

Introduction Despite the global strides made in palliative and hospice care, organisational challenges continue to negatively impact the accessibility to care and adequacy of pain and symptom management for patients and their family members. Nurses play a fundamental role in advocating for and providing high-quality palliative and end of life care, however, there is limited understanding of their occupational wellbeing. The purpose of this presentation is to explore the occupational resources and demands in palliative nursing practice through the development and psychometric evaluation of the Palliative Care Nursing-Job Resources (PCN-JR) Scale and Palliative Care Nursing- Job Demands (PCN-JD) Scale.

Methods This study used a three-phase process of instrument development and psychometric evaluation within a province-wide cross-sectional design. Phase 1 involved a thematic analysis of qualitative data, palliative expert consultation, and a content validation index in the development of a 64-item PCN-JR Scale and 72-item PCN-JD Scale. Phase 2 consisted of a pilot survey of 55 nurses and use of item discrimination analysis to estimate internal consistency reliability and reduce the length of each scale. Exploratory factor analysis was used in Phase 3 to further test the modified scales in a province-wide survey of n=377 nurses who provide palliative and end of life care.

Result Exploratory factor analysis of the 32 items related to palliative job resources favoured an 8-factor structure, accounting for 62% of the variance, Cronbach's alpha 0.90. The 36 items related to palliative job demands favoured an 8-factor structure, accounting for 61% of the variance, Cronbach's alpha 0.93.

Discussion The Palliative Care Nursing-Job Resources (PCN-JR) Scale and Palliative Care Nursing- Job Demands (PCN-JD) Scale are valid and reliable, and have broad applicability to better understand the occupational wellbeing of palliative care nurses. Further research is necessary to further evaluate their psychometric properties from a national and international perspective.

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CAN COPING STRATEGIES ALLEVIATE THE LINK BETWEEN WORKPLACE AGGRESSION AND BURNOUT? THE ROLE OF SEEKING INSTRUMENTAL OR EMOTIONAL SOCIAL SUPPORT

¹Ellen Delvaux*, ^{1,2}Whitney Van den Brande, ¹Martijn Schouteden, ¹Maarten Sercu, ²Elfi Baillien, ²Anja Van den Broeck, ^{1,3}Lode Godderis. ¹IDEWE, External Service for Prevention and Protection at Work, Leuven, Belgium; ²KU Leuven, Work and Organisation Studies, Brussel, Belgium; ³KU Leuven, Centre for Environment and Health, Leuven, Belgium

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Introduction Aggression at the workplace occurs frequently. Workplace aggression negatively impacts employees' psychological well-being. In the current research, we investigated whether coping strategies alleviated the negative impact of workplace aggression on one important indicator of employees' psychological well-being, namely burnout (risk). More specifically, we examined whether the coping strategies seeking instrumental or emotional social support moderated the relationship between workplace aggression and burnout symptoms.

Methods Questionnaires were administered to employees of a large Belgian hospital. In total, 1544 employees participated (response rate=44%). The scale measuring workplace aggression consisted of three items ($\alpha=0,79$). Burnout risk was measured with the two most central subscales of the Dutch version of the Maslach Burnout Inventory (UBOS), namely emotional exhaustion (5 items; $\alpha=0,92$) and depersonalization (4 items; $\alpha=0,86$). Finally, from the COPE questionnaire, we used the subscales seeking instrumental social support (4 items; $\alpha=0,92$) and emotional social support (4 items; $\alpha=0,92$). We tested our hypotheses using hierarchical regression analyses.

Result Replicating previous research, we found that workplace aggression increases both the levels of emotional exhaustion and depersonalization. Furthermore, we found that seeking instrumental social support is a better coping strategy than seeking emotional social support: the former decreases burnout symptoms, whereas the latter may even increase burnout symptoms. Finally, we found that the coping strategy seeking instrumental social support alleviated the relationship between workplace aggression on the one hand and emotional exhaustion and depersonalization on the other. Seeking emotional social support only moderated the relationship between workplace aggression and depersonalization: the level of depersonalization increased for employees with lower scores on this coping strategy when they encountered workplace aggression; employees scoring high on this coping strategy had increased levels of depersonalization regardless of experienced workplace aggression.

Discussion Our findings will be discussed in light of its theoretical and practical contributions.

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ALL EMPLOYEES RESILIENT THROUGH AGGRESSION AFTERCARE': THE DEVELOPMENT OF A DIGITAL PLATFORM SUPPORTING AGGRESSION AFTERCARE IN HEALTH CARE TEAMS

¹E Delvaux*, ²H Leirs, ²J Schrijvers, ³I Konovaloff, ^{1,4}L Godderis. ¹IDEWE, External Service for Prevention and Protection at Work, Leuven, Belgium; ²UCLL, University Colleges Leuven-Limburg, Diepenbeek, Belgium; ³ICOPA, Knowledge and Expertise Centre on Aggression, Brussels, Belgium; ⁴KU Leuven, Centre for Environment and Health, Leuven, Belgium

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Introduction Health care workers are often confronted with aggression, impairing their well-being at work. Aggression aftercare, adjusted to the personal needs of victims, may facilitate their recovery, return to and well-being at work.

Methods We used three methodologies to identify the most important needs for employees confronted with workplace aggression. First, fictive aggression incidents were reenacted in four organisations. After each scene, actors and audience discussed about impact and needs after encountering such incidents. Second, aggression experts (n=10) were interviewed about existing and ideal aggression procedures within their institutions. Third, a diary questionnaire (of two weeks) was administered to employees (n=11) that recently encountered workplace aggression.

Results Bringing together the input from the different methodologies by defining common and frequently re-occurring