

# Best Practices for Virtual Delivery of NAVIGATE Early Psychosis Intervention Services

**March 2024**

**Dr. Nicole Kozloff, MD, SM, FRCPC**

**Dr. Wanda Tempelaar, MD, PhD**

**Rachel Roby, OT Reg. (Ont.)**

**Lauren de Freitas, MSc**

**Linda Dang, BA**

# Table of Contents

<b>I.</b>	<b>Introduction</b>	<b>4</b>
<b>II.</b>	<b>Delivery Considerations for Virtual Care</b>	<b>4</b>
	A. Procedures	4
	B. Technology	5
	C. Training	6
<b>III.</b>	<b>NAVIGATE Role-Specific Delivery</b>	<b>8</b>
	A. Individual Resiliency Training (IRT)	8
	B. Supported Employment and Education (SEE)	8
	C. Family Education Program	9
	D. Individualized Medication Management	9
	E. Peer Support	9
<b>IV.</b>	<b>Considerations in Virtual Implementation</b>	<b>10</b>
<b>V.</b>	<b>Fidelity</b>	<b>12</b>
<b>VI.</b>	<b>Appendix</b>	<b>13</b>
	A. Tips and Tricks for Virtual Care Delivery	13
	B. NAVIGATE Web-Based Resources (Condensed Version)	14
<b>VII.</b>	<b>References</b>	<b>23</b>

# Acknowledgements

We acknowledge and thank the following individuals for their support and contributions to the research related to this manual:

**CAMH's Virtual Mental Health Team, especially:**

- **Allison Crawford**, MD, PhD
- **Anne Kirvan**, PhD(c)
- **Eva Serhal**, PhD

**Alexia Polillo**, PhD

**Alexandra Sosnowski**, MSc

**Tallan Alexander**

**Victoria Villanueva**

**Andrea Morizio**

**Melanie Barwick**, PhD, CPsych

**Janet Durbin**, PhD

**Crystal Baluyut**, MD

**Sarah Bromley**, OT reg. (Ont.)

**Sanjeev Sockalingham**, PhD

**George Foussias**, MD, PhD

**Wei Wang**, PhD

**Don Addington**, MD, PhD

**Jean Addington**, PhD

**Paul Kurdyak**, PhD

**Sandy Brooks**,

**Elaine Stasiulis**, PhD

**Raluca Dubrowski**, PhD

**Seharish Jindani**, RN

**Maya Stein**, OT reg. (Ont.)

**Jessica Rosales**, OT reg. (Ont.)

**Rachel Martini**, OT reg. (Ont.)

**Aristotle Voineskos**, MD, PhD

We would also like to thank the clients, family members, and clinicians from the Slight Centre Early Intervention Service at the Centre for Addiction and Mental Health who participated in research activities that guided the content in this manual and provided feedback. The research study was funded by the Canadian Institutes of Health Research, the Ontario Ministry of Health and University of Toronto Miner's Lamp Innovation Fund - COVID-19 Response.

This document is for information purposes only and does not constitute an endorsement by CAMH or guarantee any particular outcome.

## I. Introduction

This manual is designed to guide the **virtual** delivery of [NAVIGATE](#)<sup>1</sup>, an Early Psychosis Intervention (EPI) coordinated specialty care model. It provides information and guidance on the general adaptations required to deliver NAVIGATE virtually, modifications specific to each NAVIGATE role, and recommendations to achieve fidelity to the model in a virtual context.

The suggestions and resources contained in this manual stem from the “e-NAVIGATE” study conducted at the Centre for Addiction and Mental Health (CAMH). This study evaluated the transition of in-person NAVIGATE services to virtual delivery as a result of the COVID-19 pandemic. This manual draws on research findings from this study, other resources, and expertise of clinicians and researchers, as well as youth and family members with lived experience of psychosis. EPI programs are not able to deliver care fully in a virtual format without collaboration with local services; see [Section IV. Considerations in Virtual Implementation](#) for suggestions on when to offer care virtually or in-person. To provide any feedback on this manual, please [click here](#).

## II. Virtual Care Delivery Considerations

Resources in 3 key areas are required to deliver NAVIGATE content in a virtual setting while maintaining fidelity to the model:

1. **Procedures** to support virtual care
2. **Technology** to facilitate the virtual delivery of care, and
3. **Training** for staff to deliver care in a virtual setting (Figure 1)

For more general information on whether and how to implement virtual care in your organization, please see [CAMH's Toolkit for e-Mental Health Implementation](#)<sup>2</sup>.

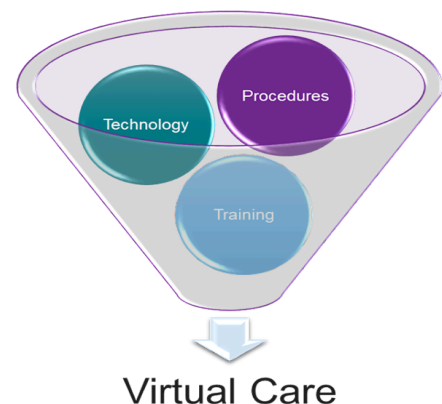


Figure 1. General adaptations needed to provide virtual care

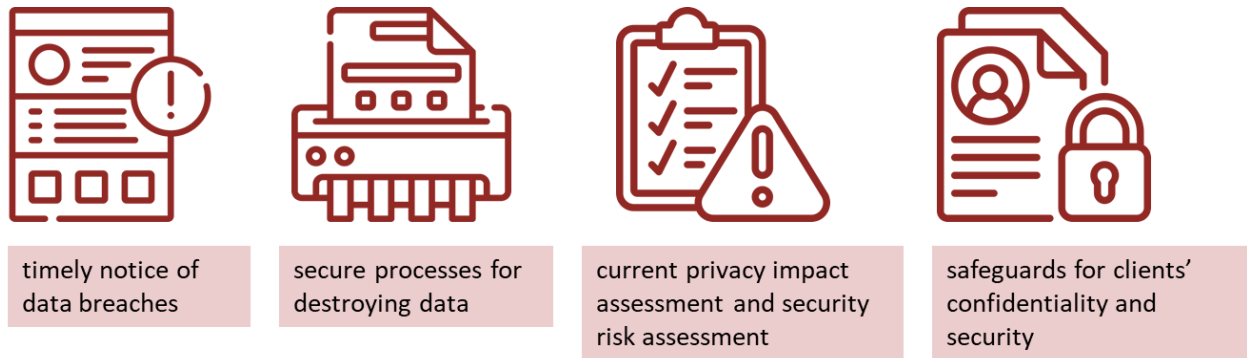
### A. Procedures

The virtual delivery of NAVIGATE requires that procedures regarding privacy, safety, security, and confidentiality comply with relevant legislation (e.g., [Ontario's Personal Health Information Protection Act](#)<sup>3</sup>), professional standards, and institutional policies. Administrative, technical, and physical safeguards are required to protect personal health information.

#### Quick Tips

- Develop a virtual health care policy that ensures privacy, safety, and confidentiality are maintained when providing care virtually

Confirm that privacy and security provisions are embedded in your contract with your virtual care platform service provider such as:



**Figure 2.** A guide for video visits and secure messaging. Adapted from the Provincial System Support Program (PSSP), 2020<sup>4</sup>.

In Ontario, Ontario Health maintains a list of [Verified Solutions for Virtual Visits](#)<sup>5</sup>.

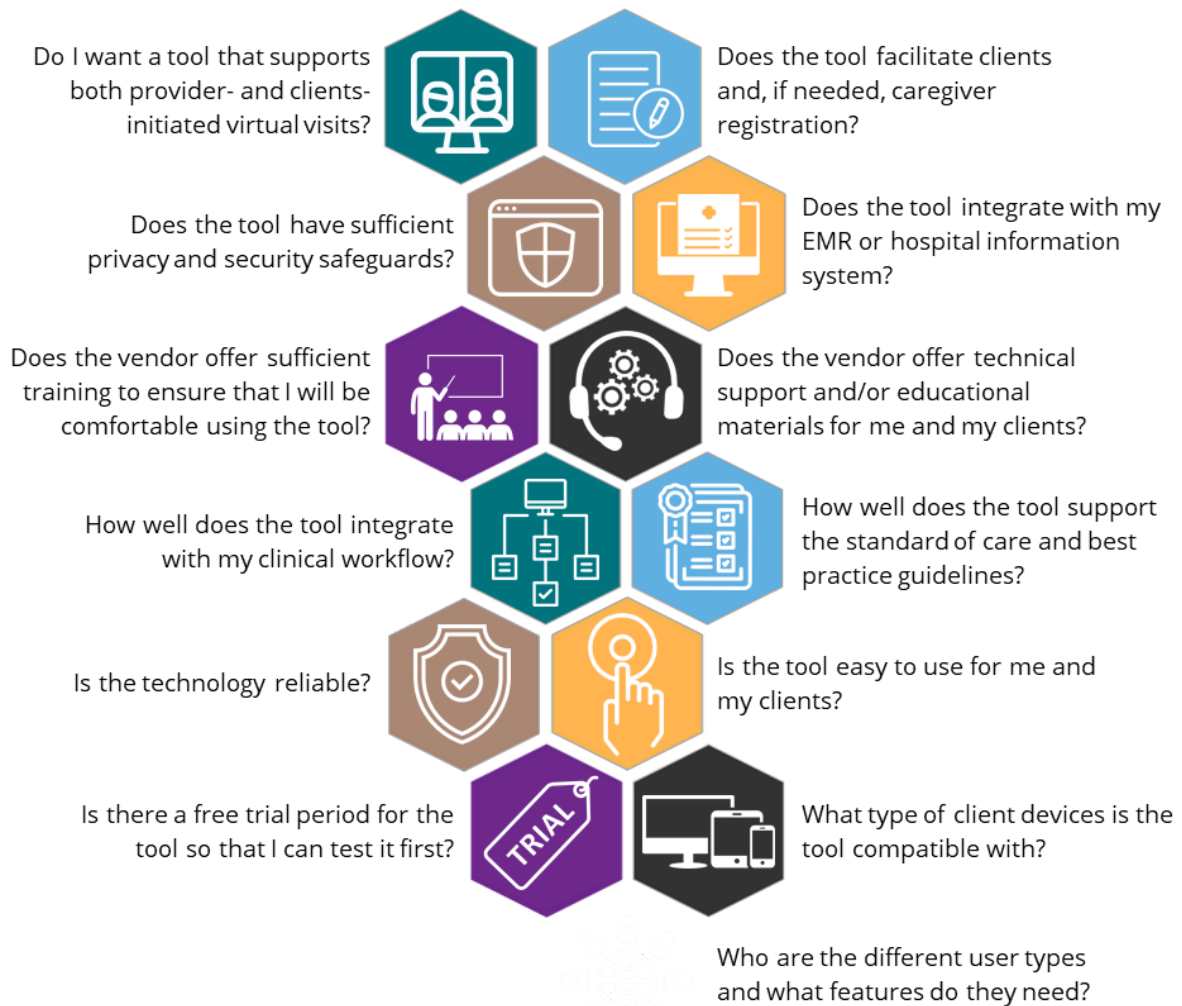
It is imperative to establish procedures for obtaining client consent to receive virtual services and to prepare clients for what to expect prior to initiating virtual care. Standardized processes for registration can be put in place such as adapting the [Consent to Use Electronic Communication template](#)<sup>6</sup> provided by The Canadian Medical Protective Association, 2016. If e-consent cannot be obtained, providers should make efforts to obtain verbal consent and document the discussion in the client's medical record. Providers should also provide clients with information on how the videoconferencing platform works, be transparent about any technical issues that may arise, and address any questions the client may have.

#### Quick Tips

- Verify the client's identity by asking for their health card or any two forms of identity to help ensure confidentiality and privacy are maintained
- Develop guidelines for providing crisis care virtually, as well as procedures for involuntary detainment in a virtual setting. Consult your organization for local guidance.

## B. Technology

Staff require hardware and software to connect remotely with clients in order to provide virtual care. This can include laptops and mobile phones if staff are working remotely, or ensuring that computers with webcams and microphones as well as phones are available onsite for staff. Software, particularly, video conferencing platforms, is crucial to providing care in a virtual setting. When staff are working remotely, they should have access to additional applications that can assist with faxing, scanning, and securely emailing documents. Some additional questions when considering which digital tool or platform to use for virtual visits include can be found in Figure 3 below, adapted from Ontario Health, 2020<sup>7</sup>.



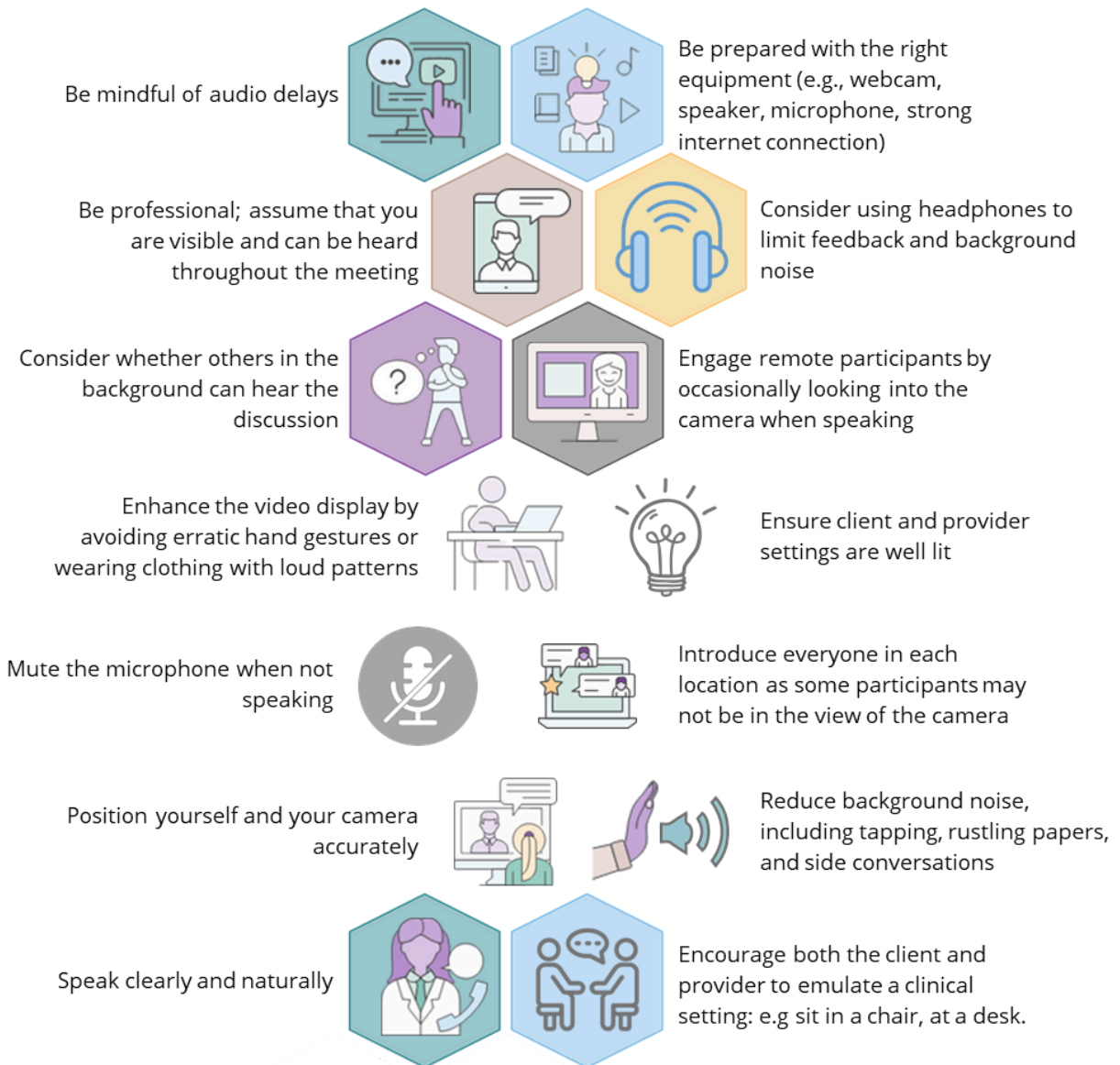
**Figure 3.** Questions to consider when choosing which digital platform or tool to use. Adapted from Ontario Health, 2020<sup>7</sup>.

### C. Training

All staff providing virtual care should be trained on the use of videoconferencing platforms and other relevant hardware/software. This can include supportive materials such as infosheets, presentations, and a list of frequently asked questions for staff. Additional topics to consider include how to effectively engage clients in virtual care, boundary setting, maintaining privacy, and addressing health equity in a virtual setting. Please see [Addressing the Health Equity Impacts of Virtual Care](#)<sup>8</sup> (which summarizes a journal article introducing the [Digital Health Equity Framework](#)<sup>9</sup>) for more information on virtual health equity and how to make virtual care accessible.

[Digital mental health training](#)<sup>10</sup> such as that available through the Centre for Addiction and Mental Health may increase provider capacity to provide virtual care, addressing the evidence base for virtual care; individual and group settings; procedures to support safety and confidentiality; technology; and therapeutic rapport in a virtual setting. OntarioMD also offers

[Virtual Care Privacy and Security Training](#)<sup>11</sup> for providers which focuses on protecting client personal health information virtually. Clinicians should feel comfortable navigating devices and virtual platforms prior to providing virtual care. Some best practices to consider when conducting virtual appointments can be found in Figure 4, adapted from Ontario Health, 2020<sup>7</sup>.



**Figure 4.** Best practices to consider when conducting virtual appointments. Adapted from Ontario Health, 2020<sup>7</sup>.

### III. Delivering NAVIGATE Virtually

NAVIGATE consists of 4 core services: Individual Resiliency Training (IRT), Supported Employment and Education (SEE), Family Education Program, and Individualized Medication Management. Many NAVIGATE programs also offer Peer Support.

There are several strategies for optimal delivery of NAVIGATE virtually that are common to each of these services. These include:

- Providing clinicians with laptops and mobile phones with VPN access (if they are working remotely) to facilitate reminders, appointment scheduling, and to provide care
- Breaking up appointments into shorter and more frequent occurrences to allow for sustained attention and engagement
- Using the screen-share feature to work through documents and fillable PDFs with client and their families
- Offer clients and family members a choice on how they would like to receive individual care (e.g. through phone, video conferencing, in person or a hybrid method)

A full list of tips and tricks for virtual delivery of NAVIGATE can be found in Appendix A.

## Role-Specific Adaptations

The different NAVIGATE roles may require modifications specific to their focus to optimize virtual delivery of their respective content.

### A. Individual Resiliency Training (IRT)

- Additional tips and tricks for clinicians were created to support the delivery of virtual NAVIGATE care, such as:
  - Creating separate computer folders for each client
  - Adding a summary of the previous session or documents to be discussed during the upcoming session as attachments to video conference invitations
  - Taking turns reading from the screen to enhance engagement and lessen “screen fatigue”
- Consider using IRT material as fillable PDFs that can be completed with client via the “screen share” feature and consider adapting them for each client’s unique needs
- Care may be recommended in person for clients considering or receiving intramuscular injections, those taking clozapine who require regular blood work, those with medication side effects, those experiencing crises, those whose mental status cannot be assessed over phone/video, and those with barriers to accessing virtual care
- [Web-based resources per NAVIGATE module](#) have been curated by the “e-NAVIGATE” team and are meant to be used by IRT clinicians to facilitate delivery of NAVIGATE content and enhance engagement and learning virtually

### B. Supported Employment and Education (SEE)

- It is important to introduce the SEE clinician as early in care as possible: if it is not possible to introduce the SEE clinician at the first appointment, try to introduce them at the next follow-up appointment
- Screen sharing can be used to work on resumes, school applications, or for discussing and collaborating on other resources, which can also help in building rapport between the SEE clinician and client



- SEE clinicians can ask to meet virtually with potential employers and schools if that is of interest to the client, which may reduce barriers such as cost and time associated with transportation, potentially resulting in more connections made
- Document verbal consent from the client to liaise with school and/or employer contacts of interest
- Offer skills to help prepare clients for virtual interviews

### **C. Family Education Program**

- All NAVIGATE team members should communicate regularly to discuss progress and coordination of materials
- It is best practice to ensure client consent to liaise with and provide information to the family is clearly documented in the medical record
- Try to engage the family as early as possible in care
- Consider offering more virtual groups rather than in-person groups for family members. Content can be delivered in presentations that can be shared on-screen and sent as a PDF post-session. Structured discussion and question and answer periods can help keep the sessions engaging and build trust among group members. Offer participants the opportunity to connect individually for additional sessions as needed

### **D. Individualized Medication Management**

- Prescribers should be aware that virtual care may require additional time for faxing/calling in prescriptions, ordering blood work with external laboratories and other administrative work (e.g., organizing appointments)
- Videoconferencing may have some advantages for rapport-building, as prescribers can assess the client's environment and get a sense of their interests and hobbies.
- If initiating any medication changes or prescribing medication that requires intensive follow-up such as clozapine, it is recommended to meet with the client in-person and not only virtually as it may not be possible to complete a fulsome physical assessment remotely
- For clients receiving injections who are unable to come into the clinic, prescribers may need to leverage community-based administration options and resources to ensure clients receive their dose on time (e.g., by exploring options for community-based nurses to provide these injections either in local clinics or at home)

### **E. Peer Support**

- Peer Support groups may work best in smaller numbers (e.g., 4 participants) when connecting virtually
- Ask clients if they have any reservations about meeting virtually in a group setting, including whether they miss the in-person connection or are experiencing any technical/connectivity issues.

## IV. Considerations in Virtual Implementation

There are a few factors to consider when implementing NAVIGATE in a virtual setting. A positive aspect of delivering NAVIGATE virtually includes a reduction of certain barriers to attendance (e.g., reduced travel time/costs including parking fees and less stigma/trauma related to the location of the appointment) which can lead to fewer missed appointments. This can be important for both clients and particularly for family members who may be balancing other commitments and cannot attend in-person sessions during work hours but can instead attend virtually on their breaks. This convenience also allows for family members who live far away or in different households to attend sessions and receive care. Clients may also experience smoother transitions when transferring from other hospitals and connecting with providers outside the institution for “warm handovers.” Virtual care may also provide opportunities for clients to develop computer skills and may facilitate collaborative work between clients and providers (e.g., using screen sharing to fill out documents together) that can increase the therapeutic relationship. The therapeutic relationship may also be positively impacted when clinicians can see the client’s interests and hobbies depending on what is shared on screen in their homes.

### Challenges and Possible Solutions to Virtual Care

#### Privacy and Security

- In order to ensure privacy and security of the clients, make sure to ask the client who is present and if they would prefer to reschedule or to offer the appointment in person

#### Boundary Setting

- If the client is not in an appropriate setting or state (doing other activities, being in bed, being intoxicated, if others are around)
- Offer shorter appointments or a short break and ask if the client is good to continue, if not then reschedule

#### Access to Devices and Internet

- If the client is in a low-bandwidth and / or low socioeconomic status, access to devices and internet may be limited
- Offer in-person or phone appointments instead
- Use Blue Sky Network<sup>12</sup> to determine clients’ level of accessibility
- Use 211 Ontario to see which organizations are closest for clients

#### Building Rapport

- Adding extra appointments or conducting the initial consultation appointment in person can assist in developing rapport between the clients and provider when providing care virtually

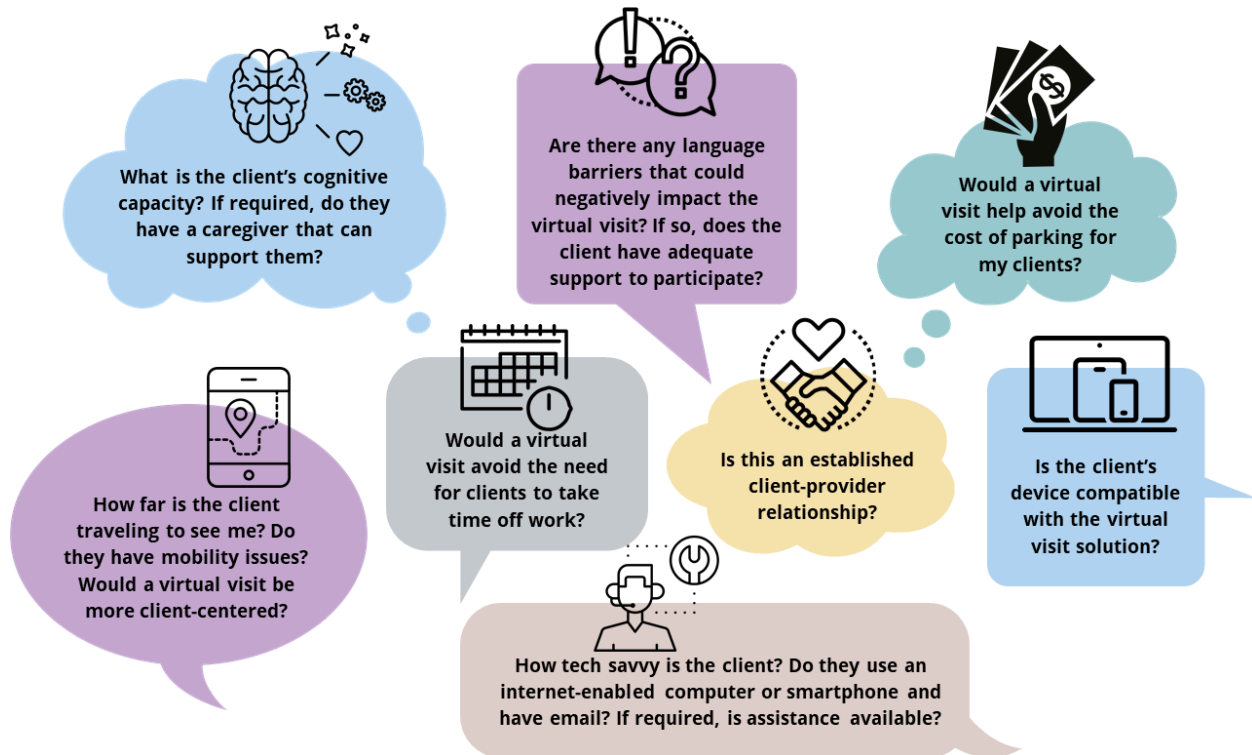
#### Symptoms, Side-Effects & Support

- Ask concrete questions around symptoms in order to fully capture mental health status and so that supportive interventions can be proposed
- Schedule an in-person visit or ask the client to visit a clinic / their family doctor if there are worsening physical symptoms and significant concerns
- Ensure that there is support for clients requiring crisis services including support for clients going to the ED when meeting virtually
- Offer in-person appointments especially when clients are experiencing elevated distress or crises

#### Appointment Delivery

- clients that do not have access or are hesitant to use videoconferencing can instead: Connect via phone in order to continue NAVIGATE care
- In-person appointments will help provide care for clients that normally receive community or home visits and will also provide appropriate supports

Not all clients and client encounters will be appropriate for virtual care. Some questions to consider when offering virtual care to clients can be found in Figure 4 below adapted from Ontario Health, 2020<sup>7</sup>:



**Figure 5.** Questions to consider when offering virtual care. Adapted from Ontario Health, 2020<sup>7</sup>.

Additional questions to consider when choosing the modality can be found in Figure 6 adapted from Ontario Health, 2020<sup>7</sup>:



**Figure 6.** Questions to consider when choosing a modality to use to meet with a client. Adapted from Ontario Health, 2020<sup>7</sup>.

If there is a hybrid model in place for clinicians within your institution, such that some may be working remotely while others are onsite, there may be less informal and spontaneous “hallway” meetings and more communication by email which can make it harder to organize treatment reviews with the team and increase documentation burden. Using virtual “team meetings” or institution-approved chat applications can assist in minimizing some of these challenges.

## V. Fidelity

Fidelity measures the degree to which an intervention is implemented as intended and how aligned it is to the program model (Addington et al., 2016).<sup>13</sup> A study at the Centre for Addiction and Mental Health examined fidelity to EPI services as well as to the NAVIGATE model to determine if the model was being implemented as intended when delivered virtually. In general, the program was able to maintain fidelity to the EPI model when NAVIGATE was delivered virtually, with some exceptions: frequency of in-person outreach community visits, tendency to initiate or change to certain medications such as clozapine (Prescriber role), using local labs instead of the hospital lab for bloodwork (Prescriber role), and comprehensiveness of assessments (e.g., for medication side effects) (Prescriber and IRT roles).

For more information on incorporating fidelity assessment into your practice, see this [Webinar recording: Fidelity as part of a learning health care system - Lessons learned in Early Psychosis Intervention](#)<sup>14</sup> and the [First Episode Psychosis Services Fidelity Scale \(FEPS-FS\)](#)<sup>15</sup>

## VI. Appendix

### A. Tips and Tricks for Virtual Care Delivery

#### TECHNOLOGY TIPS



- Consider turning off self-view in virtual meetings

- Send clients meeting reminders



- Use the “Whiteboard” feature with clients

- Check the resources on CAMH’s Virtual Mental Health website



- Connect with colleagues using the team meetings feature

- Call clients using your virtual platform



#### WELLNESS & ORGANIZATION



- Create separate folders for each client

- Create virtual to-do lists or task lists on Sticky Notes app or Outlook Task List



- Schedule short breaks throughout the day

- Incorporate self-care into your day



- Add mindfulness into your tasks

- Connect to your breath and use breath work



#### CLINICAL PRACTICE



- Review virtual consent via screen sharing

- Share non-verbal actions your client can use



- Set boundaries with your clients

- Ask clients if they need clarification more frequently



- Ask clients for feedback regarding virtual care

- Consider using more structure with groups and review how to get individual support from a facilitator if needed



#### CLIENT ENGAGEMENT



- Take a person-centered approach

- Provide apps to support care



- Incorporate ice-breakers

- Personalize NAVIGATE content for individual clients



- Supplement NAVIGATE content with additional resources

- Attach fillable NAVIGATE files to virtual platform invites or use web-based versions together through shared screens






- Involve family members including partners

## B. NAVIGATE Web-Based Resources (Condensed Version)


The below resources were co-curated with youth with lived experience and NAVIGATE clinicians at the Centre for Addiction and Mental Health's (CAMH) Slight Centre Early Intervention Service (SCEIS) to improve virtual engagement in EPI services. These resources can be used to facilitate delivery of NAVIGATE content, specifically Individual Resiliency Training (IRT). Some resources are relevant to multiple modules and are included for each relevant module so that they are all complete as standalones.

**All links and information have been updated as of MARCH 2024.** If any of this information is incorrect or outdated, or if there are additional organizations or programs that would be helpful to include, please email [nicole.kozloff@camh.ca](mailto:nicole.kozloff@camh.ca). This resource list is for information purposes only and does not constitute an endorsement by CAMH or guarantee any particular outcome.

### MODULE 1: Orientation

<p><b>Websites</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Mental Health 101 Course</u></a>   CAMH</li> <li>• <a href="#"><u>Youth and Mental Health 101: Signs of Mental Health Challenges</u></a>   CAMH</li> <li>• <a href="#"><u>Recovery After an Initial Schizophrenia Episode (RAISE)</u></a>   National Institute of Mental Health (NIMH)</li> <li>• <a href="#"><u>A Comprehensive Early Treatment Program for People with First Episode Psychosis</u></a>   NAVIGATE</li> <li>• <a href="#"><u>Early Psychosis Intervention-Spreading Evidence-based Treatment (EPI-SET) Resources</u></a></li> <li>• <a href="#"><u>Patient Information by Language</u></a>   Multicultural Mental Health Resource Centre</li> </ul>
<p><b>Videos</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Youth and Mental Health 101: Signs of Mental Health Challenges Video</u></a>   CAMH</li> <li>• <a href="#"><u>Voices: Living with Schizophrenia</u></a>   WebMD</li> <li>• <a href="#"><u>What Bipolar Disorder Feels Like (360 Video)</u></a>   WebMD</li> <li>• <a href="#"><u>Treating First Episode Psychosis</u></a>   John Kane, MD</li> <li>• <a href="#"><u>CCEIP Parallel Realities Podcast</u></a></li> </ul>
<p><b>Apps/Mindful Exercises</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Different Ways to Be Mindful</u></a>   Foundry</li> <li>• Mindfulness/Meditation Apps:             <ul style="list-style-type: none"> <li>○ <a href="#"><u>Headspace</u></a></li> <li>○ <a href="#"><u>Calm</u></a></li> <li>○ <a href="#"><u>Breathe</u></a></li> <li>○ <a href="#"><u>Blu Matter Project</u></a></li> </ul> </li> </ul>



### MODULE 2: Assessment and Goal Setting

<p><b>Websites</b></p> 	<p>Assessment</p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Definition of Psychosis   Early Psychosis Intervention (BC)</u></a></li> <li>• <a href="#"><u>Psychosis: My Recovery Journey</u></a>   <a href="http://mind.org">mind.org</a></li> </ul> <p>Goal Setting</p> <ul style="list-style-type: none"> <li>• <a href="#"><u>The Science &amp; Psychology Of Goal-Setting 101 (positivepsychology.com)</u></a></li> </ul>
<p><b>Videos</b></p>	<p>Assessment</p> <ul style="list-style-type: none"> <li>• <a href="#"><u>My Psychosis Experience and Recovery: Lucy's Story</u></a>   Headspace Australia</li> </ul>



- [What is Recovery in Mental Health?](#) | Health Service Executive (HSE) Ireland
- [What is Self-Care? Mental Health Literacy](#) | Headspace by Stride
- [CBT & DBT Skills: Behavioural Activation-Opposite Action for Depression](#) | Self-Help Toons
- [Behavioural Activation](#) | TRAILS Short Film Series:

## MODULE 3: Education about Psychosis






<p><b>Websites</b></p> 	<p><b>About Psychosis</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Early Psychosis</u></a>   National Alliance on Mental Illness (NAMI)</li> <li>• <a href="#"><u>Strong 365</u></a></li> <li>• <a href="#"><u>Psychosis Causes and Symptoms</u></a>   Psychosis Canada</li> <li>• <a href="#"><u>Psychosis Overview</u></a>   CAMH</li> <li>• <a href="#"><u>Psychosis Story</u></a>   CAMH</li> </ul> <p><b>About Medication</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Antipsychotic Medication</u></a>   Early Psychosis Intervention Canada</li> <li>• <a href="#"><u>How Antipsychotics Can Help</u></a>   mind.org</li> <li>• <a href="#"><u>Antipsychotic Medication</u></a>   CAMH</li> </ul> <p><b>About Cannabis</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Lower Risk Cannabis Use Guidelines - Youth Version</u></a>   CAMH</li> <li>• <a href="#"><u>Cannabis and Psychosis: Exploring the link</u></a>   Schizophrenia Society of Canada</li> <li>• <a href="#"><u>Things You Should Know About Cannabis</u></a>   Game Changers for Mental Health, CAMH</li> <li>• <a href="#"><u>Quick Tips About Safer Ways to Use Cannabis</u></a>   Game Changers for Mental Health, CAMH</li> <li>• <a href="#"><u>Cannabis and Mental Health</u></a></li> </ul>
<p><b>Videos</b></p> 	<p><b>About Psychosis</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Understanding Psychosis</u></a>   CAMH</li> <li>• <a href="#"><u>What is Schizophrenia?</u></a>   Anees Bahji</li> <li>• <a href="#"><u>Schizophrenia: Talking about mental health - Episode 18</u></a>   mind.org</li> <li>• <a href="#"><u>Hearing Voices, Paranoia, and Schizophrenia: Mile's Story</u></a>   mind. Org</li> <li>• <a href="#"><u>What is Psychosis?   Lived Experience from Lauren of "Living Well with Schizophrenia"</u></a></li> </ul> <p><b>About Medication</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Antipsychotics: Talking about mental health - Episode 10</u></a>   mind.org</li> <li>• <a href="#"><u>Pharmacology: Antipsychotics made easy</u></a>   Speed Pharmacology</li> <li>• <a href="#"><u>Antipsychotic Drugs: Typical vs. Atypical (uses, side effects, mechanism)</u></a>   Rhesus Medicine</li> </ul> <p><b>About Addiction</b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Addiction and the Brain - For Kids</u></a>   Addiction Policy Forum</li> <li>• <a href="#"><u>Your Brain on Drugs: Marijuana</u></a>   Asap Science</li> <li>• <a href="#"><u>Youth Specific Effects of Early Cannabis Use</u></a>   Pharmacy 5in5</li> </ul>
<p><b>Relaxation Strategies</b></p>	<ul style="list-style-type: none"> <li>• <a href="#"><u>Box Breathing</u></a>   Sunnybrook Hospital</li> <li>• <a href="#"><u>Relaxation Techniques</u></a>   EPI-SET</li> <li>• <a href="#"><u>Mindful Breathing Exercise</u></a>   Every Mind Matters</li> </ul>








- [Progressive Muscle Relaxation - Bridge the gAPP](#) | Eastern Health
- [Stress Vulnerability Module + Bucket Analogy](#)
  - [Stress Bucket Video](#) | Braive
- \*Also see 'Apps/Mindful Exercises in Module 1

## MODULE 4: Healthy Lifestyles



<p><b>Websites</b></p> 	<p><b>About Sleeping</b></p> <ul style="list-style-type: none"> <li>● <a href="#"><u>Wellness Module 6: Getting a Good Night's Sleep</u></a>   Here to Help</li> <li>● <a href="#"><u>Getting a Good Night's Sleep</u></a>   Anxiety Canada</li> <li>● <a href="#"><u>Why Sleep?</u></a>   Sleep On It Canada</li> </ul> <p><b>About Nutrition</b></p> <ul style="list-style-type: none"> <li>● <a href="#"><u>Tips for Healthy Eating</u></a>   Government of Canada's Food Guide</li> <li>● <a href="#"><u>Canada's Food Guide</u></a> or <a href="#"><u>Food Guide Snapshot (other languages)</u></a></li> <li>● <a href="#"><u>Food Journaling: How to keep track of what you eat (multiple languages)</u></a>   Health Link British Columbia</li> <li>● <a href="#"><u>Health and Wellness</u></a>   City of Toronto</li> <li>● <a href="#"><u>Dietitians of Canada</u></a></li> </ul> <p><b>About Healthy Lifestyles</b></p> <ul style="list-style-type: none"> <li>● <a href="#"><u>Physical Activity and Your Mental Health</u></a>   mind.org</li> <li>● <a href="#"><u>Get Active, Feel Good</u></a>   mind.org</li> <li>● <a href="#"><u>Six Ways to Practice Self-Care and Self-Care Information</u></a>   CAMH</li> <li>● <a href="#"><u>Improving Mental Health</u></a>   Canadian Mental Health Association, British Columbia</li> </ul>
<p><b>Videos</b></p> 	<p><b>About Healthy Lifestyles</b></p> <ul style="list-style-type: none"> <li>● <a href="#"><u>5 Ways to Get Moving and Feel Better</u></a>   mind.org</li> <li>● <a href="#"><u>How Playing Sports Benefits Your Body and Your Brain</u></a>   TED-Ed: Leah Lagos and Jaspal Ricky Singh</li> <li>● <a href="#"><u>Physical Activity and Mental Wellbeing</u></a>   UK Mental Health</li> </ul>
<p><b>Apps</b></p> 	<p><b>For Sleeping</b></p> <ul style="list-style-type: none"> <li>● <a href="#"><u>Headspace</u></a></li> <li>● <a href="#"><u>Slumber</u></a></li> <li>● <a href="#"><u>Calm</u></a></li> </ul>
<p><b>Resources on Alcohol</b></p> 	<ul style="list-style-type: none"> <li>● <a href="#"><u>Saying When: How to quit drinking or cut down</u></a>   CAMH app</li> <li>● <a href="#"><u>Canada's Guidance on Alcohol and Health</u></a>   CCSA</li> <li>● <a href="#"><u>Buzz on Booze: Providing you with information about alcohol to make your own decisions</u></a>   Game Changers, CAMH infographic</li> </ul>
<p><b>Resources on Smoking (Tobacco)</b></p> 	<ul style="list-style-type: none"> <li>● <a href="#"><u>Nicotine Dependence</u></a>   CAMH</li> <li>● <a href="#"><u>Quitting Cigarette Smoking: Where to go when you're looking for help</u></a>   CAMH</li> <li>● <a href="#"><u>Self-help Resources   Nicotine Dependence Services, CAMH</u></a></li> <li>● <a href="#"><u>Nicotine Replacement Therapy Instructional Videos</u></a>   CAMH</li> </ul>




## MODULE 5: Developing a Wellness Plan



<p><b>Websites</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>How to Plan for a Schizophrenia Relapse   WebMD</u></a></li> <li>• <a href="#"><u>How to Deal With Mania and Manic Episodes   WebMD</u></a></li> </ul>
<p><b>Videos</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Managing Schizophrenia: What I Find the Most Helpful from My Support People   Lived Experience from Lauren of “Living Well with Schizophrenia”</u></a></li> <li>• <a href="#"><u>How to Avoid Relapse In Schizophrenia   Lived Experience from Stephen of “Surviving Schizophrenia”</u></a></li> </ul>
<p><b>Online Course</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Course: Youth Wellness Quest   CAMH</u></a> <ul style="list-style-type: none"> <li>○ 5 sections: (1) <i>What services interest me?</i>; (2) <i>People who I want support from</i>; (3) <i>How to get the services you need</i>; (4) <i>My rights: Confidentiality and privacy</i>; (5) <i>Self help: How can I help myself?</i></li> </ul> </li> </ul>

## MODULE 6: Processing the Episode

<p><b>Websites</b></p> 	<p>With Personal Stories of Lived Experience</p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Early Treatment Saved My Life   Strong 365</u></a></li> <li>• <a href="#"><u>Psychosis: My recovery journey   mind.org</u></a></li> <li>• <a href="#"><u>Schizoaffective Disorder and Me   mind.org</u></a></li> <li>• <a href="#"><u>Your Stories: Bipolar Disorder   mind.org</u></a></li> <li>• <a href="#"><u>From My First Episode to My First Child   NAMI</u></a></li> <li>• <a href="#"><u>Life Has Hope   NAMI</u></a></li> <li>• <a href="#"><u>Powerful Minds   T. Morris et al. 2012</u></a></li> </ul>
<p><b>Videos</b></p> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Hearing Voices, Paranoia, and Schizophrenia: Miles' Mental Health Story   mind.org</u></a></li> <li>• <a href="#"><u>Beyond Psychosis: Exceeding expectations from first episode to recovery (part 1)   CAMH</u></a></li> <li>• <a href="#"><u>Beyond Psychosis: Exceeding expectations from first episode to recovery (part 2)   CAMH</u></a></li> </ul>
<p><b>Resources on Cognitive Restructuring</b></p>	<ul style="list-style-type: none"> <li>• <a href="#"><u>Cognitive Restructuring (Guide)   Therapist Aid</u></a></li> <li>• <a href="#"><u>Self Help - CBT   Anxiety Canada</u></a></li> <li>• <a href="#"><u>CBT: An information guide   CAMH</u></a></li> </ul>

	<ul style="list-style-type: none"> <li>• <a href="#"><u>CBT and Reframing Thoughts Video   Self Help Toons</u></a></li> </ul>
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## MODULE 7: Developing Resiliency - Part 1


<b>Websites</b> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>CAMH Recovery College</u></a></li> <li>• <a href="#"><u>Recovery Colleges Across Canada   CMHA</u></a></li> <li>• <a href="#"><u>Ontario Shores Recovery Colleges</u></a></li> </ul>
<b>Videos</b> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>The Space Between Self-Esteem and Self Compassion  TEDxCentennialParkWomen Dr. Kristin Neff</u></a></li> <li>• <a href="#"><u>Guided Meditation (in particular, Loving Kindness)   Mindfulness for Teens</u></a></li> <li>• <a href="#"><u>Audio Meditation for Self-Compassion   SickKids</u></a></li> </ul>
<b>Self-Compassion Resources</b>	<ul style="list-style-type: none"> <li>• <a href="#"><u>Screening Tool: Self-Compassion   eMentalHealth.ca</u></a></li> <li>• <a href="#"><u>Self-Compassion Exercises   Dr. Kristin Neff</u></a></li> </ul>
<b>Gratitude Resources</b>	<ul style="list-style-type: none"> <li>• <a href="#"><u>Gratitude Journal Template</u></a></li> <li>• <a href="#"><u>Gratitude Journal   Calm App</u></a></li> </ul>

## MODULE 8: Building a Bridge to Your Goals




Resources have not yet been included for this module. If you have any suggestions for resources that would support Module 8, please kindly let us know in the feedback survey.

## MODULE 9: Dealing with Negative Feelings



<b>Websites</b> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>Mental Health Resources for Clinicians   Centre for Clinical Interventions</u></a></li> </ul>
<b>Videos</b> 	<ul style="list-style-type: none"> <li>• <a href="#"><u>CBT Demo Socratic Questioning  Qualia Counselling Services</u></a></li> <li>• <a href="#"><u>Self-Compassion Video Exercise   The School of Life</u></a></li> <li>• <a href="#"><u>Youth and Mental Health 101: Videos (anxiety, depression, eating disorders and more)  CAMH</u></a></li> </ul>
<b>Apps</b>	<ul style="list-style-type: none"> <li>• <a href="#"><u>Moodmission App (coping skills)</u></a></li> <li>• <a href="#"><u>Mindshift CBT App (anxiety/cognitive restructuring)</u></a></li> <li>• <a href="#"><u>Moodfx</u></a></li> </ul>

	<ul style="list-style-type: none"> <li>● <b><u>Moodfit App</u></b> (depression, includes mood-tracker)</li> </ul>
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## MODULE 10: Coping with Symptoms



<p><b>Websites</b></p> 	<ul style="list-style-type: none"> <li>● <b><u>Depression 101 Course</u></b>   CAMH</li> <li>● <b><u>Anxiety Disorders</u></b>   CAMH</li> <li>● <b><u>Social Anxiety Disorder</u></b>   CAMH</li> <li>● <b><u>Depression</u></b>   CAMH</li> <li>● <b><u>Stress</u></b>   CAMH</li> <li>● <b><u>Trauma</u></b>   CAMH</li> <li>● <b><u>Suicide</u></b>   CAMH</li> <li>● <b><u>Coping with Stress and Anxiety</u></b>   CAMH</li> </ul>
<p><b>Videos</b></p> 	<ul style="list-style-type: none"> <li>● <b><u>The Physical Effects of Anxiety: Alex's Mental Health Story</u></b>   <a href="http://mind.org">mind.org</a></li> <li>● <b><u>Acceptance Commitment Therapy Videos</u></b>   Dr. Russ Harris</li> <li>● <b><u>Internal Struggles (The Chessboard Metaphor)</u></b>   Dr. Russ Harris</li> </ul>
<p><b>Other Resources</b></p> 	<ul style="list-style-type: none"> <li>● <b>Apps</b> <ul style="list-style-type: none"> <li>○ <b><u>MindShift™ CBT</u></b></li> <li>○ <b><u>Moodfx</u></b></li> <li>○ <b><u>Moodfit App</u></b></li> <li>○ <b><u>App4Independence (A4i)</u></b></li> </ul> </li> <li>● <b>Book</b> <ul style="list-style-type: none"> <li>○ <b><u>Mind over Mood by Dennis Greenberger</u></b></li> </ul> </li> <li>● <b><u>Interactive Games in Support of Mental Health</u></b></li> <li>● <b><u>Videos in Support of Mental Health</u></b></li> </ul>

## MODULE 11: Substance Use

<p><b>Websites</b></p> 	<ul style="list-style-type: none"> <li>● <b><u>Cannabis and Psychosis: Exploring the Link</u></b>   Schizophrenia Society of Canada</li> <li>● <b><u>Youth and Mental Health 101: Substance Use</u></b>   CAMH</li> <li>● <b><u>We're Here to Help (cross-cultural)</u></b>   Here to Help</li> <li>● <b><u>Addiction 101 Course</u></b>   CAMH</li> <li>● <b><u>10 Ways to Reduce Risks to Your Health When Using Cannabis</u></b>   CAMH</li> </ul>
<p><b>Videos</b></p> 	<ul style="list-style-type: none"> <li>● <b><u>Addiction and the Brain - For Kids</u></b>   Addiction Policy Forum</li> </ul>
<p><b>Other Resources</b></p>	<ul style="list-style-type: none"> <li>● <b><u>Interactive Resources</u></b>   Western Health <ul style="list-style-type: none"> <li>○ A fun way to learn the basics for middle/high school kids</li> </ul> </li> </ul>




## MODULE 12: Having Fun and Developing Relationships



<b>Websites</b> 	<ul style="list-style-type: none"><li>• <a href="#"><u>Health Benefits of Hobbies   WebMD</u></a></li><li>• <a href="#"><u>How Do Adults Find New Hobbies?   PsychCentral.com</u></a></li><li>• <a href="#"><u>How to Improve Social Skills: 23 Tips to Help   Blinkist Magazine</u></a></li></ul>
<b>Videos</b> 	<ul style="list-style-type: none"><li>• <a href="#"><u>Socializing After Psychosis   Lived Experience from Hayden of “Just Being Hayden”</u></a></li></ul>

Resources have not yet been included for this module. If you have any suggestions for resources that would support Module 12, please kindly let us know in the feedback survey.

## MODULE 13: Developing Resiliency - Part 2

<b>Websites</b> 	<ul style="list-style-type: none"><li>• <a href="#"><u>Childhood Trauma and the Brain   UK Trauma Council</u></a></li></ul>
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## EXTRA MODULES On Bipolar Disorder

<b>Websites</b> 	<ul style="list-style-type: none"><li>• <a href="#"><u>Bipolar Disorder: An Information Guide   CAMH</u></a></li><li>• <a href="#"><u>Bipolar Disorder Course   CAMH</u></a></li><li>• <a href="#"><u>Bipolar Disorder   Here to Help</u></a></li><li>• <a href="#"><u>Bipolar Disorder   Mayo Clinic</u></a></li><li>• <a href="#"><u>How to Deal With Mania and Manic Episodes   WebMD</u></a></li></ul>
<b>Videos</b> 	<ul style="list-style-type: none"><li>• <a href="#"><u>What Bipolar Disorder Feels Like (360 video)   WebMD</u></a></li><li>• <a href="#"><u>10 Signs of Bipolar Disorder   Psych2Go</u></a></li><li>• <a href="#"><u>What is Bipolar Disorder?   TED-Ed, Helen M. Farrell</u></a></li></ul>

## Additional Resources for Clients

<b>Mental Health and Autism</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u><b>Autism Mental Health Literacy Project (AM-HeLP)</b></u></a>   Developmental Disabilities and Mental Health Lab, York University</li> </ul>
<b>Dialectical Behaviour Therapy (DBT)</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u><b>What is Dialectical Behaviour Therapy?</b></u></a> (video)   Psych Hub</li> <li>● <a href="#"><u><b>What is Dialectical Behaviour Therapy for Adolescents?</b></u></a> (video)   University of California San Francisco</li> <li>● <a href="#"><u><b>Mindfulness: The first skills module taught in DBT</b></u></a> (video)   BorderlinerNotes</li> <li>● <a href="#"><u><b>The Dialectical Behaviour Therapy Skills Workbook for Psychosis: Manage your emotions, reduce symptoms and get back to your life</b></u></a>   Maggie Mullen</li> <li>● <a href="#"><u><b>The Dialectical Behaviour Therapy Skills Workbook for Anxiety: Breaking free from worry, panic, PTSD, and other anxiety symptoms</b></u></a>   Chapman et al., 2011</li> </ul>
<b>Cognitive Behavioural Therapy (CBT)</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u><b>What is CBT? Making Sense of Cognitive Behavioural Therapy</b></u></a> (video)   mind.org</li> <li>● <a href="#"><u><b>How Does Cognitive Behavioural Therapy Work?</b></u></a> (video)   mind.org</li> <li>● <a href="#"><u><b>Cognitive Behavioural Therapy-Based Program (introductory video clip)</b></u></a>   COPE Teen Online</li> </ul>
<b>Attention Deficit Hyperactivity Disorder (ADHD)</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u>Children and Adults with ADHD (CHADD) Resources</u></a> <ul style="list-style-type: none"> <li>○ <a href="#"><u><b>About ADHD Coaching</b></u></a></li> <li>○ <a href="#"><u><b>Adult to Adult - ADHD Support and Training</b></u></a></li> <li>○ <a href="#"><u><b>ADHD for Adults: Women and Girls</b></u></a></li> </ul> </li> <li>● <a href="#"><u><b>A Cognitive Behavioural Therapy Model for Adults with ADHD</b></u></a>   Mark Katz</li> <li>● <a href="#"><u><b>How to ADHD</b></u></a> (video series)</li> </ul>
<b>Procrastination</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u><b>Procrastination Self-Help Resources: Information Sheets and Workbooks</b></u></a>   Centre for Clinical Interventions</li> </ul>
<b>Apps</b>	<ul style="list-style-type: none"> <li>● <a href="#"><u><b>APP ADVISOR</b></u></a>   An American Psychiatric Association Initiative</li> <li>● <a href="#"><u><b>Mental Health App Guide</b></u></a>   One Mind PsyberGuide</li> <li>● <a href="#"><u><b>Addiction and Mental Health Mobile Apps Directory</b></u></a>   Alberta Health Services</li> </ul>

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