

Mental Health Care

EPV0804

How to involve carers in the acute care: An online training for clinicians across four sites in England

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Introduction: Involving carers in the care of people with severe mental illness is known to bring positive treatment and psychosocial outcomes. However, evidence-based procedures to guide clinicians on how to involve carers in the acute care are lacking.

Objectives: To provide an online training to clinicians working in the acute care regarding the organisation of a standardised meeting with the service user and their carer within the first week of hospitalisation, and explore their views after its implementation.

Methods: We trained six clinicians across four urban and rural sites in England, asked them to incorporate the meeting in their routine care provision and interviewed them to explore their experiences.

Results: Clinicians reported training advantages such as ease of use, comprehensiveness and transferable skills, and meeting advantages such as shared goals development and acknowledgement of carer involvement value. They also mentioned challenges related to organisational/time constraints, expectations management, and distance to the hospital for carers. Clinicians suggested to further focus on carer motivation to engage, to use skills throughout admission rather than in a one-off session, and to provide a structured meeting summary. Those experiences were shared across sites, indicating similar benefits and challenges, not depending on the specific setting characteristics.

Conclusions: Providing structured training to clinicians may increase carer involvement in routine care in acute settings. Given the workload in such settings training endeavours should be brief and include skills that clinicians can apply to facilitate shared goal development and expectations management. The use of online meetings may allow increased carer participation in the acute care.

Disclosure: No significant relationships.

Keywords: acute service; online training; severe mental illness; carer involvement

EPV0803

Carer involvement in the transition from inpatient to community mental healthcare: Experiences of stakeholders

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Introduction: The involvement of informal carers (family and friends) in the care of people with severe mental illness (SMI) contributes to positive clinical outcomes, such as relapse prevention and symptom reduction. To date, the care pathway between inpatient and community care is not clearly defined impeding the smooth transition for patients, whilst carers are still barely involved in shared decision-making processes.

Objectives: To investigate the views and experiences of patients with SMI, carers and clinicians regarding the transition from inpatient to community mental health services.

Methods: Four mixed focus groups were conducted with individuals with SMI (n=12), carers (n=10) and clinicians (n=9) across four different mental health catchment areas in England. Participants discussed their experiences and provided their views on facilitators, barriers and solutions for carer involvement during the transition between mental health services. Data were analysed using thematic analysis.

Results: All stakeholders highlighted that factors that impede carer involvement are related to: confidentiality issues, unmet (structural and organisational) needs, and carer expectations. Patients with SMI, carers and clinicians agreed that carer involvement can be improved by providing psychoeducation to carers and training to staff, having accessible and transparent clinical procedures, and allocating specialised staff to carers.

Conclusions: The study findings emphasise that carer involvement is still overlooked, particularly when adults with SMI transition between services. The results provide guidance for practice emphasising the need for systematic involvement of carers across inpatient care, and for future research proposing effective ways of maximising carer involvement in mental health care.

Disclosure: No significant relationships.

Keywords: inpatient; carer involvement; service transition; community care

EPV0804

The value of cognitive behavioral therapy on quality of life in addition to pharmacotherapy in adults with ADHD

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Introduction: Treatment options for ADHD in adults consist of psycho-education, cognitive behavioral therapy (CBT), pharmacotherapy or a combination thereof. Current studies do not yet