

assessed for global functioning and severity of illness by CGI-SCH and PSP, respectively.

Results Of all patients, 52% were treated by H-LAI, 48% by SG-LAI. No statistical differences ($P > 0.05$) were found between the 2 groups for age, gender, other demographic variables, substances use, somatic comorbidities. Both groups were homogeneous for severity of illness (CGI-SCH score = 4.20 in H-LAI vs. 4.38 in SG-LAI) and global functioning (PSP score = 49.1 in H-LAI vs. 54.4 in SG-LAI). Compared with the H-LAI group, SG-LAI-treated patients were characterized by shorter time from admission (>10 yrs) and treatment length (>1 yr), and less frequent anticholinergic drug co-prescription. We counted only 6 LAI-APs treatments started in the last year.

Conclusions Despite of the literature support, LAI-APs treatment for schizophrenia is still limited in our service. Our data suggest that SG-LAI-APs are used as first choice of LAI-APs treatment, although maintained for short time, while H-LAI are reserved to long-standing patients and are burdened by side effects needing anticholinergic treatment.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.951>

EV0622

Time management education influence on decreasing exam anxiety and conditioned university students' negligence of Tehran universities

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Introduction Test anxiety is a multidimensional phenomenon, including concerns about conflicts lead to negative emotional and behavioral responses in academic scores.

Aim Current study examines the influence of educating time management on decreasing exam Anxiety and educational negligence of conditioned university students on Tehran.

Methods The method of doing study is of testing in which statistical society includes conditioned university students of Tehran. Of general statistical society, we have selected 20 persons by in access sampling method. Gathering information instrument in this study is Solomon and Roth bloom's educational negligence questionnaire and sarason test anxiety in which has been in access of studied sample after testing its stability and narration.

Result After education, the result of t-test dependent and covariance analysis has shown time management education does have meaningful influence on decreasing test stress and conditioned university students negligence on Tehran universities.

Conclusion Dropped students compared to other students, provided a significant contingent of students had less time management and procrastination.

Keywords Time management; Test anxiety; Educational negligence

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.952>

EV0623

Developing community mental healthcare: Kosovo case

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Background Community mental healthcare in Kosovo is still in its developmental stage and thus pose an ongoing challenge for the health system and population.

Objectives The purpose of this study is to describe the processes of preparation, implementation, challenges and future of community mental health service in Kosovo as an economically struggling society with underdeveloped health care system.

Methods Review of the current state of community services provision for mentally ill peoples in Kosovo in the light of the objectives and targets of the WHO comprehensive mental health action plan 2013–2020.

Results The implementation of a new community mental health service in Kosovo still is characterized by considerable shortages, beside substantial effort on various levels. On the policy and financial level, it was made possible by a clear intent/initialization of international bodies and coordinated commitment of all responsible national stakeholders and authorities. Obstacles remain regarding improvements of service development indicators: financial and human resources; capacity building; stakeholder involvement and service availability. Lack of strategies for promotion and prevention in mental health and lack of information systems, evidences and research for mental health is vital need.

Conclusions Community mental healthcare in Kosovo despite struggles faced is successfully installed and represents one of Kosovo health system achievements. Comprehensive, integrated and responsive mental health services in community-based settings in line with international and regional human rights instruments is goal to be addressed.

Disclosure of interest

The author has not supplied his/her declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.953>

EV0624

Expanding the role of primary health care in the provision of mental health services to the population of the Kyrgyz republic

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Providing comprehensive, integrated services in the field of mental health in primary health care (PHC) is a component of the state mental health program for the population of the Kyrgyz republic (KR) in the 2017–2030 biennium. In order to develop an action plan in this area a situational analysis of resources of psychiatric care at PHC level was carried out. There was revealed a significant deficit of specialists, such as family doctors, mental health care professionals. In spite of the need for 3,300 family doctors, only 1706 work, and 80% of them are of retirement age.

The results of a research showed a low level of knowledge and skills of family physicians for the early detection of mental disorders and provision of appropriate medical care. There are also a limited number of psychiatrists, especially in rural regions (77% of the required quantity).

During recent years, there have been implemented significant changes in the system of mental health services, aimed at improving its quality, the approach to the place of residence of the patient and the prevalence of psychosocial services.

Since 2016 in 8 southern regions in the Kyrgyz Republic has been introduced a new model for the provision of comprehensive health

care services. Piloting this model involves psychosocial rehabilitation of patients with mental disorders, the help of mobile teams at the place of patient residence, as well as psychoeducation, training, and support to family doctors. These and other measures will help to optimise mental health care at PHC level.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.954>

EV0625

Formative exploration of the relationship between waiting times and attendance at general adult psychiatry clinics, at a hospital in pennine care NHS Foundation Trust

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Introduction An audit was done to assess new patient wait times. As part of this project we reviewed possible relationships between wait times and clinic attendance.

Objective To examine available data, for possible explanations of patients' attendance behaviour at outpatient clinics.

Aims To identify possible correlation between length of waiting time for adult psychiatry appointments and status of attendance.

Method Service Line: New patient referrals to adult outpatient psychiatry (January–December 2015)

Sample size: 401.

Results Fig. 1 and Table 1 show wait times compared with clinic attendance outcome. Percentage attendance appeared to gradually fall as wait times increased; while cancellation (%) by the NHS, and DNAs (did not attend) by the patient, appeared to rise over time.

Conclusions This review has demonstrated a possible correlation between wait time for a clinic appointment and how patients behave. The shorter a patient has to wait; it appears they are more likely to actually attend clinic. If so, this potentially has implications for discussions around possible reorganization of services, to improve engagement and outcomes, by coming up with innovative ways of reducing wait times.

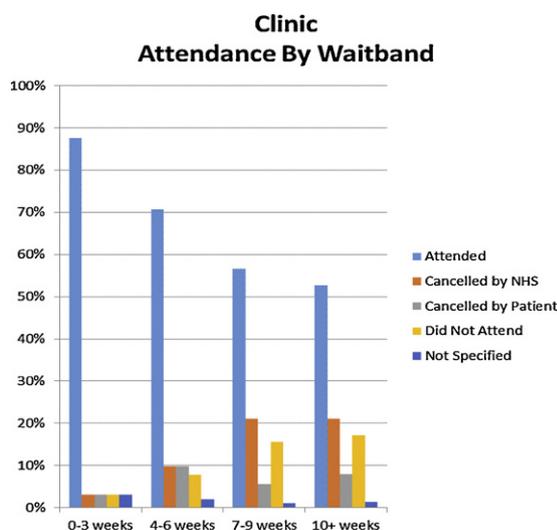


Fig. 1 Clinic attendance by waitband.

Table 1

Clinic Attendance	Attended	Cancelled by NHS	Cancelled by Patient	Did Not Attend	Not Specified	Grand Total
Wait Band						
0-3 weeks	88% (n=28)	3% (n=1)	3% (n=1)	3% (n=1)	3% (n=1)	100% (n=32)
4-6 weeks	71% (n=36)	10% (n=5)	10% (n=5)	8% (n=4)	2% (n=1)	100% (n=51)
7-9 weeks	57% (n=51)	21% (n=19)	6% (n=5)	16% (n=14)	1% (n=1)	100% (n=90)
10+ weeks	53% (n=120)	21% (n=48)	8% (n=18)	17% (n=39)	1% (n=3)	100% (n=228)
Grand Total	59% (n=235)	18% (n=73)	7% (n=29)	14% (n=58)	1% (n=6)	100% (n=401)

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.955>

EV0626

Descriptive study of adjustment disorders in a mental health unit.

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Introduction Adjustment disorders are a common psychiatric disorder in primary care and mental health units, with point prevalence estimates ranging from 0.9% to 2.3%. These disorders have been recently defined as a stress response syndrome in the fifth edition of the DSM, causing emotional and social difficulties and also a large economic burden on society.

Objectives The aim of this descriptive study was to analyse the socio-demographic characteristics and treatment of the patients diagnosed with adjustment disorders in the first visit in a mental health unit.

Methods The study sample consisted of 128 patients admitted for a psychiatric consultation in a mental health unit in Alicante (Spain) from their primary care physician, between February and July 2016. Variables of gender, age, current employment status, diagnosis and treatment were measured. Data analysis was conducted using SPSS software.

Results The data from 31 patients who were diagnosed with adjustment disorders meant a 24% of the sample. The median age was 47 years old in the adjustment disorders group. Among those with adjustment disorders, 61% were women, and 52% of them were unemployed. Almost 60% of them had at least one psychotropic prescription and only 22% were derived to psychology.

Conclusions Adjustment disorders are considered as an intermediate category between no mental disorder and affective disorders. Most authors recommend to start with a psychotherapeutic intervention. Despite starting with medication has not proved effectiveness in the studies, most of the patients had at least one psychotropic prescription before the psychiatric evaluation.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.956>