Conclusions: Hospital discharge summaries are essentially the main communication link between hospitalists and general practitioners to ensure continuity and future care of patients. Delirium diagnosis is not always recorded in discharge summaries. This is a risk to be managed. Education is vital to ensure awareness, prevention, early recognition and to ensure recording of diagnosis of delirium.

Keywords: Patient safety; Service improvement; communication; delirium

EPP1117

Reception of patients admitted to a psychiatric unit

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Introduction: The reception of a patient in the psychiatric ward is an important step that determines the proper course of care. The welcome is the first stage of the relationship, it is essential to take the measure of the importance of this moment.
Objectives: Assess psychiatric inpatients' knowledge of their rights and obligations.
Methods: This was a descriptive and cross-sectional study based on a self-administered questionnaire containing about twenty questions (20), which assessed the knowledge of patients hospitalized in the HMPIT psychiatry department about their rights and obligations.
Results: Twenty-five (25) patients agreed to answer the questionnaire and two (2) patients refused. Sixty percent (60%) of the patients were unaware of their rights. Sixty-eight percent (68%) of the patients did not know their duties. Forty-eight percent (48%) of the patients did not know the rules and conditions of hospitalization in psychiatry.
Conclusions: Patients hospitalized in the psychiatric ward have limited knowledge about their rights and duties and about the conditions and rules governing hospitalization. In addition to the poster on patients' rights and duties, a welcome leaflet will provide all the information on the rules of hospitalization.

Keywords: patient admission; quality of health care

EPP1118

Therapeutic isolation in psychiatry

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Introduction: Therapeutic seclusion, consist of locking a patient alone in a room dedicated to this type of care. It poses real questions about respect for fundamental rights, in particular the right to liberty.
Objectives: The objectives of our work were to evaluate the practices of psychiatric doctors and nurses in seclusion.
Methods: Our study is descriptive-based. Using a self-questionnaire, a set of questions about the decision of seclusion, its prescription, its means, its surveillance, the information of the patient and his relatives as well as the characteristic of the seclusion room, were asked. Our target population consisted of medical and paramedical staff working in the HMPIT Psychiatry Department.
Results: Our study covered eleven doctors and fourteen nurses. The average age was 35 years with 52% having more than 5 years of psychiatric experience. Fifty-two percent used seclusion while 72% had no specific training. Twelve (12%) percent felt that no accidents could occur in seclusion. Twenty percent (20%) did not find it necessary to transcribe the monitoring parameters on the medical file.
Conclusions: Our study showed that the psychiatric staff lack sufficient exposure to in the area of therapeutic seclusion. A seclusion protocol has been drawn up to guarantee patient safety.

Keywords: patient isolation; administration and organization

EPP1119

Evaluation of efficiency and quality of the multi-disciplinary team handover process in a mother and baby inpatient setting

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Introduction: At Coombe Wood Mother and Baby unit (MBU) there are daily multi-disciplinary team (MDT) handover meetings and a weekly MDT ward round attended by 7-8 team members. There are concerns that the handover is too time consuming, utilising time which could be spent on other clinical duties, and concerns regarding the relevance of information that is handed over.
Objectives: To perform a service evaluation to determine the efficiency and quality of MDT handover meetings in an MBU setting.
Methods: Data was collected from September to October 2020. A checklist was designed listing information felt to be relevant to handover and contained the following data points – 'current situation', 'mental health', 'level of observations', 'risk', 'physical health', 'baby care', 'baby supervision levels' and 'tasks and responsibilities'. The start and stop times of each MDT handover meeting were noted and a record was made as to whether these topics were discussed.
Results: Mean meeting duration was 32.2 minutes (range: 13 – 45 minutes) and amounted to 2.68 hours spent in MDT handover over a 5-day working week. This equates to 21.4 person-hours (based on 8 staff) a week. 928 data points were generated. 50.7% (468) data points were recorded and commonly omitted data points were – 'tasks and responsibilities', 'risk', 'level of observations' and 'physical health'. On all occasions, 'current situation', 'mental health' and 'baby care' were handed over.
Conclusions: The results of this service evaluation provide compelling evidence for a wider improvement project. Involving MDT staff in designing interventions will make handover meetings more meaningful.

Keywords: service evaluation; safety; handover; quality improvement

EPP1122

Combined therapy of positive interventions and cognitive training for reducing neurobehavioral symptoms of traumatic brain injury: A clinical case

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Introduction: There is a need to study therapies that may contribute to the successful rehabilitation of veterans with traumatic brain injury (TBI) and increase their effective interaction with the stressful environment, reduce the severity of symptoms. Combined short-term therapies may have potential.
Objectives: To analyze the clinical case of combined psychological treatment of TBI in a Ukrainian combat veteran with reduced resilience
Methods: The clinical case of Ukrainian combat veteran with TBI is presented. Montreal Cognitive Assessment (MoCA) was used to assess cognitive domains. Neurobehavioral symptom inventory (NSI) was used to assess neurobehavioral symptoms of TBI. CD-RISC was used to assess resilience. In addition to pharmacotherapy, the patient agreed to undergo a combined program of psychological therapy of 3 short-term positive intervention sessions and 3 cognitive training sessions.
Results: MoCA result prior to treatment was 24 p., NSI – 38 p., CD-RISC – 44 p. (lower than in population). After the combined therapy, the results of the assessment with MoCA were 26 points, NSI was 17 points, CD-RISC – 47 points. Subjectively, the patient noted an improvement in emotional state, better resilience, and a significant reduction in the intensity of cognitive symptoms.
Conclusions: Combining positive interventions with cognitive training can have the potential to significantly improve the neurobehavioral and cognitive functioning of war veterans with traumatic brain injury, and also possibly increase resilience. Further research in this direction will be conducted to obtain more reliable results.

Keywords: positive interventions; combined therapy; traumatic brain injury; cognitive training

EPP1123

Achievements and problems of psychosocial rehabilitation: Results of sociological research in the volga federal district

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Introduction: The active development of psychosocial rehabilitation (PSR) has been taking place in Russia within latest two decades. In this regard, analysis of the accumulated experience and problems' identification in the PSR field is relevant.
Objectives: Conducting a sociological study in the Volga Federal District (VFD) to work out measures for further PSR system development.
Methods: Sociological, statistical, original semi-structured questionnaire on PSR application, including 26 questions.
Results: 63 institutions providing psychiatric care in 14 large regions of the VFD participated in the study. Achievements in the field of PSR include: introduction of new forms of rehabilitation care, modern psychosocial interventions; development of the volunteer sector and others. A number of systemic problems were also identified: more pronounced decrease in the availability of psychiatrists in VFD compared to the Russian Federation (RF) as a whole (in the VFD 0.76 psychiatrists per 10 thousand population in 2017 and 0.74 per 10 thousand population in 2018; in RF: 0.83 psychiatrists per 10 thousand population in 2017, 0.82 per 10 thousand in 2018); insufficient provision with psychotherapists, psychologists, social workers, which varies considerably in different territories (up to 10 times); insufficient use of non-profit organizations' (NPOs) potential; lack of a unified system for assessing PSR effectiveness.
Conclusions: Measures for development of PSR were proposed: improving staffing levels and qualifications of employees, introducing psychosocial interventions with proven effectiveness; dissemination of successful experience of NPOs, development of methodological tools for assessing effectiveness of PSR, its standardization and others.

Keywords: sociological; psychosocial interventions; effectiveness; Psychosocial rehabilitation

EPP1124

Visuospatial training has positive effect on language abilities in children with Delirium diagnoses and inclusion of delirium-specific

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Introduction: It was shown that children with specific language impairments (SLI) have deficits not only in producing and understanding language but also in visuospatial abilities (Kiselev et al., 2016). We assume that training programs that are aimed to develop the visuospatial abilities can help children with SLI.
Objectives: The goal of this study was to assess the impact of visuospatial training on the language abilities in 6–7 years old children with SLI.
Methods: The participants were 20 children aged 6–7 years with SLI. Children were randomly assigned to the intervention and comparison group. Children from intervention group participated in 8 weeks of visuospatial training. This programme trains the child to do different visuospatial exercises both on motor and cognitive level. This programme is built on the conceptual framework derived from the work of Luria's theory of restoration of neurocognitive functions (Luria, 1963, 1974). We used the subtests from Luria's child neuropsychological assessment battery to assess language abilities in children before and after the intervention period.
Results: Analysis of covariance tested the effect of visuospatial training programme on five language subtest from Luria's child neuropsychological assessment battery. Group differences ($p<.05$) were found for subtest that assess understanding prepositions that describe the spatial relations between objects. Posttest mean for the intervention group were significantly ($p<.05$) greater than the control group.

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