I. Inclusion criteria:

1. Resides in catchment area (or reasonable driving distance from) the mental health center.
2. Age 15 to 40.
3. Has IQ of 70 or above.
4. Person has experienced symptoms that demonstrate psychosis and which are highly likely to be the signs of an **existing or emerging schizophrenia spectrum disorder**, including A-E, below.
5. Symptoms of psychosis emerged less than 2 years ago.
6. Other causes of psychosis have been ruled out (Roman numeral II).
7. Meets criteria of less than 1 year of lifetime treatment with anti-psychotics.

A. **Delusions**
   - Behaviors, speech or beliefs that are delusional in nature
   - Episodes of depersonalization (e.g. they believe that they do not exist or that their surroundings are not real)
   - High levels of fear, anxiety, or paranoid for no apparent reason or for an unfounded reason
   - Feelings that other people are putting thoughts in their head, stealing their thoughts, believes others can read their mind (or vice versa) and/or hears their own thoughts out loud

B. **Hallucinations**
   - Experiences hearing voices or sounds that others do not hear
   - Experiences visual hallucinations or distortions
   - Experiences hallucinations related to smell, touch or taste

C. **Thought Disorder/Disorganized Speech**
   - Thought disorganization as evidenced by disorganized speech and/or writing

D. **Grossly disorganized or catatonic behavior**
   - Experiences (or significant others report) disorganized behavior or catatonic behavior

E. **Negative symptoms**
   - Flat affect
   - Difficulty experiencing pleasure
   - Difficulty feeling motivated to engage in activities that he or she used to do
   - Significant decline in either academic, vocational, social or personal (e.g. sleep or hygiene) functioning

**Reminder:** to receive a diagnosis of schizophrenia spectrum disorder in DSM-V, the person must have two (or more) of the following, each present for a significant portion of time during a 1-month period (or less if successfully treated)

A. Delusions
B. Hallucinations
C. Disorganized Speech
D. Grossly disorganized or catatonic behavior
E. Negative symptoms, ie affective flattening, alogia or avolition

II. Other causes of psychotic symptoms have been ruled out
_ Psychotic symptoms are not known to be caused by the temporary or chronic effects of substance abuse.*
_ Psychotic symptoms are not better explained by a mood disorder, such as psychotic depression or bipolar disorder
_ Psychotic symptoms are not known to be caused by borderline personality disorder*
_ Psychotic symptoms are not better explained by a diagnosis of depersonalization/derealization disorder
_ Psychotic symptoms are not better explained by autism or other pervasive developmental disorder*

*If unknown: explain to client and family that Navigate may stop being a good fit and that you will help find better treatment. Ongoing evaluation and consultation w/team.

III. Duration of untreated psychosis has been assessed to best of evaluator’s knowledge.

To the best of your knowledge, when did the individual start to experiences symptoms of psychosis related to schizophrenia, schizoaffective disorder or schizophreniform disorder?

To the best of your knowledge, when did the individual begin to receive treatment (anti-psychotic medications) for psychosis related to schizophrenia, schizoaffective disorder or schizophreniform disorder?

What is the length of time between the time the individual first started to experience symptoms and the time the individual first received treatment? That is, how many months was the person symptomatic before he or she received treatment?