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Aims. Ward rounds are complex clinical interactions crucial in delivering high-quality, safe, and timely patient care. They serve as a platform for the multidisciplinary team to collaboratively assess a patient's condition and actively involve the patient and their caregivers in shared decision-making to formulate a care plan. Ward rounds involve an intersection of factors worthy of consideration separate from the wider literature on inpatient experience and multidisciplinary team meetings. With this review our primary aim is to systematically identify what methods and perspectives researchers are using to understand ward rounds.

Methods. The databases searched were Medline, CINAHL, British Nursing Index, PsychInfo, and ASSIA as well as reference and citation checking. The search terms used were *psychiatr** AND (*ward round* OR "*multi disciplinary team meeting*" OR "*clinical team meeting*"). Studies were included if they were peer reviewed, included primary research on psychiatric inpatient ward rounds in which patients are participants with no restriction on the type of ward or hospital, patient group, country or methodology.

Results. 224 records were retrieved and screened from the database search and 10 from other sources. 35 full texts were reviewed for eligibility and 26 included in the review. 16 studies had no particular theoretical perspective, 2 were constructivist, 2 critical realist, 2 lean methodology, 1 systems research, 1 phenomenological, 1 trauma informed and 1 critical theory. 9 focussed on patient experience, 5 ward round structure, 3 on power relationships, 3 on efficiency, 2 on shared decision making and 4 had a unique focus. Though often not explicit, critical theory influenced discussion of power is common in papers focused on patient experience and ward round structure. Cross-sectional surveys, interviews, focus groups and audit cycles were the most common methods. Key themes which emerge are anxiety provoked by ward rounds, preparation and communication, and the negotiation of power structures. Key tensions identified include being multidisciplinary versus overcrowding, efficiency versus personalisation and reliability versus responsiveness.

Conclusion. For a central part of inpatient psychiatric practice there is a limited range of research on psychiatric ward rounds. The influence of critical theories' focus on power was widespread with limited representation of other theoretical perspectives and concerns. There was no research using experimental methods, but there was some implementation research. Key tensions are highlighted which services may wish to consider when revisiting ways of working on inpatient psychiatric wards.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

Systematic Review of Cultural Expressions of Depression in African Communities; Implications for Service Provision

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Aims. This review delves into the understanding of depression within African communities, extending its scope to nations with

significant African populations, aiming to enhance service provision for these patients. While focusing on cultural experiences of depression that transcend geographical boundaries, it builds upon existing literature predominantly centred on sub-Saharan African countries.

Methods. A comprehensive literature search was conducted across multiple databases, yielding 13 relevant articles after applying stringent criteria. Following Cochrane guidelines, search terms encompassed population (Africa, Africans, African communities), exposure (Depression, Depressive disorder, Dysphoria, Dysthymia, Low mood), and outcomes (Cultural expressions, Cultural variations, Somatization, Cultural framework, Cross-cultural research, Service provision).

Results. Analysing selected articles through the CASP checklist, a narrative synthesis of qualitative studies over the past twelve years elucidated diverse perceptions and expressions of depression in African communities compared with Western contexts. Three major themes emerged: Expressions of depression (with sub-themes: Attitudes towards depression), Perceptions of depression (including Stigmatization), and culturally acceptable forms of treatment (including Barriers towards treatment).

Conclusion. The review underscores the significance of integrating culturally acceptable treatment methods into psychological therapy for improved healthcare delivery. Collaboration between clinicians and patients is pivotal, with religious assistance emerging as a culturally acceptable treatment avenue. Establishing therapeutic alliances with religious communities could enhance treatment effectiveness. Further research is warranted to explore the impact of religious activity on depression symptoms and progression, as well as the influence of mental health providers' religious backgrounds on treatment dynamics. This holistic approach is crucial for addressing the unique cultural nuances surrounding depression in African communities and optimizing patient care.

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Do AI Chatbots Incite Harmful Behaviours in Mental Health Patients?

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Aims. The contribution of mental illness towards total Disability Adjusted Life Years is increasing according to the Global Burden of Disease study. As the need for mental health services increases, technological advances are being deployed to improve the delivery of care and lower costs.

The emergence of Artificial Intelligence (AI) technology in mental health and companionship is an evolving topic of discussion. There have been increasing debates about the use of AI in managing mental health problems. As the AI technology and its use grows, it is vital to consider potential harms and ramifications.

There are very limited discussions about the use of chatbots and relevant AI by humans to commit crime especially in those suffering from mental illness. AI can potentially serve as an effective tool to misguide a vulnerable person going through a mental health problem e.g. encourage someone to commit a serious offence. There is evidence that some of the most used AI chatbots tend to accentuate any negative feelings their users already had