An online supported self-management toolkit for relatives of people with psychosis or bipolar experiences: the IMPART multiple case study

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

The IMPART multiple case study

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Plain English summary

his study looked at what helps and what hinders the introduction of online support services in NHS care.

To do this, we examined the introduction of an online toolkit for relatives of people with psychosis or bipolar disorder into routine practice in six mental health trusts. The Relatives' Education And Coping Toolkit (REACT) had previously been shown to be a promising way to support relatives, although how well it works in reducing relatives' distress is still being tested in a parallel study (REACT trial).

This study asked what do organisations need to put in place so that people can successfully use this support package? What gets in the way of this and what helps? Our research team included carers.

Our approach was to build case studies of each trust to describe what happened. REACT was introduced in two trusts first, the lessons from these being transferred to the next two trusts and then again to the last two trusts. We collected data on how many people used REACT and how often; we also talked to people about their experiences. Finally, a 2-day event was held to draw the findings into a framework.

It was hard to get REACT to relatives. Over 18 months, about half of the relatives invited to use REACT did so. Staff and relatives valued REACT, but staff found it difficult to prioritise support for relatives because of workload and were frustrated by technical issues. Some staff viewed REACT as a useful addition to face-to-face support, but felt that personal relationships remained more important. There was significant resistance to a stand-alone online package, and some concern about managing risk in online forums. The use of REACT might increase engagement with relatives, so there are cost implications.

The findings show that significant changes are needed to both the way in which online interventions are developed, tested and delivered, and to the NHS services hosting them.

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