To describe the implementation and dissemination expe-Aim rience of DBT in Egypt.

The implementation of DBT is examined quantitatively. Methods Numbers were calculated retrospectively from the records at the implementation start in December 2013 and after 3 years in September 2016.

Results Number of therapists increased from one team of 2 therapists and one observer to 16 therapists organized in 3 teams plus 4 observers. The initial team, 7 psychiatrists and 2 clinical psychologists, could host and attend the first DBT Intensive Training in the middle east in 2014. DBT intensive training is the official training model developed by Dr. Linehan. We started with 8 clients one group for adults in Alexandria at 2013, increasing to 150 clients in 12 groups for adults, adolescent and SUD patients in 2016 with an average increase of 18.75 folds. The team participated and presented about DBT in 23 local and regional scientific meetings and hosted two workshops in collaboration with BehavioralTech, the official training institute.

Conclusions Although the DBT implementation in Egypt represented a great challenge, results are showing a promising increase in the number of trained therapists and participating clients.

Keywords Dissemination; DBT; Egypt; Borderline personality disorder

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

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### EW0670

# **Physical examination of psychiatric** patients who presented at emergency department in a tertiary care hospital in Sultanate of Oman

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To examine the completeness of physical assessment Objective of patients presenting with psychiatric problems to the emergency department (ED).

Methods This was observational study based on a retrospective review of the medical records of patients who attended the ED of Sultan Qaboos university hospital and referred to the on-duty psychiatrist for assessment over a 12-month period. All patients aged 16 years and above, who presented to the ED with a psychiatric complaint were included in the study. A data collection sheet was designed to gather each patient's demographic data such as age and gender, past psychiatric history, nature of the presenting complaints, thoroughness of physical assessment, medications prescribed by the ED doctor prior to psychiatric assessment, and whether the patient was discharged, admitted to a psychiatry.

Results A total of 202 patients met the inclusion criteria. The mean age of the patients was 34.2 years. Females represented 56% of the sample. The majority of the study group (60.4%) were patients with a documented past psychiatric history. Physical examination was conducted in the ED for 61.4% of the patients, while vital signs were recorded for 68.8% of them. Approximately, 31% of the patients required injectable psychotropic medications as tranguillizers in the ED. Patients with an isolated psychiatric complaint coupled with a documented past psychiatric history were more likely to be referred to the on-call psychiatrist without a physical examination by the ED doctors.

*Conclusion* In our institution, not all patients with psychiatric presentations had a complete physical examination by the ED doctors.

*Disclosure of interest* The author has not supplied his declaration of competing interest.

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#### EW0671

### National child developmental and mental health disorders screening policy in Thailand A. Benjaponpitak

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Background Developmental disorders and mental health problems result in less optimal outcomes in children. Although awareness among the public had been improving, there was paucity of early identification frameworks, care pathways as well as the process of monitoring and evaluation in Thailand.

Objective To develop appropriate National child mental health policy in Thailand.

Aim To promote developmental and mental health outcomes of children.

Method Current child development and mental health research as well as policy development were reviewed. The framework of development together with major mental health disorders screening and intervention among children has been studied and established as a major policy in Thailand since 2014. The National developmental screening has been implemented in children aged 9, 18, 30 and 42 months. District level hospitals have been coached to facilitate Health promotion schools to screen and provide early intervention for grade 1 students with mental health problems. Annual data has been collected and analyzed to reflect the milestones of child development and mental health preventionpromotion policy in Thailand.

The coverage of National developmental screening ranges Result from 70-80% of children. About 20% of preschoolers are at risk of language delay while nearly 20% of grade 1 children are at risk of emotional, behavioral and learning problems. Parental awareness is the major challenge for those with limited financial resources.

Conclusion Investments in early childhood development are needed. The pathways to develop the appropriate intervention requires further collaboration among stakeholders.

*Disclosure of interest* The author has not supplied his declaration of competing interest.

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### EW0672

## A RCT of a staff training intervention to promote quality of care in long-term residential facilities-the **PromOual study**

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Introduction The shift of hospital-based to community-based mental health care, introduced the need to assess and promote quality of residential services.

This RCT aimed at assessing the effectiveness of a staff Objectives training intervention to improve quality of care in residential facilities.

Twenty-three units with at least 12-hour on-site staff Methods support per day in Portugal were assessed with the quality instrument for rehabilitative care (QuIRC) filled online by the manager. A random sample of service users were interviewed using standardised measures of autonomy, experiences of care, quality of life, and the time user diary (TUD) for level of activity. The intervention group units (n = 12) received workshops and a four-week handson training of the staff versus TAU in the control group (n = 11). All units and users were reassessed at 8-months. The staff knowledge gained during the workshops was assessed using pre- post-test. Generalized linear mixed effects models were used.

*Results* The residential units were mainly in the community (n = 17, 73.9%), and had QuIRC mean scores above 50% in the following dimensions : living environment, self-management and autonomy, social inclusion, and human rights. Service users' level of activity (TUD) at 8-months did not differ between intervention and control groups. At 8 months, all QuIRC dimensions scored higher in the Intervention group, without reaching statistical significance. Pre- post-tests comparison showed a significant increase in the knowledge acquired by the staff.

*Conclusions* The intervention had impact on the staff's knowledge without reaching significant change of users' activity and quality of care of the units.

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

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### EW0673

# Differences in symptom expression between Vietnamese and German patients utilizing a psychiatric outpatient service using the PHQ

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*Objective* Despite a large body of work on somatic symptom presentation among people of Asian descent, research has shown heterogeneous results. Examining symptom presentation in clinically and ethnically well-characterized populations constitutes a first step towards better understanding differing patterns symptom of presentation. This is the first larger study aiming to compare Vietnamese and German psychiatric outpatients regarding symptom presentation.

*Methods* 110 Vietnamese and 109 German patients seeking psychiatric treatment at two outpatient clinic services in Berlin were asked to complete the patient health questionnaire (PHQ). Comparisons of Vietnamese and German patients were conducted using independent *t*-tests. The somatic symptom module (PHQ-15), the depression module (PHQ-9) and the original PHQ-modules examining anxiety and psychosocial stress levels were compared for both groups using multivariate analysis. Categorical variables were evaluated using Chi<sup>2</sup> analysis. Crohnbach's alpha was calculated separately for both groups and all PHQ modules.

*Results* Vietnamese patients endorsed significantly higher levels of somatic symptoms overall and on individual somatic items, such as pain-related disturbancies. Yet, German and Vietnamese patients did not differ in terms of depression severity. Vietnamese patients with fewer German language skills showed a significantly higher tendency for somatization. While German patients showed higher total scores on the anxiety- and stress-modules of the PHQ, this difference was not statistically significant. Vietnamese and German patients showed comparable Crohnbach's alpha for all subscales.

*Conclusion* As data was collected from both groups upon the first visit to an outpatient clinic, the symptoms reported could be reflective of culture related symptom awareness when feeling discomfort in the context of mental illness.

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

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#### EW0674

## Development and investigating the effectiveness of an integrated school-based program for changing attitude toward substance abuse based on philosophy for children components and emotional intelligence

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*Background* Substance abuse in the youth is one of the major problems of any society. The research purpose was the development of a program for changing female adolescents' attitude toward substance abuse and evaluating its effectiveness.

Methods To develop the treatment, important variables influencing in shaping attitudes toward substance abuse were selected. Afterwards, structural equation modeling approach was conducted for examining the relationship among variables (emotional intelligence, critical thinking, caring thinking and reasoning) and identifying significant paths and variables. Based on these variables, a program developed for changing students' attitudes. To evaluate effectiveness of programs a pretest-post test design with the control group was used. Random sampling was carried out for selecting 26 students attending senior high schools in district 2 of Tehran. Then, sample randomly assigned in experimental and control groups. Experimental group exposed to philosophy for children intervention in the form of community of inquiry. Control group didn't receive the intervention. The data were collected from Nazari's questionnaire for attitude toward substance abuse.

*Results* ANCOVA revealed that based on a composite score of attitude toward substance abuse (adjusting pretest effect), there is a significant difference between two groups at 0.99 significance level (partial = 0.329, P < 0.001, = 11.28).

*Conclusions* It is recommended that the school based program should be used for developing and strengthen the students' attitude based on exploring itself, rather than simply giving awareness about substance abuse. In this treatment, rather than highlighting accumulating knowledge, put emphasis on, thinking, decision-making, and management of emotions.

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

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#### EW0675

# Medical assistance in dying: The Canadian experience

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Canada is in the midst of implementing new and rapidly evolving policies on medical assistance in dying (MAID). Following the landmark Canadian Supreme Court Carter v. Canada ruling in February 2015, the former prohibition against physician-assisted death was deemed to violate the Canadian Charter of Rights and Freedoms. The Court provided until 2016 for development of national legislation and policies that allowed for physician-assisted dying in cases of "grievous and irremediable" illness and "intolerable suffering". This session will review shifting public, societal and medical concepts regarding assisted dying and the Canadian experience