**POSTER ABSTRACT**

**COSSAD: Social and Health Coordination in Home Care**

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**Background:** Non-suicidal self-harming behavior is increasingly prevalent in Danish society. In somatic Emergency Departments (ED), they constitute 12,100 contacts a year. This behavior creates conflicts and (sometimes) the use of coercive measures. Experiences and research-based knowledge show treatment in the ED is challenging. Patients experience a misunderstood treatment, and nurses articulate negative attitudes such as antipathy and a stigmatizing behavior. Existing studies focus on the therapeutical treatment, such as dialectical behavior therapy where the patient is able to participate in the treatment. However, the nurses lack the knowledge of how to support these patients during a psychological crisis.

Mental Health Services Region Zealand, developed a digital solution in the form of a mobile application ‘SAFE app’. The app was co-created with a multidisciplinary psychiatric team and users with lived experiences (patients and relatives). The aim of the app was to provide better and more efficient care and support. SAFE app consists of 36 calming methods. Feedback from staff members and users (relatives and people with lived experiences) was promising. However it was difficult to use the app in critical situations, where patients enter the ED.

**Hypothesis:** When people who self-harm can use SAFE app and they can take care of their immediate needs, they will experience the treatment in ED helpful.

**Aims:** To explore how SAFE app, a digital solution can support Treatment As Usual (TAU) in ED when people are seeking help after an episode of non-suicidal self-harm.

**Method:** A qualitative interview study with a hermeneutical approach (Hans Georg Gadamer) was undertaken from March - April 2021. It involved two emergency departments and included all participants (n=26) who were seeking help after an episode of non-suicidal self-harm. Firstly, all participants were informed and guided in the use of SAFE app. Hereafter in-depth telephone interviews were conducted and analyzed.

**Results:** When people enter the ED after an episode of self-harm, they described how the relationship with the professional was problematic, such as a lack of communication with the nurses, a lack of trust in the system and misunderstandings. They experienced conflict full encounters, such as when nurses possessed authoritarian behavior and they acted as guards. The SAFE app could mitigate these experiences as they found the calming methods helpful and
distracting. SAFE app was perceived as a positive and caregiving supplement in TAU, which could establish a relationship with the nurses. However, they found the app to be too feminine.

**Discussion:** The area of research is relatively young. People who engage in self-harm, experience different reasons for hurting themselves. The SAFE app can provide learning for friends, family, health-care professionals and others. The interventions must be tested in a broader population.

**Conclusion:** Findings from this study suggest that digital solutions can supplement TAU for people with non-suicidal self-harming behavior in ED. Digital solutions can potentially improve the experiences of hospitalization, particularly in the creation of relations to the nurses.

**Implications for practice:** Future implementation of the SAFE app will potentially reduce conflicts with nurses and provide patient-experienced quality of care.