

	<p align="center">Community and Wellbeing Scrutiny Committee 5 July 2022</p>
	<p align="center">Report from Strategic Director Community Wellbeing</p>
<p>Brent Regulated Services – Brent Shared Lives and Tudor Gardens</p>	

Wards Affected:	All
Key or Non-Key Decision:	Non-Key
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
No. of Appendices:	None
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Martin Crick Team Manager Commissioning, Contracting and Market Management – Supported Living Martin.Crick@brent.gov.uk

1.0 Purpose of the Report

- 1.1 This report provides the Community and Wellbeing Overview and Scrutiny Committee with an overview of the Brent Shared Lives Scheme and Tudor Gardens. Both services are regulated by CQC. The overview includes the scheme’s current operational responsibilities as well as an outline of the future plans for the scheme.

2.0 Recommendations

- 2.1 Members of the Overview and Scrutiny Committee are recommended to note the report and question officers on the plans for Brent Shared Lives and Tudor Gardens.

3. Introduction to Shared Lives

- 3.1 Shared Lives Schemes are similar to fostering, but with the main difference being that these schemes are for people over 16 years old. Schemes can support service users with a range of support needs such as learning disabilities and mental health. It is a real alternative to someone who does not wish to live in more traditional models of care such as residential care or supported living.

- 3.2 Shared Lives matches service users' needs to a registered carer and their family. The matching process takes in to consideration gender, age, ethnicity, cultural needs as well as any specific support needs. The service user will live with their carer and family and be fully integrated in to the wider community.
- 3.3 Carers registered with the Brent Shared Lives scheme are self-employed and 'approved' as carers by the Approval and Advisory Group (AAG). The process involves and application process including references, DBS check, property risk assessment, medical questionnaire and a successful interview with a recommendation for approval from core members of the AAG.
- 3.4 The Approval and Advisory Group is a board that is set up to oversee the general governance of the scheme and to support the registered manager in making decisions that are outside of general day to day operational decisions. The board consists of officers who have the following job titles:
- CQC Registered Manager and Nominated Individual
 - Head of Service for Commissioning, Contracting and Market Management
 - Service Manager in Children's Services
 - Service Manager in Direct services
 - Deputy Team Manager – Learning Disabilities Team
- 3.5 The following officers are part of the AAG but are non-decision makers and provide information and guidance only.
- Chief Lawyer for Adult Social Care
 - Supplier Relationship Manager responsible for the schemes compliance
 - Supplier Relationship Manager responsible for operational issues.
- 3.6 Decisions are made by the core membership but the registered manager is the ultimate decision maker. The reason for this being that they have legal responsibility for the service and the regulated activity of personal care.
- 3.7 Shared Lives Schemes are registered with the Care Quality Commission (CQC) for regulated activity of personal care. In line with registration requirements the scheme must have a Registered Manager and Nominated Individual. For Brent, Martin Crick, manager of the Supported Living and Extra Care Team in ASC Commissioning performs these roles. The main differences between the Registered Manager and Nominated Individual is the registered manager has legal responsibility for regulated activity whereas the nominated individual holds no legal responsibility. The nominated individual is responsible for ensuring that a suitable experienced manager is appointed and registered with CQC and also supervising the regulated activity.
- 3.8 Although the carers are self-employed the council has a responsibility under its CQC registration to ensure they are appropriately 'approved' and trained at all times.

4. Brent's Shared Lives

- 4.1 As of June 2022, the following number of carers and service users are in the Brent Shared Lives service.

Carers	
Carers Currently Providing Permanent Placements	11
Respite Only Carers	8
Total Carers	19
Service users	
Current number of service users	18

4.2 Table 2 provides the breakdown of the scheme's carers.

Gender	Male	Female		
	5	14		
Age	25-64	64-74	75-84	
	9	9	1	
Ethnicity	Asian/Asian British	Black/Black British	White/British	White/Other
	6	3	8	2

4.3 Table 3 provides the breakdown of the current service users within the scheme.

Gender	Male	Female				
	8	10				
Age	25-64	64-74	75-84	85-94		
	12	3	2	1		
Ethnicity	Asian/Asian British	Black/Black British	White/British	White/Other		
	12	3	2	1		
Support need	LD	MH	PD	Sensory	PD&LD	PD & Sensory
	10	2	1	2	2	1

4.4 Table 4 provides the three bandings and weekly fees paid to carers, depending whether service users are considered to have low, medium or high needs.

Band	Weekly Rate	Number of carers
Band 1	£360.47	4
Band 2	£425.77	6
Band 3	£491.02	8

4.5 The commissioning, contracting and market management team are responsible for the operational management of the scheme but not the annual statutory review of the service users. This function remains within the complex care teams. It is important to keep the two functions independent of each other to avoid any conflict of interest.

- 4.6 Placement relationship officers in the Adult Social Care Commissioning Service undertake a quarterly review with each carer to ensure the placement is meeting the needs of the service user and the carer is well supported.

5.0 Scheme governance

- 5.1 The scheme has a board Approval and Advisory Group (AAG) that meet at least every quarter to review the overall governance of the scheme. A supplier relationship manager, within the wider supported living commissioning team is responsible for overseeing compliance. They will present a report that updates members on all issues to do with the scheme including statutory notifications to CQC, carer compliance levels with training and any operational issues.
- 5.2 At least 4 board members are required at each meeting if any formal decisions are required. In line with the schemes terms of reference the CQC registered manager is the ultimate decision maker. The board is made up of representatives from different services and teams such as a head of service, team and deputy team managers as well as other colleagues in health.
- 5.3 Annual quality assurance surveys are sent out to service users, carers and stakeholders each year to see how the scheme has performed and where improvements can be made.
- 5.4 The scheme has a service improvement and CQC action plan in place to move the scheme from an overall CQC rating of 'Good' (the current rating) to 'Outstanding'. CQC requested that a provider information return (PIR) was submitted in February 2022. In the past this has normally meant an annual CQC inspection is due. However CQC are reviewing how they inspect services and given the current overall rating this inspection may not happen for some time

6.0 Future of the scheme

- 6.1 The scheme is able to support all service users with a permanent placement. However, due to a number of carers either retiring or being de-registered, respite for the permanent carers is becoming an issue.
- 6.2 Initial plans are to test the Shared Lives carer market and recruit a number of respite carers for the scheme.
- 6.3 Dependent on the market and how successful the recruitment of new carers goes, the scheme will look to build capacity and offer more placements. Further work is required to look at demand for the scheme but early indications suggest that there are a number of individuals with a learning disability and mental health support need that would benefit from this type of service. There is also an opportunity to build capacity to provide a wider 'respite' service across Adult Social Care.

7.0 Tudor Gardens Supported Living

- 7.1 Tudor Gardens is a 24 hour Supported Living Service for adults with Learning Disability and Autism. The Service was opened in April 2010 and has a Care Quality

Commission “**Good**” rating... that Tudor Gardens is, “Caring, Safe, Effective, Responsive and Well-Led”. The service is currently running at full occupancy.

- 7.2 Tudor Gardens Supported Living is located in purpose built accommodation and consists of three separate buildings, each building having five bedrooms, self-contained units. The first two buildings are split over two storey accommodation with ground and first floors with a connecting lift service. The other unit is a single storey building which has a further five bedrooms, self-contained units.
- 7.3 The property is set in its own grounds and provides accommodation, Care and support for 15 adults with varied learning and physical disabilities. All bedrooms are designed as individual flat-lets and have a bedroom/living area, en suite and kitchenette facilities. All bedrooms are designed for single occupancy only.
- 7.4 The service is built around the individual needs and aspirations of our residents, giving each person the opportunity to live as independently as possible with support from our qualified and caring staff team. Our service users are encouraged to make their own choices and lead their lives in the way they want to. Promoting independence is high on our agenda. Through elements of communal living, residents make new friendships, develop social networking skills and can get involved in group sessions such as cooking, gardening and film nights. Service users are supported with Educational, Recreational, Sport, Life-skills and wellbeing needs.

8.0 Management & Staffing

8.1 The service is led by qualified and experienced team of managers, consisting of:

- X1 Team Manager
- x 3 Team Leaders
- x 26 Care Support staff

All Care Support staff have a minimum of two years experience working with adults who have varied learning disabilities and autism and hold a minimum of NVQ level 3 or equivalent. The Team Manager and Team Leaders all have NVQ Level 5, or equivalent experience.

- 8.2 All of our staff team have undergone comprehensive training to meet the varying needs of our service users. They are trained to manage residents with challenging behaviour and complex needs. Throughout the year, staff attend a wide range of training and personal development courses to fully equip them to work effectively and professionally with our service users.
- 8.3 To maintain an effective and safe service, our staff team work both day and night shifts to ensure the service meets Care Quality Commission standards. There is also a waking night staff member per building with 24-hour management support.

9.0 Benefits of Tudor Gardens Supported Living

- 9.1 At Tudor Gardens Supported Living, all service users have an individual care and support plan that specifies the type of support that is needed, the support plan is outcome base to ensure Care Act assessed needs are met in a strengths based way.

9.2 The benefits that our service users receive varies depending on their level of need and abilities. We actively promote independence and choice, this enables service users to have control over their life and to maintain the things that are important to them. They have their own tenancy and are responsible for their own bills and cost of living expenses. At Tudor Gardens, Service users are supported with budgeting and money management.

9.3 Other support provided includes:

- Round the clock support provided by trained professionals
- Tailored support and care
- Enjoy greater independence
- Live in own home tailored around individual needs
- Strength base approach support
- Maintaining own home
- Managing personal finances
- Developing domestic and life skills
- Accessing employment, training or volunteering opportunities
- Developing and keeping personal relationships
- Learning new skills for independence
- Personal care and well-being
- Managing medication
- Support with social networking

10. Financial Implications

10.1 Included in the main body of the report.

11. Legal Implications.

11.1 Included in the main body of the report.

Report sign off:

Claudia Brown

Operational Director of Adult Social Care