

**Conclusions:** The prioritization of some services by the regulatory agency causes many supply difficulties for the others. It would be important to reassess the priority of ECT in such crisis because most of the time other caregivers and regulatory agencies are not aware how they are vital for patients.

**Keywords:** ECT; Pharmacy; COVID-19; supply

### EPP0307

#### Symptoms of depression and anxiety among health care workers during COVID-19 pandemic in Latvia: A cohort study.

L. Valaine\*, A. Ancans, L. Logina, R. Beskrovnijs, L. Bubko and G. Ancane

Department Of Psychosomatic Medicine And Psychotherapy, Riga Stradiņš University, Riga, Latvia

\*Corresponding author.

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**Introduction:** Studies from the beginning of 2020 show that symptoms of depression and anxiety are increasing among health care workers. It is important to assess the dynamics of health care workers mental health.

**Objectives:** To assess the dynamic of symptoms of depression and anxiety among health care workers over a 3-month period during the COVID-19 pandemic in Latvia.

**Methods:** A longitudinal cohort study of symptoms of depression and anxiety in the population of physicians, physician assistants and nurses in Latvia during the COVID-19 pandemic. Symptoms of depression were assessed using the Patient Health Questionnaire-9 (PHQ-9) scale, symptoms of anxiety were assessed using the General Anxiety Disorder (GAD-7) scale, cut-off score for both scales was 10. Initial data was collected on April-May 2020 with a 3 month follow-up.. Data was analyzed using SPSS- Related-Samples McNemar test.

**Results:** 348 physicians were initially included (women 83,9%, mean age 45,17±14,02) and 376 physicians assistants and nurses (women 88,2%, mean age 39,99±12,97). After the 3-month follow up 189 physicians (women 88,40%, mean age 45,01±13,57) and 141 physicians assistants and nurses were left (women 88,00%, mean age 39,96 ±12,59). During the 3 months symptoms of depression among physicians rose from 26,80% (n=94) to 27,5% (n=52), symptoms of anxiety from 17,70% (n=62) to 20,6% (n=39). Depression symptoms among physician assistants and nurses dropped from 25,50% (n=96) to 23,9% (n=34), symptoms of anxiety stayed almost the same 18,20% (n=68) to 18,30% (n=26). Symptoms of depression among physicians changed from 26,80% (n=94) to 27,5% (n=52), symptoms of anxiety from 17,70% (n=62) to 20,6% (n=39), changes were not statistically significant (p=0,281; p=0,725). Symptoms of depression among physician assistants and nurses changed from 25,50% (n=96) to 23,9% (n=34), symptoms of anxiety from 18,20% (n=68) to 18,30% (n=26), changes were not statistically significant (p=0,405; p=0,664).

**Conclusions:** No change in the dynamics of symptoms of depression and anxiety among health care workers over a 3-month period during the COVID-19 pandemic in Latvia was observed.

**Keywords:** physicians mental health; health care workers; Depression; Anxiety

### EPP0310

#### The psychological burden of long-term care facilities personnel during the SARS-COV-2 pandemic – a national survey in Poland.

A. Senczyszyn<sup>1\*</sup>, K. Lion<sup>2</sup>, D. Szcześniak<sup>1</sup>, E. Trypka<sup>1</sup>, J. Mazurek<sup>3</sup>, M. Ciulkowicz<sup>1</sup>, K. Fila-Witecka<sup>1</sup>, M. Pawłowski<sup>1</sup>, M. Łuc<sup>1</sup>, M. Maćkowiak<sup>1</sup> and J. Rymaszewska<sup>1</sup>

<sup>1</sup>Department Of Psychiatry, Wroclaw Medical University, Wroclaw, Poland, Wroclaw, Poland; <sup>2</sup>Menzies Health Institute Queensland, Griffith University, Nathan, Australia and <sup>3</sup>Department And Division Of Medical Rehabilitation, Wroclaw Medical University, Wroclaw, Poland

\*Corresponding author.

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**Introduction:** The high COVID-19 morbidity and mortality are observed among residents in long-term care facilities (LTCF) worldwide. Employees of LTCF, who are facing a critical epidemiological situation endangering the vulnerable residents, are exposed to pandemic's psychological consequences daily.

**Objectives:** The main aim of this study was to assess psychological consequences (somatic symptoms, anxiety and insomnia, social dysfunction, and depression) among LTCF employees exposed to the SARS-CoV-2 pandemic crisis. Moreover, we investigated if factors such as: personal protective equipment (PPE) availability, safety guidelines or access to psychiatric and psychological support at the workplace, correlated with the level of psychological distress experienced by personnel.

**Methods:** A cross-sectional study was conducted among personnel of LTCF in Poland. The survey consisted of the sociodemographic section, the authors' questionnaire with questions related to COVID-19 exposure, working conditions, access to PPE and mental health services, GHQ Questionnaire-28.

**Results:** show that access to PPE (P= .018), to workplace safety guidelines (P= .031), psychological support at workplace (P<0.01), fixed shift schedule (P= .05) and feeling that the right number of staff are employed in the workplace (P= .009), were related to the lower severity of psychopathological symptoms evaluated with the GHQ-28.

**Conclusions:** The study indicates an evidence that LTCF personnel are susceptible to the development of anxiety, depression, insomnia and social dysfunction during the pandemic crisis. However, these can be modified by: access to PPE, safety guidelines and psychological support. Findings from this study lay a basis for effective interventions aiming to support psychological health within this group.

**Keywords:** COVID-19; long term care facilities; Psychological Distress

### EPP0311

#### Smart care facilities space for employees

E. Abbasian\*

Architecture And Environmental Design, Iran University of science and technology, tehran, Iran

\*Corresponding author.

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