

Social Partners' Conference on Occupational Safety and Health

A SOUND MIND IN A SOUND BODY

Taking care of those who take care of us

Vilnius, 23 - 24 May 2018

ABSTRACTS

Wednesday, 23 May 2018

Plenary 1 - Psychosocial Risks and Stress at Work

The impact of psychosocial risks at work on the quality of medical services in Bulgaria (the role of employers and trade unions)

Mag. Pharm Slava Zlatanova, Deputy Chairwoman (Federation of Trade Unions in Health Care – FTUHC) and Krasimir Grudev, Elected Board Member (National Union of Private Hospitals – NUPH)

Presentation of a survey on the impact of psychosocial risks at work on the quality of medical services in several hospitals in Sofia and the country. Particular attention is paid to the problem of third-party violence in healthcare. The joint role of employers and trade unions in reducing these risks is investigated including measures laid down in the collective bargaining, through the committees on working conditions, through legislative initiatives and others. The results of the survey, the conclusions made and the future joint actions planned will be presented and discussed.

Prevention of violence on health workers

Alice Casagrande, Head of the life-long training, innovation and voluntary work department (Fédération des Etablissements Hospitaliers et d'Aide à la Personne Privés Non Lucratifs – FEHAP)

FEHAP works on this subject since 2013, on the aspect of patients' abuse through the National Committee of Good Treatment and patients' Rights in France. In this working group, there are lots of partners:

- Regional agencies of health,
- Health Minister,
- Trade unions (CFDT / CGT),
- Non-profit organizations,
- Croix-Rouge

In the beginning, this working group worked on the patients' bad treatments and now there is a reflection about the positioning of health workers on this question because themselves can be victims of violence.

They observed that to have good treatments for patients, health workers need first to feel safe at work. And to limit the violence of workers, patients have to be treated safely too.

So the major points that are discussing these days with the partners are:

- To build a managerial culture on the situations of bad treatments and their follow-up,
- The link with the CPD of health workers, to prevent these situations and to form them how to react, to be helped;
- To equip professionals for a better spotting of bad treatment/violence



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Thursday, 24 May 2018

Plenary 2 – Organisational Climate

Risk assessment of psychosocial stress for nursing staff according to the provisions of the Occupational Health and Safety Act – an example of a comprehensive and participative approach in the University Clinic Heidelberg

Sebastian Starystach (University of Heidelberg) and Christina Streib (University of Heidelberg)

Objective

The project surveys the mental stress of nursing staff as well as the subsequent implementation of preventive measures in the context of a risk assessment of psychosocial stress. The presentation will focus on the process of risk assessment from the step of making an inventory to the implementation of concrete measures. The overall goal of the project is to identify and to initiate necessary structural changes in the work of nurses. A participatory approach is pursued, in which those affected by a possible structural change, the nursing staff, are also included in the problem definition and solution process. The instrument of organisational development chosen is the health circle. Targeted by the measure are the roughly 2,500 registered nurses at Heidelberg University Hospital. In addition, training and development concepts are being developed that empower nurses to use this means of organisational development themselves, without having to be accompanied in detail by external experts. In this way, the health circle is not only a measure of organisational but also of the development of the personnel. By doing so, the legally established, but in practice, underdeveloped risk assessment of mental stress for the hospital context can be carried out successfully and with broad participation in the workforce.

Results so far

The concept used for carrying out a risk assessment of psycho-social stress according to the provisions of the German Occupational Health and Safety Act is suitable for the hospital context. The constant involvement of the caregivers as experts did not only allow for a continuous feedback between actual workload and the necessary structural change but at the same time increased the motivation of employees which was essential for the implementation of measures. The concept did not only strengthen the voice and the involvement of the staff but also enabled a constructive discussion between employees and employer representation. Possible conflicts in the change of the organisational structure could be prevented by the inclusion of all relevant status groups in the Steering Committee. The concept makes it possible to translate the legal framework of the German Occupational Health and Safety Act into a concrete procedure that makes a joint contribution to the improvement of working conditions for both employees and employers.

Organisational climate

Anouk ten Arve, Programme Manager (Stichting IZZ) and Marc Spoek, Manager (Stichting IZZ)

Stichting IZZ analyses the health care utilisation of healthcare employees with collective IZZ healthcare insurance on a yearly basis. The analyses show that there are large differences in employee healthcare utilisation among healthcare organisations. To explain these differences, Stichting IZZ has partnered with Erasmus University Rotterdam in a collaborative research project. The research shows that the organisational differences in employee healthcare utilisation are related to differences in organisational climate. Organisational climate refers to employees' perceptions of the policies, practices and procedures concerning physical and psychological health and safety within the organisation. The results furthermore reveal that employees working in healthcare organisations with a positive organisational climate score lower on musculoskeletal disorders and emotional exhaustion.



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Rising health care costs, labour shortages, and an increasing demand for care are expected in the near future of healthcare sectors all around Europe, including the Netherlands. Given these circumstances, improving the health and safety of healthcare employees is becoming increasingly important. Based on these developments and the research results described above, social partners in the Netherlands have started projects to improve the organisational climate of healthcare organisations.

Measuring health-promoting leadership within the scope of the risk assessment

Dr. Sabine Gregersen, Head of Health Sciences (Berufsgenossenschaft für Gesundheitsdienst und Wohlfahrtspflege – bgw; Grundlagen der Prävention und Rehabilitation & Arbeitsmedizin und Gefahrstoffe)

What important role leadership behaviour plays in maintaining employees' health has become a topic of growing interest in research and practice for some time. In recent years, the number of studies on the relationship between leadership and employee well-being has increased tremendously. Transformational leadership is the leadership concept that has been most frequently linked to employee well-being. However, this leadership concept has not been specifically developed to predict employee well-being. Thus, the gain of knowledge regarding health-promotion is limited and it is difficult to develop interventions that foster health-promoting leadership.

This contribution presents results of a study that investigated the relevance of different leadership concepts to the health of employees in the healthcare and social services sector and thus are best able to predict employees' mental health. 412 employees working in the healthcare and social service sector were surveyed about their direct leader's behaviour and their mental health.

To measure leadership behaviour, different established leadership concepts were used. Statistical analyses aimed to examine which of the leadership concepts best predict psycho-social risks and stress beyond transformational leadership. Two concepts, leader-member exchange theory and the health- and development-promoting leadership behaviour, as well as the lack of initiating structure, were found to be the most powerful tools. The findings of this study provide insights into how leaders may promote good health among their employees.

As demographic changes and an ageing workforce become increasingly evident, health-promotion has become an important endeavour for management to keep employees healthy and efficiently working.

Therefore, it is crucial to develop action-oriented recommendations for managers to enable them to foster their employees' job resources and to reduce situations that may lead to stress and pressure among employees in healthcare and social services. The findings of the study help to develop approaches that enhance safe and healthy workplaces. The findings may also be used to develop training programs for (line) managers and to evaluate the implementation of health-oriented leadership.

Related evaluation study "FÜHR GESUND": www.fuehr-gesund.de

Plenary 3 – Occupational Safety and Health

Kunteko 2020 - Programme for improving working life in Finnish local and county government

Anna-Mari Jaanu, Programme Manager (Kunteko)

The aim of the programme is to promote the long-term improvement of productivity, performance and working life quality in the Finnish local government sector (including hospitals). The programme's first phase took place 2015-2017 and funding has been applied for the second phase 2018-2020. The programme extends across Finland, taking into account the individual needs of each municipal organisation or unit and supporting their development in various ways. Kunteko supports co-operative development in local government organisations. It means that staff and management developed services, working practices and processes and the quality of working life together. Kunteko offers many kinds of support for the working life development in municipal



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organisations. They are implemented by consultants and service providers as well as by the programme's cooperation partners. the services include:

- 2-day training for staff responsible for the development
- 1- to 2-day coaching/consultation for individual municipal organisations
- Learning networks with various themes
- Development networks with various themes

Kunteko has also gathered good practices on a web portal, where they can be easily viewed by other interested organisations. Currently, there are 232 development practices and stories shared at the tekojen tori (marketplace of actions)

Links: <http://www.kunteko.fi/kunteko-in-english>

The Workplace of Medical Worker – An Appropriate Platform for Health Innovation and Collaboration *Raimonda Eičinė-Lingienė, Head (Occupational Health Centre, Institute of Hygiene)*

The Lithuanian Institute of Hygiene is a budgetary institution of the Ministry of Health, which carries out state functions in the areas of monitoring Lithuanian residents' health state and healthcare institution activities, assessing public health inconsistencies and public healthcare technologies. Occupational Health Centre of the Institute develops research on the effects of the working environment on health as well as the assessment of occupational healthcare technologies, while also preparing and testing innovative interventions in the occupational healthcare practice. The information will include international projects implemented by the Institute of Hygiene, medical musculoskeletal system diseases, occupational diseases in Lithuania, risk factors and injuries, stress in the health sector and prevention, recommendations, Hygiene Institute's Occupational Safety and Health Initiatives.

Links: <http://www.hi.lt/en/>

Break-out Session 1 - Psychosocial Risks and Stress at Work

Intervention to enhance satisfaction of nurses in the work environment, to prevent burnout and to improve services provided to patients

Zoyia Antoniou, Secretary (Cyprus Nurses and Midwife Trade Union - PASYDY)

CPD of Nurses is important in Cyprus as this provides the opportunity for nurses to update their knowledge and be informed of current evidence-based practice. This is the reason why the Cyprus law requires from nurses to participate in conferences for at least 32 hours of duration in order to revalidate every four years their licence to practice nursing. Our union, as one very important stakeholder of the health care system - since many nurses and midwives as a member of the union - welcomes every effort that is made from organised bodies to provide CPD educational programs. In addition, our union welcomes and supports but makes use of the findings or research and other projects that deal with CPD or support of nurses. Important organised bodies that provide CPD programs or participate in other projects on psychosocial risks are the educational sector of the Nursing Services of the Ministry of Health and the Cyprus University of Technology (Department of Nursing).

The educational sector of the Nursing Services of the Ministry of Health organises educational programs for psychiatric nurses regarding crisis management. These programs allow psychiatric nurses to gain experience and knowledge on how to deal with crisis situation within their organisation. In addition, the educational sector offers a one-day course on burnout prevention and management. Finally, qualified psychiatric nurses offer individual counselling services to nurses of the various department (more specifically oncology and haematology department) who require support due to the nature of the patient they deal with.

All the above are offers at no cost to the participants and is part of the obligation that nursing services have to support nurses. The department of nursing of the Cyprus University of Technology (CUT) is the largest



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department of nursing in Cyprus. Recently, in collaboration with the nursing services of the Ministry of Health and the financial support of the Cyprus Nurses and Midwives Association, conducted a replication of the RN4CAST study in Cyprus. The RN4cast project is an international effort to understand the nursing work environment - including burnout among nurses. The findings of this study are currently used to implement interventions to enhance the satisfaction of nurses from their work environment, prevent burnout and improve the services provided to patients.

Suntarbetsliv

Gunnar Sundqvist, Investigator (Swedish Association of Local Authorities and Regions – SALAR) and Margaretha Johansson, National Officer (Kommunal)

Suntarbetsliv was created and is owned by the social dialogue partners in the public sector to create tools and materials to improve the work environment. Managers and safety representatives are the primary audiences. The organization has created a web-based work environment training program tailored to the public sector. In addition, a number of tools and checklists for topics such as threats and violence at the work-place, sharps injuries, organizational and social conditions, and better meetings have been created. All materials are available free of charge. News and information describing good examples of collaboration are made available on Suntarbetsliv's website.

Below you will find short descriptions of two tools from Suntarbetsliv:

1. Better Working Environment Training Program

This web-based training program is for those who need to learn about work environment activities from scratch. Participants learn an effective method of working with health and safety improvements in their organization and also get a basic knowledge of laws and regulations. In addition, they learn how to search for more knowledge about the work environment and how to manage both physical and psychosocial work environment issues at their workplace.

Working with health and safety issues is largely about evaluating situations, asking the right questions, communicating, collaborating and being able to find the information needed. All this is taught through practical exercises during the training program. The program is aimed at managers and safety representatives and others who need to know how health and safety issues should be handled.

2. The Organizational and Social Work Environment Compass – OSA Kompassen

This tool was developed as a practical aid in implementing the Work Environment Authority regulation on concerning the organizational and social work environment. The tool focuses on the areas covered in the regulation; workload, working time and victimization. It gives a brief introduction to what the systematic work environment is and what the regulations on organizational and social work environment contain.

Links: www.suntarbetsliv.se

Supporting staff mental health in East Midlands Ambulance Trust

Kevin Charles, Chaplain & Staff Support Lead and Tracy Cunningham, Community Paramedic (East Midlands Ambulance Service NHS Trust)

The Trust started by setting up a working group, involving union and staff representation from across the service to help shape the programme. The trust chief executive was the senior responsible officer for the programme, which helped to demonstrate strong visible leadership, and a project lead was appointed to help drive change. A lead chaplain/staff support role was also involved. There is now a range of support options available to staff ranging from P2P support (all departments now have P2P/PCW volunteers in place) through to more specialist options including TRiM. Staff are able to access these systems themselves, but the trust also takes a proactive approach to staff wellbeing, by encouraging P2P/PCW volunteers to look out for staff that may need assistance and offering them a TRiM assessment. Although the programme is still being



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evaluated, there were 150 TRiM activations in the first month of the service and 236 staff made use of the P2P/PCW network in the first quarter of its existence (April - June 2105). The total number of staff contacts with the P2P / PCW network was 1398 in year one.

Links: <http://www.nhsemployers.org/-/media/Employers/Publications/Health-and-wellbeing/EMAS---Final.pdf>

Break-out Session 2 – Musculoskeletal Disorders

Physical work environment among healthcare workers

Lars Andersen, Professor (National Research Institute for working environment – NFA)

The National Research Centre for the Working Environment has performed several projects in the area of healthcare workers, physical workload, musculoskeletal pain and sickness absence. The presentation will cover research in this area in relation to 1) epidemiological work on risk factors among healthcare workers for developing musculoskeletal pain and sickness absence, and 2) intervention studies at Danish workplaces with physical exercise and increased use of assistive devices.

SOTERGO and the ergonomic patient handling card

Anna Kukka, Work Environment Specialist (Union of Health and Social Care Professionals in Finland – TEHY) and Leena Tamminen-Peter, Independent Occupational Health Ergonomic and Economics Expert

At the social and health care we have some communities which have made an investment in the programme for training MSD and purchase of equipment leading to cost reduction for employers and society. Exemplary from one Southern Finland municipality (Kouvola) where The Ergonomic patient handling card® - education scheme started in 2013. The home care units have training for all their workers. Their 3½ -year statistics (2013-2016) showing a gradual decrease of sickness absences due to MSDs of 29 %. The reduction of sick leave days is over 12000 days (46766 days in 2013, extrapolated 34692 days in 2016). We have several other municipalities which have achieved the same kind of results from the management of occupational safety, health and environment in-home care (and investment to training and purchase of equipment).

Break-out Session 3 – Organisational Climate

Vuosaari homecare

Merja Hyvärinen, Legal Adviser (The Finnish Union of Practical Nurses – SuPer)

The workload in-home care has increased in recent years. The number of patients and the complexity of their needs have grown. At the same time, the number of workers has decreased. Vuosaari homecare, situated in the capital Helsinki, decided to reduce the workload of homecare workers and promote the quality of services by launching a project in 2015-2016. During the project homecare workers (practical nurses and registered nurses) and their managers reorganised homecare work and shifts together. They have many good effects of these changes. We suggested that this could be a good combination (linked to each other); first management of the safety and second an example where workers (practical nurses and registered nurses) and their manager's reorganised homecare work and shifts together and also promote the quality of services Elements of reorganisation of home care work and shifts by the homecare workers (practical nurses and registered nurses) and their managers:

- only the necessary tasks (medication etc.) are performed in the mornings, other tasks are distributed more evenly during the day and the week
- workdays on weekends do not differ from workdays on weekdays
- Less staff are now needed in the morning shift and more in the evening shift. The evening shift starts already at 1 pm and the morning shift continues until 4 pm, daily working hours were lengthened to 9 hours



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- (voluntary), shifts are planned by the workers themselves
- rota: 2-4 days' work, 2-4 days off (this system allowed two extra days off in a 3-week rota)
 - there is a substitute pool to cover any unforeseen need of substitutes

The effect of these changes: reduction of work stress and ethical burden and recovery from work is more efficient both during the working day and between the working shifts

Innovative flexible rostering; the right person, in the right place at the right time

Elize Hooftman, Manager FIER/Capacity Manager (Groene Hart Ziekenhuis) and Elles van der Neut, Team Leader FIER (Groene Hart Ziekenhuis)

Last year social partners united in the Labor Market Hospitals Foundation (StAZ) organised an 'Idea Yacht' to contribute to a better balance between work and private, and reducing work pressure. They found that the FIER department of Gouda's Green Heart Hospital (Groene Hart Ziekenhuis) has proved to be 'word and deed' in the field of flexible and innovative rostering for its own hospital. A good timetable ensures that the number of employees is better matched to the core question of the moment.

With an internal flex pool (the FIER) with fixed jobs and investment in education and training, the Green Heart Hospital addresses the need for flexible staffing and optimal coordination of capacity and working hours. Over time, fluctuations in workload are known. The nurses work from FIER where necessary and where their competencies are connected to the care question. They are trained to work for a cluster of up to three departments and are routed according to the patient pattern (care intensity, number of patients). One day in advance they hear what department they work according to their schedule. Nurses are pleased with this method because they contribute to good care, lower workload and job satisfaction. They choose consciously for alternation. It's not about postings; In principle, FIER always has sufficient offer.

If hospitals are able to tailor the personal occupancy to the peaks and decreases in bed occupancy and care, they save costs while maintaining the quality of care. Therefore a culture change is needed. Flexibilization begins with you but together you make sure the right person is in the right place at the right time.

Presentation of trade union work to prevent PSR in the context of “quality of work programmes” (in a public-sector hospital)

Konan Midy and Fabienne Tartaise, Centre Hospitalier Douarnenez, Bretagne (French Democratic Confederation of Labour Health and Social Services – CFDT SSS)

For 4 years the High Authority for Health (HAS) has initiated work on the quality of life at work (QVT) within the framework of the certification of health facilities: Public Service Hospital (FPH), the associative (FEHAP, UNICANCER), Home Hospitalization (FNEHAD) and Lucrative (FHP). Quality of life at work is one of the dimensions of the V2014 certification Concept “Quality of life at work in health facilities”

Concept “Quality of life at work in health facilities”

The High Health Authority (HAS) and the National Agency for the Improvement of Working Conditions (ANACT) have decided to join forces because they are convinced that improving the quality of life at work in health facilities is contribute effectively to the quality of care. Where room for manoeuvre seems to be shrinking, the quality of life at work opens new avenues to promote multiple initiatives that are in keeping with the primary purpose of the hospital mission: to care and take care. Today, stakeholders in the sector share a strong conviction: the more people who work in healthcare institutions will feel recognised, the better each sick person will be cared for and the better they will be accompanied.

Implementation:

- In 2016, social clusters to do the concrete work in the health care institutions were set up at the regional level. The social partners are involved in the process.



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- In 2017, the General Directorate of Health Supply (DGOS), the High Health Authority (HAS) and National Agency for the Improvement of Working Conditions (ANACT) did launch a call to apply for the cluster approach Regional Health Agencies (ARS).
- The CFDT social health federation encouraged the CFDT teams of health establishments have engaged in experimentation.
- In 2017, 4 fields of action have been defined: 1) Promoting quality of life at work processes for business performance and improving working conditions; 2) Prevent professional wear and promote job retention and the quality of career paths; 3) Prevent occupational risks by improving the organization of work; 4) Accompany technical and organisational changes

http://www.has-sante.fr/portail/jcms/c_990756/fr/qualite-de-vie-au-travail

https://www.has-sante.fr/portail/upload/docs/application/pdf/2015-09/has_anact-10questionsqvt.pdf

<http://solidarites-sante.gouv.fr/professionnels/ameliorer-les-conditions-d-exercice/qualite-de-vie-au-travail/article/la-qualite-de-vie-au-travail>

<https://www.anact.fr/themes/qualite-de-vie-au-travail>



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