

## **NIMH Launches the Early Psychosis Intervention Network (EPINET): A National Learning Health Care System.**

Over the past 10 years, there has been rapid growth nationally in the number of clinical programs focused on support for individuals who are experiencing a first episode of psychosis. This growth was stimulated both by the exciting results of the National Institute of Mental Health's (NIMH) Recovery After an Initial Schizophrenia Episode (RAISE) studies and the expanded federal funds to support early psychosis program development across the country. A critical addition to this national focus on early psychosis programs is the launch of the Early Psychosis Intervention Network (EPINET) by NIMH. EPINET is a national [learning](#) health care system that links early psychosis clinics through standard clinical measures, uniform data collection methods, data sharing agreements, and integration of client-level data across service users and clinics. Clients and their families, clinicians, [health care](#) administrators, and scientific experts now have the opportunity to partner within EPINET to improve early psychosis care and conduct large-scale, practice-based research.

The EPINET initiative includes 8 Regional Hubs, 101 early psychosis clinics across 16 states, and the EPINET National Data Coordinating Center (ENDCC).

The ENDCC is operated by [Westat](#), and serves as the primary coordinator for Early Psychosis Intervention Network (EPINET) activities across the Regional Hubs and early psychosis clinics. Working closely with NIMH, Regional Hubs, and clinics, the ENDCC will harmonize and aggregate data collected in EPINET clinics. The ENDCC will share this data with Hubs, clinics, and ultimately early psychosis clinical programs nationwide to support early psychosis care, quality improvement, and benchmarking. Through this process, the ENDCC is developing a unique research database that will be available to collaborators within and outside of EPINET to support research and improve early psychosis identification, clinical assessment, intervention effectiveness, and recovery outcomes among individuals experiencing their first symptoms of psychosis.

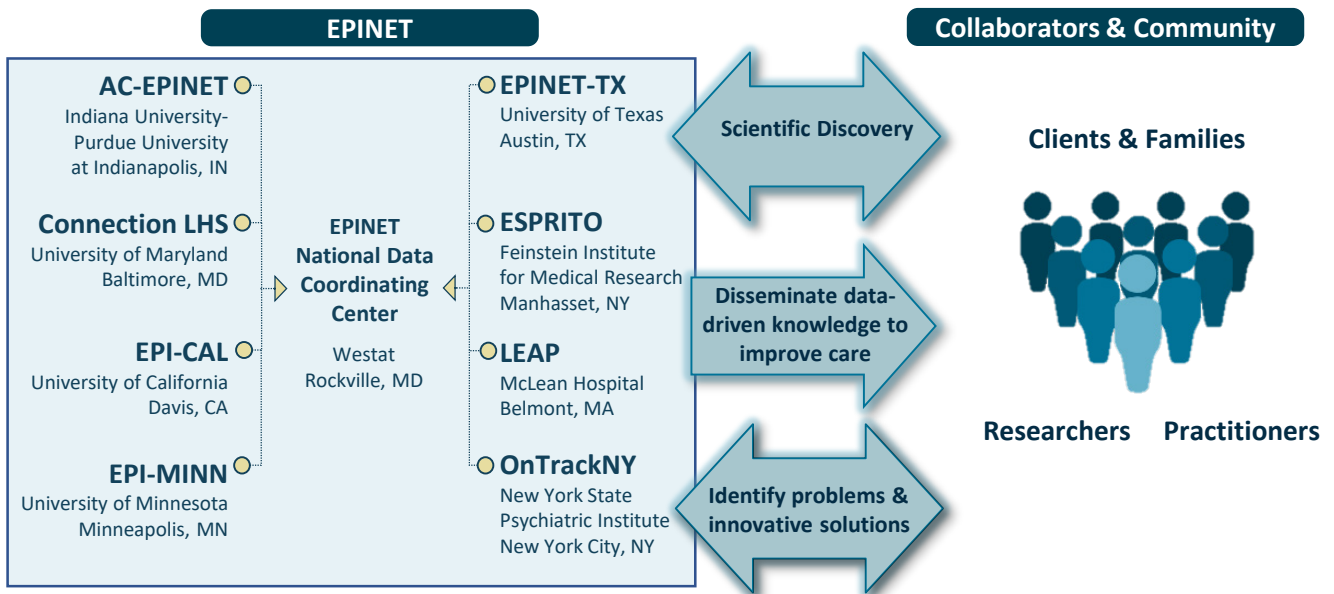
The EPINET Core Assessment Battery (CAB) is one unique resource EPINET is making available to early psychosis clinical programs across the country. The CAB is a set of research and clinical tools which includes standardized measures and individual items that assess key domains of early psychosis psychopathology, recovery, contextual factors, and treatment. The CAB was developed through a consensus process by the EPINET Steering Committee, composed of principal investigators from each of the 5 original Regional Hubs and the EPINET National Data Coordinating Center (ENDCC). While selected components of the overall CAB will be collected at each of the participating EPINET clinics, early psychosis clinical programs outside of the network are welcome to use some or all of the measures for benchmarking or other quality improvement analyses.

Ultimately, one longer term goal of EPINET and the ENDCC is the development of a bi-directional dissemination and collaboration process. As the ENDCC data base expands, research findings from the network will be easily shared with the field and clinical programs not currently in EPINET will be able to propose important research questions to be addressed to the ENDCC for shared exploration with regional hub partners via the CAB. In addition, over time, CAB data

collected by non-network clinics could be shared with the ENDCC and also contribute to answering key research and clinical questions. For more information, including a list of all participating hubs and clinics, visit the ENDCC website at [www.nationalepinet.org](http://www.nationalepinet.org).

## The Early Psychosis Intervention Network (EPINET)

**EPINET is a national learning health care system for early psychosis sponsored by the National Institute of Mental Health**



**The EPINET Core Assessment Battery (CAB) is used for data collection across all EPINET clinics.**

- Includes standardized measures that assess key domains of symptoms, service use, recovery and treatment
- Available for adoption by clinics outside EPINET
- Over time, CAB data will be aggregated and be accessible to stakeholders both inside and outside of EPINET

**The EPINET data set collected across clinics and from thousands of participants will allow:**

- Randomized quality-improvement projects
- Rapid piloting or field testing of new approaches
- Evaluation of rare events with statistical power