

Supporting people with a learning disability and/ or autistic people

Worked examples to support learning and development

What are these worked examples?

These worked examples are based on real life scenarios of people with learning disabilities and/ or autistic people, who display or are at risk of displaying behaviours which challenge. Each worked example explains what workforce that individual needs, what skills and knowledge they need, and how much this training would cost. They can help adult social care commissioners and employers to plan support and provide the right learning and development.

Find out more and download other worked examples at www.skillsforcare.org.uk/workedexamples.



Meet Jake

Jake is 28 years old. He has a moderate to severe learning disability with some 'autistic traits'. There are queries about whether he acquired a brain injury as a child, but this has never been confirmed. He lives in a supported living service with five other people but is not engaged with the local learning disability team. He has no family and was a looked after child from the age of four. His mum wanted to keep in contact but this was prevented due to the risk to Jake.

Jake feels more relaxed with music on and in his own space. He has good practical skills and is very creative – he is a good artist.

He does not use words to communicate but does display behaviours which challenge – his team thinks this is his way of communicating. Some of these behaviours include pulling people's hair, self-harming, smashing furniture and attempting to bite staff. In the past this had led to seclusion and over-medication with anti-psychotic medication.

He has lived in a range of settings, including children's homes and foster care. One to one placements, such as foster care, have been more successful, but these have broken down due to his behaviour.

He now lives in supported living with five other people – he has his own flat but shares a kitchen and lounge with others. Most of the time he enjoys living here, but recently the number of incidents of behaviours which challenge have increased. This could be due to staff leaving and him getting a new house mate. He does not have any known friends but seems to engage well with female staff.

His support provider feels he is at risk of admission to inpatient services as his behaviour can be too challenging.

What are the key challenges that Jake faces?

Jake is at risk of admission to inpatient services which could reduce the quality of his health and wellbeing, and lead to more incidents of his behaviours.

He also has unstable diabetes and is overweight which requires close monitoring – he needs the right support and monitoring to control these. When Jake needs his insulin or blood glucose test, he becomes anxious and this can trigger his behaviours.

He has had no functional analysis of his behaviour so his team can't develop a positive behavioural support (PBS) plan.

What could Jake's future look like with the right support?

With the right care and support Jake can have a positive future. Here is how this could be achieved.

- Jake would have a clear care plan that meets all his support needs.
 - He is supported to find his own home where he has his own space to deal with things when they overwhelm him. This could be in a small but friendly village with good transport links to a bigger town or city. There is a local shop and pub with live music where he can go.
 - He has a bespoke care team that is trained to meet his individual needs. He has one to one support through the day and one person sleeping on site.
 - His care team work to build relationships, trust and independence which improves his health and wellbeing, and reduces his need for medication.
 - He could start volunteering in the local community in a music shop.
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What workforce does Jake need?

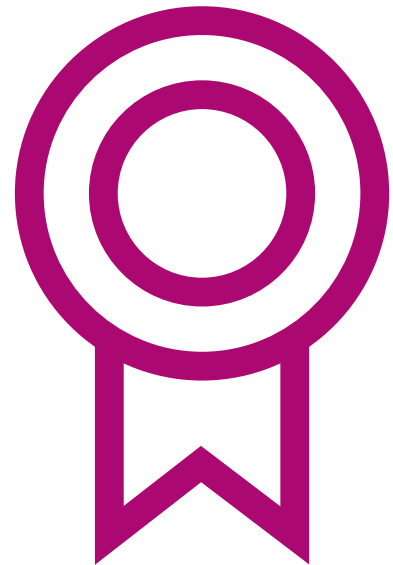
To have a positive future, Jake needs the right workforce in place. Here are some suggestions.

- Care team
 - Social worker who also acts as a care coordinator
 - Independent mental capacity act advocate
 - GP
 - Community learning disability team (CLDT)
 - PBS consultant
 - District nurse
 - Occupational therapist
 - Speech and language therapist
 - Diabetes nurse or consultant
 - Epilepsy nurse or consultant
 - Psychiatrist
 - Dietician
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What skills and knowledge does this workforce need?

Jake's workforce need to have the right skills and knowledge to provide high quality care and support. We think these are the key things that his workforce need to know or have skills around:

- person-centred planning
- understanding behaviours which challenge
- PBS level A*
- PBS level B*
- diabetes care
- active support
- resilience and coping mechanisms
- learning disability awareness.



The table on the next page explains what skills and knowledge each worker needs. The boxes with a 'x' in suggest what that worker needs to know. The boxes which say 'some' indicates that some workers in this group would need this knowledge but not necessarily all of them.



Values

Everyone working in adult social care should have the right values. Values are the things that we believe to be important, and they influence how people behave in different situations. Recruiting people with the right values can help employers find people who know what it means to deliver high quality, person-centred care and support.

Our '[Example values and behaviours framework](#)' describes some of the values that are central to providing high quality care and support.

*PBS levels A, B and C refer to the competency levels in the PBS Academy Competence Framework. The framework outlines the things that you need to know and do when delivering best practice PBS. It explains the competencies at three different levels: 1. direct contact (PBS level A), 2. behaviour specialist, supervisory or managerial (PBS level B) and 3. higher level behaviour specialist, organisational, consultant (PBS level C).

	Person-centred care	Understanding behaviour	PBS level A	PBS level B	Diabetes care	Active support	Resilience and coping mechanisms	Learning disability awareness	Specialised skills and knowledge
Jake	X	X			X	X	X		Any learning needs to be reasonably adapted to Jake's level of understanding
Care team	X	X	X		X	X	X		Care Certificate
Care team manager	X	X	X	X	X	X	X		Supervisory, leadership and/or mentoring skills
Social worker	X	X					X		
Independent mental capacity advocate		X						X	
GP		X						X	
Local community learning disability team	X	X				X	X		
PBS consultant									PBS level C
District nurse		X				X		X	
Occupational therapist		X				X		X	
Speech and language therapist		X				X		X	SALT and sensory profiling
Diabetes nurse or consultant								X	
Dietician		X						X	

How much would this training cost over a five year period?

This table estimates how much it would cost to deliver this training. It is based on the training listed on the previous page and the costs are estimated for a five year period. We recommend that a lot of the training can be delivered together, with people from different roles.

We have NOT included the basic professional training that roles like GP, occupational therapist and social worker do.

We HAVE included basic training that Jake's day to day support team need since they would be selected to support him specifically.

	Days of training	Number of people	Cost each day of paid work	Direct cost of training	Total cost	Cost of updating annually	% of their time spent supporting Jake	Cost related to Jake over five years	Cost related to Jake over one year	Notes
Jake	5	1	£0	£150	£150	£120	100%	£750	£150	
Care team	8	20	£120	£1500	£20700	£400	40%	£8440	£8280	
Care team manager	6	2.5	£133	£0	£2000	£150	20%	£430	£400	Direct costs included with care team.
Social worker	1.5	2.5	£167	£0	£625	£150	0.2%	£2	£1	Direct costs included with care team.
Independent mental capacity advocate	1.5	2.5	£125	£0	£469	£75	0.5%	£3	£2	Direct costs included with care team.
GP	1	2	£563	£150	£1275	£50	0.04%	£1	£1	
Local community learning disability team	3	4	£167	£0	£2000	£50	0.04%	£1	£1	Direct costs included with care team.
PBS consultant	54	1.3	£188	£8000	£21163	£250	1.5%	£321	£317	Note that the initial PBS level C training will equip the consultant for more than 5 years.

District nurse	1.5	5	£167	£0	£1250	£50	0.5%	£7	£6	Direct costs included with care team.
Occupational therapist	1.5	5	£167	£0	£1250	£50	0.5%	£7	£6	Direct costs included with care team.
Speech and language therapist	1.5	5	£167	£0	£1250	£50	0.5%	£7	£6	Direct costs included with care team.
Diabetes nurse or consultant	1	5	£167	£0	£250	£75	0.5%	£2	£1	Direct costs included with care team.
Dietician	1.5	1	£167	£0	£375	£75	0.5%	£2	£2	Direct costs included with care team.
Total costs related to Jake								£9970	£9174	
Average per year related to Jake								£1994		

What could Jake's future look like without this care and support?

Without the right care and support, these are the negative kinds of things that Jake might experience.

- Jake could be admitted to an inpatient service where he is not able to do the things he enjoys. He becomes more anxious because he does not have his own space and can not listen to his music loudly.
 - The number of incidents of behaviours which challenge increase and this leads to increased use of medication.
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