



New-Care. Open educational resources for a new model of care in long-term care facilities, based on dignity and wellbeing of the elderly. ERASMUS+ KA202. Project number: 2017-1-ES01-KA202-037853

PSICHOSOCIAL RISKS AT WORKPLACE

Module 5. Main strategies to prevent psychosocial risk and hazards in the long-term care facilities

1. HOW TO COPE PSYCHOSOCIAL RISKS AT WORKPLACE

Psychosocial risks are defined in terms of the interactions among work organization and worker's competencies and needs.

This interaction can prove to be hazardous to employee's health through their perceptions and experience.



2. CAN WE CONSIDER A PERSON-CENTRED CARE MODE AS A POSITIVE INFLUENCE ON STAFF OUTCOMES



Person-centred interventions in the long-term care facilities are associated with positive influences on staff outcomes. The change to PERSON-CENTRED CARE MODEL has required new roles and competencies basically of caregivers, who have become professionals of reference for residents with dementia.

3. HOW COULD WE COPE WITH CAREGIVER'S STRESS AND BURNOUT

Psychosocial risks at the workplace can be controlled using appropriate techniques: General techniques, cognitive techniques, Physiological techniques, Behavioral techniques.



4. COULD CAREGIVERS IMPROVE THEIR HEALTH IMPROVING EMOTIONAL INTELIGENCE COMPETENCIES



The caregivers are able to manage their emotional intelligence and change their negative feelings. A person with a high self-esteem and feeling of self-efficacy are associated with lower levels of anxiety, depression, anger and a lower presence of physical symptoms.

CONCLUSION

Caregiver's competencies together with person-centred interventions are associated with satisfaction and capacity to reduce work-related stress and burnout of direct care workers in the long term-care facilities.



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