

interface (primary care systems and secondary care mental health services). An innovative model of single point of care for people with severe and enduring mental health problems hosted at a primary care (GP) setting has been developed and evaluated in Walsall, UK.

Objectives: To develop and evaluate an integrated (multidisciplinary) approach of managing health & social care needs of people with severe mental health disorders.

Methods: People with severe & enduring mental health problems were reviewed in primary care (N=65). A comprehensive physical, mental and psychosocial assessments were undertaken by the clinicians that included GP, Psychiatrist and Care-Coordinator. The reviews included: 1) A review of physical health indicators based on the Lester toolkit by practice pharmacist/nurse, including lifestyle, body weight, BMI and blood pressure. 2) Individualised interventions included physical / psychiatric prescribing, social prescribing and advice on lifestyle changes. Stable patients were recommended for stepping down from the secondary care. Outcomes included Patient Satisfaction Questionnaire (PSQ).

Results: Satisfaction on the PSQ was rated from very good to excellent. Results highlighted multiple benefits including trust generation, improved communication among professionals, physical health screening and prompt clinical decision making (e.g. referral / prescribing). Other benefits included patient access & satisfaction, time and cost efficiency by reducing the number of reviews.

Conclusions: The integrated CPA reviews offers efficient, holistic & cost effective model of care with high satisfaction levels for patients and is replicable.

Disclosure: No significant relationships.

Keywords: Service innovation; primary & secondary care collaboration; Multidisciplinary,

EPV0811

Evaluation of a home treatment approach to schizophrenia in rural Pakistan: the SOUL Programme

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doi: 10.1192/j.eurpsy.2022.1570

Introduction: Psychiatric services in LEDCs face a tripartite challenge: (i) limited financial capital; (ii) scarcity of professionals; (iii) restrictive health beliefs. Inevitably, services developed for the first-world are ill-suited here. Psychiatric services must be designed from the ground up: inspired by but not a replica of best practices in the developed world. The SOUL project in Larkana, Pakistan provides home based assessment by a psychiatrist and fortnightly treatment by a mobile nursing team for schizophrenic patients. Psychoeducation of carers and the community as well as facilitation of work for patients are core aims. This mixed-methods study evaluates the experiences of primary stakeholders - patients and their carers.

Objectives: 1.Are patients and carers satisfied with the care received? 2.Has SOUL been successful in changing health beliefs? 3.How could the programme be improved?

Methods: The principal investigator accompanied the team for 4-weeks. Purposive sampling was employed. Satisfaction was assessed quantitatively using the likert based PSQ-18 questionnaire. Thereafter, qualitative data was gathered using semi-structured interviews and analysed using a grounded theory approach. A total of 27 interviews were conducted before data saturation.

Results: 100% of interviewees answered 'Satisfied' or 'Very Satisfied' to all elements of the PSQ-18. Above all, stakeholders valued that treatment was free and highly accessible (home visits), promoting treatment adherence. They felt psychoeducation events significantly reduced community stigma and made families more likely to seek psychiatrists over faith healers. Provision of respite care was suggested as a future improvement.

Conclusions: SOUL is highly valued by stakeholders and offers an excellent example of LEDC psychiatric care.

Disclosure: No significant relationships.

Keywords: schizophrénia; Outreach; Mixed Methods; LEDC

EPV0812

The Use of Dietary Supplements for Mental Health Among the Saudi Population

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doi: 10.1192/j.eurpsy.2022.1571

Introduction: Despite the limited evidence about the efficacy and safety of dietary supplement use for mental health, people tend to use them quite often. Generally the use of supplements among Saudi population shown to be prevalent, although limited studies that assessed their use for the improvement of mental health.

Objectives: Identify the prevalence of dietary supplements use for mental health among the population in Saudi Arabia and also determine the factors that affect the use of dietary health supplements for mental health.

Methods: A cross-sectional study of a convenience sample of 443 participants from various regions in Saudi Arabia. Questionnaire includes demographics, dietary use supplement assessment, and mental health assessment via the patient health questionnaire (PHQ-9), generalized anxiety disorder questionnaire (GAD-7), and insomnia severity index (ISI).

Results: The prevalence of DS among the Saudi population reached 44%. Vitamin D and Melatonin were the most commonly reported DS used for mental health among the study population. The use of DS was associated with three times higher odds in patients who had previous mental health disorder diagnoses (OR 2.972; 95%CI; 1.602-5.515). The chance of using DS almost doubled in patients with subthreshold and moderate-severe insomnia (OR 1.930;95% CI 1.191-3.126) and (OR 2.485; 95% CI 1.247- 4.954) respectively.

Conclusions: Despite the limited evidence about the efficacy and safety of dietary supplement use for mental health, people tend to use them quite often. Although the use of supplements among Saudi population shown to be prevalent, limited studies assessed their use for the improvement of mental health.

Disclosure: No significant relationships.

Keywords: Dietary Supplements; mental health; sleep; Depression

EPV0814

An approach to identify people with mental illness that can be expected to benefit from integrated community care in Germany.

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doi: 10.1192/j.eurpsy.2022.1572

Introduction: Although integrated community care programs specifically tailored to patients with severe mental illness (SMI) are available, recent studies show that these programs are not always provided to the population which would benefit the most from it.

Objectives: Aims of this study were the selection of clinical and psychosocial characteristics and the development of a screening algorithm indicating the need for integrated community care services in people with mental disorders.

Methods: Data of an observational longitudinal study including N=511 participants has been used to examine the hypothesized determinants. At baseline, self-reported empowerment has been assessed via the EPAS and psychosocial impairment and perceived needs have been rated by research workers via the HoNOS and the CAN, respectively. Use of integrated community care services was defined as at least four appointments with service providers over six months and has been recorded via the CSSRI twelve to 18 months after baseline. Mixed-effects regression analyses have been performed to test the predictive value of the hypothesized determinants and marginal predictions were used to define cut-offs for the assessment tool.

Results: EPAS, HoNOS and CAN scores each proved to be significant predictors for using integrated community care services. Cut-off scores for each predictor are presented, forming practical assessment guidelines for future studies.

Conclusions: A screening tool and an algorithm for the identification of mentally ill patients who can be expected to benefit from integrated community mental health care programs is available for the German health care system.

Disclosure: No significant relationships.

Keywords: severe mental illness; Community-based mental health care; Integrated community care; Assessment

EPV0815

The impact of early and late childcare experience on cognitive functions

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doi: 10.1192/j.eurpsy.2022.1573

Introduction: Previous studies have found long lasting cognitive delays among children with early childcare experience, especially institutionalised experience. However, little is known about institutions' effect in late childhood.

Objectives: Our goal is to identify the characteristics of cognitive functions in connection to attachment related anxiety among adopted children and children living in institutional care.

Methods: The participants' (N=68, Mage=14.20, 29 boys and 39 girls) cognitive functions were measured with the following tests: Rey15 Memory Task, Knock And Tap Task, Simon Says Test, Verbal Fluency Task, D-KEFS 20 Questions Test. Participants completed two questionnaires: the Family Affluence Scale and the Experiences In Close Relationships Revised Scale. The results from the adopted children (N=19) and children living in institutional care (N=18) were compared to the matched control group: children living with their biological parents (N=31).

Results: Children living in institutional care did not differ significantly from their (SES-based) matched controls. Children adopted after the age of 2 years (N=7, M =56,57month) and the low SES control group (N=14) differed from the high SES control group on tests of attention (*Verbal Fluency Task*, *Mhigh.c.*=212.50, *Mad. aft.2*=193.50, *U*=59.50, *z*=-2.62, *p*=0.009) and verbal memory (*Rey15*, *Mhigh.c.*=17.94, *Mad. aft.2*=9.18, *U*=35.00, *z*=-2.79, *p*=0.005). Children adopted before the age of 2 years differed from the high SES control as well, in inhibition (*Simon Says Test*, *Mhigh.c.*=12.26, *Mad. bef.2*=18.88, *U*=55.55, *z*=-2.23, *p*=0.026).

Conclusions: Our findings suggest that only in the early years is child protection experience associated with long-lasting cognitive delays and attachment related anxiety.

Disclosure: No significant relationships.

Keywords: childcare; Executive functions; institutionalisation; attachment security

EPV0816

Measurement-Based Care in Treatment of Substance Use Disorders

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doi: 10.1192/j.eurpsy.2022.1574

Introduction: Measurement-Based Care (MBC) is an emerging healthcare model with a number of potential advantages over traditional approaches for the treatment of substance use disorder (SUD). Despite SUD treatment programs being theoretically well suited for the implementation of MBC, its uptake has been minimal, which in turn limits further research, knowledge synthesis, and translation into clinical practice.

Objectives: The goal of this knowledge synthesis project is to stimulate greater consideration of MBC models in addictions programs, with three interrelated objectives: 1. To summarize the