P-577 - INTENSIVE PSYCHIATRY: CREATING, PRESERVING AND RESTORING STABILITY

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Introduction: Psychiatric intensive care units (PICU) are rarely described since it is secluded from external insight. At the same time, it is highly intensive since staff and patients interact around the clock in the most acute phase of psychiatric illness. The PICUs admit patients who are considered extremely unmanageable within psychosis units or acute psychiatric wards, and who often demonstrate aggressive or other forms of severe behaviors.

Objectives: This raises the question: What is going on in these units and what constitutes nursing care? **Methods:** Spradley's 12-step ethnographic methodology was applied. Data was collected through more than 200 hours of field work on three PICUs including 16 hours of formal interviewing and numerous of informal interviews; data also consisted of writing memos and field notes. The field work aimed to understand the staff member's way of interact with the patients and what they did to care for these patients who was considered as unmanageable.

Results: The findings presented here describe how and when nursing care is provided in PICUs. The findings are presented in relation to themes, as these emerged within the psychiatric intensive nursing care. Six themes emerged as frames for nursing care: providing surveillance, soothing, being present, trading information, maintaining security and reducing. **Conclusions:** These themes are used to strike a balance between turbulence and stability and to achieve equilibrium. As the nursing care intervenes when turbulence emerges, the PICU becomes a sanctuary that offers tranquility, peace and rest.