care and outpatient care was performed. An one-day point prevalence study was performed in 5 of the catchment areas.

Multifold differences existed between the services in treated prevalence, contact rates and patterns of care. The accessibility of the services and the amount and allocation of resources were of minor importance in determining the contact rate and use of services. Rates of outpatient staff was only the service characteristic associated with the contact rates.

The use of services was very skewed, e.g. 10% of the patients accounted for 90% of all inpatient days. High consumption of services was related to older age, living alone, being unemployed, female gender, a diagnosis of psychosis and a history of psychiatric service use. Use of inpatient services was correlated to supply of beds. Highly staffed community services did not reduce the use of inpatient services. An availability of day care services was related to less use of inpatient services for psychosis patients.

S15.04

RCT on discharge planning for high utilisers of psychiatric services I: Background and first results


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Background: Attempts to reduce high utilisation of psychiatric inpatient care by targeting the critical time of hospital discharge have been rare. In Germany, until now no such intervention has been implemented, let alone subjected to a clinical trial.

Method: “Effectiveness and Cost-Effectiveness of Needs-Oriented Discharge Planning and Monitoring for High Utilisers of Psychiatric Services” (NODPAM). This intervention applies principles of needs-led care and focusses on the inpatient-outpatient transition. The NODPAM intervention manual includes a range of predefined standardised options based on number and type of needs.

Results: Recruitment has been quite successful and the study has been high so far. Further results on duration, participant characteristics, and participants’ appraisal of the NODPAM intervention will be presented.

Conclusions: These first results indicate that the NODPAM intervention is feasible in inpatient mental health services in Germany. Discussion will focus on its applicability in other service systems.

S15.05

RCT on discharge planning for high utilisers of psychiatric services II: Needs-oriented intervention


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Background: Aim of this contribution is to describe the intervention used in the study “Effectiveness and Cost-Effectiveness of Needs-Oriented Discharge Planning and Monitoring for High Utilisers of Psychiatric Services” (NODPAM). This intervention applies principles of needs-led care and focusses on the inpatient-outpatient transition. The NODPAM intervention manual includes a range of predefined standardised options based on number and type of needs.

Method: For the intervention group, a trained intervention worker provides a coherent package of needs-oriented discharge planning and focussing on the care process. He or she emphasises continuity of the care process vis-à-vis both patient and clinician (and carers if possible) via providing two manualised intervention sessions: (a) A discharge planning session takes place just before discharge with the patient and responsible clinician at the inpatient service; (b) A monitoring session takes place three months after discharge with the patient and outpatient clinician (office-based or public outpatient mental health service-based). A written treatment plan is signed by and forwarded to all participants after each session.

Results: Acceptance of the intervention by patients and clinicians has been high so far. Further results on duration, participant characteristics, and participants’ appraisal of the NODPAM intervention will be presented.

Conclusions: These first results indicate that the NODPAM intervention is feasible in inpatient mental health services in Germany. Discussion will focus on its applicability in other service systems.

S16. Symposium: WOMEN’S CAREERS IN PSYCHIATRY—DEVELOPMENTS AND DATA (Organised by the AEP Section on Women’s Mental Health)

S16.01

The need for female leadership in international professional organisations

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The proportion of women entering psychiatry is gradually increasing and among psychiatrists in clinical leadership positions women comprise an increasing proportion.