Partnership in Exploring Compulsory Care & Treatment

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Overview of Session

- Importance of involving service users
- The study
- How service users were involved
- Personal reflections from the team
  - Benefits/difference it made
  - Challenges/issues
  - Key learning points
The Research Study

- Aimed to evaluate experiences of MHCT Act
- For Scottish Government
- Qualitative methods – literature review, interviews, focus groups
- Key stakeholders – service user experience central; informal carers; professionals
- 2 Stages – 6-12 months apart
- 2006 – 2008
- To be published shortly
Research Samples

- 4 Health Board areas
- 49 service users - 80% agreed to be interviewed twice
- 33 informal carers/relatives
- 38 professionals – national groups & local practitioners
Why Service Users Were Involved

- Acceptance at policy level
- Section 1 (3) (c) of MHCT Act - “importance of the patient participating as fully as possible”
- Commission focused on service user experience
- Our values
- Networks
Benefits – Researcher View

- Impact on what we did - protocols
- How we did it – conduct of interviews
- What we asked
- Established rapport & credibility
- Interpretation of findings
- Personal capacity building
What Interviewees Said…

- *It felt better that there was somebody there that understood”*

- “*If I was sitting with two officials I couldn’t be as relaxed, having a laugh as well as talking about these things”*

- “*Good that its also someone that’s been in a similar situation”*
Some Challenges

- Scope of study
- NHS Ethics committees
- Employing people
- Co-ordinating interviews with pairs
- Skills in qualitative interviewing
- Support
Some Key Learning Points

- Untapped capacity
- Training and support
- Fresh insights
- Involved at the outset
- Payment
- Flexibility
- Positive culture