

## Profile of support to be provided by the Shared Lives (SL) Carer

This profiling tool is intended to be used to identify and agree the level and type of support that the SL Carer will be required to provide to the individual and in turn the level of additional payment that the SL Carer should receive for these additional support services. This tool is **not** intended to be used to assess need but should be used after the needs assessment has been carried out, shared lives identified as the best way to meet the individual's requirements and the adult plan or support plan agreed. The profile of support needs to be met by the SL Carer will be informed by the placement plan.

The questions in this form are asked in the first person but the form is **not** a self-assessment questionnaire. The form should be completed by the Shared Lives Scheme, in discussion with the SL Carer, and the person using the shared lives service (with support as required).

**The statements in the boxes will not always be a perfect fit and the statement that is nearest to the level of support needed should be ticked without too much agonising.**

### 1. Meeting personal care needs – like washing, dressing and going to the toilet

*Please tick the box that most closely describes the amount of support you will need from your SL carer/s.*

A) I will always need my SL Carer(s) to give me a lot of help and/or prompting with personal care, including during the night	
B) I will always need my SL Carer/s to give me help and/or prompting with personal care in the day.	
C) I will sometimes need help or prompting by my SL Carer(s) with personal care.	
D) I will not need help or prompting from my SL Carer/s with personal care	

### 2. Being alone and safe at home – to what extent can you be left alone and be safe

*Please tick the box that most closely describes the amount of support you will need from your SL carer/s.*

A) I will always needs my SL Carer/s to be around day and night to keep me safe	
B) I will need my SL carer/s about most of the time to keep me safe	
C) I can be left without my SL carer in places that I know for a short time.	
D) I can be left without my SL carer safely for quite a long time	

**3. Eating and drinking – how much help you need with eating and drinking**

*Please tick the box that most closely describes the amount of support you will need from your SL carer/s.*

A) I will need my SL Carer/s to give me a lot of help to eat and drink. My carer/s will need to feed me and give me drinks. Includes peg feeding	
B) I will need my SL Carer/s to give me some help to eat and drink. I will need my SL carer/s to prepare my meals, drinks and snacks.	
C) I can eat and drink without support but will need help to make drinks and snacks.	
D) I can make my own drinks and snacks without support.	

**4. Practical daily living- shopping and household tasks such as cleaning, cooking, laundry, gardening etc.**

*Please tick the box that most closely describes the amount of support you will need from your SL carer/s.*

A) I won't be able to do anything about the house. My SL Carer/s will need to do all the household jobs and shopping.	
B) I will need my SL Carer/s to give me a lot of help and/or encouragement with household jobs and shopping	
C) I can and will look after my own room and help with the jobs that need doing around the house. I will need help with shopping.	
D) I can and will look after my own room. I will be involved in my own washing and ironing and do my own personal shopping	

**5. Managing money – the help and support you need to manage your money and finances**

*Please tick the box that most closely describes the amount of support you will need from your SL carer/s.*

A) I can't manage my own money or finances at all. I will need my SL Carer/s to manage my money for me	
B) I do understand a bit about money but will always need a lot of support from my SL Carer/s with going to the bank and/or shopping and looking after my money etc	
C) I will need some help from my SL Carer/s to look after my own money, banking and/or budgeting	
D) I can manage my own money and bank account. I can budget quite well.	

**6. Health and wellbeing – help you need to manage your long term medical condition e.g. Chronic mental illness; diabetes, epilepsy, heart condition, stroke, medication management etc**

A) I will always need a lot of help from my SL Carer/s to manage my long term medical condition and to take my medication	
B) I can take my own medicine with support from my SL Carer/s. I need a lot of support from the Carer/s to manage my long term medical condition, including making and attending appointments with me	
C) I can take my own medicine. I will need some support from my Carer/s in managing my long term medical conditions	
D) I can take my own medicine without any help and can manage my own medical appointments. I only need my SL Carer to keep an eye on my long term health	

**7. Emotional wellbeing – support I need to look after my emotional wellbeing e.g. lack of confidence, depression, anxiety, grieving, frustrations, obsessions**

A) I need constant help from my SL Carer/s to try to stay emotionally well.	
B) I often need help from my SL Carer/s to try to stay emotionally well.	
C) I will need my SL Carer/s to keep an eye on my emotional wellbeing	

D) I am usually emotionally well.	
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**8. Relationships and being included – support I need to do things in the local community (e.g. using local shops, library, church, pub) and with friends,**

A) I always need support to try out new things in my local community and will need my SL Carer/s to arrange things for me and often to be with me. This may include help in socialising and making friendships.	
B) I need support to go out more and will need my SL Carer/s to help me find new things to do and come with me until I feel comfortable	
C) I need some support from my SL Carer/s to make new friends and keep in touch with old friends and help me organise my social life	
D) I can socialise, make new friends, keep in touch with old friends and find things to do locally without help	

**9. Choice and Control – this is about who decides about every day choices – the support that you need to make day to day choices and decisions**

A) Other people make most choices on my behalf. I will need my SL Carer/s to support me to begin to make personal choices, be able to tell people about them and take more control of my own life	
B) I will regularly need some support from my SL Carers to make choices and day to day decisions	
C) I make all the decisions but will sometimes need my SL Carer/s to give me some support and advise me. I will need support to build up my confidence and how I feel about myself.	
D) I do not need help to make choices or decisions. I just need a bit of advice. I fully understand the decisions that I am making	

**10. Taking risks – this is about staying safe both inside and outside your home e.g. on the bus, using a gas cooker, crossing roads etc**

A) My SL Carer/s will need to do a lot to make sure I stay safe. Without constant support I am likely to be in danger of harm	
B) My SL Carer/s will need to spend quite a lot of time helping me to stay safe. There are some things that I do where my AP Carer will need to be with me so that I don't get harmed.	

C) My SL Carer/s will sometimes need to help me think about the risks involved in the things I want to do and tell me how to stay safe	
D) I can take risks without coming to any harm without needing help	

**11. Keeping in touch with family and friends – this is about how much support you need to keep you in touch with your family and friends e.g. making visits, writing letters, on the phone**

A) I need a lot of encouragement and support to stay in touch with family and friends and will always need my SL Carer/s to organise this and may need them to come with me	
B) I want to stay in touch with family and friends but will need help from my SL Carer/s to make phone calls and arrange to meet	
C) I will need some reminding from my SL Carer/s to stay in touch with my family and friends	
D) I do not need or want any help in keeping in touch with my family and friends	

**12. Communication – this is about how much help you need with letting people know what you want or answering questions. Eg: Needing someone who knows you well to help people understand what you are saying; needing help in filling in forms or answering letters.**

A) I find it very difficult to make people understand me without help because of my communication difficulties. I will need a lot of help from my SL Carer/s to communicate with people who don't know me well.	
B) I can find it difficult to make people understand me and sometimes help to understand them. I will often need help from my SL Carer/s with people I don't know or where I feel uncomfortable,	
C) I will need help from my SL Carer/s when I have to deal with forms, official letters or meetings.	
D) I can easily get people to understand me and do not need any help.	

**13. Employment and/or education and leisure – this is about the support that you need from the SL Carer to get a job, go to college or a class, or take part in leisure activities.**

Note: SL Carers are not expected to provide a day time service to the people placed with them). SL Carers that are being asked to provide a day time service should be paid separately for this.

A) I will need support all of the time from my SL Carer/s so that I can work, learn things or take part in activities	
B) I will regularly need support from my SL Carer/s so that I can work, learn things or take part in activities	
C) I will need some support from my SL Carer/s to get myself organised so that I can keep a job, learn new things and take part in activities.	
D) I do not need any support to get and keep a job, go to college or a class and take part in activities.	

**14. Getting about – this is about the amount of support that you need to get to places you want to go e.g. work, college, swimming, day service, visit family etc.**

A) I will need my SL Carer/s to take me to the places I want to go.	
B) I will often need my SL Carer/s to take me to the places I want to go.	
C) I can travel on my own on journeys that I know but will need my Carer/s to take me at other times.	
D) I can travel by myself without help most of the time	

**Extra Needs**

Please note that this is not an exhaustive list

**1. Complex Health Care Needs**

I need intense support around my medical condition, e.g:-

Epilepsy

Injections

Alzheimer's

Dementia

Terminal Illness

## **2. Complex Emotional Needs**

Not adapting to change

Low Self Esteem / Anxiety

Compulsive

## **3. Complex Personal Relationships**

Family Conflicts

Conflicts between family & carers

## **4. Managing Complex Risks**

Relationships

Violent Relationships

Behaviours