to which has previously led to changes in decision making and adaptation to service delivery recommendations. **75% of professionals rated the management as excellent and 25% good.**

Furthermore, Shared Lives Stoke overall stated that they are supported by their senior executive management which included Shared Lives + and Stoke-on-Trent City Council, which enables the team to function efficiently and ask for support or confirmation when applicable.

“The manager expressed continued appreciation and thanks for the above and beyond efforts that carers put in to provide excellent care.”

Adaptation and Responsiveness

“The service has adapted to new ways of working around digital working methods. Such as training, checking in with families and quality assurance.”

“Sceptical at first of the service and if it could work. But proved very wrong and that it has been managed very well to achieve the current state of success.”

The planning and service delivery of Shared Lives Stoke has demonstrated timely but efficient adaptations to COVID-19 national guidance. Carers echoed that Shared Lives Stoke had provided excellent support during the pandemic and provided training with updated resources as and when required. It is clear that the scheme adapted its services and appropriately restricted some services. These include respite relief and advising carers what social activities should and should not take place during COVID-19.

Despite positive strides made over the previous 3 years and the blossoming reputation of the Shared Lives Stoke service, the manager highlighted **forward thinking plans to strive to continue to improve service delivery**. Progressive ideas included, recently enrolling carers and staff onto a positive behaviour support training CPD course with North Staffordshire Combined Healthcare Trust, themed weeks for educational awareness such as hydration and bowl awareness, looking to increase education around health, reviewing key lines of enquiry to ensure the service covers all angles and is able to evidence best practice, considerations for social events prior to formal meetings and panel introductions, a new Improvement Group to be in place to reflect and evaluate service delivery and enhancing digital training.

For further consideration and adaptations, one relative stated they would like to see the service evolve for the elderly too. However, it should be acknowledged that this may not be within capacity of the Shared Lives Stoke service delivery scope. Moreover, it was noted that Shared Lives Stoke could expand recruitment further to have a wider pool of available carers.

Shared Lives Stoke made **good strides to utilise digital technology** to continue to enable a safe and inclusive service during COVID-19. For example, remote catch up sessions were a regular occurrence for staff, carers were able to meet with coordinators and some external professionals via online meetings, relatives and service users were invited to online quiz nights and garden visits were scheduled under safe COVID-19 measures. All with the aim of boosting the morale.

“Quiz Zoom events have been put on to get everyone together during difficult periods and keep moral high.”

“Wish more people knew of the service and more promotion of Shared Lives Stoke, as people don't realise what they're missing.”

“Life changing service for preparing, supporting and developing people's lives and enhancing family support , great family bond.”

Conclusion and Acknowledgements

Following 18 individual engagements, comprised of management and coordinators, service users, relatives, carers and external professionals our findings have identified that the service delivery at Shared Lives Stoke has demonstrated excellent COVID-19 safety and awareness, the effectiveness of care was overall deemed good, communication was agreed as highly proficient, the management and adaptive practice of the service was exceptional. In summary, the manager and coordinators take evident pride in creating a family oriented environment to ensure service user and carers are well cared for and supported appropriately.

Nevertheless, while the current level of service provided is to a good standard, based upon anonymous viewpoints from participants there are **5 areas for consideration and development** which are explained in greater detail in our recommendations below.

Healthwatch Stoke-on-Trent would like to thank all of the 18 participants associated with Shared Lives Stoke for their time and openness to facilitate an effective virtual visit.

Do health and care services
know what you really
think?



it starts with
YOU

healthwatch
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Recommendations and Service Provider Comments

Any recommendations formed are designed to support and offer constructive insight. Moreover none of the feedback items received should be deemed as a complaint but purely areas for consideration and development for the benefit of the service.

Healthwatch Stoke-on-Trent would like to thank Shared Lives Stoke for their comments, feedback and future plans and ideas.

Recommendation One

HW SOT - Review opportunities and methods in place for service users to provide feedback specifically on improving their social lifestyle activities.

Shared Lives Stoke Response - “It was disappointing to read that people were dissatisfied with levels of activity provided by the Shared Lives Carers, we need to bear in mind that as a nation there has been a relative amount of boredom for everyone during Covid 19 lockdowns, it’s been a very difficult time. We have had to consider how we keep everyone safe which may have meant reduced activities but this would have been following government guidance. To ensure we address the issue highlighted we plan to focus over the next few months, on seeking feedback specifically about social activities at the quality assurance visits that take place with those accessing the service and our Shared Lives Carers. Where we find people aren’t fully satisfied with the level of social activity we can address this directly with the Shared Lives Carer. ”

Recommendation Two

HW SOT - When it is deemed safe, consider a hybrid training programme for carers to include in-person and digital methods to cater for attendees’ learning preference.

Shared Lives Stoke Response - “Moving our training and CPD events to video call has been the safest option whilst ensuring our Shared Lives Carers stay up to date with their mandatory training, new Shared Lives Carers received their initial training and other development opportunities have been facilitated. We fully recognise that video call training isn’t for everyone and we aim as soon as it’s safe to reintroduce classroom-based training, as it had been previously. We have also had positive feedback from some Shared Lives Carers to say that they prefer the video call training as they haven’t needed to travel and it’s been more convenient, so moving forward we will be aiming to get a balance once we can.”

Recommendation Three

HW SOT - Re-evaluate the processes (collect service user and carer feedback) in place to assure that the transition period for service users integrating with carers long term allows enough time for carers to fully understand service user personality traits and triggers, and enables the service user to adjust comfortably.

Shared Lives Stoke Response - “Getting the matching right is crucial to a successful placement whether long or short term, we have been developing our skills in this area since the service began and have learned when matches haven’t worked. Over recent months we have developed an improved matching checklist which has helped us to identify improved matches between people wanting to access the service and Shared Lives Carers. When we are looking at a long-term placement we always fully involve the person wishing to access the service, the important people in their lives and the Shared Lives Carer in any next steps to ensure everyone is happy to moved forward, we will continue to monitor this process to ensure it is effective.”

Recommendation Four

HW SOT - Address inappropriate referrals made by social workers into the scheme. This may be an opportunity to review with the social worker team previous encountered barriers in anticipation of greater clarify around Shared Lives Stoke requirements.

Shared Lives Stoke Response - “To help improve the types of referrals we receive we have worked with our colleagues in the assessment team and delivered some sessions to discuss what works and what doesn’t work in Shared Lives Stoke. We have been able to put this together after feedback from our valued Shared Lives Carers and having to face challenges that some placements have brought about. Since we have carried out this piece of work with our assessment team, more appropriate referrals are coming through and when the assessment team need advice we can refer to the ‘what works and doesn’t work’ document.”

Recommendation Five

HW SOT - Explore current communications strategies in place, to firstly ensure messages are distributed equally and timely to service users and carers to avoid confusion, and secondly to promote CPD opportunities to carers, such as awareness of community or online courses to enrol onto.

Shared Lives Stoke Response - “ Thank you for bringing this to our attention, we were unaware that this had been an issue with a Shared Lives Carer not knowing about an activity before the person accessing the service and it’s difficult to know the individual circumstances around this incident. We would apologise for any anxieties this may have caused. As a team we will continue to pursue excellent communications with the people we work with and it will be discussed in our August team meeting.

With any training or events that are taking place or are available to Shared Lives Carers we email out to all Shared Lives Carers in update emails. Where Shared Lives Carers have specific other preferred methods of communication where logistically and technically possibly if people advise of their preference we will endeavour to meet them.”

About us

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