



# Triangle of Care

## Improving Patient & Carer Experience

### Dumfries & Galloway





# Carers (Scotland) Act 2016

- Regulations took effect on 1 April 2018

**Section 28(1) and (2) requires each health board to involve the carer before a cared-for person is discharged from hospital. It must do so by:**

- (a) taking steps as it considers appropriate to: inform the carer as soon as reasonably practicable of the intention to discharge the cared-for person; and invite the views of carers about the discharge; and
- (b) taking account, *so far as it is reasonable and practicable to do so, of any views given by the carer in making decisions relating to discharge of the cared-for person.*

**Section 28(3) provides that this duty only applies where:**

- the carer of the cared-for person can be identified *without delay; and* where it appears to the health board that the cared-for person is likely to require care following discharge.



# Triangle of Care

- Originally developed by Carers and the Carers Trust in England, and with support from Scottish Government, a Scottish version was launched in July 2010
- Designed by Carers and staff working to improve engagement with Carers in acute inpatient services.

# Improving Patient and Carer Experience Group (IPCEG)





# Test of Change - Midpark

- Established a baseline through the self assessment of current Carer engagement and impact of this on service users
- Analyse gaps and issues and develop an action plan
- Implemented action plan for 6 month audit across 2 pilot areas : IPCU/Rehabilitation unit ( March – November 2016).
- Evaluate change and demonstrate benefits



# Action Plan

- Developed a Carer Pathway to include specific documentation:

Pathway Driver diagram

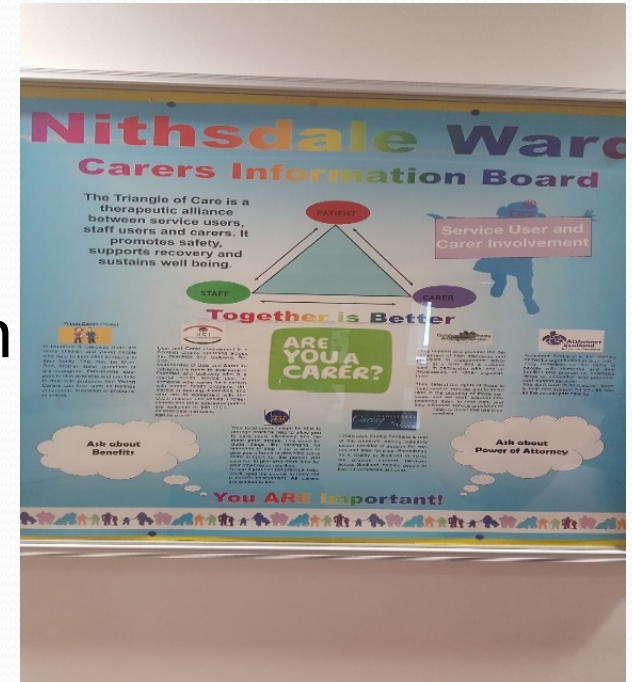
Carer checklist

Carers letter of invitation to meet with

Carer Information sheet

Information from Carer pack

Carer feedback

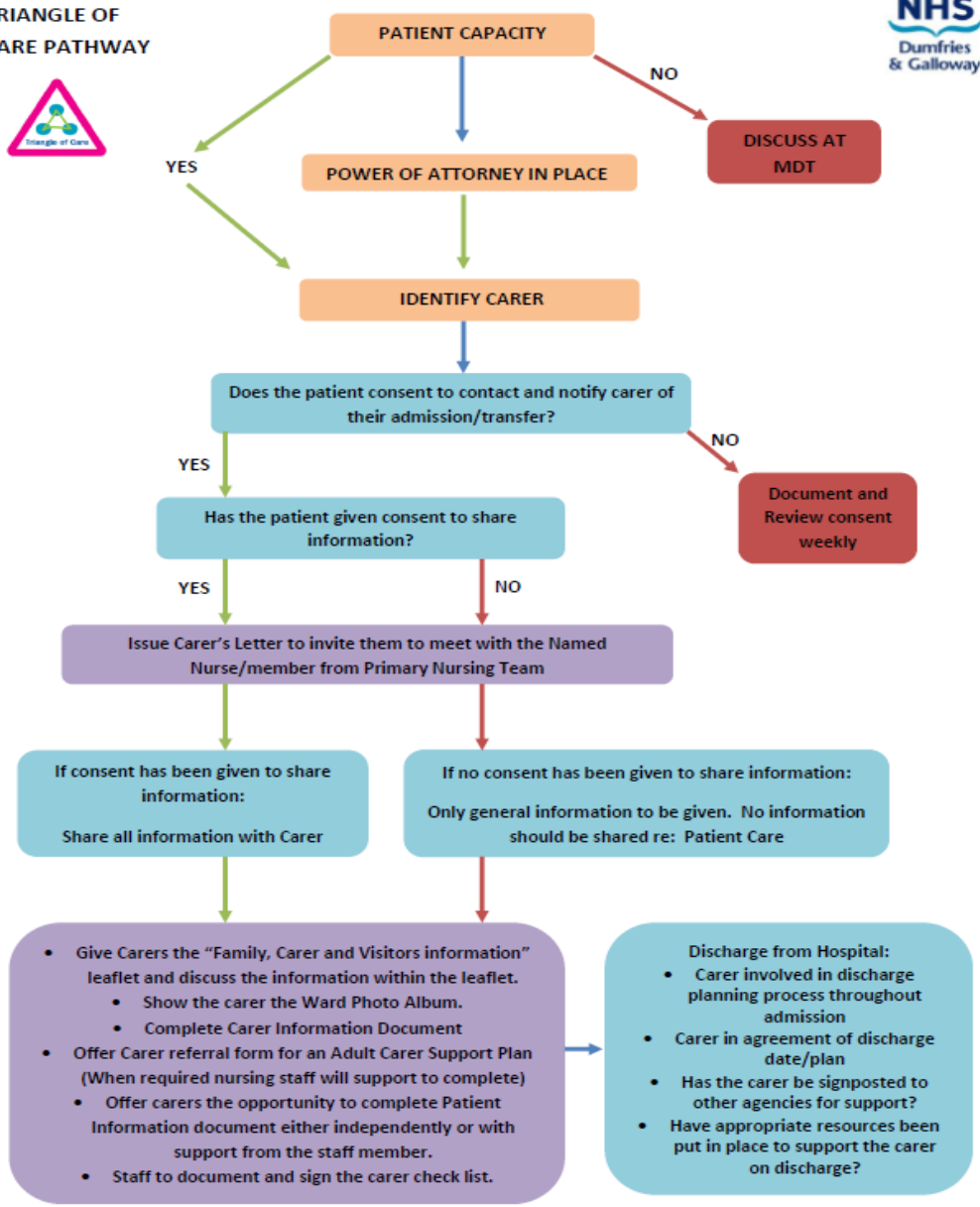


- Developed ward photo album ,information display posters & information leaflets for family/carers and visitors for all ward areas
- Process to evidence routine review of patient's consent to share info.

**TRIANGLE OF CARE PATHWAY**



Triangle of Care



- Give Carers the "Family, Carer and Visitors information" leaflet and discuss the information within the leaflet.
  - Show the carer the Ward Photo Album.
  - Complete Carer Information Document
- Offer Carer referral form for an Adult Carer Support Plan (When required nursing staff will support to complete)
  - Offer carers the opportunity to complete Patient Information document either independently or with support from the staff member.
  - Staff to document and sign the carer check list.

- Discharge from Hospital:
  - Carer involved in discharge planning process throughout admission
  - Carer in agreement of discharge date/plan
  - Has the carer been signposted to other agencies for support?
  - Have appropriate resources been put in place to support the carer on discharge?



# Audit Process

The audit of the new documentation commenced within the pilot areas from May 2016 for a six month period.

## **Intensive Psychiatric Care Unit**

During the audit period there were 20 patients admitted to Balcarry Ward whose records were audited in terms of compliance with the pathway and documentation.

## **Rehabilitation Ward**

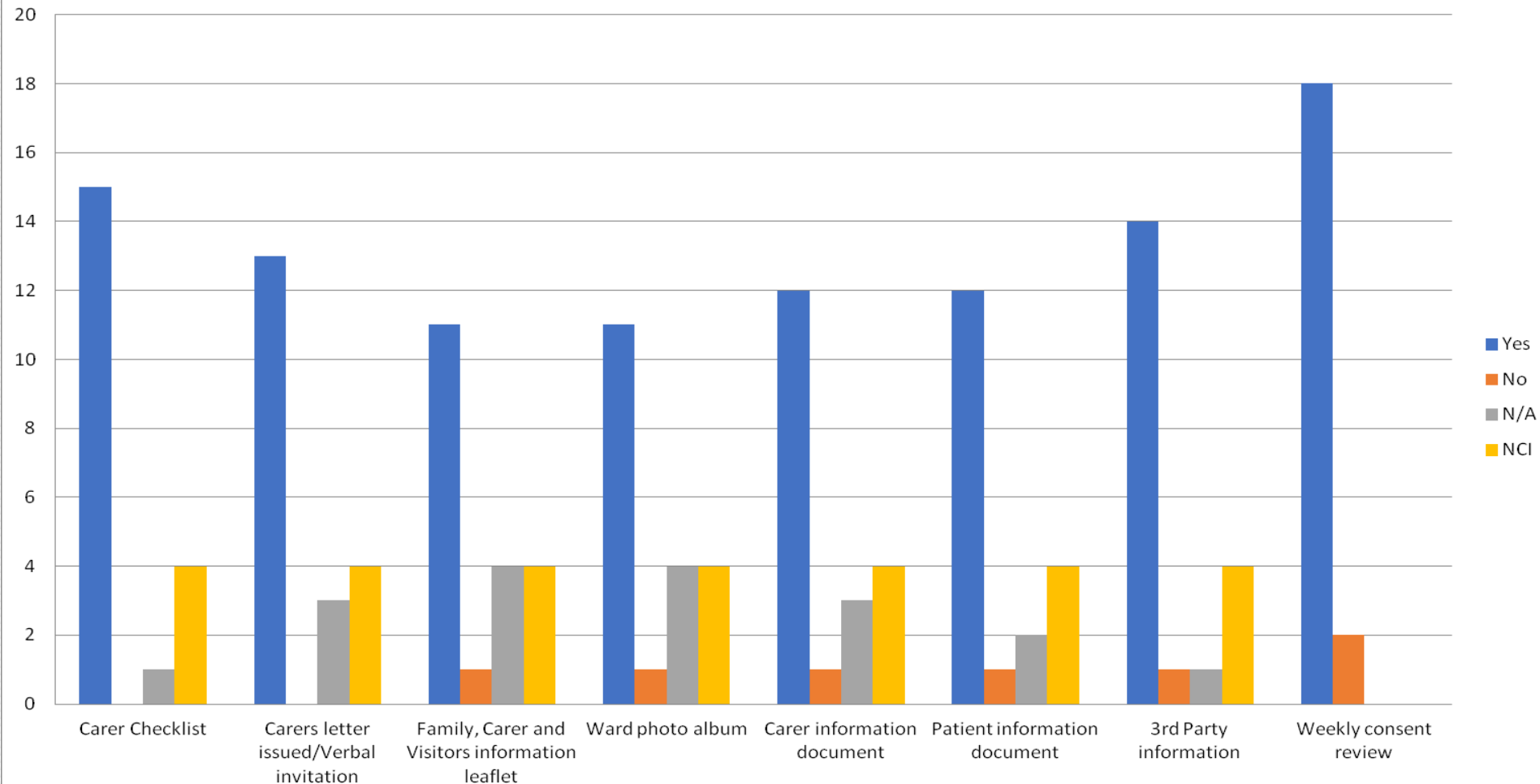
Unfortunately there were no new admissions during the audit period. Staff were unable to implement the pathway with the patients residing in the unit over the audit period as there was no identified carers.





# Outcomes of 20 notes audited post implementation

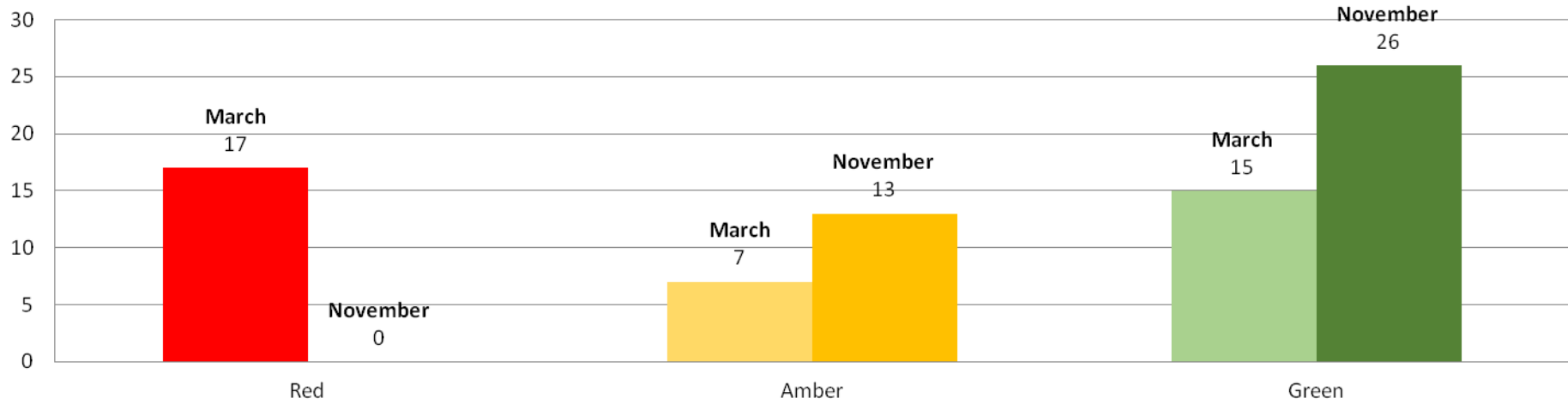
## Triangle of Care Audit



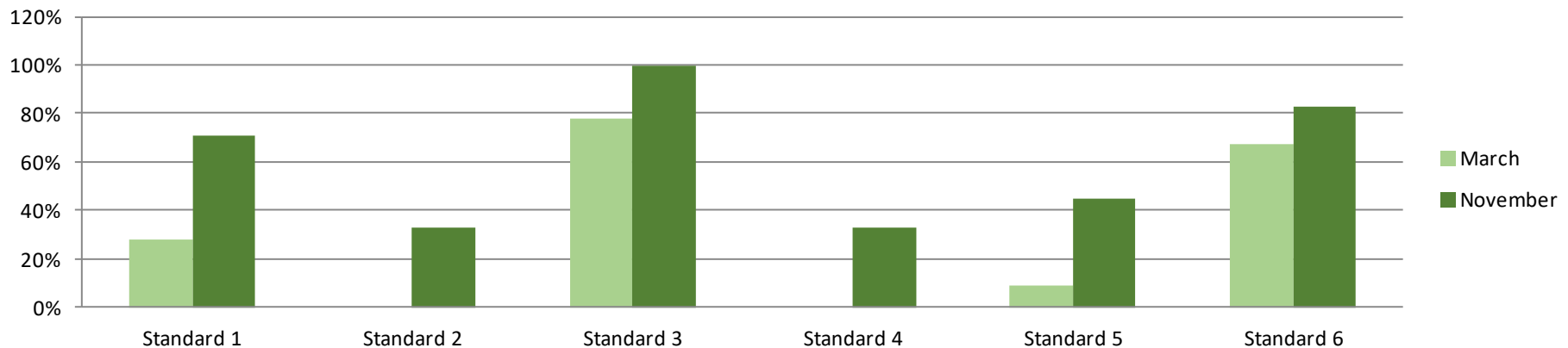


# Audit outcomes of the Triangle of Care Self Assessment post

## Traffic Light Ratings for the 39 Criteria of the 6 Triangle of Care Standards



## Triangle Of Care - % Of Criteria Achieving Green Rating Per Standard





# Carer Feedback

Appointment  
beneficial

Felt listened to  
and valued

Able to share  
their  
knowledge  
with staff

Reduced Carer  
anxiety

Established  
positive  
relationship  
with staff

Contributed  
to care of  
patient



# Staff Feedback

Pathway easy to follow

Allocated time with Carer very beneficial

Useful in breaking down barriers between staff and Carers

Clearer knowledge of patient prior to admission

All info informed assessment and treatment

Opportunity to attend staff meeting appreciated



# Next Steps

- Complete 6 month audit of current roll out
- Training of CMHT and amendment of documentation for roll out in community
- If Community Hospital pilot successful – rollout across region and discussion regarding implementing in Acute Care
- Audit of adherence of involving cares in discharge process in line with the Carers (Scotland) Act 2016



# Mental Health Inpatient Services

Triangle of Care self assessment completed for all ward areas.

Delivered Information training sessions to approximately 120 staff members.

2 Carer Leads & 12 identified Carer links.

Implementation of the Carer Pathway and documentation across all ward areas commenced from March 2018

6 month audit to be completed in October/November 2018.



# Community Hospitals

- Pilot areas: Newton Stewart & Thornhill
- Carer links identified – informative ToC training provided.
- Triangle of Care base line self assessments completed
- Commenced implementation of Carer Pathway/Documentation March 2018 (slight adaptations made to those used within inpatient services)
- Review at 3 months and full audit at 6 months.



# Community Mental Health

## Team

- Pilot of carer pathway in the Stewartry Community Mental Health Team
- Commenced February 2018 – Aims to ensure active identification and encouraged participation of Carers
- Amendments to carer pathway and carer checklist to incorporate memory clinics and review appointments. This process includes both the key worker and responsible medical officer (often the consultant psychiatrist)
- Review at 6 months and develop further





# Preliminary Outcomes

## MIDPARK HOSPITAL

	Admissions/Discharges	Checklists Completed	Compliance
Rehabilitation Unit (Dalveen)	0 (3 month review)	0	100%
Adult Intermediate Care (Glencairn)	16 (6 month)	16	100%
Older Adult Acute Admission (Nithsdale)	15 (3 month review)	13	87%
Dementia Assessment Unit (Cree)	45 (6month review)	33	73%
Adult Acute Admission (Ettrick)	80 (3 month review) Implementation will recommence on 17 <sup>th</sup> Nov	9	11%
Intensive Psychiatric Care Unit (Balcary)	14 (1 <sup>st</sup> 3 month review) 13 (2 <sup>nd</sup> 2 month review)	1 11	7% 85%

## COMMUNITY HOSPITALS

Thornhill	11	11	100%
Newton Stewart	20	18	80%