THE TRIANGLE OF CARE TOOLKIT

A Resource for Carers and Carer Organisations to Act as Critical Friends
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INTRODUCTION

It is now 13 years since the original Triangle of Care guide was produced. Its aim was to support inpatient mental health services to work better with carers and to recognise them as experts by experience.

The Triangle of Care Toolkit – A Resource for Carers and Carer Organisations

The experiences of the carer organisations and carers who have acted as critical friends are valued by those delivering the Triangle of Care membership scheme. Carers Trust has been able to identify key practices and standards which have ensured a more successful implementation of the Triangle of Care. These experiences have been collated to develop this toolkit.

This toolkit aims to support carers and carers organisations who are at the beginning of their Triangle of Care journey, those who are yet to begin and those who are already well progressed but want to learn from their peers and ensure a legacy of cultural change.

The key standards contained in the guide aims to ensure that carers are included and supported because this benefits staff, carers and service users alike. Since 2010, over 40 Mental Health Trusts have completed their self-assessment and become members of the Triangle of Care Community.

Triangle of Care has also grown. We now have a number of versions for different service providers. Our ambition for the Triangle of Care is that all health and social care providers will become members. With the passion and commitment of both carers and staff, there is room for optimism that system and cultural changes can be achieved, maintained and embedded through the implementation of Triangle of Care.
ABOUT THE TRIANGLE OF CARE

The Triangle of Care was created to improve engagement between the carer and health professional for the benefit of the patient/service user. It aims to ensure appropriate carer inclusion - “Carers Included” - throughout the patient/service user’s care journey.

The Scheme recognises providers who have committed to change through self-assessment of their existing services, and by implementation of the programme according to the Six Key Standards (see below).

Carers Trust, supported by the Triangle of Care National Steering Group, is responsible for the delivery of the Scheme.

The Six Key Standards

• Carers and the essential role they play are identified at first contact or as soon as possible thereafter.
• Staff are ‘carer aware’ and trained in carer engagement strategies
• Policy and practice protocols re: confidentiality and sharing information, are in place.
• Defined post(s) responsible for carers are in place.
• A carer introduction to the service is available, with a relevant range of information across the care pathway.
• A range of carer support services is available.

Triangle of Care Process

An initial application has been made.

Stage one is complete. All inpatient and crisis teams have been assessed and the provider is committed to improve.

Stage two is complete. All community services have been assessed and the provider remains committed to improve.

Stage three, for integrated providers, is complete. All physical health services have been assessed and the provider remains committed to improve.
THE TRIANGLE OF CARE

TOOLKIT – A RESOURCE FOR CARERS AND CARER ORGANISATIONS

Carers and carer organisations act as critical friends for those Trusts that have joined the Triangle of Care. They feed back extensively on their experiences of being a carer within a Mental Health Trust setting. Carers Trust has used this feedback to identify key practices and standards to ensure a successful implementation of Triangle of Care with Trusts joining the partnership. These key practices and carer experiences have been brought together by Carers Trust to develop this toolkit.¹

The toolkit will focus on the different elements that should be considered when an organisation or carer is supporting the implementation of the Triangle of Care.

Carer involvement

From the beginning carers need clarity and understanding of what difference is made.

Clarity

Carers and carer organisations need to know what is expected of them, the aims of the programme, what the outcomes will be and realistic timeframes.

Being clear what difference it has made

Although the organisation you are working with will have its own outcome aims, it’s worth considering what carers and carer organisations would hope to be able to see. This may, for example be a change in behaviour from staff or more referrals to the carer organisation. For many carers and carer organisations being asked to be involved in the work of a statutory organisation may involve time and resources. It helps if there is clear agreement about what this involvement means, what the expectations of the statutory organisation are, and what capacity the carer and carer organisation has to be involved. As a result it is beneficial to meet with the Trust’s operational lead as early as possible to agree a working agreement and develop an implementation plan.

The toolkit will focus on the different elements that should be considered when an organisation or carer is supporting the implementation of the Triangle of Care.

Areas to be considered:

• Is there carer involvement?

• How can we act as a critical friend?

• Are written agreements in place? Do we need role descriptions and clear understanding of the partnership and boundaries in place?

• How is evidence of change gathered (what are our outcomes)?

• Do we have the space and time to build relationships?

• What does being part of a Triangle of Care mean for the organisation, the person receiving care, staff and unpaid carers?

• How can we identify change and innovation and embed new ways of working?

• Do we have the time, resources and energy to support the implementation of Triangle of Care?

• What will success look like? What are the outcomes and impact of implementation of the Triangle of Care?

• How can we promote the Triangle of Care partnership?

Tips for local carer organisations

• If your organisation has been approached to be involved in the process of Triangle of Care implementation, whether or not you have a health or social care specific project, it is worth considering taking part. Organisations involved in the Triangle of Care have seen stronger relationships being established across partnerships. Often it can also help relationships develop with other carer organisations, creating a stronger voice.

• It’s important to recognise your status as experts in working with, involving and supporting unpaid carers, and see this as an opportunity to influence the culture of the provider to be more carer friendly and inclusive.

• You should be involved at the earliest opportunity, ideally before the provider has even signed up to the Triangle of Care, and then have an equal role in the steering group of the programme as it is rolled out.

• Ensure the right people are involved at the right level. At times someone with strategic responsibility in the organisation will need to be involved, especially when influencing those at board level. At other times, those with operational responsibilities are better suited.

• Ensure you have a written role description for your organisation and a wider working agreement for the programme. If there are individual carers involved, the working agreement should reflect all your different roles.

Tips for carers

• If you are interested or have been asked to be involved in the Triangle of Care implementation at your local service it is important to consider what you hope to get from this. This may be experience that you could add to a CV, an opportunity to improve the service for you and other carers or a chance to get to know other people in a similar situation to you. It is important to reflect on this and ensure you are doing it because you want to.

• Be clear about your role and the time you have available to be involved. It’s important that an organisation doesn’t rely on one or two carers but has enough people involved to spread the responsibilities.

• Ensure you have a written role description for you and a wider working agreement for the collective group of carers involved. If there is also a carer organisation involved the agreement should reflect the different roles you will all fulfil.
You should be approached and involved as early as possible and provided with training so you are able to fulfil your role, but also have the skills to articulate your own and others’ experiences in relation to how a service can develop and improve.

Recognise your role as an expert and don’t be scared to cast a critical eye and ask challenging questions.

How to be a critical friend

One of the most challenging elements for many carers and carer organisations is how to provide criticism while still maintaining a relationship with the provider. It is a fine line to tread and this is where the role of a critical friend comes into play.

Things to consider when being involved in the implementation of the Triangle of Care:

- Ensure you draw on current experience – both your own and that of others – you will be asked to review current practice and it’s important to use examples that reflect this. If you’ve had a bad experience try not to let it block out other experiences that may be more relevant or up to date. It’s important to consider this when providing feedback.

- It’s always important to provide praise where it’s due, no one copes well with constant criticism so where you find good practice recognise and share this.

- The expertise of the critical friend is crucial when challenging perceived ideas of ‘what carers need’. This is useful when reviewing the self-assessments especially those that are rated green. Critical friends can help staff recognise what they think carers need as opposed to what carers know they need. It’s also important to use the experience to show where the system may not achieve consistency.

- Be patient. Sometimes it can feel like two steps forward and one step back when working on the implementation. It’s important to remember that the provider will have a lot of competing demands and beginning the Triangle of Care journey may be very new for many staff.

- Provide constructive feedback, if something could be done better, explain how. Providing people with solutions to their problems is always better than only criticism.

Written agreements

It’s important for all those involved to understand their roles and responsibilities. Developing written agreements for both carer organisations and individual carers is a vital way to clarify what the expectations of those involved are and what will be achieved and by whom.

Role and responsibilities

The agreement should be developed jointly and include what areas of responsibility each person/group/organisation has and a plan for implementation.

Understanding boundaries and expectations:

These written agreements are especially useful to establish clear boundaries and ensure carers and carer organisations aren’t being expected to deliver the Triangle of Care for the provider.
**Time, resources and energy:**

Part of the written agreement should recognise the needs of the carer representatives as volunteers and carers. It is therefore crucial to check they have the training and support they need to be involved in the implementation process. It is also important to check there are enough carer representatives so that it doesn’t become onerous for individuals.

**Outcomes – gathering evidence of change**

One of the important things for Triangle of Care implementation is gathering evidence on the difference it has made for carers, staff and service users.

Before the implementation process begins it is worth discussing this to determine what information you want to capture, and how. It is also worth starting to record evidence early. One of the greatest challenges for the Triangle of Care is measuring cultural change but there are ways to do this.

Things that can be considered are:

- Measuring the number of referrals made to carer organisations and groups.
- Measuring changes in complaints, that is, have they gone down after implementation?
- Using tools that measure outcomes to evaluate the change in carer wellbeing.
- Measuring staff knowledge pre and post carer awareness training.
- Recording how carers are being included in policies and procedures, being added as regular items to meeting agendas and included in supervision meetings and appraisals are all ways to measure cultural change.

**Building relationships**

Some carers and carer organisations involved in the Triangle of Care will already be very familiar with their local provider and who the key members of staff are. It is important, however, for all carers and carer organisations to be aware of this.

Building relationships and having strong relationships with members of staff at all levels in the Trust is vital for successful implementation. It will help solidify the critical friend relationship and people will accept negative feedback better if they know and trust the person delivering it. Things to consider and to include:

- Find your allies, find those people who are already promoting the carer agenda and start working with them.
- Find out if your Trust’s board has a carer governor. They can be a vital influencer at a strategic level.
- Find people from different disciplines who are sympathetic to and support the Triangle of Care. They can be great allies in influencing their peers.
- Offer to visit ward and team meetings to promote what carer organisations do and how they can support the work of staff.
- Once carer champions have been appointed, liaise with them regularly. You can be a great source of support, information and knowledge as they begin their new role.
Being part of the Triangle

One of the main purposes of the Triangle of Care is to ensure that carers become included, informed and supported in health and social care. However, it is important not to forget the Triangle. The Triangle of Care is an opportunity to:

• Build relationships and understanding not only between carers and professionals, but also carers and people who use services.

• Help people communicate better with one another about their decisions and experiences as carers and people who use services.

• Foster understanding, improve knowledge, support whole families and recognise that all three points of the Triangle have something to learn and share.

Innovation

One of the strengths of partnership working and involving those who experience how services are delivered is the ability to innovate, especially in challenging or new environments. Thinking differently and offering innovative solutions to problems can get the right people’s attention and can help boost morale and staff engagement.

Confidentiality workshop for carers, patients and staff

In January 2023, Central North West London NHS Foundation Trust (CNWL) held a Confidentiality Workshop for carers, patients and staff across the Trust. This was an opportunity for all parts of the ‘Triangle’ to come together to discuss the principles of confidentiality, as well as the barriers for each group and how to overcome these. Attendees were split into small groups made up of a carer, patient and staff member, and worked through some confidentiality scenarios, looking at each perspective in turn.

“It was a good eye opener for everyone to hear that all groups came up with near enough the same outcome - which was that confidentiality should be dealt with in a compassionate way and not a textbook way. As staff members, we must not lose sight of how hard it is for the carer and continue being compassionate towards them in all that they are trying to achieve.”

Staff member who attended the workshop

Boundaries and role descriptions

As mentioned in earlier sections, it is vital for any individual carer or group, as well as any carer organisation acting as a critical friend, to have a role description. It’s important that this makes clear:

• Which activities will be undertaken

• Timeframes that will be worked to

• The reporting structure

• What training will be provided to carers who are involved

• The support that will be available to carers who are involved

Role descriptions are helpful for all involved as it helps individuals and organisations have a clearer understanding of their role and responsibilities. Then it is important for all those involved to develop and maintain professional boundaries.

This should also include knowing the limits of the role. It can be tempting to become the expert in the Triangle of Care and begin doing the work for the service. For staff to fully understand and feel confident about the Triangle of Care they must do the work themselves.
**Time, money and energy**

Many who get involved in the Triangle of Care do so because they often feel passionate about it and its value to carers. However, it’s important to remember that individuals and organisations do not have unlimited time or resources. Consider how much time and resources supporting the Triangle of Care implementation will require and ensure that the provider understands the limitations of the support you can offer.

It is important also that carers are reimbursed for their time and out-of-pocket expenses and that enough carers are involved so that it doesn’t become a burden to one or two carers.

**What success looks like**

One of the biggest challenges for carers and carer organisations involved in Triangle of Care implementation is recognising what good looks like and being able to communicate this. This is particularly important when providing feedback to health and care teams and organisations on the self-assessments.

Important things to look for when scrutinising the self-assessments:

- How, and by whom were they completed? This should ideally be a team effort and reflect the ward/team’s current level of involvement and support to carers.

- Has the whole self-assessment been completed? It’s important that all the elements of the self-assessment are completed and that there is evidence supporting each element.

- Explore the rating given in the supporting self-assessment and the evidence. Can the service demonstrate that it is consistently doing something? Stating that a policy exists doesn’t mean it is being implemented in practice.

- Push their understanding. Some services often will see things through the prism of their knowledge and understanding. Carer support organisations and unpaid carers are there to show what it means to experience it. For example, if a service states that information is provided to carers and they use a noticeboard as the only example of this, demonstrate to them why this may not be the best way for this to be done.

- Look for consistency – if a ward or team use the terms ‘where appropriate’, ‘if required’ or ‘when necessary’ this isn’t demonstrating that carers are experiencing an equal service.

- Look at the actions in detail. How will the ward or team make changes to improve, and are their timescales realistic to achieve this?
PROMOTING THE PARTNERSHIP

For some organisations, their relationship with their provider is a long and established one; for others it may be the first time they have worked together. In either case, working in partnership on the Triangle of Care implementation is an opportunity to not only demonstrate your organisation’s expertise, but also show what services and support are available to carers.

Experience of implementation across England has shown that, no matter how well-established a carer organisation may be, there will be many frontline Trust staff who are unfamiliar with that carer organisation. Specifically, they may be unfamiliar with the carer organisation’s services, what it can do, what carers are entitled to and how Trust staff can refer carers to the local carers organisation.

Closing comments

Better engagement by health providers with those who use services, staff teams and unpaid carers as active partners is a necessary foundation of more effective planning and delivery of health care.

The implementation of the Triangle of Care Six Key Standards in partnership with unpaid carers and carer support organisations recognises the expert knowledge and supports continuous improvement for health and care services.

A ‘listening organisation’ creates opportunities for unpaid carers and users of services to be given opportunities to share their insights through feedback to influence changes to services.

For further information contact TriangleofCare@carers.org