# Improving delivery of Early Psychosis Intervention programs: Can implementing a structured model of care increase quality?

J. Durbin, S. Brooks, H. McKee, D. Addington, G. Foussias, N. Kozloff, S. Sockalingam, A. Voineskos

## BACKGROUND

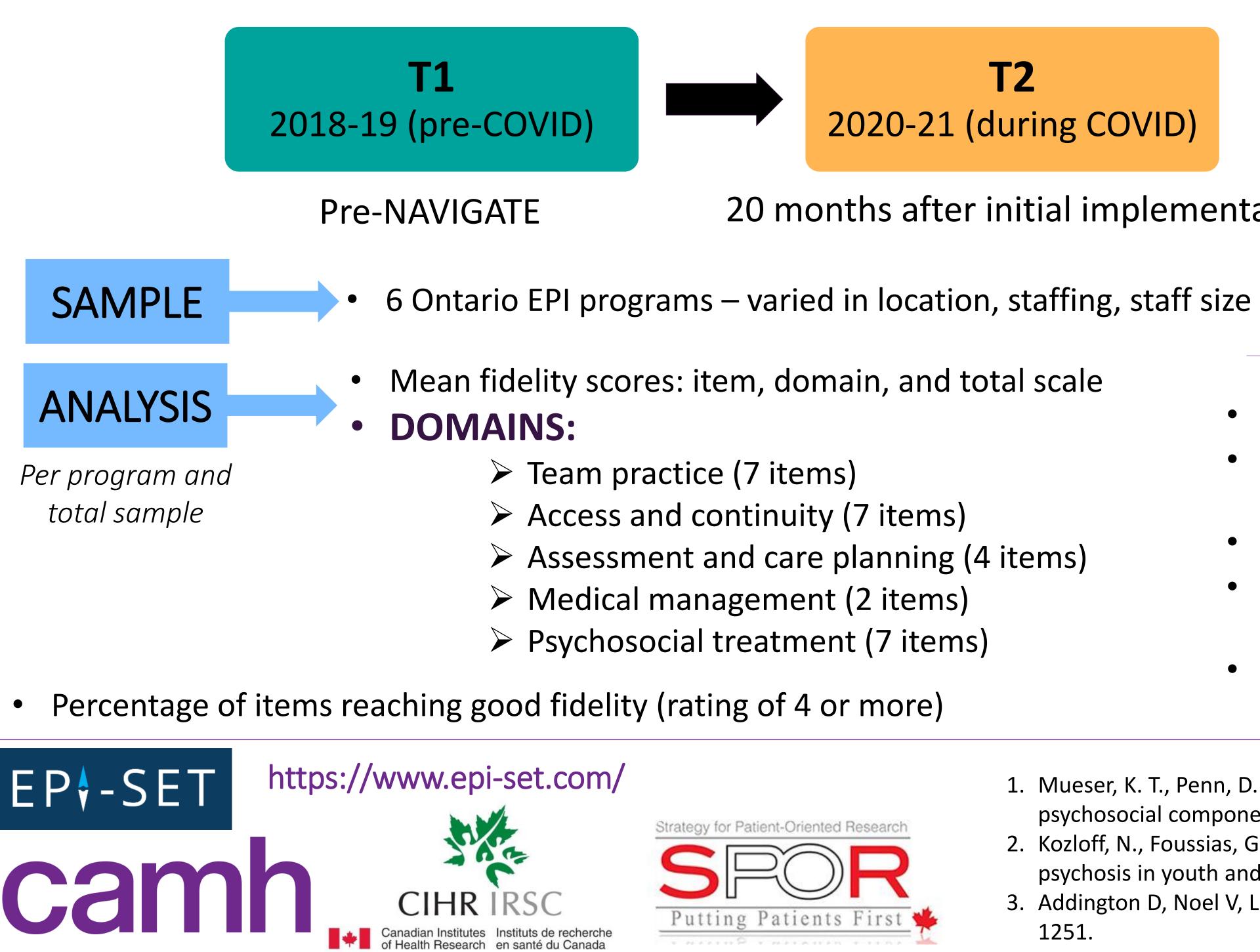
- In Ontario, Canada, Early Psychosis Intervention (EPI) is a priority service with about 50 programs currently delivering EPI across the province.
- Past fidelity assessments have shown good program model but some areas of challenge including deliver
- NAVIGATE is an evidence-based, structured model of medical and psychosocial interventions by an interdi
- The EPI-SET study (Early Psychosis Intervention: Spr implementation of NAVIGATE in six Ontario EPI progr
- Among other benefits, NAVIGATE was expected to in model standards

### **STUDY AIM**

Evaluate the effect of implementing NA to the EPI model

## METHODS

- Program fidelity was assessed using the First Episod
  - 27 items rated on a 5-point anchored scale
  - Ratings based on staff interviews (virtual),
- Assessments were conducted at 2 points in time
  - At T2. each team reviewed their results and discussed reasons for any rating changes: e.g., NAVIGATE-related, COVID-related, other

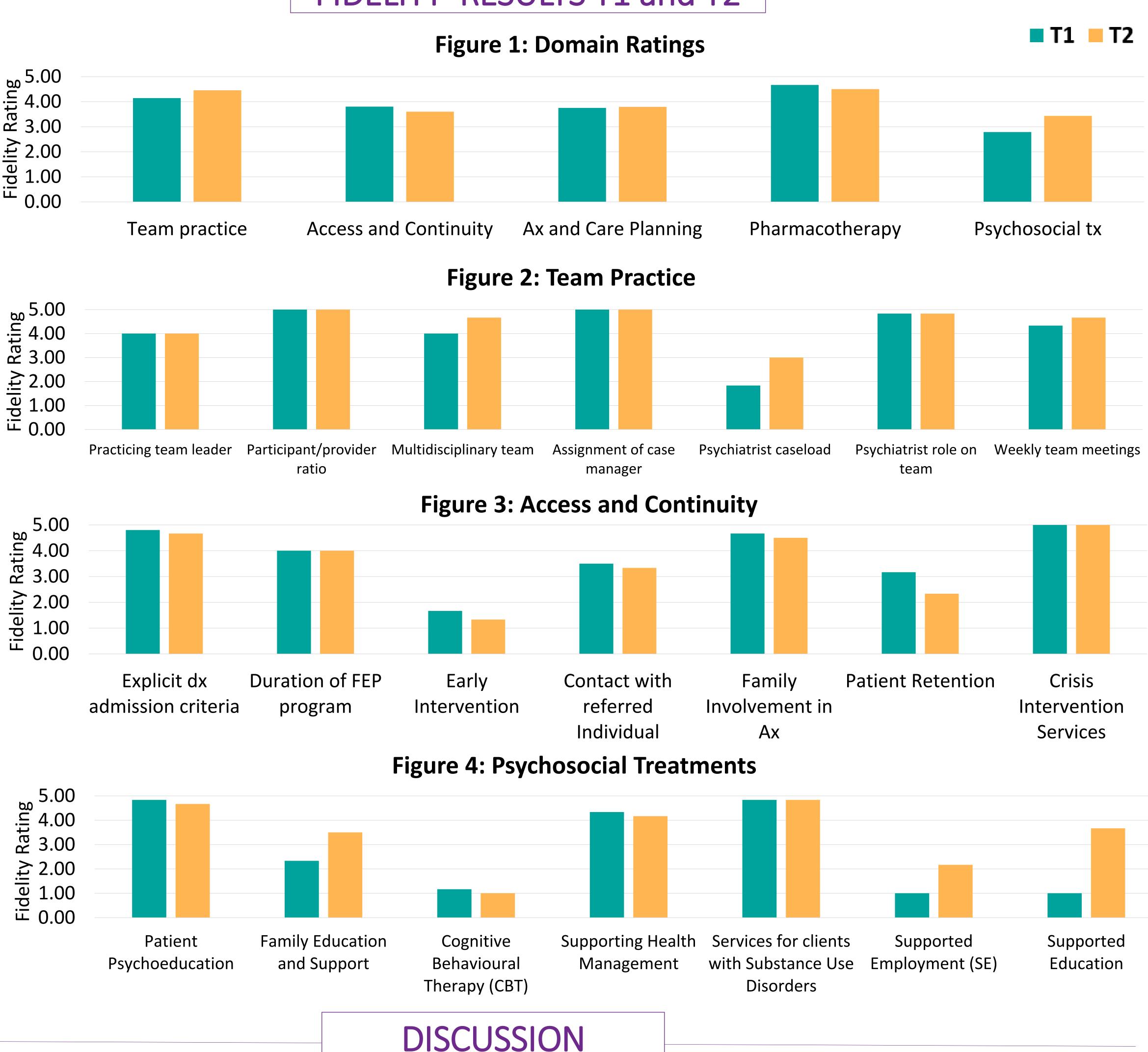


n adherence to many components of the EPI ry of psychosocial treatments. of EPI that emphasizes systematic delivery of disciplinary team. <b>reading Evidence-Based Treatment</b> ) <b>supported</b> grams and evaluated the result. mprove quality of EPI delivery in relation to EPI	Bating 4.00 2.00 1.00 0.00 5.00 4.00 5.00 4.00 5.00 4.00 5.00
AVIGATE on EPI program fidelity standards	0.00 Fidelity 2.00 1.00 0.00
<b>de Psychosis Fidelity Scale (FEPS-FS-R)</b> le; 4 or more indicates good adherence ), chart data, program data, team lead survey nd discussed reasons for any rating changes:	5.0 4.0 5.0 0.0 0.0 0.0

20 months after initial implementation

- psychosocial components. *Psychiatric Services*, 66(7), 680-690.
- psychosis in youth and emerging adults. BMJ Open, 2020; 0:e 034280. doi:10.1136.

FIDELITY RESULTS T1 and T2



NAVIGATE was implemented during a time of extensive healthcare system turmoil Despite this, after 20 months, programs reported implementing many NAVIGATE-related practice changes and fidelity ratings improved in areas which are a particular focus of the model – team practice and psychosocial treatment • The fidelity review feedback was generally valued by the programs to guide delivery and stimulate further practice changes Nevertheless, continued improvement is needed to reach good fidelity in a number of areas. The fidelity assessments and other study feedback is informing continued NAVIGATE implementation and efforts to build high quality EPI delivery • A third fidelity review will determine whether improvement is sustained and inform continued improvement

3. Addington D, Noel V, Landers M, Bond GR. (2020). Reliability and Feasibility Scale-Revised for Remote Assessment. Psychiatric Services, Dec 1;71(12):1245-

<sup>1.</sup> Mueser, K. T., Penn, D. L., Addington, J., Brunette, M. F., Gingerich, S., Glynn, S. M., ... & Cather, C. (2015). The NAVIGATE program for first-episode psychosis: rationale, overview, and description of

<sup>2.</sup> Kozloff, N., Foussias, G., Durbin, J. et al. Early Psychosis Intervention-Spreading Evidence-based Treatment (EPI-SET): Protocol for an effectiveness-implementation study of a structured model of care for