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DEVELOPMENT AND EVALUATION OF RETURN CALLS – A TOOL TO ENHANCE RETURN TO WORK FOR LONG-TERM ABSENTEEISM

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Introduction Since 2002, long-term absenteeism in Belgium has steadily increased each year. In 2016, 5.13% of the Belgian working population was on sickness absence for >1 month. In Belgium, sickness-absence benefits are paid by the employer in the first month and subsequently by social security. To increase the RTW chances among employees with long-term absenteeism, Mensura Occupational Health Services (OHS) developed return calls.

Methods Mensura OHS developed the following procedure:

- Companies with long-term absentee employees complete an online intake form for each employee on long-term absence (>1 month).
- A trained professional (nurse) from Mensura OHS calls the employees on long-term sickness absence and uses a telephone protocol to collect data on their sickness-absence reasons and desire to receive RTW support. Employees willing to receive support from Mensura OHS are referred to voluntary consultations with an occupational physician (OP).
- The OP evaluates the possibility of starting a reintegration program or further sickness absence.
- The employer receives individual and group reports (in accordance with confidentiality regulations and privacy-protection laws), including recommendations. Mensura OHS reviews the results and discusses possible solutions with the employer.

Results By the end of 2017, return calls will be evaluated by:

- Comparing the anticipated sick leave date with the actual return to work date
- Mapping the long-term evolution of absenteeism in companies

By the ICOH 2018 Congress, preliminary results will be available.

Discussion Return calls can establish a proactive, constructive approach to increase the chances of successful reintegration of employees on sick absence. The results may inform targeted strategic-policy advice to reduce and prevent long-term absenteeism in companies.

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SICK ABSENCE IN THE SÃO PAULO REGION

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Introduction The literature reports that many of the causal factors related to sickness absenteeism are linked to working conditions and the absence from work often means by which the worker would escape a conflicting situation. Having this central question indexes is studied in Absenteeism of institutions in which the author practiced occupational medicine.

Methods Retrospective study of 6183 workers with absence periods of up to 15 days, during the years 1989 to 2004 of

a private general hospital, two public health services, a public education unit and a large private food industry in the region of Ribeirão Preto. Traditional absenteeism indices (severity, frequency, average length of leave, frequency per individual and average license per person) are used according to age, length of service, occupational group, gender, former employees and employees of the same institution And employees with concomitant links at two institutions.

Result The rates are higher at the extremes of age, in women, the unskilled occupational group among the dismissed employees and public entities.

Discussion The profile is similar to other studies indicating motivational influence mainly on comparing concomitant double bond of workers (higher absenteeism in the public service where there is stability guaranteed by law). The double work/home journey and greater concern about the state of health may be influencing the female sex. The occupational group presents an increase of the indices directly proportional to the decrease of the schooling and the responsibilities of the tasks. Real morbidity seems to influence the indexes of the oldest and youngest, and institutions have increased indexes since the second year of attachment (adaptation to the climate of absenteeism of each institution). The results demand a global managerial action discarding the isolated participation of the Service of Medicine of the work, usual practice in our country, in the control of the absenteeism by diseases.

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ESTABLISHMENT AND APPLICATION OF OCCUPATIONAL HEALTH EXPENDITURE INPUT-OUTPUT MODEL IN IRON AND STEEL ENTERPRISE

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Introduction Insufficient and unreasonable occupational health investment is one of the important reasons for the high rate of occupational diseases and accidents in iron and steel sector. The purpose of this study is to establish occupational health and safety investment prediction model of iron and steel manufacture for higher returns.

Methods The DEA model and input-output table were established. The detailed data of the input and output of each branch in a steel enterprise in 2015 were collected and the input and output efficiency of occupational health in each branch were evaluated through DEA method. The data were put into the DEA model and a list of relevant parameters calculation and adjustment scheme were obtained, and occupational health input and output data after adjustment and other relevant data were substituted into it to build prediction model.

Results According to the characteristics of the iron and steel enterprise's occupational health, occupational health funds input-output table have been established, which can reflect the input and output relationship among various departments (workshops) directly and clearly. In the branches of the iron and steel enterprise, the occupational health input output efficiency score of stainless steel plant and smoother was the highest, equal to 1, while the cold rolling plant had the lowest, equal to 0.759. In the cold rolling plant, only acid rolling workshop parameters met the standard of $\alpha=1$, $s^-=0$, $s^+=0$.

And the remaining four workshop could reach at 1.7044, 2.0238, 1.3152 and 1.2136 times respectively after adjusting each component according to the parameter. The adjusted data were put into the occupational input-output table and the prediction model was built.

Conclusion If the estimated annual output of a given year is known, after being converted to the total output value, the most suitable occupational health input and the largest occupational health output can be calculated.

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THE ASSOCIATION BETWEEN WORK-FAMILY SPILLOVER AND QUALITY OF SLEEP: A PROSPECTIVE STUDY OF JAPANESE WORKERS

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Introduction Quality of Sleep has been linked to poor health. While work-family spillover is associated with health problems and impaired work performance of workers, previous findings were inconsistent on, the association between work-family spillover and sleep quality. No study was conducted in non-western countries. The objective of this study was to investigate the prospective association between work-family spillover and sleep quality among Japanese workers.

Methods The database used in the study was from a 2 year prospective cohort study. In the baseline survey (T1) in 2011, questionnaires were sent to 1356 workers living in two wards of Tokyo, and 753 (56%) responded, and 489 completed all scales and items used the study. A follow-up survey was conducted in 2013, with 224 (46%) respondents out of the 489 completers at T1; 176 completed all scales. The questionnaire (both T1 and T2) included self-reported instruments of work-family spillover (the Survey Work-home Interaction-Nijmegen, SWING), sleep quality (Pittsburgh Sleep Quality Index, PSQI), and job stressors (Brief Job Stress Questionnaire, BJSQ), and demographic variables (age, sex, education, marital status, and work styles). Multiple linear regression analysis was employed of PSQI scores on SWING scale scores, adjusting for demographic variables and PSQI score at T1. (SPSS version 22)

Results Among the 176 completers, 36% were men; the average age was 39 years old. Work to family negative spillover (beta=0.20) significantly and positively correlated with sleep quality, after adjusting for the demographic variables (p=0.020). No significant association was observed between the other type of spillover (i.e. work to family positive, family to work positive or negative) and sleep quality. (p>0.05).

Conclusion This prospective study confirmed the association between work-family negative spillover and sleep quality in a sample of Japanese workers. Work to family negative spillover could be considered a target condition to improve sleep quality of workers.

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HEALTH LITERACY IN JAPANESE WORKPLACE (2ND REPORT): IMPACT OF WORKPLACE HEALTH PROMOTION, LESSONS LEARNED FROM THE PRACTICE

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Introduction Integration of Occupational Health and Safety (OHS) and Workplace Health Promotion(WHP) aiming at employees' health and well-being attracts attention in WHO's 'Healthy Workplace Framework' and NIOSH's 'Total Worker Health'. Also in Japan, WHP is actively conducted in many companies in trends, however there are few studies on the effectiveness of WHP in Japan. We examined the impact on its lifestyle and health literacy and success factors from the practical experience of WHP in a company.

Methods We reported OHS and WHP activities in an architectural consultant company for 15 years, and its impact in the pre-post comparison design to study its success factors.

Results OHS and WHP activities at the company began in 2001. It inducted occupational physician (OP)/OHS committee (2001); employment of occupational health nurse (OHN)/developed guidelines (2002); e-mail newsletters (2003); first health survey (2005), full-time employment of OHN(2006), healthy lunch box project (2007), OHSMS (2009); health policy (2011); health lecture/portal web-site (2012); mental health training/company sports festival (2013); health lecture by labour union(2014); gymnastics with the president/3rd health survey (2015), delivery of health lecture to each department (2016), etc. In the pre-post comparison of lifestyles using health survey, employees thinking nutrition balance (40→79%), having exercise habits (31→36%) and sufficient sleep (12→18%) increased, improving the employee's health literacy for four consecutive years from 2014 to 2017.

Conclusion A good impact on lifestyle and health literacy was obtained from 15 years of WHP. It was considered that success factors of WHP practice involving human resources including management/labour union are:

1. discovery of key persons highly interested in health,
2. existence of OHN,
3. corporate culture with good communication, and
4. clear management's commitment and health policy.

WHP will be increasingly important in Japan as ageing population and health disparities progress. Its important outcome is organisational and employee health literacy, so we want to continue the research to contribute to its improvement.

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FUTURE CHALLENGES FOR THE OCCUPATIONAL PHYSICIAN

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Introduction An economic and demographic transition with an ageing workforce, evolving work organisation and new emerging risks is combined with a shortage of Occupational Physicians (OPs). This study aims to propose recommendations for