



Example 1: A man with learning disability

- living in his family home
- very anxious because of impending job interview.
- Becomes physically ill with vomiting and stomach pain.
- unable to sleep.
- recent bereavements in the family.
- He found talking about himself and his feelings extremely difficult

What happened

A thoughts and feelings talking Mat was carried out by his advocacy worker. He said 'more in 30 min than he had done in years' and he expressed his anxieties and feelings of grief.



This was shared with the family who were understanding and wanted to support him. They had not understood the extent of his feelings of loss and sadness. It was agreed to stop the job search and allow him time and space to grieve. Physical symptoms slowly resolved.



Cost			
Туре	hours	unit cost	total cost
Tm interview	0.5	35	17.
ongoing support	2	35	7(
			87.

Total

Cost of the Intervention £87.50

Possible alternative scenario

His physical symptoms persisted

His support worker arranged a GP appointment. Cost based on a double GP appointment of 14 minutes each appointment with a support worker in attendance

He was prescribe d sleeping tablets



Non intervention			0
GP referral	0.48	385	184.8
Sleeping tablets	1	41.35	41.35
support to attend	2	35	70
			296.15

Total Cost of intervention was £271.60 with risk of long term dependency on drugs forming





Example 2 A woman with a diagnosis of Asperger syndrome and generalised anxiety

- Living in her family home
- Referred to Occupational Therapist by her psychiatrist
- Withdrawing from all activities
- Becoming more dependant on family for activities of daily living which assessment showed were skills she had
- Finds it difficult to communicate her needs and express herself
- Could not think about future goals
- Becoming agitated when friends or family are talked about

What happened



A relationships talking Mat was carried out in which she identified

- Social media bullying
- Loss of contacts with school friends. She wanted to meet them but her level of anxiety linked to SM comments prevented her from doing this
- Discussion with Mum family wanted to support her in this
- Further Talking Mat to identify activities and interests that would help support engagement with friends
- Some ongoing support to family



Cost

Total Cost £352 It may be that consideration will be given in the future to independent living the cost of planned independent living is generally less than if that occurs through planning than a through a crisis

Possible alternative scenario

- 1. She withdrew even further from all activities .
- Her agitation persisted and became increasingly challenging
- 3. He family became exhausted and unable to support her
- A multi disciplinary meeting was called
- 5. Weekly support by challenging behaviour team was put in
- 6. A review meeting
- 7. A crisis occurred resulting in emergency hospital admission
- Long term placement was found in care setting

multi agncy meeting	2	792	1584
increased community staff input	42	44	1848
emergency hosp admission	28	654	18312
	•		21744

Cost Total Cost of intervention is variable depending on scenarios occurred:

- 1-6 cost would be was £3432
- 1-7 cost would be £21744
- 8 would depend on care home but could reduce the cost on an going basis by £19,604 a year from high staff unit to lower staff unit. A placement post crisis is likely to be more costly and require a higher staff ratio





Example 3 A man with learning disability, anxiety and a history of offending behaviour

- Residing in specialist inpatient facility for learning disability
- Has word finding difficulty and expression of views is difficult
- Direct 1:1 conversations and questioning can leads to increased pressure leading to worsening anxiety.

What happened

An initial 'Wellbeing talking Mat' was carried out in which he was able to express

- In hospital he did not have access to drugs or alcohol so they were not a current problem
- Stress was difficult as he often gets tongue tied
- He prefers others to make decision for him but that also makes him feel that he has less control
- He finds it hard to talk about himself.
- He was unsure about his weight and had no idea what a healthy weight would be for him
- He didn't like doctors
- Things going well included ;prescribed mediaction, eating, exercise, personal care
- He initiated a conversation on trust and that he does not feel staff trust him because of his history. They think he will reoffend

Action

The resource was helpful because it allowed the staff to see things from the patient's perspective and shifted their response to being more patient centred – explaining and supporting him in areas he had identified through the Mat.

	Tm interview	1	35	35
	hospital stay	388	330	128040
Cost				128075

Total Cost £ 128075

Possible alternative scenario

- That care continued without the person centred focus and knowledge of what patient was feeling about his inpatient support
- A study in Gothenburg identified that a patient focused approach as opposed to a more standard approach reduced inpatient hospital stays by 30% Ekman, A. Wolf, L.-E. Olsson, C. Taft, K. Dudas, M. Schaufelberger, K. Swedberg. Effects of personcentred care in patients with chronic heart failure: the PCC-HF study. European Heart Journal, 2011; DOI:

10.1093/eurheartj/ehr306 Not found comparable evidence in learning disability but have used this figure of 30% reduction as an assumption.

Cost

Hospital stay 554 330 182820

Total cost £182820





Example 4 A man with autism who lives on his own with a support package

- Has high level of comprehension and very detailed interest in politics.
- On occasions he does not permit his support staff access to his flat.
- has difficulty processing information including filtering out what information is relevant and will include a lot of detail in his responses



What happened

An initial 'Relationships Mat' was carried out in which expressed

- · concerns about some of his staff,
- he felt their behaviour to him was not always appropriate –he perceived them as nagging
- that he sometimes had concerns about when he was in the community about safety



Action

- Identified what staff support would be more helpful (including, the possible introduction of new staff to the team).
- It helped identify areas of staff practice that require development; working on how staff support and present tasks.
- Work on personal safety.

Cost

Туре	time		unit cost	total cost
Tm interview		1	55	55
further support		2	55	110
work with staff		4	55	220
total cost				385

Possible alternative scenario

- Three further visits where staff were refused entry
- Social work visit
- Man becoming increasingly withdrawn
- Multi agency visit to discuss concerns
- Further support to staff on how to support and present tasks



Cost

Potential costs			0
			0
3 failed visits of support staff to house	1.5	24	36
social work visit	3	55	165
multi agncy emergency meeting	2	687	1374
further work with staff re support	4	55	220
total cost			1795





Example 5 A young woman with learning disability who is in process of transitioning from family home

- Family very supportive of the move They are thinking of her future and want to see her in independent living
- Low mood

What happened

An initial 'thoughts and feelings Mat' was carried out in which expressed

- How worried she was about the move
- That she felt she was letting her family down by not being brave,
- Everyone was telling her how good the move was and she could not say what she felt



Action

- Arranged a doctors appointment where they received support for their low mood (in the end they take not opt for medication as mood improved)
- Put in strategies to allow for more open communication so fears can be expressed and acknowledged.

Possible alternative scenario

- Mood deteriorates
- At the last minute she refuses the placement and it is in danger of breaking down
- Social worker assess and calls multidisciplinary meeting to discuss the situation

С			
Туре	hours	unit cost	total cost
Tm interview	1.5	40	60
gP appointement	0.25	199	49.75
support to atend Gp	3	20	60
liase with family	2	40	80
			169.75

Cost

GP referral	0.25	199	49.75
prescription	1	41.35	41.35
support to attend appointment	3	20	60
social work visit report and liaisng	3	40	120
multi agncy emergency meeting	2	687	1374
			1645.1





Example 6 A man with cerebal palsy and mild learning disability He has good verbal understanding but limited verbal communication . He is familiar with using Talking Mats as a way to communicate his views. He lives in a small group home.

His community learning disability nurse was reviewing his views on well-being.

What happened

A Well being Mat' was carried out in which he expressed:



- difficulties talking about himself -talking mat helps him
- eating wasn't going too well, worried about choking and that means he does not choose a varied diet
- not liking the dentist
- exercise wasn't going well would like to try using the new parallel bars in the centre to help improve his strength.
- managing money and making decisions were not going as well for him.
- Worries about the safety of his belongings.

This information was discussed at his next review meeting. Steps were put in place re increased re supporting his autonomy and safety of his belongings and parallel bars tried at sport centre A referral to Speech and Language Therapy was made around his eating concerns

Cost

Tm interview	1	44	44
Planned Review meeting	1	264	264
referral to SLT	3	44	132
guidelines dissemenated re eating and drinking	1	44	44
laison with key worker re eating and autonomy	3	24	72
further work on automony and safety	3	44	132
			688

Possible alternative scenario

- His concern about eating and drinking were not picked up
- There was a choking incident (risks of deterioration of eating and drinking are associated with aging and cerebal palsy)
- His mood deteriorated
- Referall to doctor and speech and language therapist
- Further investigation such as video-fluoroscopy
- Adapted diet and input to educate staff and client re future eating and drinking support



Cost

Non intervention - choking incident and dysphagia			0
GP referral 0.25			49.8
referral to SLT	3	44	132
investigation at the hospital e.g. videofluroscop	1	580	580
training for staff on dsyphagia	3	44	132
staff	8	33	264
Emergency Review meeting	1	395	395
further work to explore poor mood		44	132
			1685





Summary of the cost benefit intervention

Case	Talking Mats intervention	alternative scenario	saving	Percentage saving
1	88	161	73	45
2	704	21534	20830	97%
3	139800	234342	94542	40%
4	385	1575	1190	75
5	170	1645	1475	89
6	688	1684	996	59
TOTAL	141747	260780.75	119033	
	average		19,851	67%