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**Semi-plenary #8****CONFLICT MANAGEMENT, COMMUNICATION,  
RESULTS-DRIVEN PERFORMANCE MANAGEMENT**

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The “4<sup>th</sup> industrial revolution” is impacting considerably our social and professional environment. It influences in an important way our daily work in occupational medicine and the inherent requested knowledge and skills. Teamwork, leadership, management, communication as well as mediation and coaching are more and more requested as competencies in daily practice of occupational medicine, skills that appear essential to gain in effectiveness and to adopt a result oriented approach in the discussions with decision makers concerning improvement of working conditions. In a society driven by economical constrains, maximal performance and virtual reality, effective psychosocial risk management gets more and more importance, extending largely the traditional role of the occupational physician.

The terminology “psychosocial risks” considers all potential conflict situations linked to the interface between the individual and it’s working situation, including the perception of an imbalance between “constraints and available resources” commonly defined as distress; situations of a “Burnout” designated as “occupational depression” by many psychiatrists; conflict situations between people or teams; moral or sexual harassment at work whether voluntary or involuntary; as well as violence such as insults, threats, or physical aggressions.

Acting in the field of psychosocial risk management and developing prevention strategies, requests first to convince the employers that its worth to invest in this type of prevention. Some employers believe that available means to act effectively are very limited, others believe that the thematization of this topic and the implementation of actions would have a negative impact on the company’s performance or reputation. Given that psychosocial risks depend only partially on the work environment, but also on the individual’s response to this situation, this phenomenon and its impact seems difficult to quantify, and in a world obsessed by quantophrenia, something that’s not quantifiable often does not exist. It seems very important to have convincing arguments, namely to measure the impact of the phenomenon, to show that effective management of psychosocial risks is a win-win approach with a positive impact on the well-being of workers as well as on the performance, the sustainability and the brand image of the company, and to highlight the high return on investment (ROI) of this type of prevention. Examples of good practice show that effective actions are available and quite easily implementable.

In the traditional occupational medicine, the management of psychosocial risks was generally limited to listening to the grievances of the workers during their medical exams, to directing them if necessary to external care, respectively to request a change or an adaptation of their working conditions. Progressively, occupational health departments have developed skills to teach workers how to increase their resilience to face difficult work situations, however most actions remain focused on secondary and tertiary prevention.

In the modern occupational health, by trying to act more and more effectively against the negative impact of psychosocial risks on the well-being of the active population, the role of the occupational health physician is changing considerably. Thus, alongside it’s traditional role, the occupational physician must also be able to adopt the roles of a manager, a mediator, a consultant and a coach.

In the context of psychosocial risk management, the playing field of an occupational health department is very diversified. A multidisciplinary team orchestrated by the occupational physician is probably the best way to be able to act in all these areas.

The assessment in psychosocial risk management is aiming at developing a dashboard showing the impact on the workforce as well as on the company’s performance, while highlighting potential action levers. It is important that the chosen indicators are reliable to motivate and guide the employer in the implementation of actions and that they also allow monitoring the effectiveness of actions in place. Assessment should also consider the impact at the individual level, whether psychic, physical, cognitive or behavioral, to guide the occupational physician in the care he proposes to his patient.

In the field of communication, the aim is to promote interindividual respect, to consider difference as a complementarity, to create risk awareness considering and the potential impact of psychosocial risks at individual level, to

highlight the role that everybody can play within the framework of shared vigilance and the way to get support if someone is confronted directly or indirectly with psychosocial risk situations. It is also a matter of creating awareness among employers, of having good arguments to motivate them to set up preventive actions, to convince them that the occupational physicians can be a competent interlocutor for questions relating to work organizations, management systems, change management and transformation.

The occupational physician takes more and more the role of a consultant, he becomes an essential partner for employers when it comes to implementing strategies for preventing psychosocial risks and helping to boost a company's results at long term and so to foster its sustainability.

Whether in the management in daily practice of conflicts between employees, or in the management of conflict situations between different stakeholders due to toxic management, or in requests for adapting the working environment for medical reasons, the occupational physician is increasingly led to take on the role of mediator and should develop his skills in this field.

To bring effective support in its daily consulting practice to patients presenting symptoms of psychological distress, the occupational physician is more and more solicited to act as a coach, by helping employees developing their self-esteem, considering their strengths, satisfying their psychological needs and recognizing their specific distress patterns. By this way he fosters interpersonal communication and encourages positive thinking. The development of specific coaching competences, including the use of personality assessment tools, helps to better meet these needs.

Psychosocial risk management involves considering professional and extra-professional causal factors and requires a multidisciplinary approach. The accompaniment of persons in psychological distress as well as the professional reintegration of people in prolonged sick-leave for psychic disorders need an individual case management approach by a multidisciplinary team combining an adaptation of the working environment / organization, a close medical follow-up in occupational health and if necessary a specialized support by a psychologist and / or a social worker.

Sharing some examples of good practices of psychosocial risks management tools, should motivate occupational health departments to create their own toolbox and highlight the feasibility to implement an effective prevention strategy aimed at the 3 levels of prevention.

The systematic assessment of the perception of work related stress (E.g. Karasek questionnaire) during periodic examinations in occupational health or by focused surveys, as well as the collection of potentially distress related symptoms and signs of cognitive impairment, helps collecting necessary data to draw a dashboard informing about the impact, the evolution, the effectiveness of preventive actions and highlighting situations of toxic management.

In primary prevention two tools appeared being particularly effective.

- A workshop for managers entitled "Business performance by effective stress management", This workshop is implemented in a top-down approach as it appears essential getting the commitment and participation of the top-management to make such a proposal effective. This workshop includes a theoretical part where the participants are informed about assessment results and taught about the individual & the collective impact of bad stress management and the specificities of the Burnout. During the practical part, the managers are invited to share their perception according to a list of potential stressors at work. These stressors can have an organizational reason being job-related or related to the home-work interface. Based on their findings, the managers develop action proposals to improve the situation. They also get tips and tricks how to cope better with their own distress. The training finishes with objective settings for each participant, one from the managerial and one from the personal perspective.
- A training program for "individualized management" based on different personality profiles (PCM)

In secondary prevention best results and feedback came up from following activities.

- Sensitization conferences for the public about topics such as "Shared vigilance in psychosocial risk management", "Burnout prevention", "Sleep and mental performance";
- The implementation of a "Contact platform for psychosocial risk management" where employees can call to get advice and support;
- Individual coaching based on personality assessment (PCM) in case of symptoms of psychological distress;
- Teaching of relaxation techniques.

In tertiary prevention it's the "individual case management" by a multidisciplinary team that brings best results. It combines if necessary an adaptation of the working environment, a close medical follow-up in occupational health and if necessary a specialized support by a psychologist and or a social worker.

The purpose of this conference is to demonstrate that in a VUCA world, the consideration of psychosocial risks is of increasing importance as in developed countries is gradually becoming the major source of suffering at work. It is essential that occupational health departments acquire the knowledge and skills required to become the preferred interlocutor for employers to provide them with advice, guidance and support in this field. Many tools for a better psychosocial risk management are available, up to us to put them in practice and make them evolve.