EPP0068

Emotional competence of nurses and therapeutic communication towards the person with manifestations of mental disorder

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Introduction: Emotional competence is fundamental in the communication that nurses establish with the people they relate to, and therapeutic communication is a crucial tool in nursing care.

Objectives: This study aimed to understand the influence of nurses' emotional competence in therapeutic communication with people with manifestations of mental disorder in a portuguese general hospital.

Methods: A descriptive-correlational and transversal study was performed. The sample consisted of 171 nurses from a general hospital in the Azores. Data were collected between May and July 2021, using an instrument that includes the sociodemographic and professional questionnaire, the Veiga Scale of Emotional Competence–Reduced version [EVCE-Reduced] (Veiga-Branco, 2021) and the questionnaire "Therapeutic communication: use by nurses" (adapted from Coelho, 2015).

Results: Nurses, mostly female, aged between 31 and 40 years, show moderate levels of emotional competence. Specialized nurses with more time in professional practice demonstrate to be more emotionally literate. The EVCE-Reduced demonstrates good internal reliability. Self-motivation was the most predictive capacity of emotional competence, and self-awareness the capacity with the highest average. Three communication profiles were delineated, with Profile 1 (Nurse centered on the person and on themselves) the most representative. Although there is no correlation between emotional competence and therapeutic communication, it was evident that the more empathetic nurses perceive themselves, the more they use therapeutic communication techniques; and the better they manage emotions, the more they mobilize therapeutic communication techniques and attitudes towards people with manifestations of mental disorder.

Conclusions: In view of the results, it is important to deepen the way in which therapeutic communication and emotional competence are manifested in professional practice, what facilitates or inhibits its expression, and how its development can be enhanced. In this sense, health institutions must implement actions for the education and training of nurses, through the contribution of specialized practice in Mental Health Nursing, allowing for the improvement of emotional literacy and performance in work contexts.

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EPP0070

Organizational features of mental health facilities and adequacy of treatment. Multilevel analysis from the italian region lombardy

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Introduction: Mental healthcare represents a significant issue for the Healthcare System [1]: one of the major causes is the high heterogeneity in the provision of care, due to the differences among the Departments of Mental Health (DMHs).

Objectives: To identify the predictors of an adequate treatment for patients with severe mental disorders (SMDs), both at an individual and structural level, the latter considering the major features of the Psychiatric Operative Units (POUs), in the Italian region Lombardy.

Methods: Healthcare Utilization Databases, collecting data on the services provided to beneficiaries of the National Health Service (NHS), have been used to retrieve data.

Patients that during 2015 were resident in Lombardy; suffered from depressive, bipolar or schizophrenic disorder; were in contact with the DMHs, have been identified.

Adequateness of treatment has been evaluated according to the Minimally Adequate Treatment (MAT) [2,3]: a combination of psychiatric visits and specific pharmacological treatment, or psychotherapeutic sessions. Having received a MAT has been assessed during a one-year period.

Predictive factors have been classified into two hierarchical levels: individual (first) level and structural (second) level. At the first level, clinical and socio-demographics characteristics have been evaluated for each patient. At the second level, the organizational structure of each POU has been examined: the number of patients taken in care, number of community-care facilities, and hours worked by each class of healthcare providers (psychiatrists, nurses, psychologists, psychosocial staff).

A log-binomial model has been used to evaluate the association between the first-level factors and having received a MAT; a multilevel log-binomial model for the second-level factors considered the hierarchical structure of data.

Results: 72115 patients have been identified: 33974 (47.1%), 28407 (39.4%) and 9734 (13.5%) suffering from depressive, schizophrenic or bipolar disorder respectively; 45.4% of them (32773 patients) received a MAT.

Compared with patients affected by depression, those with bipolar or schizophrenic disorder show a higher probability of receiving a MAT (+23%, +11% respectively).

Patients living alone have a lower probability of receiving a MAT, unlike patients with a higher level of education or employment, underlining the social burden related to SMDs.

Organizational features have proven significant: centres with a higher activity volume and with more community-care facilities seem more likely to guarantee MAT. Moreover, the higher the hours worked by psychiatrists, nurses and psychologists, the higher the probability of providing MAT. **Conclusions:** Patients with SMDs are still untreated in an appropriate way. Results highlight the importance of the community-care facilities, as well as of the composition of the multidisciplinary teams working there.

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EPP0071

What are the fundamental ways that psychiatric services should engage with carers and family?

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Introduction: When mental health service providers, service users and their carers/family are successfully integrated, widespread benefits will flow to all stakeholders. However, mental health services do not commonly engage with carers or family.

Objectives: This presentation describes (a) an extensive review of the literature and (b) empirical research with carers and family about what they received and wanted from engagement with mental health services.

Methods: A mixed method online survey asked 134 family members and carers what they received and what they wanted from mental health services. Participants also quantified the importance of seven hypothesised core practices on a 0-100 point likert scale. **Results:** Almost 250 verbatim responses were deductively matched against hypothesised engagement practices from the literature, with additional unaligned responses inductively categorised. The findings triangulate with multiple diverse literatures to confirm seven fundamental engagement practices that carers and family want from health services. Conceptually, these practices are represented by two broad overarching practice themes of (i) meeting the needs of the family member and (ii) addressing the needs of the service user.

Conclusions: Policy, clinical practice, training and future research might encompass these core practices along with consideration of the intertwined relationship of family, carers and the service user suggested by the two broader concepts.

Disclosure of Interest: None Declared

EPP0072

Capacity of the health facilities to manage Alzheimer's and related dementia diseases in Mukono district: Challenges and recommendations

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Introduction: With the projected increase in the number of older persons in both low and middle-income countries, the burden of Alzheimer's and related dementia diseases (AD/ARDs) is projected to increase as well. However, the health systems are inadequately

prepared to offer optimal care for patients with AD/ARDs, despite the growing disease burden.

Objectives: The aim of this study was to assess the capacity of the health facilities to optimally manage Alzheimer's and related dementia diseases in the Mukono district

Methods: We conducted a cross-sectional between August and December 2018. A survey of 32 facilities (3 hospitals, 2 health center IV (HCIV), 15 health center III (HCIII) and 6 health center II (HCII), and 6 Private health facilities) in Mukono district. We conducted a thorough assessment of medical records, interviewed heads of the facilities, and a questionnaire was administered to 46 health workers. The study assessed the service provision for AD/ARDs, Knowledge of AD/ARDs management, challenges, and opportunities.

Results: Out of 32 health facilities assessed, 4 in 10 (42%) facilities reported managing (diagnosing/treating) clients with AD/ARDs, and the majority (90.2%) were run by Non-Physician Health Workers (NPHW). Only 2 in 10 had guidelines for managing AD/ARDs. Less than half (46.4%) had AD/ARDs medicines in stock (mainly Haloperidol) and all of the private facilities lacked essential medicine to treat AD/ARDs. All health center IIs lacked drugs for AD/ARDs. A significant knowledge gap in assessing and diagnosing AD/ARDs was observed among all the health workers. All health workers highlighted the need for additional training in AD/ARDs. A multitude of client and health provider challenges were observed in this study

Conclusions: Health facilities in Mukono district are inadequately prepared to offer optimal services for the management of AD/ARDs. AD/ARDs drugs, knowledge gap, and human resources for health presented a great challenge. In order to address the inadequately capacity to manage AD/ARDs, emphasis should be dwelt on strengthening the health facilities.

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Old Age Psychiatry 01

EPP0073

Accessability to mental health services during pandemic period

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Introduction: A try to protect people diagnosed with dementia, from the COVID virus, during pandemic period could easily lead to isolation and hinder them to reach the needed medical care.

Objectives: Research question refer to accessibility during pandemic to psychiatric services of patients with dementia.

Methods: The consultations of patients with dementia of an outpatient setting where analyzed before (2019-2020) and during pandemic (2020-2021). We evaluate the consultations frequency, characteristics of patients, comorbidities and treatment changes. **Results:** A total number of 965 consultation (493/472) were analyzed. There was no statistically significant difference between the