

30% for the latter. The purpose of this article was to determine these factors by qualitative research, according to medical students points of view.

Methods It was a qualitative study using semi-structured interviews. The analysis was done according to *Grounded Theory*.

Results 12 medical students were interviewed. They expressed difficulties at work and positive factors. Three major themes were identified in selective coding: occupational factors, 'study' factors and individual factors. All themes were both a source of well-being and ill-being according to the situations specified in the results.

Conclusion Studying medicine includes positive and negative aspects. Abandonment issues, lack of recognition and insufficient coaching emerge from our study. These results open lines of thought on the ways of improving formation of medical students.

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THE INFLUENCE OF OCCUPATIONAL MEDICINE PROGRAM IN MEDICAL STUDENTS' ATTITUDE TOWARDS THIS SPECIALTY

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Introduction Occupational medicine in Romania is not one of the first choices for residency training programmes and there are medical schools with no or just an optional educational program in this specialty for medical students. We tried to estimate the influence of such a program in changing students' attitude towards our specialty.

Methods We used the 18 items questionnaire developed by Smits and Verbeek and published in *Occupational Medicine Journal* in 2015, which was applied in its original form (English version) on 141 fourth-year medical students before and after their educational program in occupational medicine. Data was collected in a Microsoft Excel Datasheet and analysed using statistical functions (average, sum, standard deviation, t-test paired samples, and 0.05 statistical significance threshold was used). Items were collapsed in three scales according to the authors (a career in occupational medicine – 6 items, occupational medicine as an interesting specialty – 11 items and role and position of the occupational physician – 1 item).

Results For the first scale the mean score before was 17.35 and 16.87 after the educational program (0.48 difference and $p=0.082$). The second scale had a mean score before of 42.97 points and 43.78 after (0.81 difference and $p=0.010$), and the third scale, 3.39 before and 3.58 after (difference of 0.19 and $p=0.048$).

Discussion Results showed us scores which are comparable with the ones described in the original paper. In our research the educational program didn't reveal a positive effect in students attitude regarding choosing a career in occupational medicine (the score decreased but not statistical significant). A positive response was noticed in changing their attitude about occupational medicine as a specialty (higher score after and statistical significant) and also in the awareness of the necessity of independence of the occupational physician from the employer.

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NATIONWIDE OCCUPATIONAL MEDICINE TRAINING PROGRAM IN THE FINNISH INSTITUTE OF OCCUPATIONAL HEALTH

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Introduction Teaching of occupational medicine is an integral part of the training of occupational health specialists. This training takes place in Finnish Institute of Occupational Health Institute (FIOH) in Helsinki and its four regional offices. A challenge is that instructors in different regions have different skills and their resources are different. Here we present our new, nationwide occupational medicine training program, which has recently piloted and launched. It consists of six modules that correspond to the learning objectives given in university curricula. Each module includes lectures, workshops and self-study but also practical tasks, such as workplace visits, outpatient work and literature search. In teaching we use a web-based learning platform.

Methods The program was developed in collaboration with a selected group of trainees and all instructors in Helsinki and in all regional offices of FIOH. Feedback from instructors and trainees was collected by employing a web-based questionnaire and face-to-face discussions.

Results Feedback from instructors and trainees has been positive. The following things are considered as benefits of the new program:

- trainees receive same kind of training, regardless of locations where they specialise,
- they can view lectures later on video and
- they can discuss with other trainees and instructors in other areas, and
- instructors can take advantage of each other's material,
- we can employ modern pedagogic theories and teaching methods and
- instructors can more easily communicate with their trainees.

Discussion We had a need to reform and unify occupational medicine training at FIOH. Participation of students and all regional instructors was central to the success of the program development. Our program has been well received by trainees and instructors. Web-based learning platform makes it possible for us to take advantage of instructors' different skills and to use new pedagogical theories and methods in our teaching

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GROUP EXPERIENTIAL INTERVENTION IN GREEK HEALTH PROFESSIONALS FOR THE CONFRONTATION OF MOBBIING

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Introduction There are many ways to tackle with mobbing, with mainstream counselling and psychological support either