

our national health system Laws until two years are completed for newly appointed surgeons. Managers might encourage surgeons if some balancing convenience was offered.

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EW0791

A grounded theory of service providers' perceptions of a recovery-oriented transformation of a mental health service

G. Eikmeier^{1,*}, T. Junghans², T. Kruse², A. Lacroix¹

¹ Klinikum Bremerhaven, Psychiatry, Bremerhaven, Germany

² Klinikum Bremerhaven, Management Board, Bremerhaven, Germany

* Corresponding author.

Recovery-oriented mental health service programs are often rather based on ideological or political considerations than on empirical evidence.

At Klinikum Bremerhaven Reinkenheide, we have included peer support workers in our teams in order to improve the quality of our treatment program and the recovery attitudes of the staff members. To control and evaluate this process an independent investigator conducted 13 (T1: February 2012), respectively 15 (T2: September 2013) interviews with different stakeholders of the change process. The interviews were transcribed and analysed for the categories level of information, confidence, participation and profession/working conditions/team structure.

The main result of T1 was that nursing staff fostered the projected transformation while physicians and psychologists focused on risk management and worried about losing their role. As implication of the T1 results, we offer a continuous in-house-training to improve interprofessional teamwork and social psychiatric expertise. At T2 all interviewed participants judged the involvement of the peer support workers positively. Many of the interviewees expressed though that from their point of view their participation had decreased and/or, the reorganisation was already terminated. As implication of T2, we now try to improve our internal communication and cooperation and strengthen the involvement of all stakeholder groups.

Besides the employment of peer support workers, it is essential in a recovery-oriented transformation of mental health services:

- to train staff members continuously and;
- to involve all stakeholder groups continuously in the change management.

A third survey is projected for 2017 to implement further requirements for a successful change process.

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EW0792

Personal experiences of recovery facilitated by participation in an individual placement and support intervention

I. Gammelgaard^{1,*}, E. Stenager², L.F. Epløv³, K.S. Petersen⁴

¹ Institute of Clinical Research, University of Southern Denmark, Psychiatric Research Unit, Odense C, Denmark

² Institute of Regional Health Services, University of Southern Denmark, Research Unit of Mental Health, Aabenraa, Denmark

³ Research unit of Psychiatric Center Copenhagen, Research unit of Psychiatric Center Copenhagen, Hellerup, Denmark

⁴ Faculty of Health Sciences, University of Aalborg, Department of Health Science and Technology, Aalborg, Denmark

* Corresponding author.

Introduction Individual placement and support (IPS) is an evidence-based intervention where IPS consultants support people with severe mental illness in achieving competitive employment. IPS is a recovery-oriented intervention, but vast evidence regarding its ability to influence recovery-oriented outcomes challenges this position.

Aim To investigate how an IPS-intervention influences the personal recovery process in people with severe mental illness.

Method A qualitative phenomenological study including interview of 12 participants in an IPS-intervention. Analysis was made using a four-step phenomenological analysis method.

Results IPS contributed to personal recovery in a number of ways: The IPS consultants' ability to create an equal, acknowledging and safe relationship where participants' needs were taken into consideration in the search and support for job or education was found valuable. In combination with employment, the role of the IPS consultant contributed to normalization and stabilisation of participants' daily lives, changed their behaviours and beliefs about maintaining new achievements, personal goals and dreams.

Conclusion Individual placement and support provides opportunities to gain personal goals and contributes to stabilisation and normalization of participants' daily lives. This study supports the notion that the individual placement and support positively influences personal recovery in people with severe mental illness.

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EW0793

Healthy lifestyles programme in an acute psychiatric inpatient unit

I. Ganhaio^{1,*}, M. Trigo², A. Paixao³, J. Cardoso²

¹ Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Psiquiatria Geral e Transcultural, Qta do Anjo, Portugal

² Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Psiquiatria Geral e Transcultural, Lisbon, Portugal

³ Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Alcoologia e Novas Dependências, Lisbon, Portugal

* Corresponding author.

Introduction Mental health issues and illnesses are associated with poor self-care and unhealthy lifestyles that contribute to morbidity, mortality and overall decrease in quality of life when compared to the general population. Healthy lifestyle promotion is infrequently considered a priority in mental healthcare services, especially in acute psychiatric inpatient units.

Objectives To present a healthy lifestyles promotion programme implemented in an acute psychiatric inpatient unit.

Aims To reflect on how to design an adequate programme for patients with complex needs.

Methods In a general psychiatric inpatient unit, a team of two psychologists and one psychiatrist, ventured to introduce weekly activities that included drawing, colouring, painting, crafts and games, that provided a context for patients and the team to sit down together or to gradually "drift" together and make possible conversations focusing on tobacco smoking, caffeine consumption, weight control, physical activity and health promoting activities.

Results Instead of individual or group psychoeducation talk interventions, play and art strategies, in closer proximity with the patients, made it far easier to engage difficult patients and made psychoeducation possible and fun.

Conclusions Patients with severe mental illness are frequently reluctant to engage in activities targeting healthy lifestyles, especially in acute psychiatric inpatient units, when insight and motivation for change may be low due to illness and consequences