

Schizophrenia: Care in the Community for Adults

This document is a resource for health care professionals and summarizes content from the [Schizophrenia: Care in the Community for Adults quality standard](#).

Assessment, Care Plan, and Support

Quality Statement (QS)* 1: Care Plan and Comprehensive Assessment

Work with adults with schizophrenia (and their family or caregivers, if they agree) to create an individualized care plan. The plan documents mutually agreed-upon goals, individual concerns and preferences, care and services, and a crisis plan, and it incorporates the results of the comprehensive assessment. Review and update the care plan every 6 to 12 months, or sooner if there is a need.

QS 2: Physical Health Assessment

Complete a physical assessment that focuses on conditions that are common in people with schizophrenia, including cardiovascular disease, diabetes and metabolic syndrome, and lung disease. Use the results to inform the person's care plan.

QS 3: Self-Management

Offer self-management education to adults with schizophrenia. Education should align with their needs and stage of illness, and focus on empowering people to engage in their own recovery. If you are not able to provide education on site, ensure that people have access to it in the community or online.

QS 4: Family Education, Support, and Intervention

Encourage adults with schizophrenia to involve their family in their care. Offer families education, supports, and family intervention that align with their circumstances and needs. If you are not able to provide these on site, ensure that people have access to them in the community or online.

*The quality statements are provided in full on page 3.

Treatment

QS 5: Access to Community-Based Intensive Treatment Services

Refer adults with schizophrenia to the community-based services (including early psychosis intervention, assertive community treatment, and intensive case management) that will best meet their needs. Consider assessing service needs using a tool (e.g., Level of Care Utilization System [LOCUS] or Ontario Common Assessment of Need [OCANI]). Advise them on available services and how to access those services.

QS 7: Antipsychotic Monotherapy

Whenever possible, prescribe one antipsychotic medication at a time and at the lowest effective dose for that person. Regularly monitor and document people's symptoms and side effects.

QS 8: Treatment With Long-Acting Injectable Antipsychotic Medication

Discuss the option of a long-acting injectable antipsychotic medication with adults with schizophrenia. Offer this option early in antipsychotic treatment.

QS 9: Treatment With Clozapine

Offer clozapine to adults with schizophrenia if they have tried two different antipsychotic medications and their symptoms have not improved or remain distressing. Monitor and manage the risks associated with clozapine (including agranulocytosis, myocarditis, cardiomyopathy, and bowel obstruction).

QS 10: Continuation of Antipsychotic Medication

Ensure that adults with schizophrenia continue to take their antipsychotic medication and that they and their family are educated about the role of maintenance medication in helping them stay well. Review medication at least once a year, including benefits, risks, clinical response, and side effects.

QS 11: Cognitive Behavioural Therapy for Psychosis and Other Psychosocial Interventions

Offer cognitive behavioural therapy for psychosis and other evidence-based psychosocial interventions (e.g., cognitive remediation) to adults with schizophrenia who may benefit.

Concurrent Care and Services

QS 6: Housing

Ask adults with schizophrenia about their access to safe, affordable, and stable housing and support services that meet their needs and preferences. Consider assessing needs and support requirements using a standardized tool (e.g., [Service Prioritization Decision Assistance Tool \(SPDAT\)](#)). Connect people with service providers who can assist them with their housing needs.

QS 12: Promoting Physical Activity and Healthy Eating

Be aware of local programs for healthy eating and physical activity, and encourage adults with schizophrenia to access them.

QS 13: Promoting Smoking Cessation

Offer behavioural interventions, counselling, or medications to adults with schizophrenia who smoke tobacco to help them reduce or stop smoking.

QS 14: Assessing and Treating Substance Use Disorder

Ask adults with schizophrenia about their substance use. If necessary, provide a more thorough assessment for a possible diagnosis of substance use disorder, and offer treatment for concurrent disorders. Use validated screening tools (e.g., [Global Appraisal of Individual Needs–Short Screener \[GAIN-SS\]](#)) to screen for substance use and identify people who would benefit from further evaluation.

QS 15: Employment and Occupational Support

Ask adults with schizophrenia about their employment, volunteering, and other occupational and educational

interests and goals. Include this information in their care plan. Connect people with supports and services that can assist with these pursuits.

Resources

- [Schizophrenia Care in the Community for Adults Quality Standard](https://bit.ly/3SxhqCz) and [Patient Guide](#)
bit.ly/3SxhqCz
- [Schizophrenia Care for Adults in Hospitals Quality Standard](https://bit.ly/3zbv87c) and [Patient Guide](#)
bit.ly/3zbv87c
- [Early Psychosis Intervention Ontario Network \(EPION\)](https://help4psychosis.ca)
help4psychosis.ca
- [Institute for Advances in Mental Health \(IAM\) One-to-One Support](https://bit.ly/3gwlHYh)
bit.ly/3gwlHYh
- [Schizophrenia: An Information Guide by the Centre for Addiction and Mental Health](https://bit.ly/3Fa4ak4)
bit.ly/3Fa4ak4
- [ConnexOntario](https://connexontario.ca)
connexontario.ca
- [Canadian Mental Health Association: Find Help](https://cmha.ca/find-help)
cmha.ca/find-help
- [Schizophrenia Society of Canada Resources and Links](https://schizophrenia.ca/resources-links/)
schizophrenia.ca/resources-links/
- [Smoking Treatment for Ontario Patients \(STOP\) Program](https://bit.ly/3EcSB9G)
bit.ly/3EcSB9G
- [The Ottawa Model for Smoking Cessation \(OMSC\)](https://bit.ly/3TLu7dk)
bit.ly/3TLu7dk
- [Level of Care Utilization System \(LOCUS\)](https://bit.ly/3OI8PSP)
bit.ly/3OI8PSP
- [Ontario Common Assessment of Need \(OCAN\)](https://bit.ly/3UBHlux)
bit.ly/3UBHlux

Additional tools and resources are available on [Quorum](#).

Quality Statement 1: Care Plan and Comprehensive Assessment

Adults with schizophrenia have a care plan that is regularly reviewed and updated, and that is informed by a comprehensive assessment.

Quality Statement 2: Physical Health Assessment

Adults with schizophrenia receive a physical health assessment on a regular basis.

Quality Statement 3: Self-Management

Adults with schizophrenia have access to information and education that supports the development of self-management skills.

Quality Statement 4: Family Education, Support, and Intervention

Families of adults with schizophrenia are given ongoing education, support, and family intervention that is tailored to their needs and preferences.

Quality Statement 5: Access to Community-Based Intensive Services

Adults with schizophrenia have timely access to community-based intensive treatment services based on their needs and preferences.

Quality Statement 6: Housing

Adults with schizophrenia have a safe, affordable, stable living environment that reflects their needs and preferences.

Quality Statement 7: Antipsychotic Monotherapy

Adults with schizophrenia are prescribed a single antipsychotic medication, whenever possible.

Quality Statement 8: Treatment With Long-Acting Injectable Antipsychotic Medication

Adults with schizophrenia are offered the option of a long-acting injectable antipsychotic medication.

Quality Statement 9: Treatment With Clozapine

Adults with schizophrenia whose symptoms have not responded to previous adequate trials of treatment with two different antipsychotic medications are offered clozapine.

Quality Statement 10: Continuation of Antipsychotic Medication

Adults with schizophrenia whose symptoms have improved with antipsychotic medication are advised to continue their antipsychotic medication for the long term.

Quality Statement 11: Cognitive Behavioural Therapy for Psychosis and Other Psychosocial Interventions

Adults with schizophrenia are offered cognitive behavioural therapy for psychosis and other evidence-based psychosocial interventions, based on their needs.

Quality Statement 12: Promoting Physical Activity and Healthy Eating

Adults with schizophrenia are offered readily accessible interventions that promote physical activity and healthy eating.

Quality Statement 13: Promoting Smoking Cessation

Adults with schizophrenia who smoke tobacco are offered pharmacological and nonpharmacological interventions to help them reduce or stop smoking tobacco.

Quality Statement 14: Assessing and Treating Substance Use Disorder

Adults with schizophrenia are asked about their substance use and, if appropriate, they are assessed for substance use disorder and offered treatment.

Quality Statement 15: Employment and Occupational Support

Adults with schizophrenia who wish to find work or return to work are offered supported employment programs. Adults with schizophrenia who are not seeking paid work are supported in other occupational or educational activities, in accordance with their needs and preferences.

Note: This resource can be used to support health care professionals in the provision of care. It does not override the responsibility of health care professionals to make decisions with patients, after considering each patient's unique circumstances. Grouping/directionality of statements may not be applicable for every patient, and clinical judgment should be used.