

statistical differences reported as well as in the overall life quality level as in its compound factors for both groups. The same result applies for the gender differences.

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Quality of life at work and motivation for research activities for residents of general practice in two different surgical departments in Greece

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Introduction Quality of life at work has very much to do with educational efforts during medical residence years. Constant changes of work environment for general practice residents, is a strong reason for high levels of stress at work.

Objectives Our study is to present the general rules of work for general practice residents in surgical departments in Greece and the quality of their lives and career motivation.

Methods We use information coming from two hospitals, a large city hospital which covers a population of 780.000 of citizens during all-night duties, and a provincial hospital, which covers a population of 50.000 citizens.

Results In both workplaces, general practice residents spend much of their education time in the emergencies department or the outpatient clinics of surgery. Stress is more intense in the large hospital, based on the number of patients examined per day and the frustration they receive at work. However, the heavy duty to accompany a patient for a transfer to other hospital is much more often in province, and then the stress is much more intense and lasting. Frustration is also often in the urban hospital where the residents of various specialties are more experienced and have more confidence due to their departments expertise. Satisfaction at work varies according to the personality of every doctor.

Conclusions Opportunities for scientific development through participation in scientific meetings was stronger in the provincial Hospital due to a good team of strongly motivated researchers that happened to be there and better work environment.

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First episode psychosis service (EPS): Evaluation of implementation in a rural Australian setting

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Introduction Recent decades, has seen an increasing focus on developing specific early or first episode psychosis services, in various parts of the world. There has been a growing awareness of the emotional impact of psychosis like trauma at onset, suicide and loss of social network. There is also a co relational link between the duration of untreated psychosis (DUP) and outcomes. The first

2–3 years following first episode onset have been argued to be a critical period for treatment.

Method Our study was an evaluation of an early psychosis service (EPS) in a rural Australian MHS 'experiencing' or 'at risk' of experiencing first episode psychosis. The guidelines were based on the Australian clinical guidelines for early psychosis (1998). The audit tool used was a checklist based on 10 treatment guidelines developed by the EPS special interest group evaluation sub-committee. **Results** The overall results show that 7 out of the 10 treatment guidelines were well adhered throughout the implementation process. Guidelines strongly adhered to were numbers 2, 3, 5, 6, 7, 8, and 10, whereas guidelines 1, 4, and 9 were poorly adhered to.

Discussion The implementation process was found to be generally effective. The factors that influenced the effectiveness will be discussed in the poster.

Conclusion There were a number of trends when we looked at the overall results which included aspects of the guidelines that were done well and aspects that needed improvement which will be further discussed in the poster.

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e-Poster viewing: Rehabilitation and psycho-education

EV1170

Development of an interview schedule for assessing factors influencing educational outcome in students with schizophrenia

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Introduction Schizophrenia is a severe mental disorder with a relatively high toll on the quality of life of the patient and caregiver. It has a high financial, emotional and psychosocial burden. Surprisingly, optimum academic and educational outcomes in individuals with schizophrenia have been a neglected area of research and service provision.

Objectives Development of an interview schedule assessing the helpful and hindering factors affecting the educational attainment in persons with schizophrenia.

Methods Twenty-one participant were recruited (11 patients and 10 caregivers) from August 2014 to 2015 using purposive sampling and interviewed in a semi-structured qualitative fashion. Patients were between 16–25 years of age. Data collection and interpretation continued iteratively till saturation of factors was achieved. The list of factors (hindering/helping) was compiled and sent to a panel of 14 experts. They rated the schedule and the individual factors on a Likert scale. Reliability and validity parameters were tested and the final schedule was formulated.

Results The final schedule contained 17 hindering and 18 helping factors. Detailed instructions to the interviewer for administration of the schedule are included. The factors have been further subdivided into illness related and illness unrelated. Some of the major hindering factors were symptoms of illness, medication side effects, delay in treatment initiation, perceived conflict in parents, lack of motivation. The major helpful factors were adequate symptom control, withholding inpatient care, spirituality, and peer group acceptance.