

Common Core Principles

to support good mental
health and wellbeing in
adult social care



For many years the priority given to physical health over mental health has been a significant issue for our society. When at least one in four people will experience a mental health problem at some point in their life, making sure they get the support they need to live independent and fulfilled lives is essential in delivering a stronger economy and a fairer society.

Because of this long standing issue, the Deputy Prime Minister and I recently launched *Closing the Gap: Priorities for essential change in mental health*

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Common core principles to support good mental health and wellbeing in adult social care

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The key personal values relevant to social care are also critical characteristics that the workforce should have. Evidence from people who need care and support consistently shows that the personal values of social care workers are very important to their experience of receiving good quality social care. Personal values are not the same as principles and it is much more difficult to embed them in working practice. It is therefore very important that a social care workforce is developed that can both individually and collectively demonstrate the personal values that are rated highly by people who need care and support while at the same time understanding their role in terms of delivering a service. Such development will include good recruitment, training, practice development and peer support. Qualities which are particularly important include:

Empathy

Compassion

Caring nature

Honesty

Consistency

Integrity

Friendliness

Approachability

Optimism

Motivating other people

Non-judgementalism

Collaboration



Principle 1

Social care workers should understand that when people with mental illnesses or problems are in crisis or distress and behave in unusual ways this is almost certainly as a result of the illness or problem. Social care workers need to be able to address their own concerns, the person's concerns or the concerns of others (e.g. family and carers) about the person's mental health and provide a timely, appropriate and sensitive response about mental health support options for the person who needs care and support. The term 'recovery' is often used to describe how people can be supported to exercise control over their mental illness or problems and live a good quality of life even if they continue to experience episodes of mental distress.

Social care workers need to be aware and sensitive to that fact that people who need care and support may not describe their distress or difficulties in terms of mental illness. People who need care and support may have experienced stigma and discrimination as a result of being known to have a mental illness or mental health problem, or treatments for their mental health they weren't happy with. For these reasons they may be reluctant to talk about their mental health. Social care workers also need to be careful not to make assumptions about a person's mental health based only on observing these signs, but know how to respond appropriately and raise concerns where necessary. Unusual lifestyles, different values, beliefs, behaviours and customs because of age, ethnicity, gender, sexual orientation, and religion or similar beliefs, or the presence of other disabilities, illnesses or health problems may be the reasons for these signs, rather than a mental illness or mental health problems. Being able to

Principle 2

Understand the importance of *good mental health* and *wellbeing* and have good knowledge of how

Principle 3

Promote *dignity* and *respect* by maintaining confidentiality and integrity and valuing the individual's knowledge and experience.

Context

People who need care and support should not be treated with less respect or dignity than anyone else would expect to receive. Social care workers should show the same level of respect and dignity that they would want for themselves or for their loved ones.

Examples of a lack of dignity and respect being experienced can include:

not being talked to, asked for their views, or having their views listened to

being treated simply as an illness or problem that needs doing something to or performing a task on

personal preferences for how care or support is provided being ignored, e.g. privacy when providing personal care

differences in values, belief, culture, etc., based upon age, ethnicity, gender, sexual orientation or religious or similar belief being ignored by those providing social care or support.

Care and support that is guided by dignity and respect will have a positive impact on people who need care and support, including their self-esteem, feelings of self-worth and overall mental health and wellbeing. Social care workers should not take an expression of dissatisfaction by a person who needs care and support personally. A lack of knowledge about a person's beliefs and values because of age, ethnicity, gender, sexual orientation or religious or similar belief may mean that other colleagues can advise you or are better placed to provide social care or support to a particular person.

Indicative behaviours

Know who people are, acknowledge them by name (making sure that you use the name they prefer you to use) and ask them how they are.

Provide introductory information to people who need care and support about the service they are receiving and the people that will be providing their social care services.

Recognise the value of the expertise and contributions of the person and involve them from the outset in planning their own care or support.

Answer people's questions as openly and honestly as you can, signposting them to other sources of information where necessary.

Trust that a person knows themselves very well-listen to and respect what they have to say.

Ask the person about their personal preferences about how they like care or support to be given to them.

Ask the person about their values, wishes and particular beliefs that affect how social care is provided to them.

Where people who need care and support are unable to express preferences, wishes, beliefs, etc., make sure you have the correct and relevant information from colleagues,



Principle 4

Ensure *equality* and *legal rights* are upheld under the law, especially in relation to the Equality Act 2010 and Mental Capacity Act 2005.

Context

Stigma and discrimination can be very detrimental to people's mental health. Also, people have a right to make decisions about their care and support and to have help in doing this where necessary. However, many people who need care and support may have experienced stigma and discrimination because of their age, ethnicity, gender, sexual orientation, or beliefs and this may be compounded by additional stigma and discrimination if they have a mental illness or mental health problem. Historically, many people using social care have been wrongly excluded from making decisions simply because of their diagnosis or disability even though they are capable of making decisions for themselves. Promoting equality in accordance with the Equality Act 2010 and good practice requires that social care workers readily and fairly facilitate all people who need care and support to access appropriate sources of mental health support as well as other social care they may be using.



Supporting a person to make decisions about their social care for themselves wherever possible, and knowing whether and how to make a decision on their behalf, must follow the legal safeguards in the Mental Capacity Act 2005 (MCA). The MCA emphasises that people should not be assumed to lack mental capacity in making a decision solely because the person is making an unwise decision or because of diagnosis, disability, age, appearance or behaviour. It describes a process for assessing capacity and explains how a decision made on behalf of someone who lacks capacity to make it themselves must be done in their 'best interests'. Mental capacity is decision-specific (i.e. a person's capacity to make decisions must be judged on a decision-by-decision basis) and a person cannot be assumed to lack capacity to make all decisions on the basis of their lacking capacity for any one decision.

Indicative behaviours

Show awareness that there is legislation that covers equality and mental capacity issues.

Enable equal access to care, information and support appropriate to individual need.

Provide equal access to complaints procedures and ensure people who need care and support are not discriminated against when complaints are made.

Recognise and account for individual differences in culture, language, circumstances, values, beliefs, age or abilities when providing social care.

Be aware that it can be difficult sometimes to ensure that your own personal values, beliefs and prejudices don't inappropriately affect your practice as a social care worker.

Principle 5

Maintain *safety* and *safeguarding* responsibilities by appropriately assessing risks and supporting where necessary.

Context

Although most people who need care and support want to live as independently as possible they may still be vulnerable due to factors such as their illness, disability, age, or frailty. Feeling safe in their own homes and the communities they live in are important factors supporting good mental health and wellbeing for all people who need care and support. Abuse (physical, sexual, emotional/psychological, or financial), intimidation or harassment will have a detrimental effect on a person's mental health and wellbeing and any suspicion or allegation of these must be taken very seriously. People who need care and support with mental health problems may feel unsafe, or be at risk particularly when experiencing a crisis or in distress.

People with mental health problems or cognitive problems (e.g. learning disabilities, dementia) may sometimes make decisions or do things that put themselves at risk from others. Although rare, they may on occasions pose a risk to the safety of others including family members and workers. Unfortunately, there is clear evidence that sometimes health and social care services are provided in ways that put people who need care and support at risk, or that neglect, mistreat or abuse them. Safeguarding therefore is everybody's business.

Safeguarding responsibilities involve assessing, managing and addressing risks to people's health and wellbeing, from the people they are in contact with or the communities they live in. This may also involve having basic skills and knowledge about how to respond to a perceived risk that the person themselves may pose, to themselves or others, and an awareness of the laws relating to safeguarding.

Addressing risks may include challenging instances of poor care. However, safeguarding must be balanced with respecting the independence and privacy of people being supported, and it is important not to be overly or unnecessarily protective of individuals. Assessing and managing risk must incorporate supporting people who need care and support to take risks. It is important to share information about the safety of and risks to any person who needs care and support with other organisations providing support and care, according to local agreements about sharing information.

Indicative behaviours

Recognise where people are vulnerable or unable to take their own decisions and/or to protect themselves, their property and assets and bodily integrity.

Show understanding of the different types of abuse that can occur and give rise to safeguarding concerns.

Have knowledge of how to raise a safeguarding concern.

Where appropriate, discuss concerns about a person's safety or any risks with the person themselves.

Make sure that any concerns about a person's safety or risk are shared in any risk assessment process with your manager, colleagues, and other organisations.

Ensure that when the right to an independent lifestyle and choice is at risk, the individual concerned receives appropriate help, including advice, protection and support from relevant agencies.

Report any suspicions if there is evidence to indicate that any other service the person is receiving, or individuals they are in contact with, is abusing them or increasing their vulnerability.

Have an awareness of your organisation's policy for reporting safeguarding concerns and using it appropriately so that vulnerable adults receive the protection of the law and access to the judicial process where necessary.

Recognise that different safeguarding issues can arise in different settings, e.g. care homes, person's own home, etc.



Principle 6

Deliver

As far as possible, maintain continuity of contact and relationship-building with the person, to foster trust and confidence in the service they are receiving.

Use plain vocabulary and avoid jargon.

Remember that just because someone lacks capacity to make decisions doesn't mean that there aren't ways of ensuring that they still receive a personalised service.

Feed back to your manager if policies and procedures are preventing you from providing a flexible and personalised service.



Principle 7

Enable *informed choice and control* by appropriately supporting people who need care and support to make well-informed social care and lifestyle decisions, building on their strengths and personal resources.

Context

Many people needing care and support have experienced a lack of choice and control (see Principle 6). By contrast, these common core principles offer important opportunities to promote good mental health and wellbeing for people who need care and support, particularly by enabling them to take an active role in making their own choices. People may need support and sensitivity to their varying or fluctuating needs. Workers' practice should be informed by the values of respect, dignity, choice and independence for individuals. Best practice encourages and supports individuals to make decisions based on the experience of their needs and enhanced by appropriate professional support and guidance. Practice is based on a shift of values from professionals 'knowing best' to them supporting and empowering individuals to be in control of their own needs. It is therefore important to find ways of helping people towards their own empowerment, regain control, have choices and take initiatives. This will often mean social care workers working in partnership with people who need care and support (and with others working with those people) to support them in developing solutions to problems they are experiencing. Remember also that family members and friends may want to contribute and collaborate in this process as well.

Indicative behaviours

Respond positively and supportively to feedback and requests from people who need care and support, and ensure the provision of good information.

Try to keep yourself informed about changes to health and social care services, benefits, etc., so you can share this information with people.

Care is provided on the assumption that people, irrespective of their needs or circumstances, are usually in the best position to say what their care and support needs are and have a right to be involved in day-to-day care and support decisions.

Find out more about how you can demonstrate 'dignity' and 'respect' towards people in your work with them (see Principle 3).

If a person lacks capacity to make a decision it is essential that any decisions are made in their 'best interests', in accordance with the Mental Capacity Act 2005 – this is likely to include the person's family and/or friends. (See also Principle 4.)

Provide good quality information about availability of services. Where good quality information is not readily available, support the people who need care and support in identifying the required information, or seek it out for them.

Find out from the person (and others who are supporting them) how you can work collaboratively or in partnership to support them in developing solutions and coping strategies.

If the person who needs care and support is unable to express preferences, family or friends may be able to assist or it may be helpful to ensure the person has an advocate.

Have knowledge of where to find EasyRead versions of factsheets, forms and documents to make them available whenever required by the people who need care and support. Many organisations will have EasyRead documents and forms available to download from their websites.

Ensure that hand-written communication is legible to the person needing care and support, carers or relevant health or social care staff.



Principle 8

Promote social inclusion by helping people who are being supported to maintain positive relationships and family contact, peer support, active community involvement, and by enabling carer involvement.

Context

Being socially connected and feeling part of the community where you live are essential for good mental health and wellbeing. Many people with disabilities, illnesses and long term conditions, including mental health problems, have experienced social exclusion from the communities they live in, including stigma, discrimination, poverty, unemployment, isolation and loneliness. By supporting people to be more socially included, social care workers can contribute to individuals' overall wellbeing and recovery. This applies to carers as well.

Establishing or maintaining positive relationships is essential to building confidence and life satisfaction. However, people who need care and support may sometimes have "friendships" and relationships with people who also exploit them or abuse them. These can be difficult to deal with if a person has capacity to make decisions to maintain the relationship. If there is evidence of exploitation or abuse then a safeguarding concern may need to be raised (see Principle 5) or, if the person lacks capacity, the MCA could be used.

Clearly, it is important to maintain established friendships and positive relationships with family members. Peer support can be one way of enabling people to become socially connected again with others who have a similar disability, illness or condition. Local organisations and services may run peer support groups. However, it is important that people are not linked together simply because of the reasons they are receiving social care. People may also want to become actively (re)involved in their communities through volunteering opportunities, activities, or paid employment. Carers may also want opportunities for greater social connections and community participation.

Indicative behaviours

Build up your knowledge of local organisations and services providing opportunities for peer support, community and carer involvement.

To support people who need care and support and carers to become more socially connected find out from them first what they want to do. Enable people to identify their interests and what they can offer within their community.

Support people to build positive and trusting relationships with their neighbours and the people living with and close to them.

Actively promote people's access to means of social support, such as local support groups and community activities. Do the same for carers wherever possible.

Where possible and applicable, accompany people who need care and support when exploring new sources of social or peer support, to encourage maintained engagement with the local community.

People who lack capacity to make decisions about social contact and community involvement may still want to be socially connected, so try and support positive relationships, family contact and community involvement wherever possible.

If you have safeguarding concerns about the relationships that a person who needs care and support has with somebody, manage these in accordance with Principle 5.

Be aware of alternative routes to enabling the person to participate in communities, have social interactions, and receive information and social support; social networking sites and online forums such as Twitter and Facebook can be popular routes to promoting engagement, information and services.



Principle 10

Enable *capacity and confidence-building* in people who need care and support to maintain their independence and control by supporting them to manage risk-taking activities, lifestyle decisions and setting goals.

Context

Supporting people who need care and support to build on their strengths, skills and abilities can be an important approach to promoting good mental health and wellbeing. There is a risk that people needing care and support are seen only in terms of their disability, illness or condition, and what this means they cannot do, rather than for their actual abilities. Such loss of independence and choice can lead to deterioration in people's self-esteem, mental health and wellbeing. Encouraging and supporting people to continue as much as possible to remain active and do the things they like doing can help to boost their good mental health and wellbeing. It can also support recovery from mental illness, especially where people have been denied opportunities because of assumptions or prejudices regarding mental health problems.

Indicative behaviours

Work with people to identify their strengths, abilities and skills and enable them to feel worthwhile.

Enable people to identify the resources they have available to them within their family and community.

Develop the care plan that takes account of and builds on the strengths that people have.

Where possible provide information and opportunities for people to share and develop their strengths and skills, for example through volunteering.

Ensure that you support people in making their own social care and lifestyle decisions.

Support people who need care and support by helping them outline and attain their goals in achieving and maintaining wellbeing.

Encourage people to be active participants in the care they receive from you by supporting them to do tasks for themselves wherever possible.

If your role allows, support people who want to become involved in influencing and contributing to their local services or community.

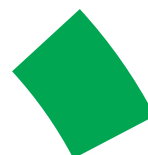


Embedding the common core principles

The principles are based on current policy and best practice. The principles provide a framework for learning and development and form the foundation for good practice across social care settings.

The indicative behaviours demonstrate how the attitudes and actions of individual staff can support people who need care and support and they can be used for setting appraisal objectives for individual workers and designing learning programmes for groups of staff. It is important that the indicative behaviours are applied to specific work contexts and roles, in order to support the development of good practice across an organisation.

Managers may find the Skills for Care 'workforce outcomes measurement model' helpful for planning their workforce's training and development. At the time of publication, this model is still in its discussion stage,

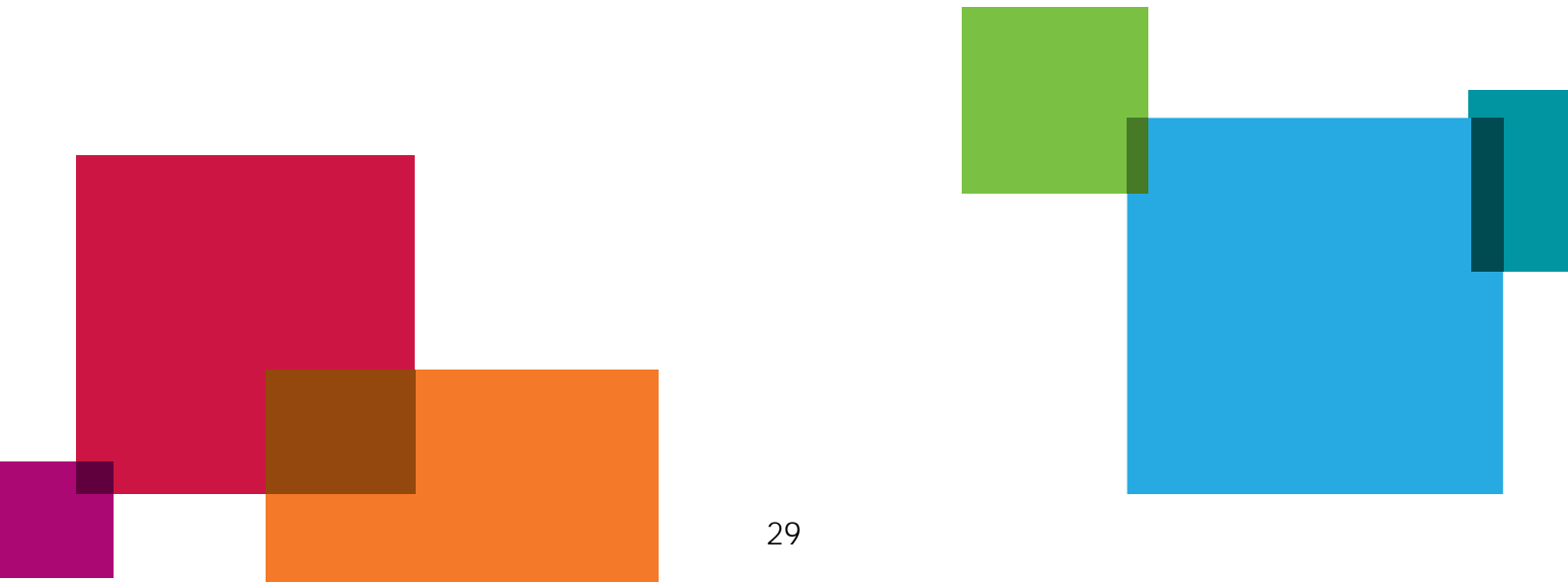


Reviewing your workplace

The following questions should help you review your workplace and plan the training and development you need to support your workforce to adopt the common core principles. This can be used as a benchmarking record to monitor the improvements and changes that are introduced to the training and development available for the workforce.

Topics to consider	How do these apply in your service?
Based on the needs of people who need your service, describe the ambition for the service and for workforce development in your local context	
Who interacts with the person needing care and support? Which people? Which teams?	
What skills do they need? Indicative behaviours from common core principles Specialist skills in caring for people with mental health and wellbeing needs	
What training and development is currently available? Audit: Content Access Resources Qualifications Outcomes for the person receiving care and support	

Topics to consider	How do these apply in your service?
<p>What training needs to be accessed, designed and delivered? What kind of learning works best for your workforce? Negotiate with training providers - are the programmes built using social care units and qualifications? Use social care units and qualifications to ensure your workforce achieves a recognised standard of skills. Develop your own learning programme - use social care units and qualifications to inform your context-specific competences.</p> <p>NB. For the social care units and qualifications, see www.skillselector.skillsforcare.org.uk</p>	
<p>How will the training and development be delivered? Examples: Corporate induction Local networks Regular staff meetings and training sessions Appraisals Mental health and wellbeing conference for full organisation and partners Others (specify)</p>	



(For legislative resources, see list at end).

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Tadd W, Hillman A, Calnan S, Calnan M, Bayer A, & Read S (2011). *Dignity in practice: an exploration of the care of older adults in acute NHS Trusts.* NIHR Service Delivery and Organisation Programme

Think Local Act Personal (2012). *Driving up quality in adult social care: Statement of quality assurance principles.*

Time to Change: <http://www.time-to-change.org.uk/take-action/work-place>

Williamson T (ed) (2009). *Older people's mental health today: a handbook.*

Legislative resources

Care Standards Act 2000

Equality Act 2010

Health and Social Care Bill 2011

Human Rights Act 1998

Mental Capacity Act 2005

Mental Health Act 2007



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