

## 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](http://www.skillsforcare.org.uk/workedexamples).



## Meet Paul and Doreen

Paul is 51 and he lives with his mum Doreen who is in her late 70's. He may have a borderline/ mild learning disability and autism but has had no formal diagnosis.

Paul is interested in horror and sci-fi films and is a talented keyboard player.

He has no friends in the 'real' world but he does have some friends online – some have been friends for 20 years but never met. He often 'falls out' with neighbours, members of the public or people online, which scares his mum and leads to Paul avoiding people. They have no contact with any extended family.

Paul is verbally articulate but struggles to talk about his feelings. He can be sensitive to sudden noises and criticism, and says he 'can not hear anything' when he gets stressed.

He can also become 'flustered' when he is under pressure or facing unexpected events. In the past this has led him to throw objects and kick furniture. He often acts on impulse and is ashamed afterwards. He was once cautioned by the police after slapping some teenage boys who were taunting him – now he will not travel on public transport and can not drive, so Doreen pays for taxis for them to do their shopping.

Paul has never worked but he does buy films and action figures from the charity shops and sells them online to make 'pocket money'. He has tried volunteering several times but leaves when he feels criticised.

Paul hints at grief, loss and bereavement – this could be for his dad and/ or for the life he feels he wanted (which includes marriage, children and a job). He also can not bear to think about his mum's death.

As Doreen's health is deteriorating, they are both scared that they will be separated or forced to move into a care home.

## **What are the key challenges that Paul and Doreen face?**

Doreen coordinates the household and finances but relies on Paul to do all the 'physical' activities. They live off the widows pension that Paul's dad left, but they are struggling to make ends meet, and they are confused about whether or not they can claim benefits.

Doreen's health is deteriorating and she now has mobility problems and lacks confidence getting around. She needs further health examinations but does not want to leave Paul alone overnight. Their house is described as 'cluttered' by a community occupational therapist who came to give Doreen advice on falls prevention.

At the moment Paul has low level care needs, and is his mum's carer. However without early intervention and preventative support, Paul could require more support in the future and have to move into a residential care setting.

---

## Background to Paul and Doreen's life



Paul had a 'bad time' at school and changed schools several times. He stayed in school until he was 19 years old.

After school he went to a day service two days a week, but stopped after a few months as he was no longer eligible and started to argue with others there – his mum also needed more help at home. It is reported that he hit one of the staff but he can not bring himself to talk about this. There was no other day service available at the time suitable for Paul.

When Paul was 25 years old, his mum had a stroke and became weakened on one side with a paralysed left arm. Paul assumed a caring role as his dad was working (and later died) and her health is now deteriorating.

They have no family support. Paul's dad died 4 years ago of a heart attack in front of Paul, who tried to resuscitate him. Doreen has no other siblings and is not close to her family.

---

---

## What could Paul and Doreen's future look like with the right support?

With the right care and support Paul and Doreen can have a positive future. Here are some of the immediate interventions Paul and Doreen need.

- Doreen gets home care for four to six weeks, to improve her mobility and build her confidence.
- Paul and Doreen have a carers assessment.
- They get funding and access to respite care so Doreen can have the medical tests she needs.
- They get a care call alarm so they can call for help if needed.
- Paul's doctor does a medication review. In the past Paul has had sedatives prescribed for big transitions such as hospital appointments. His GP reviews this for when Doreen is not at home.
- Paul maintains his online friendships and hobbies.
- Paul has a diagnostic assessment for autism and ADHD which helps him understand himself better. He has cognitive behavioural therapy (CBT) which is reasonably adjusted for people with autism, and this helps him cope better and reduce his anxiety.

In the longer term, here is some of the support that Paul and Doreen might need.

- They both get a person-centred care package and support from an advocate and social worker.
  - Paul's social worker communicates with him by email and using photos which he finds more comfortable.
  - In the long term they move into an extra care housing scheme where there are staff 24/7. They also receive funding to hire occasional personal assistants (PAs) so they can both do separate activities and have a break from each other.
  - They adapt the accommodation so Paul can keep his interests and hobbies – for example fast wifi and an on-site garage so Paul can store his collections. He also begins to play keyboard for the choir that meets at the scheme, and is friendly and comfortable with older people.
  - Paul has bereavement counselling to reduce his anxiety and develop his resilience. This helps him to think ahead and prepare for a time when Doreen may not be around.
  - Staff at the scheme have training in autism awareness and mental health. Some of them have similar interests to Paul and provide one to one support which is funded by a direct payment.
  - Paul starts working as a cleaner at the scheme for a few hours a week, alongside another staff member.
  - Paul is supported to contact his extended family and emails them at Christmas and on his birthday.
-

---

## What workforce do Paul and Doreen need?

To have a positive future, Paul and Doreen need the right workforce in place. Here are some suggestions.

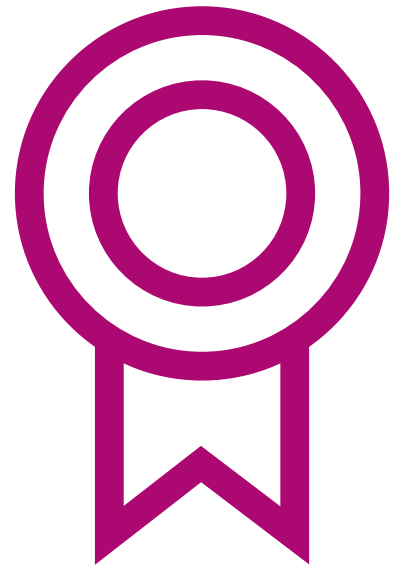
- Staff at housing scheme, including support workers and managers
  - Personal assistants (PAs)
  - Social worker who also acts as a care coordinator
  - Independent mental capacity advocate (IMCA)
  - GP
  - Community learning disability team (CLDT)
  - Positive behavioural support (PBS) consultant
  - Bereavement counsellor
  - Direct payment support team
  - Neighbours in the scheme and others in the community
-

---

## What skills and knowledge does this workforce need?

Paul and Doreen'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 their workforce need to know or have skills around:

- active support
- understanding your caring role
- behaviours which challenge
- PBS level A\*
- PBS level B\*
- loss, grief and bereavement
- autism awareness
- practical life skills
- mental health
- person-centred planning
- digital skills.



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).

	Active support	Understanding your caring role	Behaviours which challenge	PBS level A	PBS level B	Loss, grief and bereavement	Autism awareness	Practical life skills	Mental health	Person-centred planning	Digital skills	Specialist skills and knowledge
<b>Paul</b>	X	X	X			X	X	X	X	X	X	
<b>Doreen</b>	X	X	X			X	X			X		
<b>Staff at the housing scheme</b>	X		X	X		X	X	X	X	X	X	
<b>Personal assistants</b>	X		X	X		X	X	X	X	X	X	
<b>Social worker</b>	X			X		X	X		X	X	X	
<b>Independent advocate</b>	X		X			X	X		X			
<b>GP</b>			X			X	X		X			
<b>Community learning disability team</b>	X				X	X	X		X			Speech and language therapy and sensory profiling
<b>PBS consultant</b>						X	X		X	X		PBS level C
<b>Bereavement counsellor</b>							X		X			
<b>Direct payment support team</b>	X		X				X					Funding streams and payroll
<b>Neighbours and community</b>						X	X		X			
<b>Financial advice</b>							X		X			
<b>IMCA</b>						X	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 Paul and Doreen's day to day support team need since they would be selected to support them 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 them	Cost related to them over five years	Cost related to them over one year	Notes
<b>Paul</b>	8	1	£0	£0	£0	£0	100%	£0	£0	Direct costs included with support workers.
<b>Doreen</b>	7	1	£15	£0	£105	£30	50%	£68	£53	Direct costs included with support workers.
<b>Staff at housing scheme</b>	8	6	£135	£3200	£9860	£2000	30%	£3504	£2904	Direct costs included with support workers.
<b>Personal assistant</b>	8	3.5	£120	£0	£3360	£1200	75%	£3420	£2520	Direct costs included with support workers.
<b>Social worker</b>	6	1.5	£146	£0	£1313	£300	0.4%	£6	£5	Direct costs included with support workers.
<b>Independent advocate</b>	3	1.5	£175	£0	£788	£150	0.1%	£1	£1	Direct costs included with support workers.
<b>GP</b>	2	2.5	£563	£150	£2963	£100	0.4%	£12	£12	All dependant on prior expertise and experience.
<b>Community learning disability team</b>	2.5	3.5	£146	£0	£1276	£400	0.25%	£4	£3	Direct costs included with support workers.

<b>PBS consultant</b>	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.
<b>Bereavement counsellor</b>	1	1.5	£175	£0	£263	£75	0.1%	£0	£0	Direct costs included with support workers.
<b>Direct payment support team</b>	1.5	3.5	£175	£0	£919	£200	0.4%	£4	£4	Direct costs included with support workers.
<b>Neighbours and community</b>	1.5	3.5	£0	£0	£0	£25	10%	£3	£0	Direct costs included with support workers.
<b>IMCA</b>	1.5	1.5	£175	£0	£394	£120	0.4%	£2	£2	Direct costs included with support workers.
<b>Total costs related to Paul and Doreen</b>								<b>£7346</b>	<b>£5820</b>	
<b>Average per year related to Paul and Doreen</b>								<b>£1469</b>		

---

## What could Paul and Doreen's future look like without this care and support?

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

- Doreen falls and moves into a nursing home, and Paul has no support at home. He also gets no support with his bereavement or practical living. He can't afford to take the bus to see his mum, and becomes isolated. This sudden change leaves Paul feeling overwhelmed and anxious.
  - Paul has no understanding of household finances, day to day skills and self-management so he gets into debt and has the utilities cut off. His neighbours raise their concerns but he does not trust anyone so he refuses to let people into the house. He is deemed to have capacity to make these decisions so any safeguarding concerns appear to be 'self-neglect'.
  - This could lead to Paul becoming homeless or moving into a hospital inpatient unit which could be far away from his home.
  - His collectables are disposed of and he is not supported to continue with his interests and hobbies – he refuses support from medical professionals and with his personal care.
-

Skills for Care  
West Gate  
6 Grace Street  
Leeds  
LS1 2RP

T: **0113 245 1716**  
E: **info@skillsforcare.org.uk**

**skillsforcare.org.uk**



[twitter.com/skillsforcare](https://twitter.com/skillsforcare)

[facebook.com/skillsforcare](https://facebook.com/skillsforcare)

[linkedin.com/company/skills-for-care](https://linkedin.com/company/skills-for-care)