

healthcare are an essential part of transforming health systems. Simulation training is one tool by which such training can be delivered, in contrast to traditional teaching methods. However, simulation training can be high-cost and clarity over the impact is required.

Aim To compare simulation training for integrating mental and physical health to role-play and didactic teaching, on their effect on confidence, knowledge, and attitudes of participants.

Methods Participants in simulation training ($n = 24$) and role play plus didactic teaching ($n = 87$) both completed self-report measures of confidence and knowledge in working with mental and physical health needs, as well as the Readiness for interprofessional learning scale (RIPLS) collecting attitudes towards interprofessional collaboration. All participants also completed post-course qualitative feedback form with open questions.

Results T-tests found statistically significant increases in confidence and knowledge following both educational interventions. T-tests showed statistically significant increases in attitudes to interprofessional collaboration (RIPLS) following simulation training, while there were no statistically significant changes after role-play and didactic teaching. Thematic analyses of post-course open questions demonstrated differing learning outcomes.

Conclusions Simulation training appears to have a different and beneficial impact to role play and didactic teaching alone, when training participants on integrating mental and physical health.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.941>

EV0612

Mental health simulation training in psychiatric skills for police and ambulance service personnel

C. Attoe*, M. Fisher, A. Vishwas, S. Cross
South London & Maudsley NHS Foundation Trust, Maudsley
Simulation, London, United Kingdom

* Corresponding author.

Introduction UK healthcare policy has highlighted a shift in mental health services from hospital to community, stressing the importance of training for professions not traditionally associated with healthcare. Recommendations have been made to introduce training for the police force designed with experts. Similarly, the value of further training for ambulance clinicians in assessing mental health, capacity, and understanding legislation has been highlighted.

Aims To investigate the effect of simulation training on the confidence, knowledge, and human factors skills of police and ambulance service personnel in working with people experiencing mental health conditions.

Methods On completion of data collection from 14 training courses, approximately 90 police and 90 ambulance personnel ($n = 180$) will have completed the human factors skills for healthcare instrument, confidence and knowledge self-report measures, and post-course qualitative evaluation forms. A version of the hfshi for non-clinical professions will hopefully be validated following data collection. Results will also be compared by profession.

Results Analyses have not been fully completed, although preliminary statistical analyses demonstrate promising findings, with increases post-course for human factors skills, confidence and knowledge. Furthermore, qualitative feedback initially illustrates valuable learning outcomes and interesting findings from comparisons by professions.

Conclusions Mental health simulation training appears to have a promising impact on the confidence, knowledge, and human factors skills of police and ambulance personnel for working with people experiencing mental health conditions.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.942>

EV0613

A Proposal of an innovative program for informal caregivers of patients with mood disorders

J. Cabral^{1,*}, C. Barreto Carvalho¹, P. Castilho Freitas², C. Pato³

¹ University of Azores, Social sciences and humanities, Ponta Delgada, Portugal

² University of Coimbra, Psychology and science education, Coimbra, Portugal

³ SUNY Downstate Medical Center, College of Medicine Suny Downstate, New York, USA

* Corresponding author.

Introduction Intervention with informal caregivers (IC) of psychiatric patients is internationally recognized as relevant and a priority. However, the existing responses in this area are still insufficient, especially regarding caregivers of individuals with mood disorders (MD). Mindfulness and compassion focused therapy have proven to be an effective approach in stress reduction and in improving emotional and social well-being of caregivers of patients with other conditions. However, no studies testing these new approaches in IC of patients with MD have been carried out. The objective of this work is to present a research project that aims to develop, implement and empirically test the effectiveness of an innovative group program to help informal caregivers of individuals with mood disorders to cope with the negative impact of the disease and reduce caregiver burdens.

Methods The design of this experimental study to test the program's efficacy is a non-randomised controlled trial (nrct) with 12 months follow-up, with a mixed assessment methodology (quantitative and qualitative analysis). A sample of 60 informal caregivers of individuals with chronic MD will be constituted ($n = 30$ Control group; $n = 30$ Experimental group).

Results We expect the program to promote significant changes in participants in terms of several emotional variables (eg: burden, stress, resilience, compassion and quality of life).

Conclusions Further efforts to continue studying the impact of interventions in caregivers should be carried out, as a way to improve the quality of life of caregivers and their ability to provide informal care to MD patients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.943>

EV0614

Help-seeking for sleep problems among psychiatric outpatients

S. Chang*, E. Seow, Y.W. Lau, S.A. Chong, M. Subramaniam
Institute of Mental Health, Research Division, Singapore, Singapore

* Corresponding author.

Introduction Though sleep disturbances are common among psychiatric patients, some patients may trivialize their problem and not discuss it with their doctors. This study thus aimed to assess patient profile that is associated with help seeking for sleep problems among psychiatric patients.

Methods Outpatients from a tertiary psychiatric hospital were recruited for this study ($n = 400$). The pittsburgh sleep quality index was administered to identify cases of probable insomnia, and daytime impairment due to sleep disturbances was recorded. Participants were asked if they have ever consulted a doctor or any health professionals for their sleep problems. Sociodemographic information was recorded and clinical profile was obtained