



# EUROPEAN UNION OF MEDICAL SPECIALISTS

Section of Occupational Medicine

Barcelona

27<sup>th</sup> October 2012



**UEMS** Barcelona 2012.10.27



**Welcome**

**Àngel Plans**

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**Pedro Gonzalez de Castro**

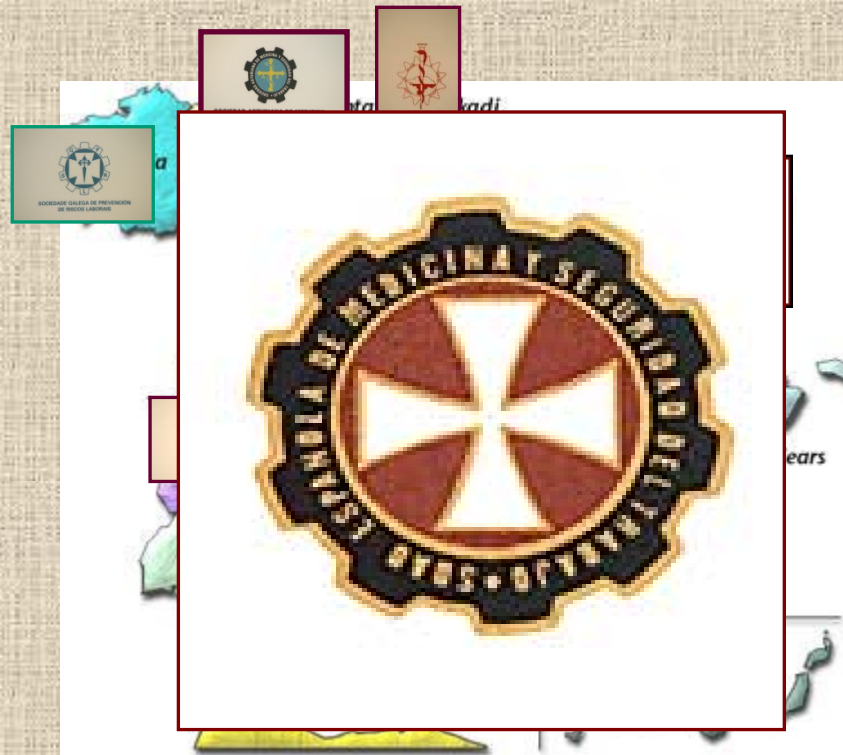
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## SPAIN

Total population: 46.000.000

Active population: 23.100.000

Registered doctors: 200.000 (400/10<sup>6</sup>)

Occupational Physicians: 10.500

Specialist in OM: 6.000

Nurses in OM: 10.000

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Acta de la Sesión de la Junta de Gobierno de la Facultad de Medicina del Trabajo:

Asistencia:

1. F. A. Torralba
2. S. Guerra Parra
3. M. Torralba
4. A. Torralba
5. E. Guerra
6. B. Torralba
7. M. Torralba
8. S. Torralba
9. S. Torralba

En la Hija de San Francisco, a las 22.30 horas del día 8 de marzo de 1973, se reúne en primera sesión la Junta de Gobierno de la Facultad de Medicina del Trabajo y Medicina del Trabajo, elegida en votación en asamblea constitutiva celebrada el día 21 de Mayo de 1973.

El Presidente, Sr. Celestino Torralba, preside la sesión y lee el acta de la sesión anterior.

El Sr. Torralba propone la continuación de acuerdo con lo establecido en el art. 33 de los Estatutos, profiere los cargos de la Junta que fueron aceptados por todos los miembros en la Sesión que sigue:

Vice-Presidente: Santiago Guerra Parra, que se le asigna además la función de Encargado del Servicio de Publicaciones.

Secretario: Sr. Manuel Torralba Torralba, de cual dependerá todo el personal administrativo.

Procurador: Sr. Sr. Celestino Torralba.

Contador: Sr. Sr. Celestino Torralba, asignándole la responsabilidad del Departamento Económico de la Facultad.

Vice-Secretario: Sr. Sr. Celestino Torralba, a la que se le asigna también el cargo de Secretario con las misiones de conservación y compra de todo el material y recibir y controlar el ingreso de todos los libros de medicina y material que se venían de la anterior Sociedad.

Bibliotecario: Sr. Sr. Celestino Torralba.

Jefe del Servicio de Estudios y Defensa al Bibliotecario: Sr. Sr. Celestino Torralba.

Jefe del Servicio de Seguridad: Sr. Sr. Celestino Torralba.

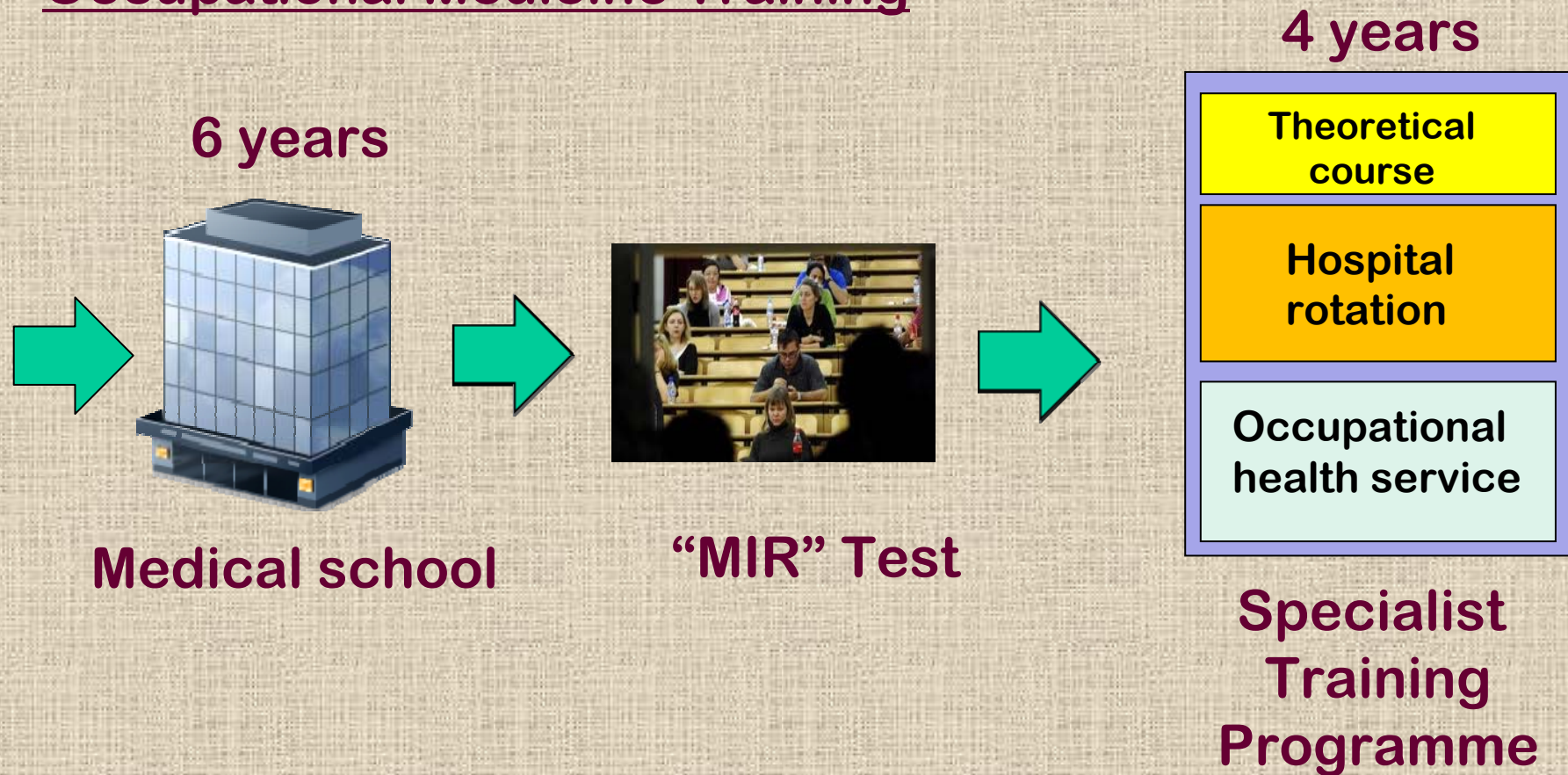




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## Occupational Medicine Training



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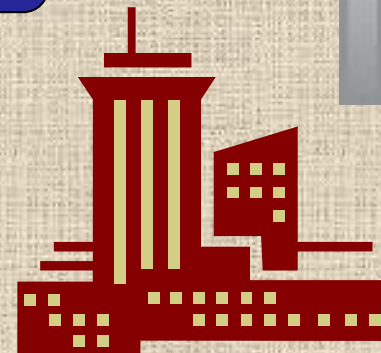
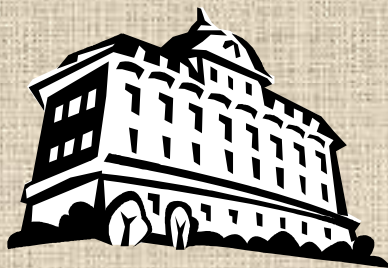
## Organization Occupational Medicine



in-house  
OHS



outsourced  
OHS





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## Organization Occupational Medicine

**in-house  
OHS**

- Public
- Large private

**outsourced  
OHS**

- Medium and small
- Large companies

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## OHS: activities

- **Preventive**
  - periodical medical examinations
  - health surveillance
  - fitness for work evaluation
  - vaccinations
- **Clinical**
- **Support activities**

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## OHS: activities

- Preventive
- Clinical
  - Diagnosis/treatment work accidents
  - Diagnosis/treatment occup. Diseases
  - Evaluation of work disability
- Support activities



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## OM: problems in Spain

- Decrease number of trainees
- Two parallel system of social security
- Lack declaration occupational diseases
- Permanent changes in legislation
- Low appreciation to specialty

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Mr. President, dear sirs,

My name is Àngel Plans and I'm the president of the Societat Catalana de Seguretat i Medicina del Treball, a mean the catalan Occupational Medicine society. Besides me I would like to introduced you Dr. Pedro Gonzalez de Castro, the president of the spanish federation of Occupational Medicine societies, which was burn in 1956 and which is called Sociedad Española de Medicina y Seguridad en el Trabajo. There are 14 regional societies integrated there.

For us, is a great pleasure to meet you today here in Barcelona, in occasion of your bi-annual meeting.

First of all, let me start my words giving all our best wishes for the time you spend working here. We think that this kind of meeting were very important for the future of occupational medicine all over Europe. I think I have to thanks M.Cruz, Consol and Charo Rodriguez, the members of our society who were involved on the organization of the event, for all the time and the work they have done to organized the meeting and the things the thinks they have prepared for this days you will stay with us.

Yesterday, when we were at the GAES auditorium, I'd told you that our regional society is one of the most important from the Spanish's ones. In Spain we were more o les 3000 members on this 14 societies.

Nowdays, Spain is a country of more or less 46 millions of people, with 22 millions in the range of work but, you know it, with a large index of unemployment.

For this population we were more or less 220.000 doctors, with 6.000 specialized in OM. We have also 10.000 nurses also specialized in OM.

The history of OM in Spain began more or less at 1900 with our first law legislating work accidents. This law originated the development of a treatment and compensation system for workers. After our civil war, between 1936 and 1939, occupational Medicine was not officially recognised as a medical specialty till 1956.

On those first years of the specialty, the knowledge and training of it was done in specific medical schools. In 1989 OM was integrated with the regularized national examination for the access for medical training, called "MIR", and it was officially established with a 3 year formal training. In 2005 it was established that the specialist training scheme in Occupational Medicine will stays on 4 years.

Nowadays our way to the access to Occupational Medicine is that a student, after 6 years of medical school, has to access to a 4 year specialist training

programme in Occupational Medicine through a national examination. After this, he begins a training which includes a 6 month theoretical course, 20 months in hospital rotations and a 20 months rotation in an occupational health service. In Spain, everyone who managed to overcome the general test for medical training, can chose a place to do the medical specialty he wants. This time of training, 4 or 5 years, is considered as a remunerated work in the hospital he has chose but this is not truth in the case of occupational behaviour where the training is funded mainly by private sector and the student earns a very little salary. This fact, of course, is causing a worrying decline in number of trainees.

The organization of the Occupational Medicine in Spain has two kinds of services:

The ones we could call "in-house OHS", that are basically in the public sector and large private enterprises, and the "outsourced OHS" which are present in the most medium and small sized enterprises and, unfortunately, in many large companies. It's very important to point out that there is a very high number of private companies in Spain who are between 50 and 500 workers.

Here in Spain, medical workers in these Occupational Health services do preventive and clinical activities and many other sort of things.

When I said preventive activities I mean a large group of health tasks as periodical medical examinations for workers, health surveillance and fitness for work evaluation, vaccinations,... Most of Spanish OH Physicians work in this modality. As I just said, those tasks can be done in an in-house OHS or in an outsourced private OHS.

The clinical activities of Spanish occupational services are usually the diagnosis and treatment of work accidents and occupational diseases in enterprises called "mutual insurance company". This system is parallel to the National Health System, which covers not work related pathology. I have said parallel which means that they are not integrated and, of course there a lot of problems on this point.

Of course, there some occupational practitioners who do evaluation of work disability for compensation schemes or, at the other hand, control of sickness absence for companies. We could also find people who work in advice or support units for general practitioners or who were integrated in University to teach health practice.

As you could suppose, for all I said till now, we have a lot of problems with many points. For me, the most important ones are:

- The decrease in the number of trainees.

- The difficulties of communication between the two systems of social security we have, (occupational and not occupational) and the integration of preventive tasks on the all national system of health.
- The lack of notification of occupational diseases.
- The permanent changes in legislation.
- The very low importance of our specialty that we notice between the government.

As you could see, there are many aspects to be worried about the future of our specialty in this country. I personally think that the next ten years will be decisive for the future of occupational medicine in Spain. We will have to front many changes on the way we are doing our task today or we will be integrated in general health services.

I think it would be very interesting to see what will tell to the delegates of UEMS, the president of the Catalan occupational medical society on the year 2022. I'm sure they all will be here but I am really concerned about the aim of the words he will say.

For the moment, I wish your work here today gives us some lights about the things that the people who are in this world of occupational safety needs because all of us, I'm sure, have an lonely aim to think, and this is the safety and security of the man or woman who works and there is very little difference if it works at the riverside of London, in the middle of Denmark, just at the side of Adriatic sea or near the sunny beaches of Mediterranean Sea.

Thank you very much for your attention and let me wish you a very successful meeting.