that work may have on the transition between one’s work and non-work domains (i.e., commuting). We sought to examine the impact of work-related rumination (WRR) as a cognitive distracting mechanism on employee’s commuting safety behaviours (CSBs) and the potential buffering effects of personal-protective factors (commute-as-relaxation) as employee’s commute from work to home.

Methods Data were collected via a baseline and 10 day daily diary study (two weeks, Monday – Friday) from employees (n=106) who worked full-time and commuted via private vehicle on a daily basis between March – April 2015. Data were analysed using Mplus version 7.3.1. and results were limited to the baseline and first week of daily diary collection.

Result On average, employees experience a decrease in risky CSBs over the work week, with a rise in risky CSB occurring from Thursday to Friday. Travel-speed disruptions and WRR resulted in risk significantly impacted the trajectory of risky CSBs, such that from Thursday to Friday. Travel-speed disruptions and WRR CSBs over the work week, with a rise in risky CSB occurring.

Discussion Results indicated that employees who engage in WRR engage in riskier CSBs over the course of the working week. However, employees who view their commutes as time for relaxation engaged in less risky CSBs than their counterparts. The final model fit the data well \( \chi^2(53)=67.81, \ p=0.08, \ RMSEA=0.058, \ CFI=0.94, \ TLI=0.93, \ SRMR=0.07 \).

Conclusion This is the first study that assessed the QoWL among doctors in the university hospitals in health area 7 of from May to June 2017. The data was collected by web-based Thai Work-Related Quality of Life Scale – 2 (Thai WRQLS-2).

Response rate was 39.1% (356/910). The mean rating of qowl was 106.36 out of 155 (SD 16.09). 61.0% of doctors rated their QoWL as moderate scale. The eight sub-factors were rated as moderate to high for control at work, home-work interface, and working conditions; moderate and high for general well-being; high down to moderate for employee engagement, job and career satisfaction, and overall QoWL; and moderate down to low for stress at work. Details of factors which might influence their QoWL is being analysed and will be updated soon.

Conclusion This is the first study that assessed the QoWL among doctors in the university hospitals in health area 7.