

future occupational health surveillance (OHS) and the role of OPs.

Methods First, the PubMed, EU-OSHA and International Labour Organisation databases were screened for literature from 2006 to August 31, 2016, concerning OHS, return-to-work policies and risk management systems in Europe, Japan, Canada and other OECD countries. Second, a standardised mail survey was delivered to all members of the Belgian Professional Association of OPs.

Results

- The literature review showed that European directives legally inspired countries to adapt their legislations and develop strategic OHS plans. Nevertheless, the comparison of OHS in different countries shows a varied landscape.
- The response rate of the survey was 54% (n=262).

The results prompt a paradigm shift:

- Within 5 years, OPs must focus more on return-to-work (96.3%; 95% CI: 93.2% to 98.1%) and risk analyses (84.9%; 95% CI: 79.9% to 88.8%) while training occupational nurses (ONs) to execute routine occupational health examinations (46%; 95% CI: 39.8% to 52.4%). Similarly, a more standardised and multidisciplinary approach to risk assessment should be developed (74.7%; 95% CI: 68.8% to 79.8%).
- By 2030, OPs would be more specialised in toxicology, disability management, ionising radiation, etc. (42.2%; 95% CI: 36.2% to 48.5%), and ONs would be trained on risk assessments (74.8%; 95% CI: 68.9% to 79.9%) and health promotion (98%; 95% CI: 95.3% to 99.1%). OPs disagree that general practitioners (GPs) could solely execute occupational health examinations (81.7%; 95% CI: 76.4% to 86.1%).

Discussion The role of OPs must be part of a trend toward evidence-based OHS (i.e., studying the effectiveness and efficiency of 'fitness for the job assessments'), disability management and engagement with a wide network of stakeholders (such as ONs, GPs and health insurance organisations).

1404 RESPONSES FROM 'HIGH-STRESS' WORKERS OF THE STRESS CHECK PROGRAM IN JAPAN – A CASE STUDY

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Introduction The Stress Check Program in Japan (SC), based on the Industrial Safety and Health Law, began on Dec 1, 2015. It requires an employer to

1. provide a survey of psychosocial stress for workers,
2. report to each individual worker his/her results,
3. arrange for an interview by a physician when requested to do so by a worker with high stress,
4. consider the opinions of the physician and improve working conditions for the worker, and
5. not take any action against the worker because he/she needs changes of his/her working conditions (Kawakami and Tsutsumi, 2016).

Ministry of Health, Labour and Welfare, Japan (MHLW) recommends an employer to assign an occupational health

physician (OHP) to both the designated staff of the survey (DSS) and the interviewer (IVW).

Methods In June 2017, the Brief Job Stress Questionnaire (Shimomitsu, *et al.*, 2000) was used as the survey at several offices of a company in Japan, where one of the presenters is assigned to OHP, DSS, and IVW. The criteria for 'high-stress' was based on an example appeared in the manual by MHLW. A presenter (as DSS) sent e-mail to fifty 'high-stress' workers, offering the interview by him (as IVW) and promoting permanent health consultation services by him (as OHP) or by outsourcing psychologists. Then he described the responses from the workers for a month.

Results Three workers requested the interview. Other ten workers reported his/her state of health by e-mail, phone or permanent health consultation. Another worker was accidentally arranged health consultation by the boss, not reported the result of the survey, due to sickness absence.

Conclusion Though SC as single program has weak scientific evidence for reducing workers' mental health problems; it may become more effective as a part of continuous occupational health promotion.

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PROCESS OF ACCREDITATION OF HEALTH SERVICE IN AUTOMOTIVE COMPANY OF BRAZIL

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Introduction Private and public companies that have employees governed by the Consolidation of Labour Laws must have Specialised Services in Safety and Occupational Medicine, with the purpose of promoting health and protecting the integrity of the worker. These health professionals are responsible for urgent and emergency care in the work environment where we know the need for technical training of the professionals. The problem is that many find themselves without adequate updating in scientific training, updating in their internal processes, risk management that guarantees a safe assistance to the worker. These are the challenges of this research, identifying which are the main difficulties encountered by health managers of the company to implement an accreditation process in their medical services.

Method Cross-organisational study developed through the data and indicators obtained with the implementation of an Accreditation and Certification process of the National Accreditation Organisation (ONA) in Brazil, from 2014 to 2017.

Results The implementation of the Accreditation process in the company's Medical Service allowed us to identify many process failures in the service routines. Pharmacy, Ambulatory Infection, and Medical Records Committees were established based on the requirements of the Accreditation and Certification Standards. All employees attended received an adhesive label with his name to be stitch to the clothing. Urgent care protocols were developed, as well as the Manchester Protocol for the prioritisation of care. A worksheet was created to identify all the Adverse Events found and a follow-up list of the pending action plans.

Discussion The Certification process is a significant differential for companies that are ready to implement it as it assures the patient's life and reduces the chances of medical failures or processes that generate damages to the patient. This company

was the first in the country to have a Certification in Internal Medical Service of companies.

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MUSCULOSKELETAL DISORDERS (MSD) AMONGST FARMERS IN THE KOURIFATE MUNICIPALITY, PROVINCE OF FQUIH BEN SALAH

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Introduction MSD are one of the most worrying problems in occupational medicine, it affects workers in all business sectors. They group together a set of periarticular diseases, affecting the soft tissues of upper limbs, lower limbs and the back.

In Morocco, the agricultural sector plays an important role in economical, cultural and political life, it is an important source of employment. However, MSD represent a big problem in agriculture, most of the time, workers in this sector are exposed to uncomfortable positions, repetitive movements and carry heavy loads.

Methods This is a descriptive study of 52 cases of MSD among farmers who visits the Kourifate Health Centre. The study consists of interviewing each patient and completing a questionnaire.

Results This study allowed us to highlight the magnitude of the complaints concerning MSD problems amongst farmers and showed us the severity of the problem. Complaints about relatively severe MSD (in frequency, duration and severity) are more seen in lower back (77%) shoulder joint (38.4%), cervical spine (32.6%) and finally in elbow and wrist joints (25%).

Discussion Our study shows that there is a significant backlog in occupational health and safety in the agricultural sector, which mainly is an informal sector, and therefore there is a great need for assessment and prevention of occupational risks. Although our study is rich in information, we can't extrapolate our results to the whole sector given the size of our sample.

Conclusion Many farmers are aware of the need for medical follow-up and suffer from chronic pain requiring multidisciplinary care, but the lack of resources and the laxity in the enforcement of safety and health legislation are prolonging their suffering.

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WORKER HEALTH SURVEILLANCE: CHALLENGES TO MAKE IT HAPPEN

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Introduction Worker Health Surveillance is a continuous and systematic process of gathering, analysis and dissemination of data on work-related events, focused on planning and implementation of measures to health promotion, prevention of risks, diseases and harms and also professional rehabilitation. Requires integration of actions and services from healthcare system to ensure comprehensive healthcare workers. Thus, this study aimed to analyse the implementation of worker health surveillance actions in Sao Carlos, Brazil.

Methods qualitative study, performed in two steps:

1. analysis of documents and policies related to health care workers,
2. semi-structured interviews with managers and policy makers that works in health care system and has (or should have) interface with health care worker surveillance.

Data collected were analysing through thematic analysis. This study was approved by research ethical committee and all ethical issues were respected.

Results Analysis of documents and policies show the existence of a National Comprehensive Workers Health Care (Renast), which proposes the articulation of healthcare actions and sectors, in the federal, state and regional levels. Such actions should be developed in the healthcare network, guided by Nacional Policy of Workers Health. Although national policies are well structured and defined, its implementation still meets barriers and challenges, mainly at the local level. Health managers and policy makers also suffer with this reality, showing difficulties to understand their role in the health network and to comprehend the worker health surveillance as a whole.

Discussion The health care services cannot implement worker health surveillance due disarticulation among governmental agencies, actions and professionals involved in the health network. As a result, we can see the invisibility of worker health surveillance in the health system, area that still remains treated as a specialty of occupational health/medicine, in a fragmented and disconnected way.

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EXERCISE PROTOCOL FOR WORK-RELATED MUSCULOSKELETAL DISORDERS

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Work-related musculoskeletal disorders are easily mitigated and prevented by a specific exercise program that targets the various bodily systems involved in the condition.

A telemedicine program will be discussed with a discussion of five (out of a sample of 200) cases with work-related musculoskeletal injuries. They were advised to follow a program based on the pathophysiology of these condition, and their symptom complex. A general protocol to target computer-related musculoskeletal symptoms has been developed through the successful treatment of these sufferers.

A discussion of the differences in this protocol and the traditional care will follow.

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SCIENTIFIC EVIDENCE OF OCCUPATIONAL EXPOSURE TO ORGANIC SOLVENTS AND ITS RELATIONSHIP WITH HEARING LOSS

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A systematic review was carried out about the auditory effect of occupational exposure to solvents. For such purpose, four data bases, chosen on the bases of their methodological quality and level of specialisation in this domain, were