

Objective Understanding the risk factors that can lead to readmission is a factor for the development of interventions that can improve the quality of care.

Aims The purpose of this study was to examine number and predictors of psychiatric readmission within 14 days, 30 days and, 3 and 6 months.

Methods In this retrospective study, analyses were conducted in a sample of 566 discharge adult patients who were admitted to a Psychiatric Hospital of Sarajevo Canton from 1st January to 31st December 2013.

Result Total number of readmission was 14%. The readmission rate within 30 days was 2.8%, number of readmission quarterly was 9.1%, number of readmission within 6 months after discharge was 13%.

In the study, several factors were significantly associated with increased risk of readmission including non-compliance with drug treatment, social problems, aggressiveness, suicidality.

Conclusion Our study suggesting that the prevention of psychiatric readmission requires continuous multidisciplinary work with patients and family members.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1108

Quality management and economic downturn. Post-modern topics of community psychiatry

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Introduction The reduction of the budget allocated to community psychiatry is part of financial needs in times of economic crisis. However, the community psychiatry is based on human resources rather than on technological devices and the economic downturn affects the quality of care in a field where the social and relational capital developed by mental health workers is fundamental. Some authors such as Serge Latouche propose to stem the economic decline with the concept of “degrowth”, a constructive idea but difficult to apply.

Objective We would like to analyze whether the economic downturn has consequences only for the organization of psychiatric services or even for people with severe mental disorders. Another issue concerns the possibility that economic downturn increases the social exclusion of vulnerable people.

Results People who live on social welfare or disability pension remain on the margins of society but also those supported by families feel increasingly marginalized with respect to the future.

Conclusions The provision of mental health services may not meet the implicit and explicit wishes in the demand for health by citizens and society. It's therefore necessary to review the quality management within community psychiatry.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Rehabilitation and psychoeducation

EV1110

An evaluation of the EOLAS psychoeducation programme for service users: An innovative approach to collaboration between clinicians and ‘experts by experience’

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Introduction Psychoeducation for service users has been shown in several recent meta-analyses to improve adherence with treatment, decrease rehospitalization rates and improve various measures of quality of life. The 8-week EOLAS Programme for service users with schizophrenia or bipolar disorder is unique in being designed, co-facilitated and evaluated collaboratively by both clinician and peer representatives. EOLAS forms part of the service plan of the national Health Service in Ireland.

Aims and objectives To evaluate the impact of the EOLAS programme on participants' perceived knowledge, confidence, advocacy, recovery attitudes and hope.

Methodology Anonymised questionnaires were administered to participants before and after completion of the EOLAS Programme. All survey participants were invited to attend for interview to examine qualitatively their experience of the programme. Interviews were recorded and subjected to thematic analysis.

Results Forty-five subjects completed pre- and post-programme questionnaires (participation rate = 55%).

Significant improvements ($P < 0.05$) were identified across each of the 5 domains examined (i.e. perceived knowledge, confidence, advocacy, recovery attitudes, hope). Expressed satisfaction with the programme was high (95%).

At interview, participants ($n = 12$) particularly valued:

- the opportunity to ask questions of the psychiatrist e.g. about medication;
- improving self-care skills e.g. monitoring early warning signs of relapse;
- co-facilitation by a peer, which provided extra credibility and inspired hope;
- sharing experiences with peers.

Conclusions The EOLAS programme succeeds in meeting the needs of the participants across the target domains. This success depends on the unique collaboration between clinicians and peer experts on which EOLAS is based.

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Attitude toward medication as a predictor of therapeutic adherence. Importance of psychoeducation on treatment

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