Article: 1660

Topic: EPV30 - e-Poster 30: Rehabilitation and psychoeducation

Characteristics and Quality of Care of Residential Units for People with Long-term Mental Illness in Portugal

G. Cardoso¹, A. Papoila², G. Tomé¹, J. Caldas-de-Almeida¹

¹CEDOC, Faculdade de Ciências Médicas-Universidade Nova de Lisboa, Lisbon, Portugal; ²CEAUL,

Faculdade de Ciências Médicas-Universidade Nova de Lisboa, Lisbon, Portugal

Introduction: In Portugal, following the National Mental Health Plan (2008-2017), an increasing number of residential units for people with severe mental illness has been developed. There are no studies assessing their functioning.

Objectives: To characterize the Portuguese residential units with high and medium support levels, their users, and the quality of care provided.

Methods: Portuguese residential units for the long-term mentally ill were assessed with the Quality Instrument for Rehabilitative Care (QuIRC) filled on-line by the managers. A random sample of service users was interviewed face-to-face with the Service User Interview.

Results: Forty-two units (100%) were included. The majority (54.8%) was in the community, single-sex (54.8%), staffed 24 hours a day (54.8%), and had 10 or less beds (61.9%), no limit in the LOS (88.1%), and no service users in involuntary commitment (93%). All units provided access to psychologists and social workers, the majority to psychiatrists and nurses (95.2% each), auxiliaries (88.1%), and occupational therapists (73.8%). Users assessed (n=278) had a mean age of 50±11 years, and were mainly men (66.2%), with a diagnosis of schizophrenia (72.7%), a mean GAF score of 64.3±15.1, and were living in the unit for a median of 4 years.

Quality of care assessed by the QuIRC was significantly higher in community versus hospital units in the following dimensions: Living Environment (p=0.030), Treatments and Interventions (p=0.035), and Self-Management and Autonomy (p=0.019).

Conclusions: Residential facilities for people with severe mental illness provide better quality of care in some dimensions in community versus hospital units.