Integrated Care Planning for Concurrent Disorders at Coastal Early Psychosis Intervention (EPI) Program: A Quality Improvement Project

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Introduction

- Up to 74% of individuals with first episode psychosis will experience a substance use disorder over the course of their lifetime.[1]
- The presence of psychosis and substance use disorder (i.e., concurrent disorders) is associated with higher risk adverse outcomes including increased number of hospitalizations, higher levels of psychotic symptoms, greater levels of violence and greater risk of homelessness.[2,3,4,5]
- Concurrent psychosis and substance use is best treated using an integrated care framework delivered by a multidisciplinary team.[6]
- The overall objective of this QI project was to enhance care for patients with concurrent disorders at the Coastal Early Psychosis Intervention (EPI) Program.
- Specifically, we aimed to increase the completion of MH&SU Screener and Integrated Care Plan for Coastal EPI clients to 80% by June 2025.

Methods

Context

This project was conducted at the Coastal EPI Program, which serves clients aged 13-30 with early psychosis who live on the North Shore.

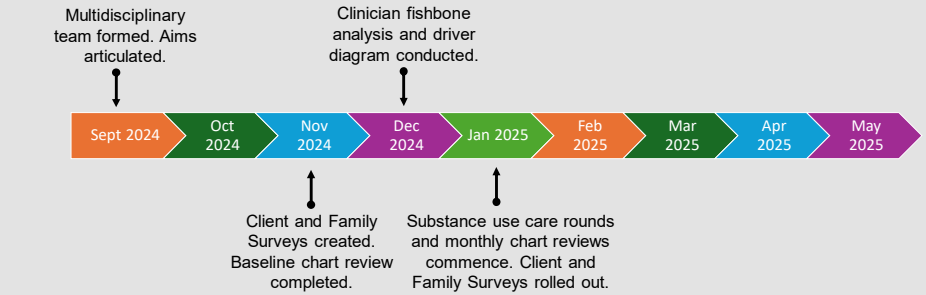
Baseline Evaluation

At the beginning of this project, a baseline focus group was conducted to understand client and family perspectives on substance use concerns and feedback on the most valuable questions to include in a client and family feedback survey. This survey was then sent out to all clients and family members. Clinicians also engaged in a *fishbone analysis* and *driver diagram* to identify barriers and solutions to integrated care. A baseline chart review was conducted to determine current levels of substance use assessment and integrated care planning.

Interventions and Monitoring

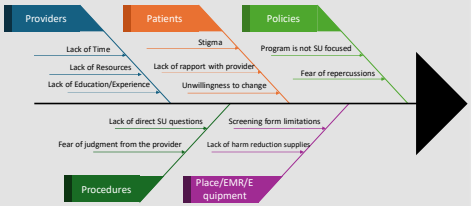
To support clinician knowledge and confidence, eight Substance Use Care Rounds were held biweekly from January 28 to April 23. Each session focused on a specific topic related to substance use assessment and care planning, with attendance ranging from 4 to 8 EPI clinicians. Monthly chart reviews were completed to monitor assessment levels.

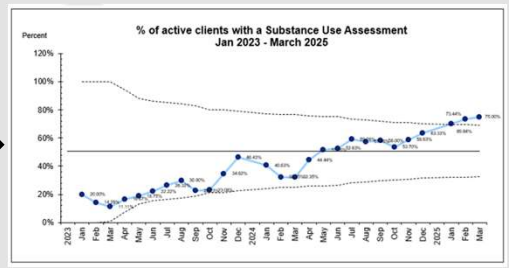
Project Timeline

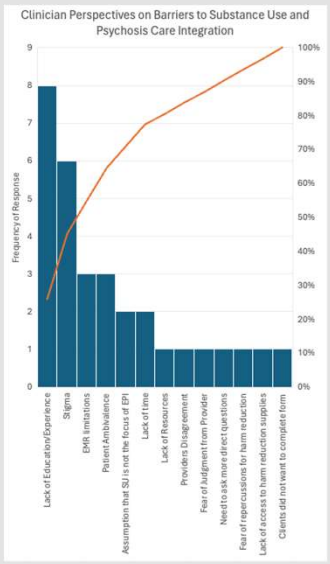


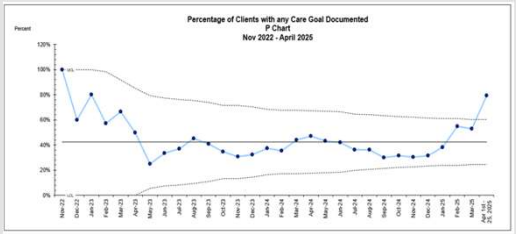
Results

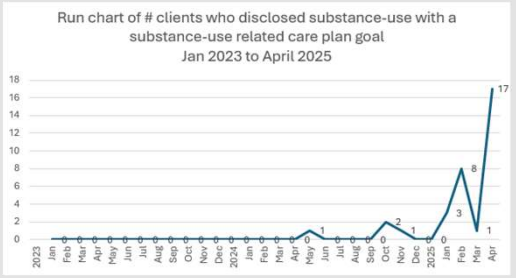
Fishbone Diagram: Barriers to SU and Psychosis Care Integration











Conclusion

- Our findings highlight the potential benefits of staff education on substance use care in an early psychosis intervention setting.
- As a result of this QI initiative, the completion rate of the MH&SU screener increased to 75%, the completion rate of the Clinical Care Plan rose to 80%, with a notable increase in the inclusion of substance use–specific goals within care plans.
- These findings corroborate previous findings that early psychosis providers often feel that they would benefit from further training and education on substance use care.[7]
- Further PDSA cycles need to be conducted to address other barriers to substance use care in an early psychosis program setting.

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