Emerging trends - Government strategy for Health and Work Service

Dame Carol Black review of sickness absence - Working for a Healthier Tomorrow

- **Health, work and wellbeing programme**
  - a cross-departmental government programme to improve the health and well-being of people of working age.
  - Changing demographic (ageing workforce)
  - Greater prevalence of chronic disease

According to the Council for Work and Health (CWH) July 2013 “If OH can make the necessary step changes, it is uniquely placed to play a major part helping to re-vitalise the UK economy”

Prof John Harrison Clinical Director of Health at Work team - Imperial College says “we offer a holistic approach that focuses on the person, their work and the business rather than just the disease”

Exciting times for OH as profile is raised

- Fiscal incentives including tax concessions or reduced insurance interventions
- Building the business case for OH – cost benefit analysis demonstrating investment in OH yields positive results in relation to performance, reduced accidents, reduced sickness absence and ill health

(Grunyeon 2013 – “benefit to the economy of £900 million per year”)

Corporate Services Group
Strategic plan 2012 to 2016 and the HR People Strategy

Derived from the University’s Strategic Plan - amongst the themes are:

- Partnerships
  - **Promote the health, safety and wellbeing** of staff and students
- Review and develop Occupational Health support across the University

“make a significant, sustainable and socially responsible contribution to Scotland, the UK and the world, promoting health, economic growth and cultural wellbeing”

Significant Events in the History of Occupational Safety and Health

- **1556** Bauer 1494-1553 German minerologist and scholar who became a doctor, who became concerned about miners and their lungs and recommended ways to overcome the problem.
- **1700** Bernardino Ramazzini, widely considered the “father of industrial medicine,” publishes his first book on occupational diseases, De Morbis Artificum Diatriba (The Diseases of Workmen).
- **1867** Philippa Flowerday is hired by the firm of J. & J. Coleman in Norwich, Great Britain. Her employment at this mustard company is considered the earliest recorded evidence of a company specifically hiring an industrial nurse.
- **1897** Great Britain passes a workmen’s compensation act for occupational injuries. English legislators would later (1906) extend the aegis of the act to encompass occupational diseases.
- **1994** The University of Edinburgh commenced a health surveillance compliance based occupational health service provision based in support service as part of H&S.
Occupational Health

Looking after the health work and well-being of staff at the University of Edinburgh

What is OH?

OH is a specialist branch of public health care protecting and promoting the health of the working population. Utilising OH will;

- assist employers with the health, safety and welfare of all employees
- impact the corporate social responsibility agenda
- contribute to government-led initiatives such as reducing health inequalities, social exclusion and sickness absence and well being

Occupational health offers an impartial advisory service concerned with the effect of work on health and the effect of health on work; where health is a concern OH aim to support and advise staff and managers in order to

- increase attendance
- optimise performance
- increase productivity and retention
- facilitate well being at work

Work relationship Health

So - Why have an Occupational Health service?

- to contribute to the wider public health agenda
- to help meet the employers statutory requirements (H&S)
- to contribute toward and achieve university strategic goals
- to benefit staff and employer
  - support staff throughout their employment
  - optimise the employees experience
  - increase productivity and satisfaction

(CBI/Pfizer 2010)

In 2009/10, 28.5 million days were lost overall (1.2 days per worker)

- 23.4 million due to work-related ill health and
- 5.1 million due to workplace injury (HSE 2011) at a cost to employers of about £17bn in 2009 alone.

Musculoskeletal disorders and stress were the most commonly reported illness types.

Who we are -

The 3 full time OH professional staff

- ‘Specialist Community Public Health Nurses’ (SCPHN) qualified to a minimum at degree level and registered as specialists with The Nursing and Midwifery Council (NMC)
- The physician is a Consultant in OH Medicine and is registered with The General Medical Council (GMC)

All health professionals work within their governing bodies requirement for professional practice or risk being struck off.
**Who we are**

Janet Craig - Head of Unit and OH Manager
Isabel Jack - Senior OH Adviser
Daniel Richards - OH Adviser
Helen Gilroy - Administration
Dr Robert Malcolm - Consultant Physician in OH

**Where we are located**

OHU’s objective is to promote health and well being at work;
Requiring partnership working and often involves balancing a number of delicate issues and work factors
To be effective OH must remain and be seen to be;
- impartial
- available for employees and managers
- Confidential
OH staff are bound by strict guidelines for practice

**Who are our customers?**

- **Staff** for all services and limited PhD contingent for health surveillance
- Managers
- Human resources
Who are our partners?

Internal
- H&S, Occupational Hygiene, etc
- HR
- Managers
- Employees
- Unions
- Physiotherapy – FASIC
- Parking Office

External
- Universities OH group HEOPS – benchmarking practice and a requirement for evidence based practice
- HSE
- Faculty of Occupational Medicine (setting standards- SEQOHS)
- RCN and NMC (Public Health Forum)

Specialist advice can be provided on a variety of work related health matters including:
- Statutory health surveillance/screening/vaccination
- Immunisation and travel
- Health and well-being
- Alcohol / Drug misuse
- Attendance management
- Policy and protocol development
- Rehabilitation
- Mental health and work
- Stress management
- Health-related capability issues including early retirement due to ill-health

NB where there is any specific case discussion confidentiality may apply

Health and Well being

The Healthy Working Lives (Gold award)
Part of criteria for the award evidence included OH service provision such as;
- managers tool kits e.g. stress risk assessment
- presentations e.g. managing absence, work life balance and management of mental health issues (et al)
- availability of self referral for staff
- available information for managers and staff with any health concern effecting work prior to referral (though do not substitute for the GP)

Involvement in a variety of projects, both internal and external to the organisation for example………..

http://www.macmillan.org.uk/CancerInformation/Livingwithandaftercancer/Workandcancer/Workandcancer.aspx

Contact with Occupational Health
- management referral (via referral form)
- self-referral (phone or email)
- report of suspected or confirmed occupational ill-health (via online form)
- phone or email enquiry
  occupational.health@ed.ac.uk
  650 8190
What would help?

• more pro-active early interventions in absence (government reviews are operating at 4 weeks absence being long term and requiring referral) and performance management in order to impact on attendance and retention – not presenteeism
• to raise awareness of mental health in the workplace particularly causes of stress and management of mental illness.
• Early consideration of the requirement for health surveillance by effective use of risk assessment

What can Occupational Health and partners do?

Whilst being realistic in expectation, continue development of good effective working relations by:
– further understanding and acknowledging specialist support roles and increasing effective communication
– working in partnership during attendance management and manager training
– Risk based health surveillance implementation
– Be mindful that there is a requirement for evidence based practice

Some solutions

• Provide adequate training and support to managers in conjunction with HR in order that they can take action with health issues
• Raise awareness of mental health issues, duty of care and the need to manage work related causes of stress
• Be realistic in expectation
• Recognise the need to work together to identify need and what else can be done…….needs assessment.
• Recognise the student health requirement.

CIPD viewpoint 2013

“believe that HR specialists play a critical role in convincing organisations of the competitive benefits to be gained from proactive strategies. Effective management of the health and welfare of people at work contributes to performance improvement and increases competitive advantage, reduces unacceptable losses associated with ill-health and injuries, lowers absenteeism, improves morale and reduces litigation costs.”

It recommends the implementation of practical occupational health policies tailored to circumstances noting “top management must demonstrate commitment and provide leadership in formulating strategy, developing policies and monitoring performance. It must ensure the necessary resources are available to implement policies”.

Council for Work and Health (2013)

sets out a vision of
“universal access to occupational health to create better health and business productivity and highlights the fact that, almost 70 years ago after the NHS was created and OH was excluded from its remit, OH now has an opportunity to play a much greater role in the health of the nation”
Occupational Health
How do you get in touch with Occupational Health?
  a) Self Referral / Manager Referral
  b) E-mail to Occupational.Health@ed.ac.uk
  c) Telephone Work: 650 8190
  d) Fax: 650 9149
  e) Any or all of the above
(Answer – e and check the website if you have it available and that will say who we are and how to contact us)

Chat time! over coffee/lunch
• Based on the information provided today consider/identify the realistic OH needs of your part of the organisation.
• Please fill in the form on your seats, let us know your perception of need and where you are from to assist us considering tailoring service provision.
Please hand this to the stall in the atrium where you can also enter our prize draw

Questions?