

Introduction: Qatar established its Forensic Community Mental Health Team (FCMHT) in 2019 as part of the region's first comprehensive forensic psychiatry service. We present here the data on clinical and offending outcomes since its establishment and compare this with data from before the service was established

Objectives: To compare clinical and offending outcomes in mental health patients with criminal offending histories in Qatar before and after the establishment of Forensic Community Mental Health Team (FCMHT).

Methods: This is a retrospective study comparing the socio-demographical characteristics, clinical outcome and recidivism measures of forensic patients, under the FCMHT for the last two years with data from a similar period before the services were in place.

Results: Data for 170 patients in total was analyzed. 85 patients currently under the active care of forensic community team were matched with a comparable group before the establishment of the services. The re-admission and reoffending rates after the establishment of the service over 1 year of follow up was 15% and 20% respectively compared with 60% and 85% of the group before the service.

Conclusions: Since its inception, the FCMHT has made significant positive impact on quality of life, mental well-being and safety of patients under its care. Close working relationships with criminal justice system, families and carers has helped fight stigma and promote safer community.

Disclosure: No significant relationships.

Keywords: Qatar; forensic psychiatry; readmission; Recidivism

EPV0771

Zero violence or zero seclusion. Which is more acceptable in our hospitals?

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Introduction: There is an established association between serious mental illness and violence. Secure forensic psychiatric services provide care and treatment to mentally disordered offenders. The majority of patients in forensic services suffer from severe mental illnesses such as schizophrenia, with co-morbid polysubstance abuse and maladaptive personality traits. Psychiatric services are under significant pressure to reduce the use of seclusion and restrictive practices, whilst mandated to provide safe environments for patients and staff.

Objectives: To determine the number and characteristics of violent incidents in a secure forensic hospital in Ireland.

Methods: A retrospective review of all incidents in Central Mental Hospital, Ireland between 1st March 2019 and 31st August 2021 was completed. Incidents were categorised into physical assaults and other violent incidents. Demographic measures and measures of violence risk (HCR-20), functioning (GAF), programme completion and recovery (DUNDRUM tool) were collated.

Results: A total of 321 incidents took place during the period examined, of which 47 (14.6%) involved physical assaults perpetrated by patients. Between March 2020 and August 2021, numbers of assaults increased by 50% and 78% compared to the preceding six-month period respectively. The majority of assaults were committed by a relatively small group of patients. Victims of assaults were more likely to be patients (n=27, 57.4%) and more likely to be males (n=43, 91.9%).

Conclusions: Physical assaults and other violent incidents happen in forensic and general psychiatric units. Restrictive practices, used in accordance with the law, are necessary at times to prevent serious harm to patients and staff in psychiatric hospitals.

Disclosure: No significant relationships.

Keywords: violence; Restrictive practice; seclusion; mental illness

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Containing Chaos: A Self-Reflection of a Final Year Medical Student's Elective in a High Security Psychiatric Hospital

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Introduction: Throughout training, medical students are often only exposed to a limited selection of psychiatric specialities, predominantly general adult inpatient settings. This medical student had the opportunity to undergo a placement at a high security forensic hospital. With only three such hospitals in England, this is an environment that few students and even qualified doctors have been able to experience. In this presentation, the author will explore their prior expectations, key skills gained, and surprising realisations that made the elective highly valuable.

Objectives: To reflect on the skills learned and revelations made during the elective period and share these as a presentation.

Methods: The author completed a 6-week placement at Ashworth High Security Psychiatric Hospital. He then reflected on his experiences.

Results: This placement allowed the development of a range of skills and personal discoveries. The skills included enhanced personal safety awareness, improved use of varied communication styles, and de-escalation and management techniques with higher risk patients. The main finding was the fine line between Ashworth's patients and mainstream society, and how easily these two entities can overlap. *Carl Jung* spoke of a 'shadow' that must be integrated, and the humanity within each patient made this philosophical concept a sobering reality.

Conclusions: High security placements are valuable educational opportunities and teach important skills, not often found in the current medical school curriculum. These placements offer the transferable communication and interpersonal skills essential in any budding psychiatrist, and also provide a vital environment for self-reflection and personal growth.

Disclosure: No significant relationships.

Keywords: undergraduate; reflection; Elective; forensic