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Aims. Compared with the general population, people with mental health disorders are at increased risk of negative physical and mental health outcomes following SARS-CoV-2 infection. In the UK, all adult mental health in-patients were offered COVID-19 vaccination as a priority group. Patients admitted to medium secure care have greatly increased mortality compared with the general population. Understanding COVID-19 vaccine uptake, and reasons for refusal, in patients in medium secure hospitals is important given the high prevalence of chronic physical health comorbidities such as obesity and diabetes, as these conditions are also associated with poor clinical outcomes in COVID-19 disease. Aims: To assess the proportions of patients who accepted or declined the COVID-19 vaccine, and explore their reasoning. To examine vaccine uptake between White and Black Asian minority ethnic (BAME) patients, and between younger/older patients.

Methods. The study took place at a medium secure hospital with male and female inpatients. All patients were offered a COVID-19 vaccine, and had a capacity and physical health evaluation completed by their Consultant Forensic Psychiatrist.

Results. Data regarding capacity to consent to the vaccine, acceptance/refusal, and demographics were retrospectively collected from the clinical records. In total, 85 patients (92.4% of eligible patients) had capacity to decide if they wanted the COVID-19 vaccine. Of these 68 (80.0%) consented and 17 (20.0%) declined to consent.

A similar proportion of patients aged under and over 40 years old consented. Those from a BAME background were more likely to decline than White British patients. The reasons for capacitous refusal appeared similar to the general population.

Conclusion. COVID immunisation was broadly acceptable for patients in medium secure hospitals. The prevalence and reasoning of capacitous refusal appears similar to the general English population.

The indication that BAME patients were more likely than White patients to decline the vaccination echoes the findings of research conducted in the Leicester general hospital. Further consideration needs to be given to how the uptake of COVID-19 vaccination can be improved in people with BAME ethnicity, especially as this group is also overrepresented in secure hospital settings.

The study demonstrates that similar services should be able to approach the vaccination process with confidence. As many people with severe mental disorder also have high physical comorbidity that would increase the risk of a poor clinical outcome if they contracted COVID-19, protecting this vulnerable population through vaccination must be a priority for mental health services.

Exploring Mental Health Patient's Perceptions and Aspirations in Employment

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doi: 10.1192/bjo.2022.218

Aims. To explore mental health in-patient's perceptions and aspirations in employment and to produce a lay document on employment

Methods. Employment is beneficial, it improves mental health and betters social integration. Different interventions exist to support mental health patients into employment. However, patients experience many obstacles, including the characteristics of their condition and stigma.

Literature review was undertaken, using a search string on PubMed focusing on mental health and employment.

Developed and used a 17-question questionnaire exploring patients' perceptions and aspirations in employment

Created lay document containing information on benefits of employment, employment rights and accessing employment.

Results. 100% of patients interviewed were interested in employment. 90.9% believed employment would improve their mental health and 100% believed it would improve their connection to their community. 100% felt there is a stigma around mental health problems which makes finding employment harder.

Conclusion. The barriers mental health patients seeking employment face are varied and complex. Most wish to seek employment, and should be encouraged, as the health benefits are clear. Professionals need to acknowledge individual barriers patients face including different mental health characteristics, ethnicity, gender and personal circumstances and find a way to create a bespoke service tailored to patients' needs in order to secure employment.

The Impact of the COVID-19 Pandemic on the Incidence of First Episode Psychosis in South London

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doi: 10.1192/bjo.2022.219

Aims. Transmission of the severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) has led to a global pandemic. Many studies are underway to ascertain the mental health impact of this seismic event, however no study has investigated its effect on psychosis incidence. We hypothesise that the overall crude incidence rates of first episode psychosis (FEP) will be higher during the pandemic when comparing the same area of South London in defined pre-pandemic and pandemic time periods.

Methods. Clinical records for all patients aged 18 to 64 years presenting to early intervention in psychosis services in the London boroughs of Southwark and Lambeth between July 1st 2019 to December 31st 2019 (pre-pandemic period) and July 1st 2020 to December 31st 2020 (pandemic period) were extracted from the Clinical Record Interactive Search (CRiS), an online database containing anonymised patient records. All patients were manually screened using the Screening Schedule for Psychosis to confirm FEP, with 104/235 cases meeting criteria for FEP in the pre-pandemic period compared with 158/376 in the pandemic period. Crude, age-standardised, and sex-standardised incidence rates and ratios were calculated for interpretation.

Results. The crude incidence rate of FEP was significantly higher in the pandemic period (68.3, 95% CI:[57.6; 78.9]) than the prepandemic period (44.9, 95% CI:[36.3; 53.6]). The crude incidence ratio was 1.52 (95% CI:[1.28; 1.77]), indicating that the overall crude incidence of FEP in the pandemic period was significantly higher (52%) than in the pre-pandemic period. The directionality and statistical significance of this ratio was unperturbed by standardisation for age (SIR = 1.45, 95% CI[1.23; 1.70]) and sex (SIR = 1.56, 95% CI[1.33; 1.83]).

Conclusion. Our results suggest that the COVID-19 pandemic has had a significant impact on the incidence of FEP in the South London boroughs of Southwark and Lambeth. Further research is required to elucidate the factors contributing to this

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increase to inform targeted interventions and prevent deterioration in at-risk patients.

Prevalence of Workplace Bullying in the Syrian Graduate Medical Education System During COVID-19 Pandemic and Civil War: A National Cross-Sectional Study

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doi: 10.1192/bjo.2022.220

Aims. Workplace Bullying (WPB) is a severe stressor that can negatively impact an individual's physical and psychological health. WPB, a type of occupational violence, is the third leading cause of death in the workplace worldwide. This study delivers an estimated prevalence of bullying among healthcare practitioners in the Syrian graduate medical education system and to explore its prevalence within socio-demographic subgroups.

Methods. A cross-sectional study was conducted in Damascus, during the Syrian war crisis. A total of 478 residents and fellows fully completed the survey. Respondents completed questions regarding socio-demographic information and workplace bullying. **Results.** Of 478 respondents, 267 (55.9%) were males. The majority (89%) reported being subjected to workplace bullying, and (92%) of them witnessed their colleagues being bullied. Supervisor/attendings (45%), and peer/resident (40%) were the most frequent source of perceived bullying followed by supervisor/consultant (34.5%), and Patients (33.5%). Attempts to belittle and undermine work 434 (90.7%) was the most frequently reported bullying behavior. Specific bullying behaviors were more reported by males, \leq 170 cm height, \geq 25 BMI kg/m2, and postgraduate year 1 (PGY) participants. Credible published national data regarding the number of Syrian medical residents are not available to evaluate the representativeness of our sample. Conclusion. Many participants reported experiencing bullying in the Syrian graduate medical education programs. Enforcing antibullying policies, closely monitoring work environments, and encouraging anonymous reporting of workplace bullying, is crucial to eliminate these behaviors in the healthcare system. A longitudinal study should be conducted to gain more knowledge and insight into workplace bullying among healthcare practitioners.

A Prospective Cohort Study to Assess Neonatal Adaptation in Neonates Exposed to Psychotropic Medications in Utero

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doi: 10.1192/bjo.2022.221

Aims. We aimed to compare the NAS in neonatal exposed to antidepressants to unexposed neonates.

Methods. A prospective cohort study was carried out comprising of women in 3rd trimester of pregnancy, data were collected on women exposed and unexposed to antidepressants. Approval from the Rotunda Hospital REC was obtained.

Hospital records were used to collect pre-, peri- and postnatal information which was relevant to the study Aim. Neonatal Abstinence Score was completed within 0–48 hours of the birth, Moderate-Severe abstinence was defined as eight points or higher (on a scale with maximum 40 points), mild abstinence as 4 points or higher. Paediatric records were reviewed where the baby required NICU admission. Women were recruited between 2019–2021

Results. 221 women in total were recruited,138 pregnant women were on no psychotropic medication (Control group) and 83 pregnant women were on antidepressant medication (exposed group).

In the exposed group, 46% (38/83) were on Sertraline,19% (16/83) fluoxetine, 17% (14/83) Escitalopram and 17% (14/83) on other SSRI/SNRI.

Six infants (3%) expressed signs of severe abstinence and 38 (28%) had mild abstinence symptoms in exposed group whereas in control group 10 (7%) of infants were observed to have mild abstinence which was seen in infants with low birth weight, poor feeding and poor sleep after feed. Neonatal hypoglycaemia in infants prenatally exposed to antidepressant was seen in 10% compared to 1% of control group.

Conclusion. Severe abstinence in infants prenatally exposed to antidepressants was found to be (3%) and mild abstinence in 28% this is in keeping with international findings. Low one minute APGAR sores and greater rates of hypoglycaemia were also noted.

While neonatal withdrawal with all antidepressants are usually mild and self-limiting it is important to make the obstretric and neonatal teams aware of the mothers medication and mothers should be advised that their baby may need a review by neonatology after delivery.

Insight Into Illness Among Inpatients in a Forensic Service - a Study From Dundrum Hospital as Part of the Dforest Study

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doi: 10.1192/bjo.2022.222

Aims. We endeavoured to ascertain if using a specific tool rating insight adds benefit over and above the insight ratings on violence risk assessment or recovery based tools currently in use and to see if they may be helpful in guiding clinical decision making.

Methods. A cross sectional study of 104 forensic in-patients was completed. All current inpatients were rated for self-rated and clinician-rated insight using the VAGUS tool, a validated and reliable measure of insight into psychotic symptoms. All participants completed the self-rated scale independent of the clinician to avoid bias. Patients were also rated with the HCR-20, the Dundrum-3 and Dundrum-4, and the PANSS measures. Patients' scores on the VAGUS tool and the other tools were compared to ascertain if any correlations could be identified.

Results. Higher scores on the VAGUS tool were associated with a greater degree of insight into psychotic symptoms. Clinician and