Conclusion We proposed an Arabic version of a battery of measures that reflect affirming attitudes. This is a step for reliable measures that assess stigma in Arabic countries.

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

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EV0651

The assessment of a drama therapy process for patients with severe psychiatric patients

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Introduction Drama therapy is a useful therapy method for improving the life quality of psychiatric patients. Drama therapy is a rehearsal of everyday life. In this therapy method, clients actively join the creative process in order to better understand their life experiences.

Objectives Drama therapy may improve patients' ego functions, psycho-social and self-expression abilities, problem-solving skills, real-life adaptations and contribute to patient's psychiatric treatment

Aim The main aims were to examine the curative effects of drama group therapy and the effects of drama therapy on functionality in psychiatric patients.

Method The study was performed at the Istanbul University Faculty of Medicine. Patients were referred from the Psychiatry Polyclinic of this university to Art Therapy and Rehabilitation Program. Drama therapy is an applied drama-based art group therapy. The 10 subjects in our study, ranged from 20 to 50 years old. This therapy group gathered once a week for a ninety minute session. Subjects continued their medical care and received psychotherapy throughout the 24-week study. The therapy plan included an introduction, a warm-up session, a drama therapy work and a sharing session. Patients were assessed in pre and post-treatment with Global Assessment of Functioning and Wilcoxon Signed Ranks Test was used for statistical analysis. Yalom's Group Curative Factors Scale was applied.

Result There was a significant decrease in loss of functioning (P < .05). In Group Curative Factors, the means of hope, identification, group cohesion and altruism were determined high.

Conclusion Our study demonstrates that drama therapy has positive effects on patients with severe psychiatric patients.

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EV0652

Comprehensive care for inpatients with mental disorders: Working towards service developments

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Introduction Over the past 20 years, considerable progress was made in understanding the multiple and complex needs of patients with mental disorders and ways to organize comprehensive care. However, organizing care in inpatient, pathology-focused settings,

where patients were seen increasingly as consumers of 'inpatient psychiatric' services is challenging.

Objectives and aims Inspired by modern trends, we are more able to integrate recent developments in psychosocial treatments, broadly defined, into progressive treatment framework within inpatient setting.

Methods Results of an audit of our service (psychosocial treatments) over the previous 5 years will be compared to published results of other services with a range of service delivery methods. Results Excerpts from mental health care practice in Moscow based Psychiatric Hospital N° 3 named after VA Hilyarovsky – are provided. The pathways of care as well as the basic principles governing the treatment (careful attention to referral sources; optimal patient-treatment matching; and psychosocial, rather than medical supremacy) are outlined. Training and development is central to the effective and efficient working of any staff group. As part of the service developments, a number of inductions (on psychosocial treatments) were provided on regular basis to all staff joining the service.

Conclusions Though the opportunity for future reform remains on the horizon, some of the strengths and weaknesses of our current health care practice will be presented.

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EV0653

Documenting the decision-making process for initiation of pharmacological VTE prophylaxis in patients admitted to an adult psychiatry ward background

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Background Venous thromboembolism (VTE) is a condition that causes a blood clot to form within the venous blood system. If this blood clot forms in the peripheral venous system, it can cause symptoms such as calf pain and swelling. If this clot becomes dislodged, it may travel through the vessels into the pulmonary artery which can have much more severe consequences.

Objectives There has been a great deal of effort in recent years to increase the percentage of in-patients receiving a VTE assessment; and for those patients to receive appropriate VTE prophylaxis. VTE is a significant cause of inpatient deaths. This audit aims to compare current working practice to local standards and identify learning points.

Method VTE assessment data were collected from two acute psychiatric in-patient wards within a specified, random date range in 2016. Data was collected by checking paper admission documentation. NICE guidelines also state that all patients should be assessed for VTE on admission, with a standard of 100%.

Results Overall, 6.25% of general adult psychiatry patients had a VTE assessment done within 24 hours of admission.

Conclusion This audit shows that the necessary standards are not met. Importance of these assessments will be communicated during induction programmes for all staff and the results of this audit communicated to current staff on all in-patient psychiatry wards. Disclosure of interest The authors have not supplied their declaration of competing interest.

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