

EPV1270**Evaluation of the knowledge in seismotherapy of the nurses of the neuropsychiatry pole**

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Introduction: Electroconvulsive therapy, also known as seismotherapy or electroshock therapy, consists of passing an alternating current of variable intensity between two electrodes placed on either side of the patient's skull to create a generalized convulsive seizure with therapeutic effects.

Objectives: To evaluate the knowledge of the nurses of the neuropsychiatry pole of the Military Hospital of Tunis in seismotherapy.

Methods: Descriptive study, carried out in February 2021 in the pole of neuropsychiatry of the Military Hospital of Tunis (Services of psychiatry, neurology and neurosurgery). We developed for this study a form gathering sociodemographic questions and technical questions on seismotherapy (indications, contraindication, monitoring parameters ...).

Results: Thirty-nine (39) nurses agreed to answer the questionnaire. The average age was 37 years, 12 men and 27 women, with a sex ratio of 0.44. The majority (62%) of the participants had no idea about seismotherapy, 92% had never attended a session, 90% had no specific training, 87% thought that seismotherapy was indicated for all psychiatric illnesses. Seismotherapy was feasible on an empty stomach for 13% and after free and informed consent of the patient for only 33%.

Conclusions: Although included in the nursing curriculum, the knowledge in seismotherapy of the nurses of the neuropsychiatry pole seems limited. A specific training program is indicated in anticipation of the establishment of a seismotherapy unit at the Military Hospital of Tunis.

Disclosure: No significant relationships.

Keywords: general hospital; Nurses; seismotherapy; knowledge evaluation

EPV1269**Psychosocial skills of ICU healthcare staff providing care to patients with COVID-19**

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Introduction: The COVID-19 crisis has imposed deep improvements in ICU responsiveness face to unprecedented and uncertain situations. In addition to strengthening logistics resources, this

responsiveness required the development of psychosocial skills of healthcare providers, especially in ICU.

Objectives: To assess extrinsic factors interfering with psychosocial skills of the staff working in COVID-19 ICU and to analyze the different dimensions of these skills.

Methods: This is an observational descriptive study conducted at the COVID-19 ICU of an Academic Hospital, during a one-month period. All healthcare providers were enrolled. Data collection was based on a self-administered questionnaire including: socio-demographic factors; the general perception of work in covid-19 ICU and psychosocial skills. Six dimensions were explored separately, then by a standardized scale ranging from 0 to 100. Three levels of satisfaction were considered.

Results: Fifty-five healthcare providers were enrolled. The average age was 32 years. The sex ratio was 0.25. Mean scales of satisfaction were 53.6 for professional status and occupational security; 62.4 for working conditions and 69.8 for relational aspects. The most altered extrinsic factors were satisfaction regarding the salary and satisfaction regarding the administration policy with mean scores of 15 and 10 respectively. Satisfying psychosocial skills were creative and critical thoughts, self-awareness and empathy for others, communication and interpersonal relationships. Whereas the most impaired skills were stress management and problems solving, with mean scales of 49.6 and 68.3 respectively.

Conclusions: Psychosocial skills were generally acceptable. However, they could be improved by specific actions targeting extrinsic factors.

Disclosure: No significant relationships.

Keywords: Covid-19; Psychosocial skills; healthcare staff

EPV1270**Improving Awareness of Safe Sleeping Practices for Babies on a Mother and Baby Psychiatric Unit**

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Introduction: SIDS is the sudden, unexpected and unexplained death of a baby. Safe sleeping practices can help to reduce a baby's risk of SIDS. At the Coombe Wood Mother & Baby Unit (MBU), it was found that many patients were opting to co-sleep with their babies which contradicts safe sleeping guidelines.

Objectives: To improve patient awareness of the condition SIDS and to implement an interactive training session improving awareness of safe sleeping practices for babies. To improve patients' confidence in implementing safe sleeping practices for their babies; thus reducing the risk of SIDS occurring.

Methods: The Lullaby Trust™ is a charity that raises awareness of SIDS and provides expert advice on safe sleep for babies. An interactive training session for patients was organised by incorporating published materials from The Lullaby Trust™, facilitated by medical and occupational therapy staff on the MBU. The

participants filled out a pre-training and post-training questionnaire to test the effectiveness and quality of the training session.

Results: The participants' average level of confidence in knowing and applying safe sleeping practices for their babies doubled following the training session (from 2.3→4.8 and 2.6→5 respectively, with 5 meaning "Very Confident.") The average level of knowledge of SIDS also increased from 1.6→4.4 (with 5 meaning "A Lot" of Knowledge.)

Conclusions: We were surprised at the low level of knowledge and confidence the patients had regarding safe sleeping practices for their babies. This project shows how interactive, ward-based training can be an effective way to engage and stimulate patients into improving the safety of their baby care.

Disclosure: No significant relationships.

Keywords: Paediatrics; Patient safety; Perinatal psychiatry; SIDS

Rehabilitation and Psychoeducation

EPV1271

Individual placement and support in young people with severe mental illness: an Italian experience

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Introduction: Individual placement and support (IPS) has a considerable body of evidence for its effectiveness in helping people with mental disorder to obtain and maintain competitive jobs in the labour market. IPS closely follows 8 main principles (such as it aims to get people into competitive employment, it is open to all those who want to work, it tries to find jobs consistent with people's preferences, it works quickly, it brings employment specialists into clinical teams, it provides time unlimited, individualised support, benefits counselling is included). However, little data in young adults are currently available, especially in Europe.

Objectives: Aim of this study was to evaluate the beneficial effect of IPS in Italian young adults with severe mental illness, examining the main competitive employment outcomes and drop out rates during a 3-year follow-up period.

Methods: 54 participants were recruited from patients receiving psychiatric treatment in adult Community Mental Health Centers of an Italian Department of Mental Health. Together with drop out rates, we examined job acquisition, job duration (total number of days worked), total hours per week worked and job tenure (weeks worked on the longest-held competitive job).

Results: A crude competitive employment rate of 40.7% and a crude drop out rate of 22.2% over the 3-year follow-up period were found. However, 66% of 42 clients who remained in the program over 3 years gained competitive employment at some time during the 3-year period.

Conclusions: This research shows the feasibility of an IPS intervention model in the public mental health care system in Italy, especially for a young adult target population.

Disclosure: No significant relationships.

Keywords: individual placement and support; psychiatric rehabilitation; mental health care; supported employment

EPV1272

Experience of using telecare in carrying out a program of psychosocial rehabilitation of patients with schizophrenia and their relatives during the Covid-19 pandemic

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Introduction: During the Covid-19 pandemic, patients with mental illness turned out to be one of the most vulnerable groups of the population, since the forced self-isolation regime was a decrease in the availability of psychiatric care. During this period, the use of telemedicine increased to provide timely assistance.

Objectives: To analyze the experience of telecare in program of psychosocial rehabilitation of patients with schizophrenia and their relatives and to evaluate its effectiveness.

Methods: 80 schizophrenia patients in remission of varying quality and 41 relatives participated in rehabilitation program. To assess the effectiveness of telecare, PANSS, SF-36, URICA, PHQ-9, ISI, PSS-10, GAD-7 scales were used.

Results: Psychosocial interventions through telecare were carried out for 12 months. Patients and relatives participated in video sessions on Zoom and Skype Internet platforms, as well as in instant messengers. Rehabilitation program for patients included psychoeducation, skills training, art-therapy, music therapy, bibliotherapy, psychological counseling. Relatives were provided with psychoeducation and psychological counseling. The analysis showed that the use of telecare contributed to increase in the availability of psychotherapeutic assistance, the participation of patients with low motivation and prompt problem solving. Within the studied period, only 5% of patients (4 persons) developed relapses, two patients (2.5%) were hospitalized. Patients and relatives showed a high level of satisfaction with the care provided, positive dynamics of psychological indicators.

Conclusions: The effectiveness of psychosocial rehabilitation program through telecare has been proven. The possibility of carrying out various psychosocial interventions in online format has been shown.

Disclosure: No significant relationships.

Keywords: rehabilitation; psychosocial; telecare; schizophrénia

EPV1274

Psychoeducational family intervention for bipolar I disorder: medium and long-term efficacy.

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Introduction: Bipolar disorder (BD) is associated to high personal and social burden, impaired social functioning and high levels of disability. Recent studies have showed that relapse rates are