

Occupational Health Developments (UK)

UEMS – August 2014

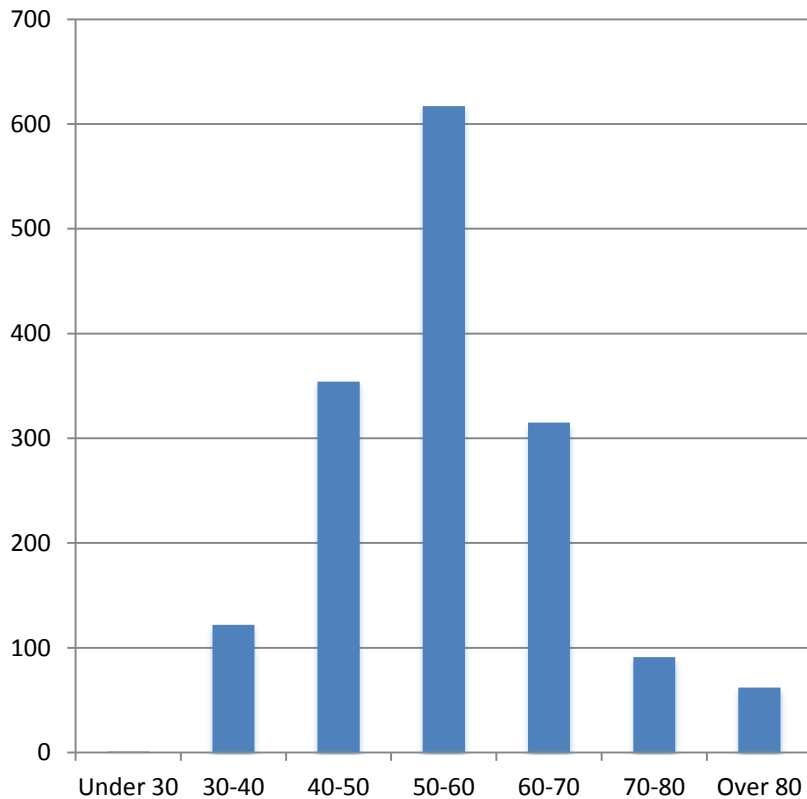
Richard Heron, President , FOM



THE SOCIETY OF OCCUPATIONAL MEDICINE

A perfect storm is coming our way!

Age of SOM membership



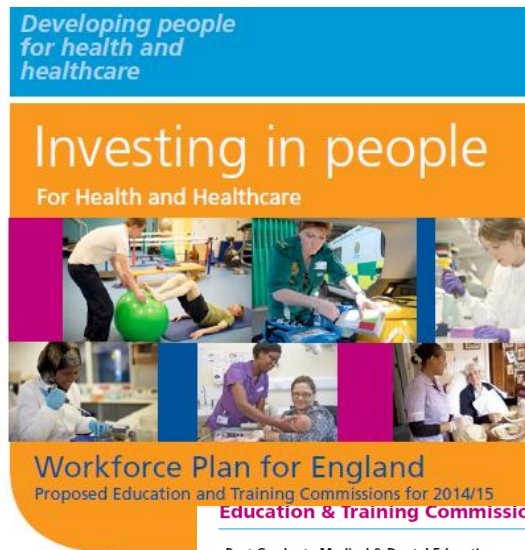
- Ageing OH Workforce - both doctors and nurses
- Falling membership of both SOM and FOM
- OH nurses seeking formal quality assurance, training programmes and revalidation processes
- Funding for trainees and research under threat
- Shrinking academic base
- Difficulty in attracting high quality doctor, nurse and AHP trainees

Demand for occupational health services is increasing



- Requirement of OH to be delivered by multi professional team – OH physicians essential part of mix
- **Ageing UK workforce** - more people in work with long term conditions
- **DWP Health and Work Service**
- Workplace – ideal environment to address health issues and health promotion
- Recognition of the potential for OH to support those who are currently out of work

Engaging Government



- Align with Health Education England

Education & Training Commissions for 2014/15

Post Graduate Medical & Dental Education:	Planned 2014/15 recruitment*	Number of training Posts	Increase/ Decrease	%
Higher Specialty Training				
Infectious Diseases	21	77	0	
Respiratory Medicine	125	490	0	
Dermatology	57	171	0	
Neurology	57	217	0	
Cardiology	106	539	0	
Rheumatology	51	211	0	
Genito-urinary Medicine	40	131	0	
Clinical Pharmacology and Therapeutics	10	35	0	
Geriatric Medicine	195	603	14	2.3%
Medical Oncology	47	132	0	
Clinical Neurophysiology	13	32	0	
Renal Medicine	52	247	-4	-1.6%
Nuclear Medicine	13	19	0	
Endocrinology and Diabetes Mellitus	99	332	0	
Gastroenterology	106	431	0	
Audio vestibular Medicine	9	18	0	
Clinical Genetics	21	53	0	
Clinical Oncology	56	260	0	
Tropical Medicine	0	0	0	
Allergy	11	11	0	
Acute Internal Medicine	123	360	0	
Haematology	97	317	0	
Immunology	17	33	0	
Rehabilitation Medicine	27	63	0	
Sport and Exercise Medicine	21	43	0	
Occupational Medicine	18	45	1	2.2%
Palliative Medicine	41	160	0	





Engaging Government

Our priorities for 2013/14



Our priorities

Local action will drive sustainable change in the public's health, but we are committed to taking action on a national scale where it makes sense, and when it is needed. We will focus our energies on five high-level enduring priorities:

1. Helping people to live longer and more healthy lives by reducing preventable deaths and the burden of ill health associated with smoking, high blood pressure, obesity, poor diet, poor mental health, insufficient exercise, and alcohol
2. Reducing the burden of disease and disability in life by focusing on preventing and recovering from the conditions with the greatest impact including dementia, anxiety, depression and drug dependency
3. Protecting the country from infectious diseases and environmental hazards, including the growing problem of infections that resist treatment with antibiotics
4. Supporting families to give children and young people the best start in life, through working with health visiting and school nursing, family nursing partnerships and the Troubled Families programme
5. Improving health in the workplace by encouraging employers to support their staff, and those moving into and out of the workforce, to lead healthier lives

To underpin these outcome-focused priorities we will:

6. Promote the development of place-based public health systems

- Align with Public Health

- Align with Dept. Health



Department of Health



Department of Health

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Health at Work Network

The core commitment, "We will actively support our workforce to lead healthier lives", provides a framework for the work of the network.

The network is chaired by Dame Carol Black, Expert Adviser on health and well-being at work for the Department of Health. Earl Howe, Parliamentary under-

Engaging Government



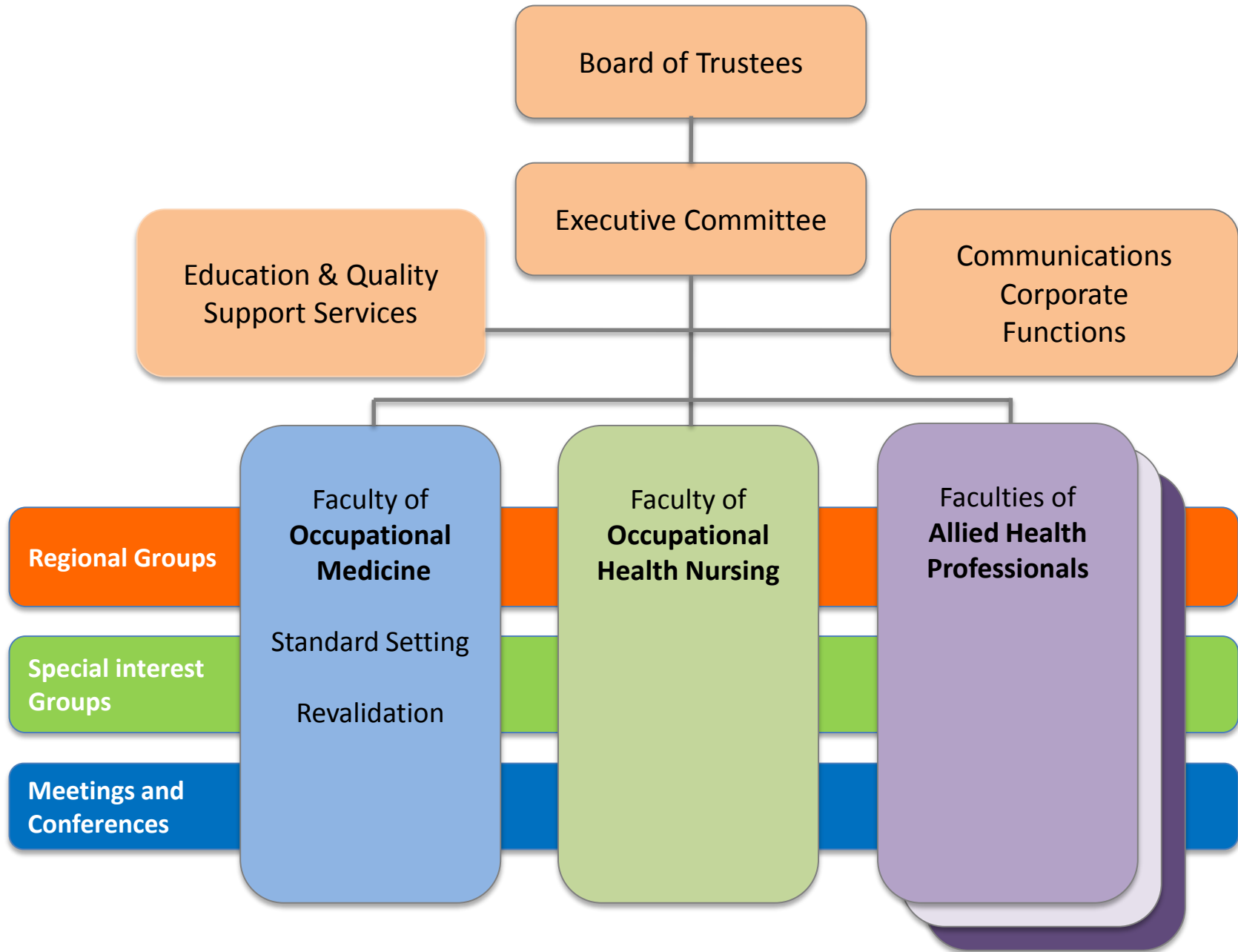
- Align with DWP?



- Health and Work Service Launched
- Government plan the new service to help employees and employers to manage sickness absence.
 - Employees on sick leave 4 weeks
 - Referred by their GPs
 - Occupational health assessment
 - Return to work plan to be shared with employer and GP



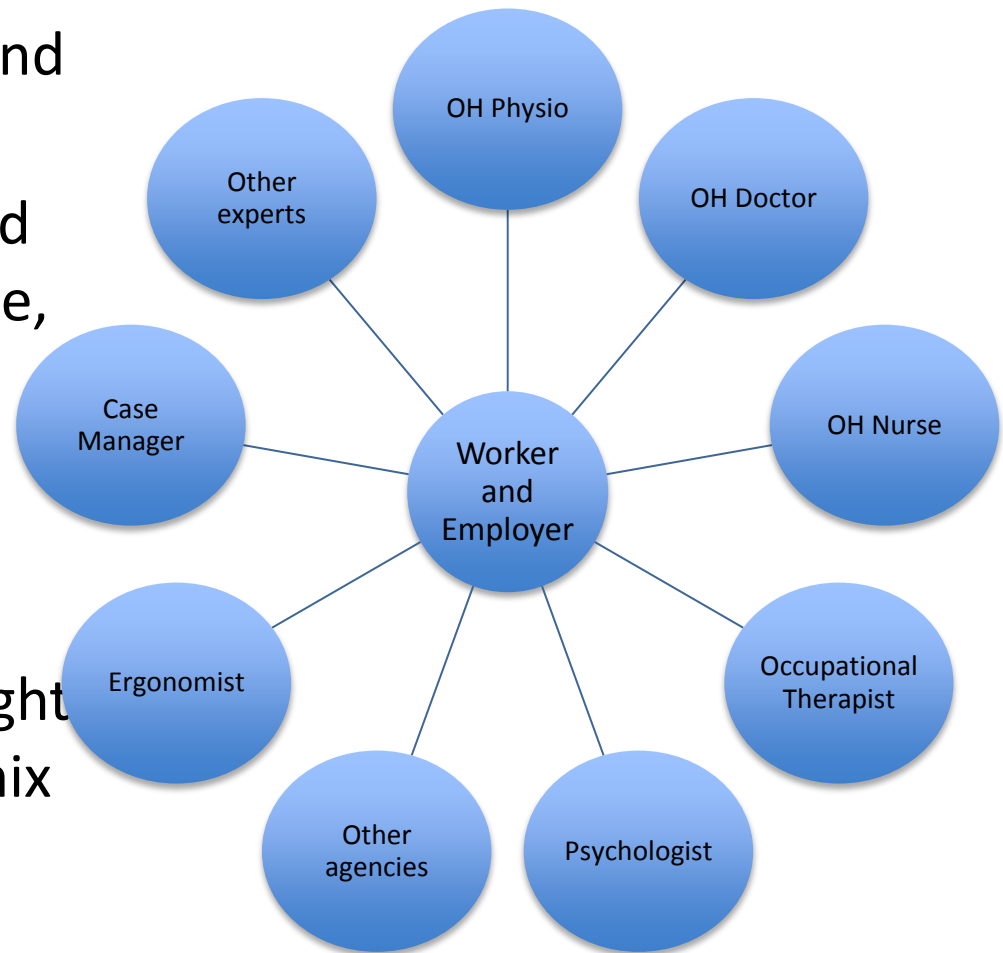
A new model for Occupational Health leadership?



What might success look like

A reinvigorated multi disciplinary OH workforce

- Solid career pathways and easy to access training
- Clearly defined roles and competencies for unique, complementary disciplines
- A vision for workforce planning well into the future- attracting the right caliber, numbers and mix of healthcare professionals



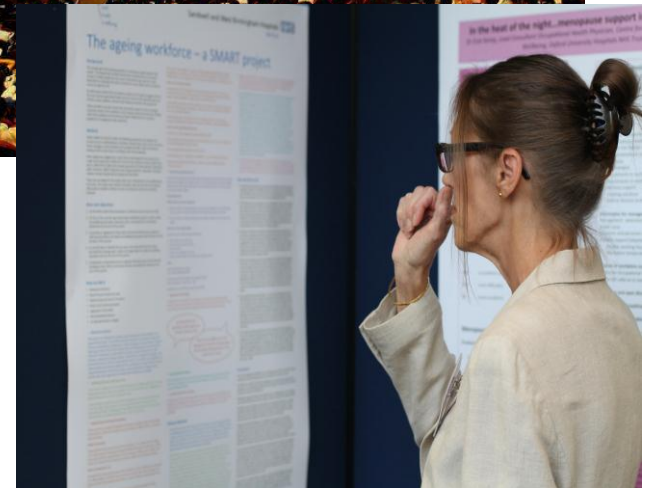
Success Trainee doctors to see 'work and health' as a really exciting career



- Engagement strategy for next generation
- Training that includes rotations in different workplaces
- Narratives around the amazing types of jobs the specialty offers
- Super specialist roles – for example in the nuclear and oil industries, varied roles working with many industries, strategic roles influencing Blue Chip companies at Board level
- And.....

Success - OH physicians see enhanced professional support

- Improved advocacy and influence
 - Recognition of value of OH doctors
- Excellent education and CPD
 - accessed in multiple ways
- Excellent Guidance
 - updates, journals and guidelines
- Regional networks
- Relevant appraisal
 - Seamless revalidation
- Refreshed Research strategy
 - Better evidence to support practice



We are on a journey....





....To sunrise after the storm