



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.



Carol is a 75 year old British born Chinese woman. She has a learning disability and her notes frequently 'query autism', although she has never been diagnosed.

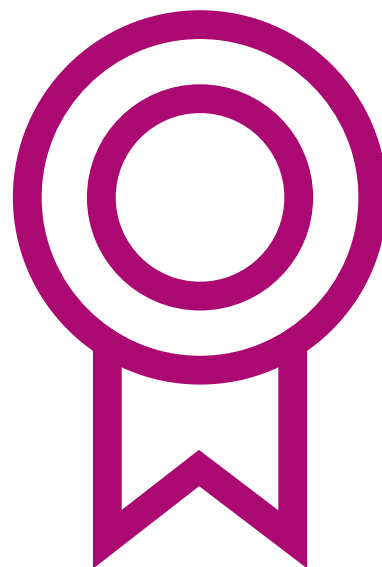
She has a strong personality – she can be feisty, has a wicked sense of humour and enjoys having fun. She knows who she likes - if she does not like someone, she does not often change her mind. She loves watching horse racing, eating out and watching Bonanza and old westerns.

Carol goes out in the community a lot and knows local people who work in the bookies, her local pub and takeaways. She has a fixed routine of places she goes and people she likes to see, and this works well for her.



Carol'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 her workforce need to know or have skills around:

- Ω person-centred care planning
- Ω understanding behaviours which challenge
- Ω PBS level A*
- Ω PBS level B*
- Ω autism awareness
- Ω active support
- Ω resilience.



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.

All training should be delivered in the context of Carol's needs, interests and preferences – some workers might also need training to understand Carol's Chinese culture and what this means to her.



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).

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 Carol's day to day support team need since they would be selected to support her specifically.

- Ω A 'keep safe' or 'safe places' scheme for the shops and local amenities Carol uses.
- Ω Peer review.
- Ω

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

- Ω Carol's undiagnosed health problems could lead to more frequent falls and minor injuries (for example broken fingers, cuts and bruises). This might result in hospital treatment which Carol finds very upsetting and could lead to more incidents.
 - Ω Carol's relationship with care staff deteriorates and she avoids the communal areas of her home. She becomes more withdrawn and loses interest in going out or doing housework.
 - Ω Carol continues to 'fall' to the floor and sometimes this happens on the stairs. Her behaviour continues to be a concern so she is prescribed sedatives which have other side effects.
 - Ω She is at increased risk of osteoarthritis and after a risk assessment she is moved to a residential home for older people. This home is not near her local community so she can not go out and she becomes inactive and uncommunicative.
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