

Engages in challenging behaviours. Challenging behaviours defined as behaviours significantly limiting engagement in daily & family life, education and/or social activities, and have persisted for at least a period of 3 months. Data were collected from electronic recoding system of individual patients; using a data collection sheet on level of learning disability; comorbid neurodevelopmental or emotional and mental health disorders; profession of allocated clinician; joint working with discipline; involvement with social care; allied health professionals input; presenting difficulties and severity; CETR or hospital admissions; referral to National services; What interventions offered (Medications, Behaviour assessment and/or interventions); if medications offered, was it used as first line and how long for; parents' view on medication management.

**Results.** As we have expected, medication management were used as first line and there were limited offers of behaviour support. Joint working with social care, speech therapy and occupational therapy but with limited input especially occupational therapy in cases with high sensory needs. It was unclear with the cognitive assessment and diagnosing the learning disability in the population under 16s.

**Conclusion.** There is a service gap for CAMHS learning disability population and more joint working needed among relevant health professionals.

### Physical Health and Mental Health Comorbidities of People With Functional Neurological Disorders Referred to a Community Neuropsychiatry Service Pre- & Post March 2020 Lockdown Due to COVID-19

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**Aims.** Health comorbidities contribute significantly to the development and maintenance of illness in patients with Functional Neurological Disorder (FND). As part of a service evaluation project, we investigated the physical and mental health comorbidities of people referred to a community neuropsychiatry service in East Kent, in one-year periods preceding and following the March 2020 lockdown due to COVID-19.

**Methods.** We included all people accepted to the service between 23rd March 2019 and 23rd March 2021, where the reason for referral was Functional Neurological Disorder (FND) or Non-Epileptic Attack Disorder (NEAD). Referrals to the service for other reasons were excluded, as were declined referrals. Routinely collected data sources were reviewed and data stored in anonymized fashion. Data were analysed using Statistical Package for Social Sciences (SPSS).

**Results.** Total number of referrals for FND in the 2-year period was 260, with 161 referrals for NEAD and 99 for other FND.

In the pre-lockdown period, 163 patients were referred due to FND (101 with NEAD, 62 for other FND). There were fewer FND referrals in the post-lockdown period: 60 referrals for NEAD and 37 for other FND. The majority were female (74% pre-lockdown, 81% post-lockdown). Where ethnicity was recorded, White British was the most common (94% pre-lockdown, 90% post-lockdown), with a small number of people from other ethnic groups (3.5% White Other, 1.4% BAME, 1.4% Mixed pre-

lockdown; 5.4% White Other, 3.2% BAME and 1.1% Mixed post-lockdown). Ethnicity was not specified in 21 cases (13%).

Of the pre-lockdown group, 15 patients had prior contact with Child and Adolescent Mental Health Services (9%), with 7 patients (7%) in the post-lockdown group. Many patients had previous contact with mental health services (47% pre-lockdown, 53% post-lockdown). The majority of patients had at least one physical illness (69% pre-lockdown, 73% post-lockdown). Most had 1–3 physical comorbidities but 9% (pre-lockdown, 7% post-lockdown) had more than 4. Fibromyalgia (14% pre-lockdown, 12% post-lockdown), chronic pain (23% pre-lockdown, 21% post-lockdown), and epilepsy (11%, 9%) were common. Over 90% had psychiatric illness in both periods. Most patients had 1–3 psychiatric illnesses; a few had more than 4 (6.1% pre-lockdown, 1.4% post-lockdown). Depressive disorder was the most common comorbidity in both groups (41% pre-lockdown, 44% post-lockdown), followed by anxiety (35% pre-lockdown, 36% post-lockdown). PTSD was present in 8% pre-lockdown and 8.2% post-lockdown.

**Conclusion.** Physical and psychiatric comorbidities are common in people with FND; multidisciplinary working and liaison between services is crucial for care of these patients.

## Audit

### The Effect of the First Coronavirus Lockdown on Psychiatric Outpatient Attendance, a North Fife Survey

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**Aims.** There has been a significant change in the way we see patients during psychiatric consultations, this has led to challenges we face in delivering safe and effective care to patients under our care. “Telepsychiatry” has been used in literature from countries like Australia and India, there is very little around coming from the UK but there appears to be many ongoing research making the rounds. It is interesting to know that the existing literature on remote/virtual consultations during the COVID-19 pandemic are on the rise. The idea of this study was conceived during outpatient clinics after making an observation that many patients were likely to miss their appointments when they had telephone appointments compared to video consultations. This prompted a study to know if this is more likely to be observed in other outpatient clinics. The purpose of this study was to establish if virtual/remote consulting has affected patient attendance rate and whether this is also affected by the type of virtual consultation.

**Methods.** The data were collected using the “2020 stats sheets” for inpatient appointments between North Fife consultants from January to October 2020. This was registered with the NHS Fife clinical effectiveness team in January 2021.

**Results.** The results were categorized for the purpose of this survey as January – March (Pre-lockdown) and April – October (lockdown). It is important to note that some face-to-face appointments occurred during lockdown because there were emergency assessments and drug monitoring appointments scheduled.

The results of this survey showed that there was a clear reduction in clinic appointments made during lockdown compared to pre-