The Triangle of Care Toolkit – A Resource for Carers and Carer Organisations to Act as Critical Friends

Introduction
The Triangle of Care was launched in 2010 and was developed by carers who were supporting someone who regularly needed acute inpatient mental health services. It identified six key standards that if in place would mean that the carer would be better involved and supported by mental health services.

Since the launch, Carers Trust has led the programme in England developing the original guide so that it can be implemented across all mental health services including specialist, forensic, children’s, older people’s and community.

In 2013, the Triangle of Care membership scheme was launched to enable mental health providers to receive formal recognition of their commitment to cultural change and carer involvement. Since its launch, 31 NHS trusts have joined the scheme and each of these has had to have clear carer involvement in implementation. The experiences of those carers and carer organisations have enabled Carers Trust to develop this toolkit.

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The experiences of the carer organisations and carers who have acted as critical friends to those trusts who have joined the Triangle of Care membership scheme between 2013 and 2015 have been extensive. 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 a 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 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:
- Carer involvement.
- How to be a critical friend.
- Written agreements.
- Outcomes – gathering evidence of change.
- Building relationships.
- Being part of the triangle.
- Innovating.
- Boundaries and role descriptions.
- Time, money and energy.
- What good looks like.
- Self-promotion – showing how carer organisations can help.

**Carer involvement**
The two key tenets of carer involvement are:
1. Clarity.
2. Being clear what difference it has 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.

**Tips for carers organisations**
- If your organisation has been approached to be involved in the process of the Triangle of Care implementation, whether or not you have a mental health specific project, it is worth considering taking part. Organisations which have been involved in England have seen stronger relationships being established with their mental health trust and commissioners, it has led to additional services being commissioned (in some areas) and the carer organisation
building and having their role as an expert recognised. Often it can also help relationships develop with other carer organisations, creating a stronger voice.

- It’s important to recognise your status as experts and see this as an opportunity to influence the culture of the mental health trust to be more carer friendly and inclusive.
- You should be involved at the earliest opportunity, ideally before the mental health trust has even signed up to the Triangle of Care, and then have an equal role in the steering group of the programme as it’s 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 mental health trust it is important to consider what you hope to get from this. This maybe 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 experts 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 your mental health trust. It is a fine line to tread and this is where the role of a critical friend comes into play.
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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 mental health trust 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.

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

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 mental health trust.

As well as written agreements for each concerned party, it is also beneficial to develop a joint implementation plan, then all those involved are clear on their roles, actions and timescales.

Part of the written agreement should recognise the needs of the carer representatives as volunteers and carers. It is therefore crucial to ensure they have the training and support they need to be involved in the implementation process, it is
also important to ensure 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 ascertain how and what information you want to capture. 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 outcomes measuring tools to measure 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 who are involved in the Triangle of Care will already be very familiar with their local mental health trust and who the key members of staff are, however it is important 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 carers 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.
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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 mental health 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 service users.
- Help people communicate better with one another about their decisions and experiences as carers and service users.
- 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 the third sector is its ability to innovate especially in challenging or new environments. Thinking outside the box and offering innovative solutions to problems can get the right people’s attention and can help boost morale and staff engagement.

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, however it is also 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 mental health service, but 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. It’s important to consider how much time and resources supporting the Triangle of Care implementation will require and ensure that the mental health trust 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 good 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 mental health teams and organisations on the self-assessments.

Important things to look for when scrutinizing 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 and the evidence that supports it, that is 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. You’re 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?

Self promotion – showing how carers’ organisations can help
For some organisations, their relationship with their mental health trust 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 carers organisation may be there will be many frontline trust staff who are unfamiliar with that organisation’s services, what it can do, what carers are entitled to and how trust staff can refer carers to the local carers organisation.

Don’t be afraid to promote your services and your knowledge to both staff and the trust more widely. In some areas the strength of the relationship that has been
established and skills demonstrated by the local carers organisation has led to further services being commissioned and funding being provided.

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