512 - The impact of the Health Crisis on the psychological feeling of patients during the second wave of Covid-19 in Geriatric wards.

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Objectives

During the Covid Health crisis, Belgium is one of the countries that currently counts a very high rate mortality among the elderly population. With more than 24,000 deaths, including more than 10 000 nursing home patients (for a total population of 11 million); this vulnerable population paid a heavy price during this pandemic. During the 2nd wave, we wanted to focus on the level of stress, anxiety, depression and loneliness among the Geriatric hospitalized population.

Methods

This prospective observational and multicentric study (CHU St Pierre and Hospital of Nivelles-Tubize) evaluated the psychological state of our patients hospitalized in Geriatrics from 16/11/2020 to 16/03/2021 (with a Minimal Mental State > 20/30) according to the Hospital Anxiety and Depression Scale (HAD) and to the Perceived Stress Scale(PSS). We also estimated their feeling of loneliness. We analysed their biographical, social and medical data as well as their Global Geriatric Evaluation. We will also observe if there are difference between patient living in Nursing Home (NH) or at home.

Results

The sample (n=81) has an average age of 85 years and is predominantly female. The majority were widows with an average of 2 children living at home

Among the 81 geriatric inpatients, 30% scored positive for anxiety, rising to 57% with questionable cases. The depression scale was found to be certain for 17%, rising to 39% if doubtful cases are taken into account .We did not observe a significant difference between the two categories for the patients living at home or in Nursing Home. For the Perceived Stressed Scale, 65% had a high stress score, 15% a moderate score and 20% a low score. It can be noted that nursing home residents also suffer more from loneliness (56%) than people living at home (35%).

Conclusion

This study confirms that the pandemic has had a deleterious effect on the mental state of our elderly during the 2nd wave despite some efforts to reduce isolation. The high mortality rate could be explained by government mismanagement, a delay in action in NH, but also by a latent ageism in Belgium which it would be good to analyze after the pandemic.

513 - Lithium monitoring in Old Age Psychiatry – a quality improvement project

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INTRODUCTION:

Lithium has a narrow therapeutic index with a risk of toxicity and potential to increase morbidity and mortality, particularly in the elderly with co-morbid illness and polypharmacy. Lithium therapy and monitoring of lithium levels require precision and several guidelines have been issued including recommendations for strict control of lithium levels in the elderly population.

RESEARCH OBJECTIVE:

We evaluated the effect of implementation of a multifaceted management programme on the compliance with international practice standards for lithium monitoring in patients under the care of Psychiatry of Old Age (POA), Sligo Leitrim Mental Health Services in the North West of Ireland.

METHODS:

Results from a prior audit performed in February 2020 involving a cohort of 18 patients prescribed lithium under the care of POA were analysed and compared to accepted standards. The guideline used as the benchmark for compliance was the National Institute for Clinical Excellence (NICE) guidelines on the use and monitoring of lithium therapy, as published in 2014. Several deficits were found and therefore a designated Lithium Management Programme was established. A subsequent audit, performed using a simplified audit tool incorporating the NICE guidelines, delivered results which were directly compared to the initial findings and analysed to evaluate the effect of the implemented management programme.

PRELIMINARY RESULTS OF THE ONGOING STUDY:

In comparison with findings from 2020, there had been a significant improvement in most facets of lithium management and compliance to practice standards. Of particular note was the improvement of biochemical monitoring, side effect screening, polypharmacy surveillance, patient education and interdisciplinary communication.

CONCLUSION:

The launch of a dedicated Lithium Management Programme with specific features aimed at identifying and addressing poor compliance with monitoring guidelines has led to improved adherence to accepted

international practice standards. Our model provides a dynamic, multi-layered system which paves the way for better patient outcomes, timely access to care and furthering education for patients and staff members.

514 - Practice-based intervention to implement Person Centered care in long-term care facilities for people with Dementia

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Healthcare professionals working with people with dementia (PwD) have increasingly been moving away from task-oriented models of healthcare towards person-centered care (PCC). Several studies have showed positive results of PCC on quality of life of PwD. Also, it shows positive effects on self-esteem and work satisfaction of healthcare professionals (HCP).

We developed an successful practice-oriented intervention to implement PCC in long-term care facilities (LTCFs), based on the theory of Kitwood. The intervention consists of different components and learning methods:

- 1) Management of the facility is trained. They have an important role in motivating HCPs and safeguarding PCC-policy in the future.
- Dementia Care Mapping (DCM)-observations are carried out to gain understanding of the LTCF. DCM is an evidence-based observational method and aims to give a good understanding of the quality of life of PwD.
- 3) The training of staff starts with a Kick-off-meeting. During a 'Mirror theater' with professional actors, an act representing a familiar care situation is performed. Staff participates in the act to become aware of PCC. The kick-off also serves as a warming-up on PCC knowledge.
- 4) After this, staff complete an interactive e-learning on the basic theory of PCC. The e-learning contains practical videos and exercises.