ePreventPsych: Digital Strategies for Prevention of Psychosis and Its Consequences

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Summary

ePreventPsych is a European consortium that aims to validate decision support tools for early detection across five European countries and explore the potential for their implementation in healthcare. The overall goal is to provide scalable, evidence-based pathways to improve care and outcomes in the early stages of severe mental illness.

Introduction

Preventive Psychiatry, through early detection and intervention, holds the potential to improve prognosis in severe mental illness. **Decision-support tools** for early detection have shown promising results; however, further external validation and implementation studies are needed to evaluate their performance and integration across **EU healthcare systems**.

Vision and Mission

ePreventPsych aims to enable **earlier detection** and better care for people at risk of **severe mental illness** (SMI) and metabolic syndrome by validating and testing the feasibility of **clinical algorithm–based models** and **decision-support tools** across community, primary, and secondary care in **Sweden**, **Italy**, **the Netherlands**, **Spain**, and **Denmark**. The change we seek is not only technological: we are building scalable, evidence-based pathways that health systems can realistically adopt. Ultimately, our goal is to improve outcomes and quality of life for people living with SMI while streamlining care pathways and supporting more efficient healthcare systems.

Project Outline

ePreventPsych will be conducted from **April 2025 to March 2028**. This project employs a multiphase, mixed-methods, and implementation-informed study design, structured in four work packages (WPs), each focused on one specific tool.

Work Package	Tool	Applicable setting/data	Testing country
WP1	Community web-based screening tool (**ENTER**)[10]	General Population	The Netherlands, Spain, Italy
WP2	Psychosis Risk (**P Risk**)[11]	EHR system-based tool for Primary care	Sweden, The Netherlands, Spain
WP3	**Transdiagnostic Risk Calculator**[12]	EHR system-based or web-based tool for Secondary Mental Health services	Sweden, The Netherlands, Spain, Denmark, Italy
WP4	Psychosis Metabolic Risk Calculator (**PsyMetRiC**)[13]	Web-based tool for Secondary Mental Health services	Sweden, The Netherlands, Spain, Denmark, Italy

Table 1. Project outline.
Note. EHR: Electronic Health Records

The project combines external **validation analyses** (phase 1) using historical clinical cohorts to validate the tools' predictive performance and reliability in WPs 2-4, with mixed-method **integration assessment** (phase 2) to explore the acceptability, suitability, and potential for real-world implementation, and non-interventional **feasibility assessments** (phase 3) to evaluate how these tools could fit within existing clinical settings, workflows and healthcare systems.

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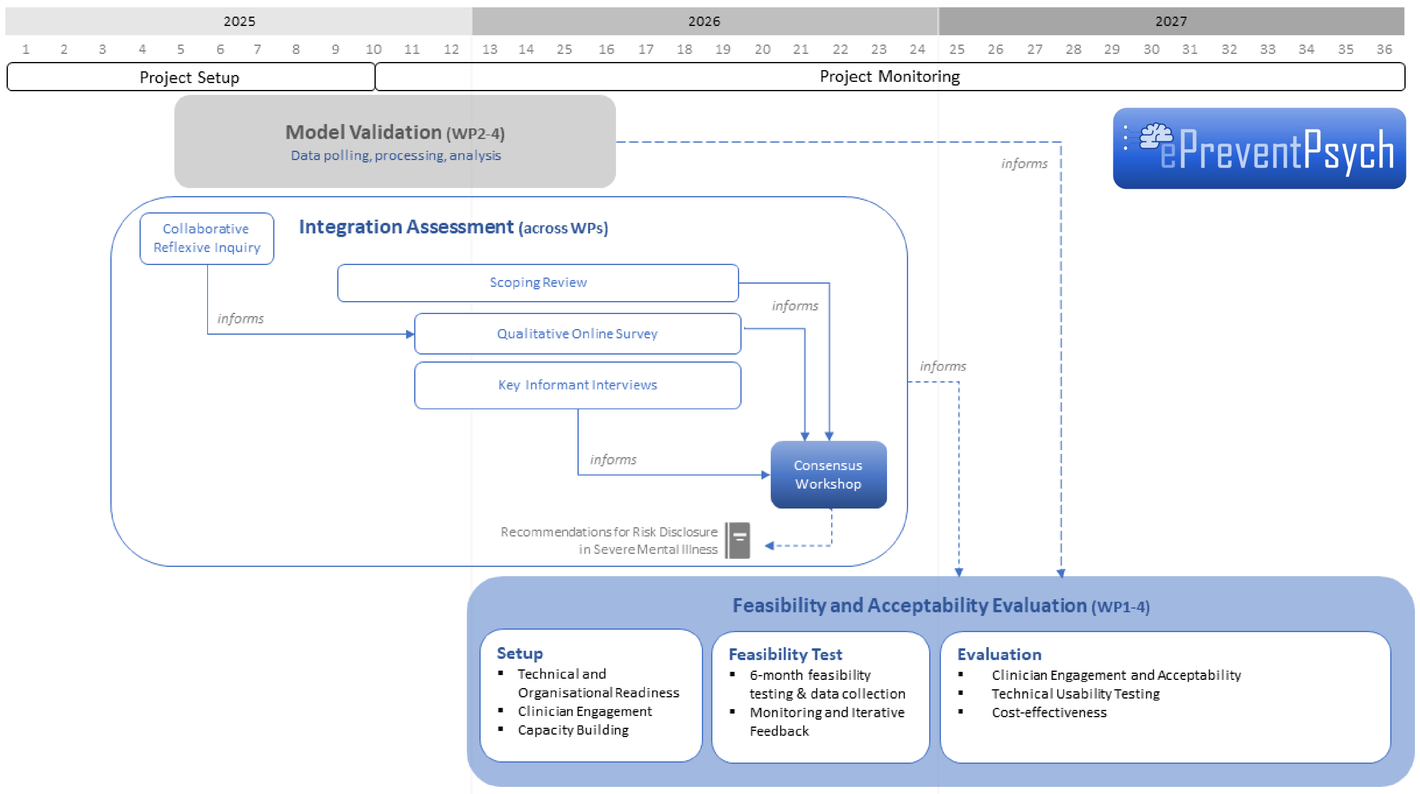

Figure 1. Project Work Plan

Our Ecosystem Research Approach

We apply an ecosystem lens to research, recognising that innovation in healthcare is shaped by multiple actors and contexts across micro, meso, and macro levels.

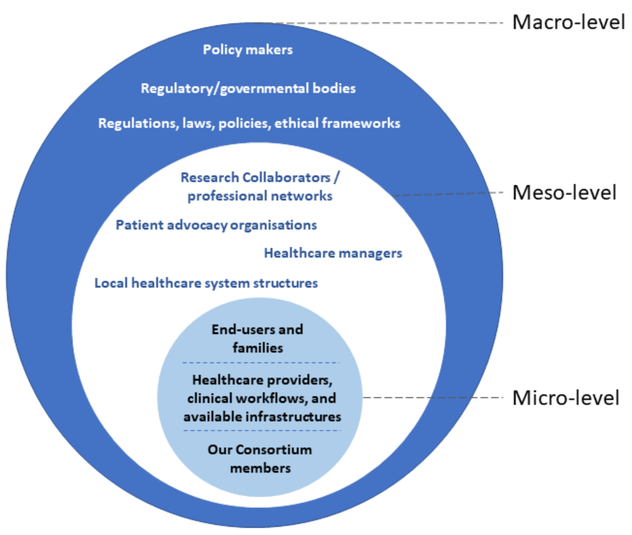

Figure 2. Our Ecosystem Map

Our approach is **multi-strategy** and **mixed-methods**. At the **micro-level**, we engage our research team, end-users, families, and healthcare providers. At the **meso-level**, we collaborate with patient advocacy organisations and other researchers to connect local work with regional perspectives. At the **macro-level**, we address regulations, policy-makers, and governance frameworks such as the Medical Device Regulations (MDR). Our ecosystem map brings these actors together to identify facilitators, barriers, and opportunities for integration, ensuring that our tools are not only technically validated but also acceptable, feasible, and scalable in real healthcare systems.

Ecosystem Engagement Strategies

Our engagement approach is embedded across all project phases. During set up and monitoring, we involve external consultancy for MDR guidance and an **External Expert Advisory Board** to provide independent expertise. In the data validation phase, we use multi-country clinical datasets to capture contextual diversity. Through integration assessment, we engage our consortium members, healthcare providers, end-users, families, managers, policymakers, advocacy representatives, and lived-experience experts via surveys, interviews, and consensus workshops. Finally, in feasibility testing, we collaborate directly with end-users and healthcare providers to evaluate real-world applicability.

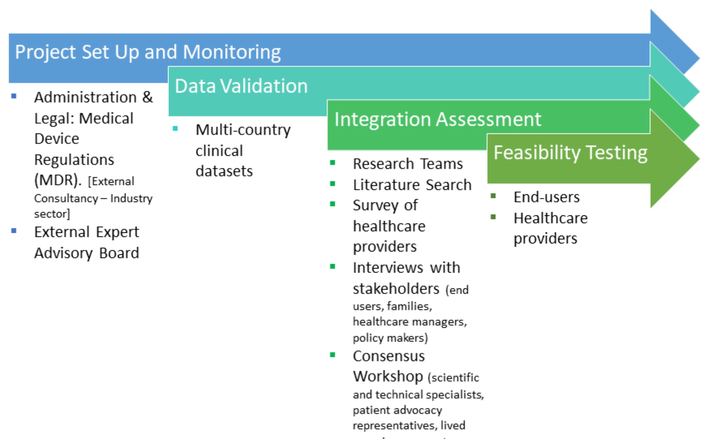

Figure 3. Our Planned Engagement Strategies

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Interested?

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