

95% CI: 2.0 to 4.5) were more likely to have paid work compared to those without chronic disease in 2002.

Conclusion The present study showed that people with a chronic disease aged 55–64 years were less likely to be involved in paid work, but we did not find indications for differences in participation in providing informal care or volunteer work. However, we did find a time effect for participation in paid work for people with and without a chronic disease in 2012 compared to 2002. Future research should focus on differences in social participation within the heterogeneous group with chronic disease, as differences may be present in subgroups.

273

PROLONGING WORKING LIFE BY ENGAGING EMPLOYEES IN DEVELOPING WORK WELLBEING WITH TOTAL OPENNESS AND TRANSPARENCY WITH THE KIVAQ METHOD

¹Näsman Ove*, ²Strandberg Erika. ¹MD, KivaQ Ltd, Kimitoön, Finland; ²MSSc, Municipality of Kimitoön, Kimitoön, Finland

10.1136/oemed-2018-ICOHabstracts.124

Introduction Employee wellbeing correlates with long working life. Every organisation should have a structured program for developing work wellbeing. The KivaQ method has been used in Finland in many successful projects.

The KivaQ method The KivaQ method consists of a questionnaire and a development workshop. The online questionnaire is fast, easy to use, validated, affordable and engaging. The seven standard questions are in 17 languages. All information is accessible at the website www.kivaq.fi including the questions and reference materials from different industries in the analysing module. The structured workshop has seven ppt-bottoms for the facilitator. A KivaQ method guide is available in English and Finnish. In 2016 a small municipality in Finland with 584 employees executed the KivaQ questionnaire with total openness. Every employee got the password and could analyse the results of the survey. In 2017 the survey was repeated with total openness. The openness was studied by constructing two additional questions in the 2017 survey.

Result In the 2017 survey 27,6% of the respondents reported, that they had used the possibility and themselves analysed the survey in 2016. Of the respondents 69,2% thought that the new way with openness in the personnel survey was good or very good. Only 1,5% thought the idea was bad or very bad. 29,3% had no opinion.

Discussion The results indicate that increased organisational openness also in surveys is welcomed by the majority of the personnel. This may increase the informal discussions on work wellbeing and result in increased investment in wellbeing. Some teams in the example municipality are already discussing participating in the KivaQ workshop. This may lead to prolonged working life. The authors call for more testing with total openness in surveys.

30

EARLY FUNCTIONAL AGEING AS DETERMINANT FOR JOB INTERRUPTION: A 4-YEAR FOLLOW UP

¹FM Fischer, ²MC Martinez. ¹Department of Environmental Health, School of Public Health, University of São Paulo, Brazil; ²WAF Informática, São Paulo, Brazil

10.1136/oemed-2018-ICOHabstracts.125

Introduction Functional ageing is a progressive work ability impairment. It is associated with negative outcomes including early retirement, unemployment and leaving the profession. The aim of this study is to investigate whether early functional ageing plays a determinant role in job interruption in the short-to-medium run among hospital employees.

Methods A 4 year cohort (2008–2012) of 1060 hospital workers in São Paulo, Brazil. At baseline participants filled a questionnaire about demographic, occupational and lifestyle items, and the Brazilian version of Job Stress Scale (JSS) and Work Ability Index (WAI). The outcome variable ‘job interruption at the end of follow up’ was no (active employees) and yes (transient sick leave and job termination). This information was obtained from human resources department. Associations between functional ageing and other independent variables with job interruption were identified by multiple logistic regression.

Results Participants’ average age at baseline were 32.5 y (SD=8.5), 29.4% were over 40, and 69.8% were females. Relative to psychosocial work factors, 67.8% corresponded to active work, 11.6% to high strain, and 94.9% reported high social support at work. The average WAI score was 42.4 (SD=4.7); 20.8% of participants exhibited early functional ageing (moderate/poor work ability). At the end of follow up 524 (49.4%) participants had job interruption.

Features involved with job interruption were: early functional ageing (OR 1.42; p=0.031); high strain (OR=1.59; p=0.030), age ≥40 years (OR=0.54; p<0.001); job title Assistants/Attendants (OR=1.71; p=0.011) and Technicians/Nursing. Assistants/Cleaners (OR=1.64; p=0.006); employees of all other departments compared to the Clinical Department (OR=1.41; p=0.020). The model was adjusted by sex.

Discussion Early functional ageing was a risk factor for job interruption in short-to-medium-run in the investigated population. Contrary to expected age was a protective factor. Inadequate work conditions and the psychosocial work environment contributed to the negative outcome.

310

THE IMPACT OF OCCUPATIONAL HEALTH ON WORK-LIFE EXPECTANCY, A REPRESENTATIVE DANISH STUDY ON THE YEARS 2010–2016

Jacob Pedersen*. Statistician, Ph.d., the National Research Centre for the Working Environment, Denmark

10.1136/oemed-2018-ICOHabstracts.126

Introduction To what degree does the occupational health impact the labour market affiliation in terms of work-life expectancy? This question plays a central role in the Danish flexible labour market system with high labour force participation, relatively generous and accessible social benefits, and a low formal employment protection with a high turnover.

Method A survey of 12,429 employed Danes from 2010 is merged with longitudinal register data on social benefits to gain a follow-up period of approximately five years, but no later than the official pension age of 65 years. By using a Multi-state design and modern survival analysis, we estimate the work-life expectancy and divide the results in periods of work, unemployment, and sickness absence. The analyses are done for five occupational health scales divided into good and poor health.

Results For a 40–49 year old non-smoking women, employed in social health type of work and with elementary school education, and without the possibility of voluntary early retirement, one can