

CHARACTERISTICS OF EVALUATION OF PSYCHOSOCIAL OCCUPATIONAL RISK FACTORS IN PERSONAL HEALTH CARE INSTITUTIONS

Project implementation period: 2021.

Background. The employer is obliged to ensure the safety and health of workers in all work-related aspects, including psychosocial risks. Work-related psychosocial risks are among the key emerging risks of occupational health and safety.

The aim of the study is to investigate the characteristics of psychosocial risk assessment in personal health care institutions.

Tasks:

1. To determine whether the employer conducted a risk assessment and whether psychosocial factors have been properly identified and assessed.
2. To determine what psychosocial risk factors have been identified and assessed.
3. To determine whether the risk assessment has led to preventive actions, whether there are planned procedures for managing the risk factors, and whether the effectiveness of the preventive measures has been assessed.

Methodology. Type of the study is a quantitative cross-sectional study. 236 Lithuanian personal health care institutions (the data were taken from the Compulsory Health Insurance Information System SVEIDRA under the Ministry of Health) were invited to participate in the study. Research instrument is the personal health care institution's questionnaire. It was prepared in accordance with following documents: the European Commission's (EC) 2018 publication "Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of psychosocial risks" (questions from the "List of questions for assessing the quality of risk assessment and measures concerning psychosocial risks"), Guidelines for Psychosocial Risk Factors Research (Lithuanian legislation governing psychosocial risk assessment in workplaces), and the questions from the questionnaire used in the EU-OSHA's Third European Survey of Enterprises on New and Emerging Risks on health and safety (ESENER). Three original questions were also included in the questionnaire in order to obtain the views of health and safety professionals on the assessment of psychosocial risk factors (including emerging risks related to COVID-19), and on the improvement of the implementation of preventive measures in the personal health care institutions.

Results. In total, 157 (66.5%) personal health care institutions agreed to participate in the survey and completed the questionnaires. They had between 5 and 7,288 employees (average 370 employees, median 147 employees). Outpatient (33.8%), inpatient (9.6%), ambulance (6.4%) and mixed (50.3%) personal health care institutions participated in the study. The study revealed that 124 (79%) of Lithuanian personal health care institutions were evaluated psychosocial risk. 104 (66.2%) personal health care institution carried out a full, 20 (12.8%) – partially. Psychosocial risk assessment was not carried out in 33 (21%) personal health care institutions. Psychosocial risk assessment was carried out in the majority of personal health care institutions (71.5%) during 2017–2021 period. Psychosocial risk assessment in ASPI 85.5% cases were carried out by an external company, the most often used method is a questionnaire. The psychosocial risk has not been assessed due to a lack of qualified professionals (50%) and a lack of such need (35.7%). Risk assessment is properly documented in almost all (94.3%) personal health care institutions. Job requirements, work organization, job content, employee relations and/or relations with the employer and/or third parties were evaluated in 76.6–91.9% personal health care institutions. Respondents (81.5%) claimed that the COVID-19 situation significantly increased psychosocial risk in individual health care institutions. It was determined that 78.2% of personal health care institutions has planned

or partially planned psychosocial risk prevention measures. Only 50.8% personal health care institutions deadline has been set for the implementation of these measures. Personal health care institutions, to reduce psychosocial risk, used organizational (60.5%) and individual (39.5%) measures. Only 9.7% personal health care institutions assessed the effectiveness of the implemented measures, and 24.2% – partially assessed it. 66.1% personal health care institutions did not measure of the effectiveness of the implemented measures.

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