

from 2002 to 2016 were analysed with joinpoint regression and the magnitudes of occupational class differences were estimated with the relative index of inequality (RII).

Results Most of the trends first increased and turned to decrease in 2007/2010. Managers and professionals had the least amount of self-certified SA, but steadily increasing trends were observed among men. Self-certified SA followed only partially the typical socioeconomic gradient, as routine non-manuals had the highest levels of SA. The magnitude of occupational class differences in self-certified SA was stable during the study period only among women. Self-certified SA and occupational class differences have increased in recent years among men in the lower occupational classes.

Conclusion Socioeconomic differences exist in self-certified SA among young employees, but gradient is only partial. Overall, high amounts of self-certified SA especially in the lower occupational classes are in need for further studies and preventive measures.

131 BEATING BURNOUT, BEING KIND – OAK

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Introduction There is increasing evidence of burnout among healthcare workers (HCW). Workers engagement is one solution to burnout with positive outcomes towards patient care and work satisfaction. Simple, low key positive activities have been shown to make differences to people in a pressurised environment. Our intervention aims to establish whether acts of kindness at work can affect workers engagement.

Methods Occasional Acts of Kindness (OAK) was a pilot intervention programme trialled in a large tertiary hospital in December 2016. All HCWs were invited to attend the 2 hours session when participants take a break from work in a friendly atmosphere, sit for a while, engage with one another and ask colleagues about how they were coping with work and life. The effectiveness of this intervention was evaluated using a validated staff engagement questionnaire, Utrecht Work Engagement Scale. Participants were also encouraged to leave their own comments regarding the intervention.

Result 65 HCWs of varying grades and departments participated. 97% of participants agree that the intervention boosts collegiality and strengthens relationships at work, 90% agree it would make them more likely to take the initiative to help a struggling colleague, 80% agree it boosts their energy at work, 83% agree it increases their mental resilience at work, 90% agree it enhances their enthusiasm at work, 87% agree it helps them persevere even if things are not going well, 63% agree it helps them continue working even for long period, 84% agree it helps instil a sense of pride in workplace and 93% agree it boosts overall morale at work. Their additional comments regarding the intervention were also cohesively positive.

Discussion Our intervention proved that acts of kindness at work have multitudes positive effects on workers and work. A culture of kindness is one solution to the growing issue of burnout among HCW.

478 DOCPASS: A TOOL TO ASSESS READINESS FOR WORK IN SURGEONS AND ANAESTHETISTS TO IMPROVE AND ENSURE SAFETY OF PATIENTS

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Introduction To protect patient safety in the operating room it is important to create awareness among surgeons and anaesthetists on their own work readiness and its influence on their performance. The purpose of the study was to design a tool (DOCpass), study its feasibility in daily operating room practice and redesign it based on suggestions made by future end users.

Methods The content of the DOCpass prototype was selected on the basis of aspects of health and work that can influence performance as was found in literature. A suitable platform was subsequently chosen to meet pre-defined requirements such as ease of use and accessibility of the tool. To determine the feasibility in the operating room practice and collect points of improvement for redesign, post-task walkthroughs were organised with surgeons and anaesthetists at a university medical centre in the Netherlands.

Result DOCpass was developed as a webpage in JavaScript and HTML which makes the tool accessible from local hospital computers or mobile devices (e.g. mobile phone, tablet). It screens for personal aspects (e.g. fatigue and mood states) and work-related aspects (e.g. shift and sleeping time duration) that have been found to affect performance and patient safety in practice. A total of 13 improvement points were suggested by future end users and the prototype was adjusted according to these. The improvements concerned the content of the introduction, the relevance of screening methods and applicability of feedback.

Conclusion DOCpass assesses and provides feedback on work readiness in colour coding through digital screening of work and personal health aspects. Participating surgeons and anaesthetists in the feasibility study reported that the tool is potentially useful in the operating room were the content to be improved. Feedback that is provided should be easy to act upon and could in this way add practical value to work.

853 DEVELOPMENT OF AN INTERVENTION FOR NURSES' SUSTAINABLE EMPLOYABILITY: A FOCUS GROUP STUDY

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Introduction In today's Western world, people have to work longer before they can retire and the working population is ageing. In healthcare, due to an increase in complexity, severity and extent of the demand for health care, it is of great importance to invest in retention of nurses, who are considered particularly vulnerable in staying employable.

A structured dialogue between employee and supervisor is seen as promising opportunity to improve sustainable employability of nurses and the corresponding required working behaviour. In order to accomplish so-called 'joint ownership',