Objectives Returning to employment after a period on welfare benefits is particularly challenging for people aged over-50 and those with health conditions. We explore the unemployment-to-employment transitions made by clients engaging with the Work Programme (WP); the UK Government’s main return to work (RTW) initiative. It supports two main groups of welfare benefit claimants - JSA, for people who are unemployed but capable of work; ESA, for people with a disability - as well as those with health conditions. We explore the unemployment-to-employment transitions made by clients engaging with the WP; the UK Government’s main return to work (RTW) initiative. It supports two main groups of welfare benefit claimants - JSA, for people who are unemployed but capable of work; ESA, for people with a disability - as well as those with health conditions.

Methods The data were from the SOPIE cohort (13,461 unemployed clients aged 18–64, who entered the WP in Scotland between April 2013 and July 2014). For clients who started a job, unemployment and employment spells during their two-year period in the WP were determined and sequence index plots produced using Stata version 14. These visualisations were explored by age and benefit type.

Results Job start rates were: ‘JSA clients under-50’, 49%; ‘JSA clients over-50’, 44%; ‘ESA clients under-50’, 23%; ‘ESA clients over-50’, 14%. Despite the lower numbers of ESA clients starting a job, these visualisations revealed that these clients (both under and over-50) were as likely to sustain employment as JSA clients. Analyses also investigated employment by Standard Occupational Classification and full versus part-time.

Conclusions Visualising longitudinal employment data provides new insight into the relationship between age, health and the RTW process. Although people receiving health-related benefits (ESA) enter employment at lower rates, they can sustain employment similarly to JSA clients, suggesting support for policies aiming to reduce the disability employment gap.
Oral Presentation
Reproductive Effects

0262 RISK OF MISCARRIAGE IN ASSOCIATION TO WORK AT NIGHT: A PROSPECTIVE PAYROLL DATA STUDY

1Luise Mølenberg Begtrup*, 2Ina Olmer Specht, 3Paula Edesa Christina Hammer, 4Anne Helene Garde, 5Johnni Hansen, 6Jens Peter Elekilde Bonde. 1Department of Occupational Medicine, Bispebjerg University Hospital, Copenhagen, Denmark; 2Parker Institute, Bispebjerg and Frederiksberg University Hospital, Copenhagen, Denmark; 3National Research Institute for the working environment., Copenhagen, Denmark; 4The Danish Cancer Society Research Centre, Copenhagen, Denmark

10.1136/oemed-2017-104636.213

Withdrawn at the author’s request

Methods This study used data from the Dutch National Working Conditions Survey (NWCS 2014; occupational disease confirmed by a doctor, self-reported, employees).

Multivariate regression analyses were performed to assess the independent association at the individual level (OR) between each determinant and the presence of at least one occupational disease. Additionally, the Population Attributable Risk (PAR) was calculated for each determinant in order to assess the risk at the population level as well.

Results The top three determinants that may be influenced and also contributed most to musculoskeletal occupational diseases, were the same at the individual and the population level: ‘Low job demands’ (PAR=40.0%; OR=2.25), ‘Working in uncomfortable positions/bad posture’ (PAR=17.7%; OR=1.62), and ‘High job demands’ (PAR=17.6%; OR=1.57).

Conclusions These determinants may be influenced through education, measures and/or policies at the workplace or on higher levels, in order to decrease the prevalence of occupational diseases in the working population.

Poster Presentation
Exposure Assessment

0264 PROBE: HAZARDOUS CHEMICAL PRODUCTS REGISTER FOR OCCUPATIONAL USE IN BELGIUM

1,2Lode Godderis*, 3Sara Pauwels, 4Anne-Marie Temmerman, 5Steven Ronsmans, 6Antoon De Schryver, 7Dorina Rusu, 8Lutgart Braeckman. 1KU Leuven- University of Leuven, Department of Public Health and Primary Care, Environment and Health, Kapucijnenvoer 35 b1k D box 7001, 3000 Leuven, Belgium; 2DEWS, External Service for Prevention and Protection at Work, Interleuvenlaan 58, 3001 Heverlee, Belgium; 3UMcGhent University, Department of Public Health, De Pintelaan 185, 4000 Gent, Belgium; 4OCMV Brugge- Public Social Welfare Centre Bruges, Ruddershove 4, 8000 Brugge, Belgium; 5University of Antwerp, Epidemiology and Social Medicine, Universiteitsplein 1, 2610 Antwerpen, Belgium; 6University of Liège, Department of Public Health, Avenue Hippocrate 13, 4000 Liège, Belgium; 7SPMT-ARISTA, External Service for Prevention and Protection at Work, Rue Royale 196, 1000 Bruxelles, Belgium

10.1136/oemed-2017-104636.215

During their job, workers are exposed to a wide variety of working conditions including chemical substances that are potentially detrimental to employees’ health. Today, Belgian data on occupational exposure to dangerous chemicals are collected by Occupational Health Services (OHS) merely for the purpose of assuring the appropriate health screening. This makes these data of little use for epidemiological research and exposure surveillance on one hand and for policy development by competent authorities on the other hand. The PROBE (Hazardous chemical Products Register for Occupational use in Belgium) study is set up to investigate the exposure of Belgian workers to dangerous chemical products, including type, duration and frequency of exposure. PROBE consists of a systematic collection and analysis of occupational chemical exposure data. A trained, motivated, and representative sample of occupational physicians from both internal and external OHS will...