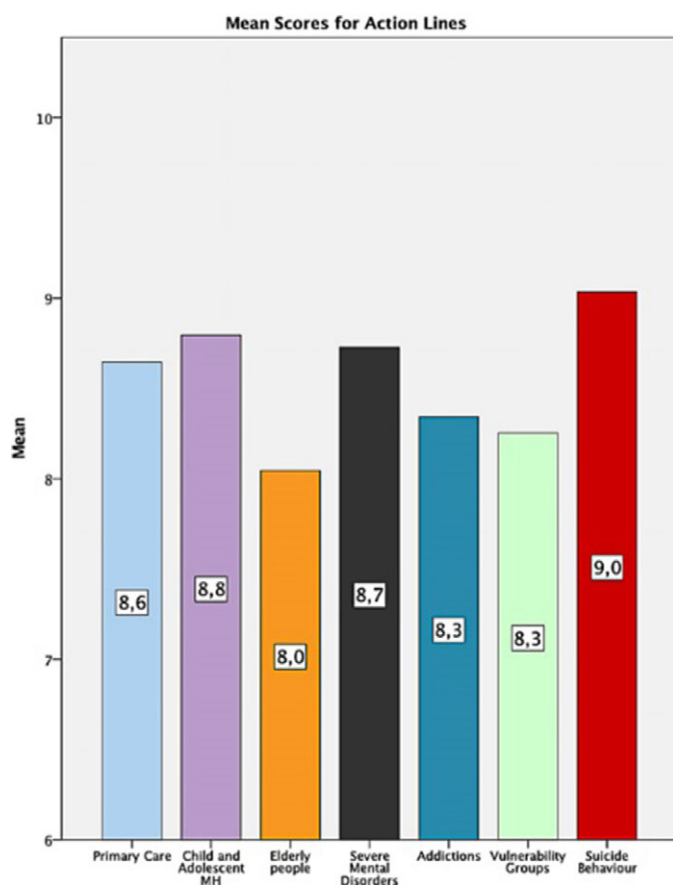


Image 2:



Conclusions: Highest transversal priority for the MH Strategy was Humanization of Mental Health Services, and the most critical action was Suicide prevention. Professionals, Scientific societies and Users considered more important research, innovation and training compared with other society groups, whereas the less important areas for the users were digitalization and prevention users. These priorities will help to design the implementation and schedule for the lines of the Mental Health Strategy in Castilla y León.

Disclosure of Interest: None Declared

EPP0859

Addressing Decision-Making Capacity in Application of Involuntary Treatment in Latvia: Case Law Analysis

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doi: 10.1192/j.eurpsy.2023.1143

Introduction: A well-established principle is that informed consent is an obligatory requirement for any medical intervention; a patient's decision-making capacity to consent is a requirement for legally valid consent. Some individuals may be unable to give valid informed consent due to their limited mental capacity. In such

cases, laws permit substitute decision-making and involvement of the patient as far as possible (Art.6, Oviedo Convention). National laws of European countries allow persons with mental health problems to be deprived of their liberty and undergo involuntary treatment, namely treatment without a patient's informed consent, in certain circumstances. Procedural safeguards must be secured, and a court must review its lawfulness (FRA, 2012). The legality of involuntary treatment is highly debated by various audiences (CRPD committee, CoE bodies). In Latvia and other countries, the requirement to assess a person's decision-making capacity in the application of involuntary treatment is not required.

Objectives: This study was conducted to reveal the role of a person's decision-making capacity to consent to the treatment of mental disorders in cases where involuntary treatment was approved by courts.

Methods: A retrospective case law study method was applied. Anonymised decisions of Latvian courts at www.manas.tiesas.lv in cases of involuntary treatment in Latvian adult psychiatric hospitals since 2010 were collected and analysed. The content of decisions concerning persons' decision-making capacity and applicable legal regulations were studied.

Results: The case law revealed that the decision-making capacity had not been addressed regularly and in detail. Latvian law does not require an assessment of capacity, and as a result, the courts do also not require any data. Some elements of decision-making abilities, such as the limited ability to comprehend or process information, are mentioned in the decisions of courts.

Conclusions: There is a need to address the significance of decision-making capacity in the application of patients' rights law in clinical and legal settings when involuntary treatment is suggested or applied. There is a need to amend the laws justifying the limitations of patients' rights, particularly concerning involuntary treatment.

Acknowledgements: This paper has been prepared within the research project "Towards a human rights approach for mental health patients with a limited capacity: A legal, ethical and clinical perspective", No. lzp-2020/1-0397 and the project "Strengthening of the capacity of doctoral studies at the University of Latvia within the framework of the new doctoral model, identification No.8.2.2.0/20/I/006"

Disclosure of Interest: None Declared

EPP0860

Smoking in an Inpatient Psychiatric Unit in Ireland with a "Tobacco Free Campus" policy: the prevalence, the associated factors, the social consequences and what can be done to address this

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doi: 10.1192/j.eurpsy.2023.1144

Introduction: Smoking is highly prevalent in patients with mental health disorders and although most literature describes the physical health impact of smoking, there is little which addresses the poverty and social consequences associated with nicotine addiction. In 2022, Ireland's HSE (Health Service Executive) published clinical