Report from the President: Summary of recent key actions and achievements

I have written an update of my recent work to progress the Faculty’s objectives on behalf of the Board; this includes a summary of work to raise awareness of the specialty, lobby government and other stakeholder bodies and to increase recruitment into the specialty.

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Government Departments and Politicians:

- On 22.01.15 I met with Adam Bailey of **Department of Work and Pensions (DWP)** and Mark Wilson of **Department of Health (DH)** and two economists to develop the argument for employers on the cost/benefits of occupational health (OH). This is the most recent of a series of dialogues (roughly every 6-8 weeks) with DWP and DH to gain their support for investment in growing our specialty.

- The Society President and I had a meeting on 09.02.15 with Lord Freud to discuss Fit for Work service and the importance of a sufficient and competent OH workforce to underpin that – having met Lord Freud several times previously.

- We have written to all FTSE 100 companies about the importance of good quality OH provision.

- Our refreshed website has a section for employers and employees.

- I have had several meetings with **Public Health England (PHE)** on the prevention agenda and the relevance of a healthy workforce and good OH service; and on 24.09.14 met with both the **Chair and Chief Executive of PHE**. At their invitation I agreed to join their Health and Work Board. This work has enabled PHE to strengthen their own service, appointing a consultant occupational physician to lead their service and also led to their financial sponsorship of a detailed workforce planning project, run by Professor John Harrison, which is due to report back in the next couple of months.

- I accepted an invitation from **Andy Burnham MP** to the launch, on 27.01.15, of the Labour Party’s plan for health care, held at the Kings Fund.

NHS

- You will probably be aware that the **new NHS Chief Executive, Simon Stevens**, has made public statements about the importance of workplace health and the need for NHS support to help people get and stay in employment. Knowing this to be a priority for him, and recognising the potential synergies in our goals, I have now met Simon Stevens three times (one at a roundtable meeting and a further two where I made presentations) about the importance of OH in the NHS and the need for strengthened OH/OM workforce in the NHS. We were delighted when the potential role of the Faculty was formally and clearly recognised by Simon Stevens in the **NHS Five Year Forward View** (October 2014) which undertook to: ‘Review with the Faculty of Occupational Medicine the strengthening of occupational health’.

- On 27.01.15 I made a two hour presentation to **Simon Stevens** and invited Presidents from the **Academy of Medical Royal Colleges** at his request regarding the importance of strengthening OH in, by and for the NHS. The College Presidents were highly engaged, with active input from many including John Ashton, **FPH**, Maureen Baker, **RCGP**, Simon Wessely, **RCPsych**, and Dame Carol Black, **DH**. There was widespread support for actions to strengthen occupational medicine and OH access. The preparation for this meeting involved direct engagement with GP and RCPsych representatives. Representatives from NHS employers, Royal College of Nursing and patient groups were also invited.

- I and colleagues are in frequent consultation with Steve Boorman and we are using the **Boorman recommendations** as part of the basis for this major piece.
of work currently underway with NHS to encourage a change in approach to OH in the NHS.

Public Awareness

- We co-operated with Alan Brimelow, **BBC Health Correspondent**, in preparation for a BBC report on the benefits of, and examples of, workplace preventive initiatives and health promotion; for this we arranged an interview with Paul Litchfield at BT. We are also currently advising on a potential BBC programme on work in Britain.

- I recently (23.01.15) contributed to debate at **Kings Fund** about the NHS Five Year Forward View, considering new models of care and how OH fits in with that.

- We know of some NHS Trusts where Boorman has been progressed. Since NHS Trusts are autonomous, progress significantly depends on local drive particularly from OPs. A 2012 study by the Health and Work Development Unit showed that performance of NHS Trusts is highly varied, with less than half of Trusts having an overarching health and wellbeing strategy in place. We need local OPs to be active in their trusts and look to our members to drive this locally, while we are addressing this at the national level.

Other recent meetings and discussions with senior influencers include:

- Professor **Sir Peter Rubin** (former GMC Chair) and Professor Terence **Stevenson** (current GMC Chair) (09/12/14). We were directly referenced in the GMC report of the state of Medical Specialties (as referenced on page 6 of this letter), and attention to the plight of our specialty made by Niall Dickson to the BBC.

- **Sir Robert Francis**, about linking quality of patient care with staff engagement, as referred to in the Boorman Report and in a recent **Point of Care Foundation Report**

- **Dame Carol Black**, on many occasions but most recently on 12/01/15

- **Sir Bruce Keogh**, Medical Director, NHS England (29/10/14)

- **David Behan, Chief Executive, Care Quality Commission** – regarding the role of a trusted OH service

- **Professor Wendy Reid, Health Education England (HEE)** on the training of occupational physicians (following previous meeting with the Academic Dean, and others regarding this, see below).

Workforce planning

- Building on the review undertaken by David Coggon, when Faculty President, in August 2011, we are currently involved in a **major piece of work on workforce planning** across the whole of OH. The project is being led by the National School of Occupational Health (led by occupational physician John Harrison) and the Council for Work and Health (of which we are a member); this is an extensive and detailed piece of work which will encompass a pestle analysis and a five step process. I was able to secure financial support for this project from PHE. This report will provide an evidence-based plan for projecting trainee numbers needed and will feed into our work with HEE and the NHS. The report is due to be finalised in March.

- We are also working with HEE on workforce planning and contributed to their **annual workforce report** which set out the goals for training posts in England. We
responded directly to their call for information on trainee numbers, posts and trends.

- The above HEE report sets a goal of 45 NHS trainees in England; there are currently 30. We have bimonthly meetings with the Department of Health and a standing item on our agenda is the need to boost trainee numbers and, at minimum, the need to try to ensure that the HEE-published target of 45 NHS trainees in England is met.

- We have lobbied the Centre for Workforce Intelligence whenever there has been an opportunity to have OM recognised as a shortage occupation. The Faculty recently engaged a marketing expert and held a focus group meeting out of which we are developing an overall marketing strategy on recruitment.

- One of our key targets is of course medical students. We have long-standing and ongoing work to promote OH in medical schools, both for general awareness and to promote OM as a career. The Faculty has established OM leads in all medical schools – progress on which depends on local effort by our members of course, and a good number of them are making inroads. We have developed two sets of awards to fund undergraduate electives in OH, with exciting projects now being taken up regularly. A recent article in the Faculty newsletter (19.12.14) described the scope of our work with medical students.

- Local action is important for encouraging potential trainees across the UK to enter the specialty. We are appreciative of the efforts being made by some of our members, working as teaching leads within medical schools, but we would like to encourage many more to be actively engaged with promoting OM as a career to medical students and junior doctors. It was disappointing that at the last national recruitment posts in some regions were unfilled. We all have a job to do in our own locality here.

- I am delighted to be supporting our first Registrars’ conference in March. The engagement of trainees is essential, and trainee conferences in Australia and New Zealand have been very well attended and received by trainees.

- We are also targeting junior doctors and are currently discussing with experts in medical training in the National School of OH how to engineer greater exposure to OM as a career through short-term placements. We have also asked members to step up and offer taster placements to doctors potentially interested in OM as a career. So far 22 organisations, including both companies and NHS trusts, have volunteered and at least 12 placements have been made.

- We have over the last 18 months created a programme of active support for doctors interested in gaining entry to the GMC specialist register through the CESR route; this has comprised targeted training days for doctors – mostly AFOMs – with GMC support to provide coaching on compiling CESR portfolios. We will shortly be undertaking surveys to assess the impact of these days with a view to making improvements where possible.

- We have recently (18.02.15) initiated a survey aimed at understanding the career movements within OM between the NHS, military and private sectors. We find that policy makers and government bodies can tend to be unaware of the importance of doctors trained in the private sector for the overall OM workforce – including those who move into the NHS or who provide services to the NHS, as healthcare provider companies. We shall be using the outcome of this survey to bolster our arguments for the need for increased funding for training.
We are also aware of the important role that GPs play in the front line of work and health, and that many in the past have switched careers to OM. We therefore regard GPs as an important audience. Last year for the second time we attended the RCGP conference and exhibition to encourage GP interest in Faculty diplomas to support their general work but also to consider OM as a career. In 2012 the Faculty proposed to Pulse magazine that we commission a series of article about OH for primary care practitioners. This turned out to be a very successful collaboration, resulting in a series of nine articles, now reproduced together in hard copy and on the website - we have approached RCGP about making this available to all GP trainees.

Funding and salaries

At one of many meetings with HEE and DH, on 02.02.15 I met with Professor Wendy Reid and Professor Liz Hughes with a view firstly to halting the negative impact that new MADEL funding regime will have and also making the case for the need to increase the workforce and provide funding for that; both organisations are aware of the critical situation.

The Faculty has approached the GMC to ask for a review of the rule which currently does not allow GPs to work part-time whilst also training part-time in OM; written evidence was presented to the GMC and they are considering this.

Listening and responding

I and colleagues visited the Society regional groups prior to the vote about a single organisation. Although it was difficult to identify a date which people could attend in the north west, I was delighted to work with Raymond Agius to find an opportunity of visit to Manchester University where many members took up this opportunity.

We always consider members’ emails and letters carefully and aim to reply promptly and fully.

Members were invited to participate in debates at the AGM about the proposed single organisation. Very few members used this opportunity but we would like to encourage more to participate.

Ian Aston, Academic Dean, and David Flower, Responsible Officer, and I have all attended the BMA OM Committee to discuss a range of items, the latest meeting being on 22.01.15.

While there is always more to do I was pleased to see the high levels of engagement in our consultations with members, which indicates active two-way communication: 58.2% voted in the single organisation vote; 38% participated in the survey at the end of 2014; and the SEQOHS consultation last year elicited 178 responses. These are acknowledged to be high response rates when compared with other member organisation surveys.

We appreciate that we can always give more detail on the work we are doing, and this letter is a useful opportunity for just that, but, in the context of limited resources, we currently communicate through:

- our fortnightly e-newsletter
- Faculty website
- periodic hard copy letters from the President and CEO
tweets:
  - @HeronRichard: 316 tweets; following 120; 133 followers
  - @FOMNews: 463 tweets; following 77; 335 followers

- In pre-vote period communicated extensively to members and ran three webinars.

**Democracy**

- The Articles of Association are available to all members at:

- All posts on the Board and the Executive Committee, and all key appointments, such as Chief Examiners, are advertised openly. We always want to attract more applicants from all regions and all sectors. There are many opportunities for members to participate in senior roles for the Faculty, but we do find that few put themselves forward. We would welcome help from members across the country in encouraging more colleagues to participate in our democratic processes and our key roles.

- Members can contact the Board, for example to seek information or to ask for a topic to be debated by the Board. A full list of members is at:
  [http://www.fom.ac.uk/about-us/board-and-key-appointments](http://www.fom.ac.uk/about-us/board-and-key-appointments)

**Engaging with other key bodies**

- I have frequent contact with FPH (several outlined above) and have initiated a joint project with FPH, with a view to reviewing local Joint Strategic Needs Assessments, and creating a template to be rolled out to Health and Well Being Boards across the country.

- I have met three times with the RCGP President, and am engaged in many other regular contacts with key personnel such as John Chisholm and Mike Pringle.

- With regard to RCP I have so far met have met six times with President Jane Dacre about OH and related matters and the Faculty has numerous other regular contacts throughout RCP.

- We are in regular contact with the GMC at many levels – from policy level through to operational.

- With regard to policy discussion with the GMC, I have met with Niall Dickson, CEO, (and the previous and current Chair as indicated above) and was very pleased to see GMC recognition of the problem with OM recruitment in their recent report and associated press release.

- During 2013 and 2014, we built on the GMC review of OM as a small specialty to progress the recommendation for the creation of the new National School to focus efforts and improve consistency of standards in training.

- In December 2014, we commented on the GMC report on doctors and suicide.

- On an operational level, we liaise with the GMC with regard to specialty training, qualifications and revalidation routinely; they also assist with our regular CESR training.


**Academic occupational medicine**

- Promoting research and the academic wing of OM is one of our key objectives, which is why we established, and have recently revived, the **Academic Forum**.

- The Faculty recently advertised for members to join a new working group to develop a **research strategy** for the Faculty. We are actively working with the Academic Forum to identify, endorse and support future research needs.

- We have a Faculty lead on quality, actively considering how to integrate clinical audit work after the demise of HWDU, with other quality initiatives such as contribution to and better use of NICE guidelines.

- We take opportunities as they arise to support academic OM and research. For instance we are pleased to be a stakeholder in the new ARUK MRC Centre for Musculoskeletal Health and Work, which was launched at an event on 17.02.15, where the Faculty was strongly represented.

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**Get in contact**

We always welcome members’ comments and also news about what members are doing in their own localities to support the specialty and to promote recruitment.

If you would like to let us know about any activities you are undertaking to promote the specialty, please do send an email to [Patrick Cullen](mailto:Patrick.Cullen@fom.ac.uk).

You may wish to contact members of the Faculty Board (the Trustees), who are ultimately responsible for all governance issues related to the Faculty, for example to seek information or to ask for a topic to be debated by the Board.

To submit your enquiry, please send an email to [trustees@fom.ac.uk](mailto:trustees@fom.ac.uk); if your enquiry is for a particular Board member, we would be grateful if you could mark it for their attention.