

Results: The E-sport intervention consists of two fields “in-game” and “over-game” In-game concerns the practice of gaming Over-game concerns the interventions organization Power in each field is driven by specific values and access to certain competencies Power in-game was equally open to patients and professionals leading to symmetric power relations Power over-game was open to professionals only leading to asymmetrical power relations Professionals may allow power distribution to patients during gameplay, while still retaining the overall power over the intervention

Conclusions: It is possible to balance between care-and-custody in forensic psychiatry. This study provides important insights to guide further practice.

Keywords: forensic psychiatry; qualitative study; care-custody; relations

EPP0686

Dangerousness assessment in psychiatric inpatients suffering from psychotic disorders

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doi: 10.1192/j.eurpsy.2021.1012

Introduction: Dangerousness is a state in which a person is likely to commit violent acts.

Objectives: Describe the socio-demographic and clinical characteristics of psychiatric inpatients hospitalized in the locked unit and suffering from schizophrenia or other psychotic disorders and to assess their dangerousness.

Methods: This is a cross-sectional study carried out in the locked unit of psychiatric department of the University Hospital of Mahdia during one year. We have collected data of patients diagnosed with schizophrenia or other psychotic disorders according to DSM 5. Psychometric assessment was done using the BPRS, the PANSS, the VRAG and the HCR-20 scales.

Results: We have included 173 patients. The average age was 36 years with a sex ratio of 9. The majority of our patients were unmarried and of a low economic level. Alcohol and cannabis consumption was found in 7.6% and in 5.7% of cases respectively. A history of incarceration was found in 79% of cases. Homicide was the infraction the most committed in 8% of cases. 71.2% of patients had an anterior hospitalization in the locked unit. Aggressiveness and instability were the main indication for hospitalization. The diagnosis was schizophrenia in 84% of cases. Patients were treated with classic antipsychotic drugs in 55.8% of cases. Non-adherence to treatment was reported in 33% of cases. The average score of psychometric scales were BPRS = 21.4; VRAG = - 4.87 and HCR-20 = 17 ± 0.87.

Conclusions: Our study showed comparable assessments for dangerousness with the literature. Evaluating dangerousness should represent the first step of the therapeutic process.

Keywords: psychiatry; dangerousness; schizophrénia; Psychostic disorders

EPP0687

Agresion and violent behaviour risk assessment

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doi: 10.1192/j.eurpsy.2021.1013

Introduction: After discharge from forensic psychiatric hospital, rates of violent reoffending are reported to range from 2% to 8% per year in high income countries. Risk assessment informs decisions around admission to and discharge from secure psychiatric hospital and contributes to treatment and supervision Current approaches to assess violence risk in secure hospitals are resource intensive, limited by accuracy and authorship bias. Forensic Violence Oxford (FoVOx) was developed using all forensic psychiatric patients in Sweden, based on the largest forensic psychiatric sample to date, and has the advantage of using routinely available data, which are less liable to bias than interview-based measures.

Objectives: Literature review on the Forensic Psychiatry and Violence Oxford (FoVOx) tool.

Methods: Pubmed and Google Scholar search

Results: The 12 items within the FoVOx tool are sex, age, previous violent crime, previous serious violent crime, primary discharge diagnosis, drug use disorder at point of hospitalization or discharge, any lifetime drug use disorder, alcohol use disorder at point of hospitalization or discharge, personality disorder at discharge, employment at admission, five or more prior inpatient episodes, and whether current length of stay has exceeded one year.

Conclusions: The FoVOx tool is scalable, quick, free to use and available online. Its use could enable clinicians to provide a reasonably accurate risk assessment in a brief and cost-effective way, and free up time to focus on clinical care and risk management rather than risk assessment.

Keywords: violence; risk assessment; forensic psychiatry

EPP0688

What can we learn about perpetrators of domestic and familial homicide and their involvement with mental health services from domestic homicide reviews?

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doi: 10.1192/j.eurpsy.2021.1014

Introduction: The evidence that supports an association between domestic violence and abuse (DVA) perpetration and mental disorders is increasing. Since 2011, authorities in England and Wales have been required to conduct Domestic Homicide Reviews (DHRs) into deaths caused by violence, abuse or neglect of individuals aged 16 or over, by a family member or a current or ex-partner.

Objectives: The aim of the study is to describe the characteristics of perpetrators of domestic homicide in a sample of DHR reports in which the perpetrator was known to mental health services in the 12 months before the offence. This sample will undergo qualitative framework analysis as part of another study conducted by the authors.

Methods: The researchers compiled a list of DHRs available online and randomly sampled 168 reports; in 20 of those reports, the perpetrators were under the care of mental health services in the 12 months prior to the offence. We have applied descriptive statistics to report on the sample characteristics.

Results: The common mental illnesses diagnosed amongst perpetrators were depression (20%), anxiety (15%) and schizophrenia