

- Respiratory Protection for Ancillary Healthcare Workers (e.g., housekeepers) – a proposed 10 min module (anticipated release Fall 2017); and
- Case Study of Respiratory Protection in Healthcare – an interactive respiratory protection training for healthcare OHNs (anticipated release Fall 2017).

Conclusion AAOHN with NIOSH formed an advisory board of respiratory protection experts and developed an acclaimed national and international online respiratory protection training that meets the needs of OHNs, frontline healthcare workers, and ancillary healthcare workers. As of June 2017, over 330 individuals have completed the Respiratory Protection training.

654 COMPARATIVE STUDY ON THE ACTIVITIES OF PART-TIME OCCUPATIONAL PHYSICIANS IN JAPAN BETWEEN 2008 AND 2016: EFFECTS OF THE STRESS-CHECK PROGRAMME

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Introduction In 2015, implementation of the Brief Job Stress Questionnaire (also known as the ‘stress-check programme’) became a legal obligation for employers in Japan. The Ministry of Health, Labour, and Welfare of Japan recommends that an occupational physician (OP) should play an important role in implementing this programme. This study aimed to compare the activities of Japanese part-time OPs in 2008 and 2016 and to investigate the effects of the stress-check programme.

Methods Questionnaires were sent via mail to 946 part-time OPs in the Kyoto prefecture of Japan in 2016. Completed questionnaires were returned by 181 OPs who were private practitioners or physicians in hospitals. Questions about the types and sizes of the industries where the OPs served, allocation of service hours, and difficulties encountered in their activities were included in the questionnaire. The responses were compared to the results of the same survey in 2008 to determine the changes in OP activities and the problems encountered after implementing the stress-check programme.

Results In 2016, 22% of OPs utilised exceedingly long hours in the stress-check-related activities. Hours for specific health examination, health and hygiene education, health promotion activity, and development of a comfortable workplace reduced from 4.7 hours in 2008 to 2.0 hours in 2016. A total of 62% OPs frequently encountered difficulties in the stress-check-related activities in 2016. Many OPs also reported difficulties in the management of mental health and overwork, and support of employees’ return to work in both 2008 and 2016.

Discussion Enforcement of the stress-check programme in 2015 changed the activities of part-time OPs in Japan. This programme might impose problems on OPs. Therefore, OPs should be given specific opportunities to gain more information and skills in these areas.

721 ASSESSMENT OF PROGNOSIS BY PHYSICIANS WORKING IN THE FIELD OF DISABILITY EVALUATION: A QUALITATIVE STUDY

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Introduction Assessment of prognosis including improvement of work functioning is challenging and research on this topic is lacking. To make this process more explicit, the following research question was formulated: Which aspects and considerations, difficulties, needs and potential solutions, affecting the prognosis assessment by physicians, working in the field of disability evaluation, can be identified?

Methods In-depth, semi-structured individual interviews were conducted with 20 physicians working in the field of disability evaluation at the Dutch Social Security Institute (UWV). Verbatim transcripts were independently analysed by two researchers until data saturation was achieved and significant themes emerged.

Results Aspects and considerations affecting the prognosis assessment consisted of medical themes including nature and severity of disease, the role of treatment, course of the disease, and medical evidence. In addition, patient-related and physician-related aspects were distinguished. Patient-related aspects as the patients’ work perspectives, coping or recovery behaviour and physician-related aspects as awareness of the physicians’ own role and reflection on empathy for clients and ethical considerations were deemed to be important. Difficulties described by physicians were assessment of complex diseases, applying prognostic evidence to the individual and lack of time when seeking for prognostic evidence. Needs and solutions formulated by physicians, were continuous education, better collaboration with medical specialists and/or labour experts and the use of prognostic tools like checklists, apps or internet applications to incorporate evidence on prognosis.

Discussion Physicians identified several medical and patient-related aspects, elucidating the process of prognosis assessment. A variety of difficulties were reported and physicians expressed their needs for further support. Future research could focus on development, efficacy and feasibility of training, prognostic tools, guidelines, collaboration with labour experts or information exchange with medical doctors in different specialties.

761 THE DEVELOPMENT OF A WORKFORCE PLANNING TOOLKIT FOR OCCUPATIONAL HEALTH NURSING SERVICES IN IRELAND

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Introduction At a time when health resourcing costs are contracting, it is vital that services examine the potential to maximise the efficiency of their services and resources.