

P-878 - A RANDOMIZED-CONTROLLED TRIAL OF INTENSIVE CASE MANAGEMENT EMPHASIZING THE RECOVERY MODEL AMONG PATIENTS WITH SEVERE AND ENDURING MENTAL ILLNESS

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Introduction: The application of recovery principles within everyday mental health services is understudied.

Objectives and aims: We studied the implementation of a programme of intensive case management (ICM) emphasizing recovery principles in an Irish community mental health service.

Methods: Eighty service attenders with severe and enduring illness were randomized into groups (1) receiving a programme of ICM, (2) receiving treatment as usual (TAU).

Groups were compared before/after the programme for general psychopathology using the Brief psychiatric Rating Scale [BPRS] (clinician rated) and How are You? Scale (self-rated). The Functional Analysis of Care Environments [FACE] scale provided assessment of functional domains.

Results: The overall group [mean age 44.5±13.2 years; 60% male] had mean total Health of the Nation Outcome Scale [HoNOS] scale scores 10.5±4.6 with impaired social functioning especially prominent (mean social subscale score 5.0±2.7). The ICM group were younger ($p < 0.01$) with higher baseline scores on the HoNOS social subscale and BPRS ($p < 0.05$). An analysis of covariance, controlling for these baseline differences, indicated greater improvement in BPRS scores ($p = 0.001$), How are You? scores ($p = 0.02$) and FACE domains for cognition, symptoms and interpersonal relationships (all $p < 0.001$) in the ICM group. The ICM group underwent greater changes in structured daily activities that were linked to improved BPRS scores ($p = 0.01$).

Conclusions: A programme of ICM emphasizing recovery principles allowed significant improvement across psychopathological and functional domains. Improvements were linked to enhanced engagement with structured daily activities. Recovery-oriented practices can be integrated into existing mental health services and provided alongside traditional models of care.