

Programme

9.30	Registration
10.00	Welcome and introduction <i>Chair: Stephen McGowan, EIPN Advisory Group Chair and Regional Clinical Lead for EIP, NHS England and NHS Improvement</i>
10.15	An update from NCAP <i>Belinda Lennox, Clinical Advisor, National Clinical Audit of Psychosis</i> Presentation blurb: an update on the work of the National Clinical Audit of Psychosis in 2026.
10.30	Quality Improvement (QI) work to increase family intervention offers and uptake <i>Stephanie Smith, Clinical Team Manager, and Tracy Harrison, Clinical Lead, Warrington and Halton Early Intervention in Psychosis Team</i> Presentation blurb: Research highlights that families who engage in FI are thought to have significant reduced relapse rates (Jolley & Grice, 2023; Rodolico et al., 2022). the number of offers made in Warrington & Halton Early Intervention Team in Psychosis was low. This inspired the team to complete a piece of Quality Improvement (QI) work to increase the offers made to families as well as families accepting this intervention.
11.00	Break
11.15	Using Evidence Implementation to Improve Physical Health Outcomes in Early Intervention in Psychosis: Learning from a Chief Nursing Officer's Research Fellowship <i>Sarah Buick, Operational Lead, and Sophie Power, Care Coordinator/RMN, Cornwall EIP Service</i> Presentation blurb: This session shares learning from Sophie's Chief Nursing Officer's Research Fellowship exploring how EIP services can strengthen physical health monitoring and intervention. This presentation examines the barriers, challenges and practical solutions identified through service evaluation and quality improvement work, highlighting how evidence-based implementation can reduce variation, improve outcomes and support recovery-focused care.
11.45	Fidelity, flexibility and leadership in national early intervention in psychosis implementation: lessons for mental health reform from England and Ireland <i>Professor Jo Smith OBE, Emeritus Professor of Early Intervention and Psychosis, University of Worcester and Karen O'Connor, Consultant Psychiatrist, Cork Early Intervention Service, Ireland Health Service Executive</i> Presentation blurb: Much of what we know about EIP effectiveness derives from pilot services and early adopters. Less attention has been paid to what happens when EIP is translated into a national system of care within overstretched health systems. England and Ireland provide complementary examples of large-scale implementation. Despite differences in scale, health system architecture and funding, both illustrate the pressures that emerge as EIP moves from innovation to routine care: workforce instability, competing service demands, legacy systems and the challenge of sustaining momentum over time. Drawing on experience from both countries, this presentation

	explores three factors that appear critical to successful scale-up: fidelity, capacity and sustained leadership. We consider how core EIP functions can be protected while allowing services to adapt to local context, and how insufficient capacity can undermine fidelity and service experience. The challenge is no longer simply whether EIP works, but whether health systems can organise, resource and sustain services around the mechanisms that make it effective. National scale-up requires more than a strong service model: it requires alignment between capacity, leadership and system priorities.	
12.15	Developing an Autism-Informed Pathway in an Early Intervention in Psychosis Service <i>Emelia Steel, Assistant Psychologist, Tanya Godwin, Clinical Psychologist and Zena Paterson, Clinical Psychologist, Pan-Dorset Early Intervention Service</i>	
	Presentation blurb: This presentation outlines the development of an autism-informed pathway within Dorset's Early Intervention in Psychosis (EIP) service. Autism is increasingly recognised as prevalent within EIP populations, yet it is often under-identified, contributing to diagnostic overshadowing and less accessible care. In response to growing clinical need, our service began developing a pathway to better identify and support our autistic clients. This presentation will describe our emerging approach across key areas, including training to improve the team's understanding of autism and enhance identification within routine clinical work, development of an in-team autism assessment pathway, adaptations to formulation and intervention.	
12.45	Lunch	
1.30	Workshop session 1	
	1. Making music and making a difference <i>Chloe Davers, Community Psychiatric Nurse, ESTEEM, NHS Greater Glasgow and Clyde and Alan Bryden, Musician, The Common Wheel charity</i>	2. Using Nature in Art Therapy <i>Tamsin Welldon, Art Therapist, Shropshire, Telford and Wrekin Early Intervention Service</i>
	Presentation blurb: An interactive Workshop and discussion about musicians and medical practitioners working in partnership, using music in a therapeutic context to support recovery.	Presentation blurb: This experiential workshop introduces Nature-Based Art Psychotherapy through creative engagement with found natural objects. Participants will be invited to select an object that resonates with them and explore its qualities through a combination of guided creative writing and image-making. Drawing on emerging research from Nature-Based Art Psychotherapy pilot projects within Early Intervention in Psychosis (EIP) services, the workshop will explore what happens when therapeutic practice moves beyond the traditional therapy room and into natural environments.
2.15	Workshop session 2	
	3. Navigating the unique challenges and complexities of working with under 18s within Early Intervention in Psychosis Teams <i>Jenny Swift, Clinical Lead, Gemma Hurst, Care Coordinator and Nicola Wait, Care Coordinator, Doncaster Early Intervention Service</i>	4. Service evaluation: long-running sports group <i>Jeremy Warner, CT3 Psychiatrist, Bath & North East Somerset Early Intervention in Psychosis Service</i>
		Presentation blurb: evaluating the effectiveness of a long-running badminton group with EIP patients.

	Presentation blurb: A workshop exploring the role of EIP in working with under 18s experiencing and at risk of psychosis. We will consider the challenges, complexities and importance of this role as well as celebrating the work that we do in this area. As well as hearing from practitioners working with under 18s, stories and experiences will also be shared from some of the young people and their families that we have worked with.	
3.00	Break	
3.15	Clinical Case Report: Autoimmune Encephalitis, a Pathway within Early Intervention in Psychosis Services <i>Laura Doyle, East Lincolnshire Locality Lead, Rose Cottam, Research Occupational Therapist, Rebecca Taylor, Interim Team Manager and Lucy Pearce, Service Manager, Lincolnshire Early Intervention Service</i> Presentation blurb: We identified a 17-year-old male who was presenting with ?First Episode Psychosis however his presentation was sudden and acute with no known antecedent. He underwent physical health checks in Lincoln County hospital, and any organic cause was ruled out. However, EIP identified he had not had the tests for Autoimmune Encephalitis. We proceeded to make links with professionals within United Lincolnshire Teaching Hospitals (safeguarding and neurology) in order to make a pathway between themselves and EIP to ensure people who test positive get the correct treatment for an organic illness. We also decided to create a pathway within EIP to offer support whilst they are having treatment and so we can review, assess and discontinue any antipsychotic medications effectively.	
3.45	Nature and Adventure Therapy interventions: more than just a pleasant walk <i>Michael Kissoon, Clinical Operations Manager, Cat Trapp, ARMS Recovery Team Leader and James Wear, Service User, Aspire, Leeds and York Partnership NHS Foundation Trust</i> Presentation blurb: An overview of the Aspire Nature and Adventure Therapy interventions since 2021. This has included three 'voyage to recovery' sailing trips with Cirdan, over two different routes. Aspire also co-produced and completed three 'residential', including two in the Yorkshire Dales in 2024 and one in the Lake District in 2026. These comprised two nights away with a mixture of activities including caving, rock climbing, ghyll scrambling and hiking. There is also the Aspire allotment that has been co-produced from a tangle of neglected weeds to a usable therapy space for service users and carers. We have lots of testimony and pictures to evidence progress and impact	
4.15	Closing Remarks <i>Chair: Stephen McGowan, EIPN Advisory Group Chair and Regional Clinical Lead for EIP, NHS England and NHS Improvement</i>	
4.30	Close	

Art submissions

These are displayed on the mezzanine floor outside this main room. Submissions from:

- Aneurin Bevan EIP Service
- Hartlepool EIP Service
- Hywel Dda EIP Service
- Shropshire, Telford and Wrekin EIP Service
- Tees, Esk and Wear Valleys NHS Foundation Trust

Posters

The following posters will be displayed on the mezzanine outside the main room:

- Laura Burley, PhD Student, University of Worcester: *Pathways to Early Intervention for Psychosis services: A systematic review*
- Amy Edwards, Assistant Psychologist, Mid-Essex First Episode Psychosis: *Evaluation of psychological interventions in EPUT Early Intervention in Psychosis (EIP) services (2022-2024)*
- Richard Gurney, Mental Health Worker, Bath and North East Somerset EI Team: *Evaluation of B&NES Early Intervention in Psychosis Service Psychosis Awareness Training delivered to local partners 2022-24: participant feedback*
- Samantha Lane, Senior Assistant Psychologist, Bucks Early Intervention and Prevention: *Adapting BFT for At-Risk Mental State Services - Learning points and future directions*
- Morgan Smith, Assistant Psychologist, Mid-Essex First Episode Psychosis: *Coproduction and Service Development Group*
- Anne Wisdom, Consultant Psychiatrist, North Lincolnshire EIP Service: *A Novel Diet and Nutrition Support Clinic*