



Request

I am currently embarking on a project that intends to better understand the policies, practices, and rationale behind double- and single-handed care within adult social care at home.

We are contacting all Local Authorities across England to enquire as to their current approaches to these modes of care. We aim to establish where consistencies and discrepancies exist between LA's. Where discrepancies are found, we aim to explore the potential reasons behind them with a view to developing future research studies that will begin to form a robust evidence-base for double- and single-handed care. This could then feed back to LA's and be used to guide and inform future decisions regarding the most appropriate application of double- and single-handed care across the country.

We would be very grateful if you would be able to respond to this message and provide us with any formal communication and/or documentation that can help us better understand the following:

1. Do you have any official policy guidelines that describe what qualifies someone to receive double- or single-handed care?
2. If so, what is the rationale that underlies these guidelines and what determines the level of care someone can receive?
3. In practice, are there any issues or barriers that have been encountered when implementing either double- or single-handed care?
4. Has there been a shift in the qualifying criteria for someone who can receive double-handed care? (i.e. how long has your current policy been in place, how is it different to anything that existed previously?)
5. If there is a preference towards single-handed care, what is the rationale behind this and how has this been managed?

Response

1. Yes
2. RoSPA- The benefits of training your team in single-handed/proportionate care
 - It takes two study completed by University of Salford 2017 (This caused a shift in assessment approaches due to advances in equipment innovation).
 - In October 2024, Care England, which represents independent providers of adult social care in England, released a report in partnership with care provider, Nightingale Hammerson, and training organisation, A1 Risk Solutions, which examines the potential benefits that this approach can offer.
 - Support plans.
 - Completing individual Manual Handling Risk Assessment.
3.
 - Shortage of equipment to implement single handed care.
 - Shortage of staff.
 - Conflict with therapy vs care support.
 - Risk averse from Hospital discharges recommending assistance of two.
 - Environmental issues can create barrier to implementing certain equipment
4.
 - Yes, if a person can be reduced to assistance of one with the implementation of equipment or specific Manual Handling techniques, this is assessed from the onset.
 - This started in 2017/18 being part of the Lancashire and Greater Manchester Back Exchange and Manual Handling Trainers/Assessors updates with the Disabled Living Services Manchester.
 - Due to innovation of Manual Handling equipment this has enabled single handed care, where previously it would require assistance of two. Examples that have allowed the reduction in a package of care are, provision of community beds, vendlet, in-bed management systems, better design of non and mechanical standing aids, gantry or easy fit/track systems.
 - Included in key mover training the benefits of single-handed care and demonstrations of equipment available.
 - Specific training delivered for social workers/social care officers generating care plans to enable a better understanding of reasonings for double up care support relating specifically to manual handling of persons.
 - Provision of key mover training for external providers.
5. Prescribed support will always be on the basis of an individual assessment, ensuring support is least restrictive which includes exploring single handed care as part of this process. Training has been provided for key mover support within provider services.

Awareness sessions provided with adult social care to provide more awareness for the support plans being completed and least restrictive options being explored.

Internal process developed to support decision making around appropriate care and support.