

AN OVERVIEW OF THE EQUIP STUDY

The EQUIP study aimed to improve service user and carer involvement in care planning in mental health services. We co-developed with service users and carers a training package for mental health professionals so that they would be better equipped to involve users and carers in their care. Service users and carers helped to design, shape and conduct the EQUIP study and you can learn more about their experiences in [Chapter 1](#).

The content of the training was 'evidence-based.' This means that it was built upon detailed knowledge of the care-planning process, why service user and carer involvement in care planning may not have happened in the past, and what might be the best way of making sure it happens in the future. You will learn more about how to find and use research knowledge and evidence in [Chapter 2](#).

Training was delivered by service users and carers, researchers and health professionals to a range of mental health workers including doctors, nurses, social workers and occupational therapists working in Community Mental Health Teams. We examined whether our new training course led to health professionals involving users and carers in their care. We also looked at how this training influenced health service delivery costs. To do this we used a specific research design, called a randomized controlled trial. You can learn more about this and other research designs in [Chapter 3](#). You can learn more about the type of data we can collect in a trial and how to analyse this in [Chapters 4 and 5](#).

During the EQUIP programme, we worked with service users and carers to develop a new instrument, a patient-reported outcome measure, to measure the extent to which people were involved in their own care planning. You can read more about the importance of patient-reported outcome measures and how you might design and test them in [Chapter 6](#).

We explored the organisational changes that needed to be made by Community Mental Health Teams and the wider healthcare system to improve user and carer involved care planning. We did this by talking to different people and listening to their different views and perspectives. You can learn more about this research approach in [Chapters 7 and 8](#).

We conducted all our work according to the principles of ethical research, and these are discussed more fully in [Chapter 9](#).

Finally, we used lots of different ways to tell users, carers, health professionals and managers about our research findings, especially how user and carer involvement in care planning could be improved. You can learn more about different ways to disseminate research in the final chapter of this book, [Chapter 10](#).