

Report to: **STRATEGIC COMMISSIONING BOARD**

Date: 23 May 2018

Reporting Member / Officer of Strategic Commissioning Board Brenda Warrington Executive Leader
Sandra Whitehead Assistant Director Adult Service

Subject: **CONSULTATION ON A BANDED PAYMENT SYSTEM FOR SHARED LIVES PLACEMENTS.**

Report Summary:

This report seeks authority to enter into consultation with Shared Lives Carers and key stakeholders to consider a banded payment system for carers. Shared Lives currently has a fixed rate of pay for carers delivery of services, despite differing levels of need for the people being cared for.

The service currently has 88 approved carers providing support to 125 service users in long term, respite and day support placements. The scheme wishes to expand its provision to support service users with more complex needs and young people leaving care. A banding payment system will assist and recognise Carers who support more challenging needs and recompense them accordingly.

Various Shared Lives schemes across Greater Manchester have moved onto a banding system, and the introduction of a banding system will support the diversification and expansion of the service in-line with service transformation objectives.

Recommendations:

That the Strategic Commissioning Board support the proposal for the Shared Lives Service to enter into consultation with carers, and key stakeholders about the implementation of a banded payment system for carers.

Financial Implications:
(Authorised by the statutory Section 151 Officer & Chief Finance Officer)

ICF Net Budget	£'000
Tameside Council – Adult Services Section 75 Decision to be determined by the Strategic Commissioning Board	777
Additional Comments <p>The proposed banded payment system outlined in this report acknowledges the different complexities of care provided. It also looks to future proof the service by attracting new carers through a more incentivised payment approach.</p> <p>The proposed banding system will increase expenditure by an estimated £11,500 per annum based on existing service users. However this is subject to the outcome of the consultation.</p> <p>It should be noted that there are wider cost and qualitative</p>	

	benefits that are realised by the Shared Lives service being in place as the service provides improved outcomes and is a more cost effective option when compared to the cost of these placements in the independent sector.
Legal Implications: (Authorised by the Borough Solicitor)	The Shared Lives Scheme is regulated under Health and Social Care Act 2008. The change to introduce a banding system within the scheme attracts the duty to consult on the proposed change. The legal requirements as to consultation must be followed to ensure that the decision that is made is lawful and takes into account the consultation.
How do proposals align with Health & Wellbeing Strategy?	The proposals align with the Developing Well, Living Well programmes for action.
How do proposals align with Locality Plan?	The service is consistent with the following priority transformation programmes: <ul style="list-style-type: none"> • Enabling self-care • Locality-based services • Planned care services
How do proposals align with the Commissioning Strategy?	The service contributes to the Commissioning Strategy by: <ul style="list-style-type: none"> • Empowering citizens and communities • Commission for the 'whole person'.
Recommendations / views of the Health and Care Advisory Group	Reported directly to the Strategic Commissioning Board.
Public and Patient Implications:	Carers banded at level 1 could lose income which could impact on willingness to be carers. We anticipate the impact and probability of this being very low.
Quality Implications:	Tameside Metropolitan Borough Council is subject to the duty of Best Value under the Local Government Act 1999, which requires it to achieve continuous improvement in the delivery of its functions, having regard to a combination of economy, efficiency and effectiveness.
How do the proposals help to reduce health inequalities?	Via Healthy Tameside, Supportive Tameside and Safe Tameside.
What are the Equality and Diversity implications?	<p>The proposal will not affect protected characteristic group(s) within the Equality Act.</p> <p>The service will be available to Adults regardless of ethnicity, gender, sexual orientation, religious belief, gender re assignment, pregnancy/maternity, marriage/ civil and partnership.</p> <p>The introduction of a banding system is a more equitable means of reimbursing carers based on complexity of the needs of those cared for.</p>
What are the safeguarding implications?	None

What are the Information Governance implications? Has a privacy impact assessment been conducted?

A privacy impact assessment has not been completed. Services adhere to the Data Protection Act when handling confidential personally identifiable information.

Risk Management:

Risks associated with the introduction of a banding system are anticipated to be low.

The primary risks identified relate to the failure to appropriately communicate with all stakeholders on the proposed banding system thus impacting on the validity of information to inform decision making.

Access to Information :

The background papers relating to this report can be inspected by contacting Mark Whitehead – Head of Operations:

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1. INTRODUCTION

- 1.1 This report seeks permission to enter into consultation with Shared Lives carers, service users and key stakeholders of the Shared Lives Service regarding the implementation of a banded payment system for carers.
- 1.2 Shared Lives currently offers a fixed payment to carers for their services. The service users who are referred to the service vary in complexity of needs and levels of support required. The demographic projections for the locality indicate that people are living for longer whilst managing multiple long term conditions. This indicates that people do have more complex needs and this is forecast to continue. Shared Lives offers a more affordable alternative service for people with complex needs, and is an area we want to expand to improve outcomes and efficiency of service going forward.
- 1.3 There is a commitment through our Care Together programme to ensure people live healthier lives for longer, and are supported to be as independent as possible with care delivered closer to home. Shared Lives offers a further service option that expands individual choice about how their needs are met and in so doing offers greater control to individuals where Shared Lives may be a viable option.
- 1.4 In order to maximise the opportunities to offer Shared Lives as an option for the widest range of people, there is a need to review the fixed payments that are currently offered to carers, and consider a payment mechanism that is more reflective of the complexity of service users that carers currently support, and could support in the future as we expand our services.
- 1.5 Benchmarking across Greater Manchester and the national Shared Lived Plus scheme has also been undertaken to ensure a best model practice is reflected in the proposal in terms of the banding and payment methodology.

2. SHARED LIVES SERVICE – CURRENT SERVICE

- 2.1 Shared Lives is a regulated social care service delivered by Shared Lives carers. The service is registered with the Care Quality Commission (CQC). Shared Lives (formerly Adult Placement) has been providing support to individuals in Tameside since 1992. The service is managed and delivered by the Council.
- 2.2 The aim of Shared Lives is to offer people aged 18 years and older, an alternative and highly flexible form of accommodation and support. Individuals who need support are matched with compatible Shared Lives carers who support and include the person in their family and community life.
- 2.3 Shared Lives primarily works with adults with learning disabilities but more recently have started to diversify and promote services to other vulnerable adult groups such as older people. Shared Lives carers are approved to provide a range of community support services to individuals who meet the criteria for Adult Services.
- 2.4 There are currently 125 service users being supported by 88 carers (April 2018). Any person aged 18 or over who meet eligibility criteria for services may use Shared Lives.
- 2.5 Shared Lives carers provide a range of services dependent upon the needs and health of the individuals. The scheme currently provides:

Long Term Support	This service enables people to live with approved Shared Lives carers on a long-term basis, sharing in the ordinary lifestyles of the carers and their families.
Interim Placements	A service user can live with a Shared Lives carer for up to 12 months. These placements will focus on promoting skills and independence, with a view to moving towards more independent living. There is the potential for interim placements to become long term placements after 12 months based on assessed needs.
Respite	A service enabling users to take either regular short breaks or one off periods e.g. to allow for convalescence after a hospital stay or for family members to go on holiday or have a break from their caring role.
Day Support	This is a flexible service enabling people to do activities of their choice, to use community facilities or to visit approved Shared Lives carers in the carer's home.
Emergency placements	We are also able to provide emergency respite placements, dependent on carers available and the needs of the service user.

2.6 All individuals using Shared Lives have been assessed by Adult Services and are then referred to Shared Lives as part of their commissioned support plan to meet eligible needs.

2.7 Shared Lives carers are self-employed. To become approved, they are DBS checked and complete an in-depth assessment and approval process, and are required to undertake regular mandatory training. They are paid expenses for the care and support provided and qualify for a Carers tax relief.

2.8 Current payments to Shared Lives carers are as follows:

Long Term Support	£395.65 per week
Respite Support	£44.45 per night
Day Support (typically commissioned in five hour blocks)	£6.89 per hour

2.9 Emergencies and interim payments are determined at the time, and are dependent on the potential length of time required and the type of service (made up from the above).

3. POLICY CONTEXT

3.1 The Shared Lives sector nationally has seen a 31% growth over the past three years. The positive outcomes experienced by people using Shared Lives are reflected in a 92% good or outstanding CQC rating across the country. Tameside Shared Lives scheme is currently due to be inspected by CQC, but was inspected under the previous regime and received a rating of 'meets all standards' in 2012.

3.2 The model promotes independence and supports building relationships with friends and family which promotes wellbeing. Appropriately supporting Shared Lives carers through placements supports community resilience and empowers service users to utilise the support networks within their local communities. This builds on the local health and social care economy and Greater Manchester's priorities to improve our asset / strength based community offer.

3.3 Key national policy drivers in health and social care have placed well-being and independence at the centre of support which sets an ambition for a strategic shift in how services are delivered. The Care Act 2014 places a duty on local authorities to promote individuals well-being by preventing and reducing the need for care and support.

- 3.4 Evidence shows that service users who are living in a high cost inappropriate setting often feel isolated. Enabling increased choice for them to move into family-based Shared Lives placements will promote independence, reduce isolation and act as an early intervention approach to prevent admission to acute settings.
- 3.5 This report also supports the Council's corporate priorities of caring and supporting adults and older people by working with health services to ensure efficiency and equity in the delivery of excellent services to meet the needs of the community.
- 3.6 Shared Lives can play a supporting role in the new Integrated Care Organisation particularly if the current service offer is expanded through the wider review. As an example, there has been a significant increase in the number of people with a mental health issue accessing Shared Lives nationally, a 23% increase in 2017, which we would hope to replicate locally to prevent admission to acute services.
- 3.7 The introduction of a banding payment system is one element of transformation plans aimed to improve the service and expand its provision, creating better outcomes for service users while also working with partners to improve the efficiency and effectiveness of community based services. This will better support the wider health and social care system as we continue to integrate health and social care services.
- 3.8 Banding systems of payment are currently utilised by eight of the eleven Greater Manchester schemes and it has been highlighted as a priority recommendation by the Greater Manchester Delivery Group to create an equitable and unified regional approach. Banding will also support the diversification and expansion of the Shared Lives scheme to meet the services transformation objectives.

4. SERVICE REVIEW

- 4.1 A review of the service began in 2017 with a view to identifying potential areas for expansion of the service taking into consideration the increasing complexity of service users, and attracting more carers. Areas for expansion include supporting young people leaving care and a potential intermediate care service.
- 4.2 To achieve these aims it has been identified that the rates of payment may need to be adjusted to meet these needs. Benchmarking has been completed with neighbouring boroughs to identify their payment structures. Currently eight of the eleven Greater Manchester schemes utilise a banded system and it has been identified as best practice by the Greater Manchester Shared Lives Action Group.
- 4.3 A comprehensive carer recruitment campaign was launched in the autumn of 2017. The campaign included promotions on social media, bill boards, bus adverts and the production of leaflets to promote the service. This led to articles on regional TV and local radio. This campaign was awarded Local Government Campaign of the Year 2017, as part of the Public Affairs Awards. The campaign was very successful – 12 people have already been assessed and are ready to accept placements and 6 carers are currently being assessed. As a comparison we normally attract 3-4 new carers to the service per annum. Going forward to meet our intended aims we want to recruit more carers who are interested and have the skills to support adults with complex needs.
- 4.4 In the vast majority of cases the Shared Lives Scheme pays approved carers one payment irrespective of the level of needs or complexity of the individual/s they support.
- 4.5 There are a very small number of exceptional cases where a higher weekly fee is paid. This particularly applies for some younger adults transitioning from Children's to Adult Services who have previously been cared for by a foster placement and the foster carer wishes to

continue to care for the young adult and become an approved Shared Lives carer. Foster carers receive a higher payment than Shared Lives carers. In order to maintain continuity for the service user, who often has complex needs, a higher weekly payment rate in line with that previously received by the carer has been agreed. Without this, it is likely that the young adults would be placed in specialist out of borough placements, or supported accommodation, both of which would not deliver the best outcomes for that individual and would cost significantly more when compared to the Shared Lives offer. An example of a highly complex case is an indicative cost avoidance of £100,000 per annum per individual.

4.6 Payments to carers are made up from various funding streams including:

- Housing Benefit
- Tameside Council Adult Services contribution
- Service user contribution (financial assessment)

Increased costs accrued by the introduction of banding particularly in the context of more complex provision is justified in terms of potential costs avoided when considering other alternative means of provision to meet complex needs such as out of area specialist provision.

4.7 An element of care and support is an integral part of the role of a Shared Lives carer. The support provided can range from a little or almost none in a traditional 'supported lodging arrangement' to a high degree of support for someone with complex needs in a 'family placement'. The degree of skill and assistance required by the carer needs to be reflected in the payment system. The proposed banding system addresses this issue.

4.8 In terms of providing choice to new carers in how much assistance they want to provide or are able to take on, it also makes sense to move to a banding system. Some kind of differential pay system segments the market and should have the effect of attracting a larger number of carers to the role of approved Shared Lives Carers, and support the recruitment of carers with the skills and interest in providing support to individuals with more complex needs.

5. PAYMENT OPTION AND CONSIDERATIONS.

5.1 Following a benchmarking exercise against Greater Manchester and other North West schemes, and consultation with Tameside Finance Team, the following payment bands are being proposed:

Day Support

Band 1	Band 2	Complex Needs
£7.06 per hour	£8.47 per hour	£12.71 per hour
In line with current proposed rate for 18/19.	20% premium on band one.	50% premium on band 3.

Respite

Band One	Band Two	Complex Needs
£45.56 per night	£80 per night	£110 per night
In line with current proposed rate for 18/19.		

Long Term Support & Interim

	Per week	Per Annum
Band One	£300	£15,600
Band Two (In line with current proposed rate for 18/19.)	£405.54	£21,088
Complex Needs - Rate subject to assessment (£800 used for cost modelling purposes only)	£800	£41,600

- 5.2 It is assumed that for all long term placements there will be a respite provision of 21 nights per annum which will usually be provided within the scheme. Carers will not be charged for these respite nights, but may choose to purchase additional respite if required.
- 5.3 Because interim arrangements are dependent on the potential length of time required, and the type of service, it is proposed that the weekly payments are as above, but will be calculated on a case by case basis.
- 5.4 Emergencies
In an emergency it is expected that carers will receive the higher banding rate until the banding assessment is completed. If the person's banding is lowered, carers will not be expected to refund the difference. This recognises the flexibility and responsiveness of the carer and nature of emergency placements and the increased pressure placed on the carer.
- 5.5 The decision of which band the service user would fit into would be agreed between the Shared Lives worker and Care Coordinator who has assessed the needs of the service user, using a Banding Toolkit.

6. FINANCIAL POSITION AND IMPLICATIONS

- 6.1 It is important to highlight that as carer payments change, any shortfall in funding would be subsidised by the Council. The additional costs will not be passed on to the service user. Service users will continue to be assessed on their eligible needs, and their contributions are based on a financial assessment (based on Charging Guidelines).
- 6.2 From a preliminary desktop exercise, it is anticipated that the majority of current service users would remain on comparable payments to the current position. The benefits of increased carer recruitment would however mean increased availability as an alternative to other more costly services, e.g. Shared Lives respite at £55 per night in comparison to £150 per night for Learning Disability based respite care.
- 6.3 The Council's Shared Lives Scheme currently costs £1.096 million per annum to operate and generates £0.319 million through charging. The Council currently provides core funding of £0.777 per annum to fund the service. It is essential that the service reviews its current payment to carers to ensure there is sufficient incentive to sustain, develop and grow the service. It is also essential that as we move into an Integrated Care Organisation that we continue to demonstrate the financial benefits and sustainability of the service, particularly the significant costs that can be avoided.

- 6.4 The key concern to implementing a banded payment system is that it could lead established long term placements to be ended if the carer payment is reduced to a level they deem to be unacceptable. It is anticipated that the number of carers whose payment will reduce will be low in terms of potential reduced payment based on the table top exercise.
- 6.5 There is also the concern that the cost of service to the Council may increase if the individual is placed on a higher band. It is anticipated that the majority of placements will remain on the band which is comparable to the current payment which is band 2 on the scale. The potential cost avoidance however could be significant in comparison to using other methods of provision.

7. PROPOSED CONSULTATION PLAN AND METHOD

- 7.1 In order to consult with current Service Users, Shared Lives carers and key stakeholders we propose to use a variety of methods which include:
- Focus groups.
 - Drop in sessions.
 - Letter and questionnaires.
 - Telephone contact.
 - 1:1 consultation with Shared Lives Team and Managers.
 - Big Conversation to establish wider population views.
- 7.2 The consultation plan and documents including public information (see **Appendix 1**) and questionnaire (see **Appendix 2**) have been developed with support from the Policy, Performance and Communications team to ensure that best practice is followed.
- 7.3 In order to ensure responses can be gathered from the letters and questionnaires, stamped addressed envelopes will be provided; alternatively, people can contact the service and a worker can offer advice and support.
- 7.4 If a Service User requires support to complete the questionnaire then a dedicated worker will be able to provide the support. Alternatively service user and their families can contact the scheme via telephone and the questionnaire can be completed remotely.
- 7.5 A combination of focus groups and drop in sessions will be arranged to run in parallel with Service User and Carer Forums over a range of day / evening sessions. These will allow individuals to speak openly about their concerns with staff and management to inform the final report.
- 7.6 Communication approaches will be made accessible in terms of people who have sensory or cognitive difficulties. Where appropriate individual meetings will be arranged with advocates, including family members and carers.
- 7.7 A consultation questionnaire will also be created for referring agencies as part of the process to inform them of the consultation and seek their views, and secure their support.
- 7.8 The consultation will also be posted on the Big Conversation online to ensure the wider public are made aware of the proposed changes and can contribute to the consultation process. Shared Lives carers and service users and their families will be directed to the dedicated consultation web pages supporting the Shared Lives consultation.
- 7.9 It is important to consult on these proposals and involve the Shared Lives carers, Service Users and their families in the co-design of the service to ensure that the service offer is

effective in meeting the current and future needs of current and future Shared Lives service users and wider Tameside residents.

- 7.10 All feedback will be used to inform the final report, recommendations and final Equality Impact Assessment.

8. RISK MANAGEMENT AND PLAN

- 8.1 There are a number of risks identified as a result of undertaking this review:

Risk	Consequence	Impact	Likelihood	Action to Mitigate Risk
Failure to effectively communicate options / proposed banding to customers and public	This would impact on the validity of the consultation and results, impacting on decision making	High	Low	To ensure that a range of different consultation approaches are used to fully inform consultees and subsequent decision making. To offer support for individuals who require support understanding or answering questions.
To ensure that individuals being consulted with have capacity and fully understand what they are being consulted on.	This would impact on the validity of the consultation and results, impacting on decision making. Impact on response rates.	High	Low	To offer a range of consultation methods including face to face discussions to ensure support is available to respondents.

- 8.2 To try and mitigate these risks Shared Lives will utilise a range of consultation and engagement methods (see section 7 above) with all stakeholders to ensure they are fully informed and engaged in the decision making process and to ensure that decisions are informed and valid.

9. EQUALITIES

- 9.1 Part 1 Equality Impact Assessment has been conducted and consideration will be given to a full Equality Impact Assessment following consultation, and as part of the decision making process / report.

10. CONCLUSION

- 10.1 The Council faces significant budgetary challenges over the foreseeable future which means it must diversify service delivery by looking at new and innovative approaches to deliver services whilst also reducing the cost of provision. This may also include a cost benefit analysis across the health and social care system identifying where efficiencies can be made. An example can be seen in Adult Services respite provision, currently Cumberland Street respite has no available capacity and costs significantly more than Shared Lives provision. Shared Lives could offer a viable alternative to meet demand.
- 10.2 Shared Lives supports some of the most vulnerable individuals across the borough to maximise their independence through a family based community support network.

Throughout the service offer Shared Lives carers can support service users to maintain independence in the community and as a support to family carers to maintain their roles. As people progress into long term placements Shared Lives carers offer an asset based approach as a less costly alternative to traditional services. The Shared Lives Scheme is currently in a period transformation to expand the provision to a more diverse range of Service Users and relieve pressure on other provisions. Recruitment of skilled carers is pivotal to these aims.

- 10.3 This consultation aims to discuss a proposed banded payment system for Shared Lives carers, which ensures the payment made to carers is reflective of the levels of need of the service users in their care, and providing a choice to carers of the amount of assistance they want to, or can, provide at a certain cost.
- 10.4 A banded payment system will also support the attraction of a larger number of prospective carers to meet the varying degrees of need. There is a need to review the fixed payments that are currently offered to carers, and consider a payment mechanism that is more reflective of the complexity of service users that carers currently support, and could support in the future as we expand our services. It will also support us in recruiting more carers to the service.
- 10.5 Some individuals may be willing to provide accommodation but not much support while others may be willing and indeed want to provide a substantial amount of support on the basis that the level of support and commitment is financially recognised. Some kind of differential pay system segments the market and should have the effect of attracting a larger number of carers to the role.
- 10.6 It is important that we fully communicate and consult with Shared Lives carers, service users and their families regarding these proposals and where appropriate offer support to individuals to fully understand the proposal, and the potential impact on them as an individual in the service. This will be done using various approaches including letters, focus groups, drop-in sessions and individual interviews. All individuals who require additional support to provide their feedback and will be offered assistance.

11. RECOMMENDATION

- 11.1 As stated on the report cover.

Tameside Shared Lives Scheme Information on Banding Proposal

What is Shared Lives?

Shared Lives, is a regulated form of social care delivered by Shared Lives Carers who are approved by a Care Quality Commission (CQC) registered scheme. The CQC is the independent regulator of all health and social care services in England and monitors and checks all care services to make sure they meet fundamental standards of quality and safety.

The aim of Shared Lives is to offer people aged 18 years and older an alternative and highly flexible form of accommodation and support. Individuals who need support, and choose Shared Lives, are matched with compatible Shared Lives Carers who support and include the person in their family and community life.

All Shared Lives Carers are subject to *Disclosure and Barring Service* (DBS) checks and complete an assessment and approval process, and are required to undertake regular mandatory training. They are paid expenses for the care and support provided.

Service Currently Offered by Shared Lives

The services Tameside MBC Shared Lives currently offers are;

- **Long-term** - This service enables people to live with approved Shared Lives Carers on a long-term basis, sharing in the ordinary lifestyles of the carers and their families.
- **Interim** - A service user can live with a Shared Lives Carer for up to 12 months. These placements focus on promoting skills and independence, with a view to moving towards more independent living. There is the potential for interim placements to become long term placements after 12 months based on assessed needs.
- **Respite** - A service enabling users to take either regular short breaks or one off periods e.g. to allow for convalescence after a hospital stay or for family members to go on holiday or have a break from their caring role.
- **Day Support** - This is a flexible service enabling people to do activities of their choice, to use community facilities or to visit approved Shared Lives Carers in the carer's home.
- **Emergencies** - We may also be able to provide emergency respite placements, dependent on Carers available and the needs of the service user.

Current Payment Position

Shared Lives currently has a fixed payment to carers for their services. The service users who are referred to the Shared Lives service vary in complexity of needs and levels of support required. These levels of support are currently not reflected in the current fixed payment. This can lead to carers becoming less incentivised to support service users with complex needs. This is a growing area of need within the borough.

Current fixed term payments to Shared Lives carers are as follows;

Long Term Support	£395.65 per week
Respite Support	£44.45 per night
Day Support (per five hours session)	£34.45 per session

Emergencies and interim payments are determined at the time, and are dependent on the potential length of time required and the type of service.

What are the Proposed Changes?

The introduction of a banded payment system for Shared Lives Carers will enable the Shared Lives Scheme to develop and expand in the knowledge that service users have different needs. The use of banded payment systems has been implemented by eight of the eleven Greater Manchester Schemes and is seen as national best practice. Tameside aims to create a fair and transparent banded system to align with the best practice. The proposal is for an introduction of a four band system that would enable the Shared Lives Scheme to pay carers according to the level of need the service users have which they support.

The bands being proposed are:

- Low needs (Band one).
- Medium needs (Band two).
- Complex banding (based on assessment) for exceptional circumstances (Complex band).
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It is proposed that banding will be introduced for

- long term,
- respite and
- day support provision

These will be used to calculate the interim and emergency payments

A banding toolkit has been produced, based on best practice guidelines from the national Shared Lives Plus scheme, which will support carers. Initial work to investigate the impact of the banding system on carers shows that most carers will continue to be paid the same / current rate of payment. There will, however, be a small number of carers whose payments will increase or decrease as a result of the proposals.

The proposed payments to carers are as follows:

Day Support

The below bands assume that a session is five hours.

Band One	Band Two	Complex Needs
£35.30 per session	£42.35 per session	£63.55 per session

Respite

Band One	Band Two	Complex Needs
£45.56 per night	£80 per night	£110 per night

Long Term and Interim

	Per week	Per Annum
Band One	£300	£15,600
Band Two	£405.54	£21,088.08
Complex Needs	Discretionary based on individual needs.	Discretionary based on individual needs.

For long term placements there will typically be a respite provision of 21 nights built in, which will usually be provided within the scheme. Carers will not be charged for these respite nights, but may choose to purchase additional respite if required.

Interim Placements

Because interim arrangements are dependent on the potential length of time required, and the type of service, it is proposed that the weekly payments are as above, but will be calculated on a case by case basis.

Emergencies

Emergencies will be paid on the long term or respite rate dependent on anticipated length of placement. In placing an emergency, it is expected that carers will receive the high banding rate until the banding assessment is completed. If the person's banding is lowered after assessment, carers will not be expected to refund the difference.

Service Users

It is important to note that the proposed changes to the payments for Shared Lives Carers will not impact the charging of service users.

Service users will continue to be assessed on their eligible needs, and their contributions are based on a financial assessment (based on Charging Guidelines).

SHARED LIVES CONSULTATION QUESTIONS

QUESTIONS

Q1. Please indicate which of the following best describes your main interest in the Shared Lives consultation (Please tick one box only):

- ☐ I am a Shared Lives Carer (Go to Q2)
- ☐ I am a Shared Lives service user (Go to Q3)
- ☐ I am a relative or friend of a Shared Lives service user. (Go to Q3)
- ☐ I am a member of the public (Go to Q5)
- ☐ I work for Tameside Metropolitan Borough Council / CCG (Go to Q5)
- ☐ Other (please specify below) (Go to Q5)

Q2. Which Shared Lives services do you currently provide? (Please tick all that apply)

- ☐ Long Term - Where people to live with approved Shared Lives Carers on a long-term basis, sharing in the ordinary lifestyles of the carers and their families
- ☐ Interim – Where a service user can live with a Shared Lives Carer for up to 12 months with a view to moving towards more independent living
- ☐ Respite – Where service users are enabled to take either regular short breaks or breaks of one off periods based on an allocated number of respite nights,
- ☐ Day Support - a flexible service enabling service users to do activities of their choice, to use community facilities or to visit approved Shared Lives Carers in the carer's home
- ☐ Emergencies – respite or interim provision due to emergency circumstances.

(Go to Q4)

Q3. Which of the following services provided by Shared Lives do you, your relative or friend use? (Please tick all that apply)

- ☐ Long Term - Where people to live with approved Shared Lives Carers on a long-term basis, sharing in the ordinary lifestyles of the carers and their families
- ☐ Interim – Where a service user can live with a Shared Lives Carer for up to 12 months with a view to moving towards more independent living

- ☐ Respite – Where service users are enabled to take either regular short breaks or breaks of one off periods based on an allocated number of respite nights,
- ☐ Day Support - a flexible service enabling service users to do activities of their choice, to use community facilities or to visit approved Shared Lives Carers in the carer's home
- ☐ Emergencies – respite or interim provision due to emergency circumstances.
- ☐ Don't Know

Q4. What impact will the proposed changes to the Shared Lives payment system (i.e. change from a fixed payment to a banded system) have on you as a carer / or on you, your relative or friend who uses the Shared Lives service? (Please state in the box below)

Further information on the proposed changes to the payment system for Shared Lives can be found at (*insert webpage URL here*) or with the letter which accompanied this questionnaire if you received a copy by post

(Go to Q6)

Q5. Do you have any comments you would like to make on the proposed changes to the Shared Lives payment system (i.e. change from a fixed payment to a banded system)? (Please state in the box below)

Further information on the proposed changes to the payment system for Shared Lives can be found at (*insert webpage URL here*)

Q6. Do you have any other comments you wish to make about the Shared Lives Service in general? (Please state in the box below)

ABOUT YOU

Q7. Are you.....?

- ☐ Male ☐ Female
☐ Prefer to self-describe ☐ Prefer not to say

Q8. What is your age? (Please state)

Q9. What is your postcode? (Please state)

Q10. What is your ethnic group? (Please tick one box only)

White

- ☐ English / Welsh / Scottish / Northern Irish / British
☐ Irish
☐ Gypsy or Irish Traveller
☐ Any other White background (Please specify)

Mixed / Multiple Ethnic Groups

- ☐ White and Black Caribbean
☐ White and Black African
☐ White and Asian

- ☐ Any other Mixed / Multiple ethnic background (Please specify)

Black / African / Caribbean / Black British

- ☐ African
- ☐ Caribbean
- ☐ Any other Black / African / Caribbean background (Please specify)

Asian / Asian British

- ☐ Indian
- ☐ Pakistani
- ☐ Bangladeshi
- ☐ Chinese
- ☐ Any other Asian background (Please specify)

Other ethnic group

- ☐ Arab
- ☐ Any other ethnic group (Please specify)

Q11. Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? Include problems related to old age. (Please tick one box only)

- ☐ Yes, limited a lot
- ☐ Yes, limited a little
- ☐ No

Q12. Do you look after, or give any help or support to family members, friends, neighbours or others because of either, long-term physical or mental ill-health / disability or problems due to old age? (Please tick one box only)

- ☐ Yes, 1-19 hours a week
- ☐ Yes, 20-49 hours a week
- ☐ Yes, 50+ hours a week
- ☐ No