

Results: Of the 95 in-patients, 92 patients agreed to participate. The majority were male (89%). The most common diagnosis was schizophrenia (71.7%). Mean age was 44.7 years (SD 11.42), and 58.2% met criteria for obesity. Of the total group, 47 patients met criteria for 'pre-frail' and 10 met criteria for 'frail' using Fried criteria.

Conclusions: This is the first study examining frailty in a cohort of patients in secure forensic settings. We found high rates of patients meeting frailty criteria at very young ages. Rates of frailty in this group were comparable to those found amongst elders in community settings. We consider this demonstrates significant medical vulnerability in this patient group.

Disclosure: No significant relationships.

Keywords: Frailty; psychiatry; comorbidity; forensic

EPP0711

One Year of Peer Support Work in Forensic Mental Health – Evaluation of Implementation

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Introduction: Peer Support Work can be an effective way to support patients and their participation also in psychiatric populations. Unlike in general psychiatry there is less experience with peer support work in forensic mental health inpatient settings. Characteristics different from general psychiatry, e.g., regarding safety, might be a reason for the delay of their implementation.

Objectives: We aim to present the implementation of a peer support worker in a forensic mental health setting for addicted offenders. We address reservations of staff before the implementation and their development during the first year. The perspective of patients about their experiences is taken into consideration. The development of the peer support workers position and tasks is demonstrated.

Methods: Focus groups and interviews were conducted with several groups of people, amongst them employees of several professions, patients and the peer support worker of the clinic. Interviews and focus groups were recorded and transcribed for thematic analysis.

Results: Reservations of staff comparable to these found in general psychiatry occurred in the forensic mental health professionals. These could be diminished during the first year. Most of the patients were able to accept and trust the peer support worker, in some cases after initial mistrust. The peer support worker felt accepted in the team and was able to develop a routine as well as own tasks.

Conclusions: The experiences from one year testified that implementation of peer support work into a forensic mental health inpatient setting is possible. Further patient outcomes are to be explored but the current results are promising.

Disclosure: No significant relationships.

Keywords: Peer Support Work; Compulsory Treatment; Addicted Offenders; Forensic Mental Health

EPP0712

Experiences and attitudes of mental health care staff to the reporting of violence in the workplace in the Republic of Ireland

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Introduction: The WHO and the Violence Prevention Alliance define violence as “the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation.” The types of violence examined in this study include physical, sexual, verbal and racial as the most commonly reported manifestations of violence in the workplace.

Objectives: To obtain the most recent statistics on violent acts perpetrated against mental health care workers in the Republic of Ireland. To capture the experiences and attitudes of staff to the reporting of this violence.

Methods: The State Claims Agency (SCA) were contacted to obtain the most up to date figures on violence against mental health care workers. An electronic survey based on the WHO's validated questionnaire on violence was then disseminated to all acute psychiatric units nationally.

Results: There were 6,690 episodes of violence against staff in the Mental Health Division in 2018 and 2019. The survey found, 92.4% of respondents reported verbal abuse, 30.3% recorded physical assault, 15.2% had suffered sexual violence in a 24 month period. 20.3% of study participants took no action. Of those who did, 70% felt that the incident had not been investigated properly. More than half of respondents felt that there were no consequences to the aggressor.

Conclusions: Further work is needed in the prevention of workplace violence as well as improvements in reporting and investigating of incidents when they do occur.

Disclosure: No significant relationships.

Keywords: violence; Workplace; reporting violence; mental health

EPP0714

Decision-making capacity regarding healthcare, welfare and finances in a secure forensic setting

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Introduction: Impairment in decision-making capacity is a serious consequence of executive dysfunction secondary to serious mental disorders like schizophrenia. Functional mental capacity (FMC) refers to an individual's ability to make and communicate legally