

## Poster Presentation

## Psychosocial

0110 THE ASSOCIATION BETWEEN PSYCHOSOCIAL FACTORS AND NEEDLESTICK INJURIES AMONG NURSES WORKING IN DIFFERENT HEALTHCARE SETTINGS

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10.1136/oemed-2017-104636.84

**Objective** To understand the psychosocial effects of needlestick injuries (NSIs) among nurses working in different healthcare settings.

**Method** A total of 5535 fulltime registered nurses (RN) working among secondary referral hospitals (SRH) or primary clinics (PC) were recruited between 2009 and 2010. A structured self-administered questionnaire was used to assess nurses' psychosocial working conditions and their experiences of NSIs. The psychosocial working conditions were assessed by the Chinese Job Content Questionnaire and a workplace justice scale. The NSIs were assessed by asking nurses' experiences of NSIs in the past 12 months. Multivariable logistic regression was used to analyse the associations between psychosocial factors and NSIs.

**Results** A total of 1032 and 1020 eligible questionnaires for SRH and PC nurses were included for final analysis. The incidence rate of NSIs was 15.2% for SRH nurses and 19.9% for PC nurses. Shift work (AOR: 1.8, 95% CI: 1.2, 3.0) and high psychological demands (AOR: 1.5, 95% CI: 1.0, 2.1) were identified as risk factors of the annual incidence of NSIs among SRH nurses, whilst the risk factors of the annual NSIs included low job control (AOR: 1.4, 95% CI: 1.0, 2.0) and low workplace justice (AOR: 1.6, 95% CI: 1.1, 2.4) among PC nurses.

**Conclusion** This study identified that the psychosocial factors of nurses' NSIs varied across different healthcare settings. Specific strategies for different healthcare settings to prevent nurses' NSIs are warranted.

## Oral Presentation

## Shift Work

0111 THE ASSOCIATION BETWEEN WORK SCHEDULE CONTROL AND NURSES' BURNOUT IN TAIWAN

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10.1136/oemed-2017-104636.85

**Background** Shiftwork and long work hours have been reported as significant risk factors for nurses' burnout. In addition, whether nurses have ability to *control* their own *schedule*, such as having options and decision over swapping shifts or taking unpaid leave, remain lacking.

**Objective** To examine the associations between nurses' work schedule control (WSC) and their effect on burnout.

**Method** A total of 3431 fulltime registered nurses working in the hospital were systematically sampled in 2013. A structured self-administered questionnaire was performed to assess nurses' WSC, work schedule demands (WSDs) and their effect on burnout. The WSC was assessed by asking nurses' experiences of requesting leave. Personal and client burnout status were measured using the Chinese version of the Copenhagen Burnout Inventory. Multivariable logistic regression was used to analyse the associations between nurses' WSC and their effect on burnout. The WSDs, including shiftwork patterns and average weekly working hours, were controlled.

**Results** A total of 2631 questionnaires were eligible for final analysis. Only 5% of participants experienced unrestricted leave. After adjusting for demographic data, both average weekly working hours and unrestricted leave were significantly associated with nurses' personal and client burnout. Nurses exposed to rotating shift work were more likely to experience client burnout.

**Conclusion** This study identified that work schedule control (WSC) was related to personal and client burnout among hospital nurses. Hospitals wishing to proactively *reduce nurses' burnout* may permit more unrestricted leaves when requested by the staff nurse.