

specific levels of cannabis consumption. This talk will overview a number of international initiatives to improve the current metrics of cannabis use.

The Standard THC Unit was created to objectively measure cannabis potency across all products, mode of administration, jurisdictions, contexts and over time.

To build upon the notion of the Standard THC Unit, additional multidisciplinary, international consensus based frameworks have been created.

One such ongoing initiatives, seeks to reach expert consensus on how cannabis potency should be reported in cannabis products in order to clearly and effectively inform consumers. The talk will overview preliminary results of the Delphi.

A similar Delphi methodology was used to establish internationally agreed-upon minimum standards to measure cannabis consumption in research (iCannToolkit), the results of which will be outlined.

Overall, it is imperative for cannabis researchers to join forces with multidisciplinary experts in order to improve metrics of use to inform consumers, general practitioners, researchers and public health experts on the harms and benefits associated with cannabis use.

Disclosure of Interest: None Declared

WS0011

Implementation of the self-sufficiency matrix (SSM) to support diagnosing people with complex social needs at the Social Services of Catalonia

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Abstract: The Department of Social Rights of the Generalitat de Catalunya considered using a unique tool to identify people with complex social needs at Social Services centres and to support the diagnosis processes. After conducting a thorough search and selection process for various tools, the self-sufficiency matrix (SSM), a Dutch tool, was ultimately chosen.

The tool was adapted to the Catalan context through a transcultural translation process, which included a pilot and validation process. This resulted in the creation of the Catalan matrix (SSM-CAT).

A comprehensive implementation program was defined to start the adoption of the tool at basic social services. This program included training trainers and providing online training with practical cases. The implementation process was accompanied by support and monitoring to ensure success.

Through this process, over 3,468 professionals (including 334 trainers) received training on the self-sufficiency matrix, and 31,354 individuals who received basic social services in Catalonia were evaluated. In Barcelona, a more thorough monitoring of the implementation was conducted, assessing a representative sample of the care provided (6,916 individuals attended) generating a more

accurate description of the situation of the people attended by social services in the city of Barcelona.

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WS0012

Innovation in the treatment, interventions and systems of care for opioid use disorder: opportunities to understand multimorbidities

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Abstract

Introduction: Opioid use disorder is still the main presenting illicit substance use disorder that patients present within Addiction and Mental Health Services even though the majority of the patients are polysubstance users. Innovation in the field will allow providers to understand better how systems work to support a population with physical and psychological morbidities

Method: We will present novel narratives in describing:

1. Standards and principles
2. Pharmacology
3. Delivery systems
4. Neuroscience based interventions
5. Systems and implementation

Results and Discussion: The above descriptors will allow a landscape that is less stigmatising and better in responding to the needs of the people who are highly stigmatised and multidisadvantaged.

Disclosure of Interest: None Declared

WS0013

Organized professional response to a large-scale disaster: Earthquakes in Türkiye

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Abstract: In February 2023, a series of earthquakes with high magnitudes affected 11 cities in Türkiye, a region with a population of over 13 million. With more than 50000 recorded deaths and more than 3 million survivors replaced, rescue and recovery efforts were challenging. The Psychiatric Association of Türkiye (PAT) immediately launched a “Disaster and Crisis Management,” which urgently formed and installed a program for psychosocial support and psychiatric care. The program included immediate, medium, and long-term actions. Hundreds of recruitments followed a call for volunteers for on-site and online support. An online “Earthquake and Mental Health” library was launched immediately, and a series