



## Annual report and accounts

2015

Charity Commission No 1139516  
Scottish Charity No SCO400060  
Registered in England No 07461063  
VAT Registration No 798 6604 62

## **OUR VISION**

Healthy working lives *for all*

## **OUR POSITION**

The Faculty of Occupational Medicine believes everyone of working age has the right to benefit from healthy and rewarding work while not putting themselves or others at unreasonable risk. They have the right to access competent occupational medical advice as part of comprehensive occupational health and safety services, ensuring that they can access the rewards of good employment and avoid preventable injury and illness caused or aggravated by work.

## **OUR MISSION**

To drive improvement in the health of the working age population through outstanding occupational health capability by developing and supporting the good practice of occupational medicine. To provide public benefit through the protection of people at work by ensuring the highest professional standards of competence, quality and ethical integrity.

## **OUR VALUES**

Collaborative, Authoritative, Relevant, Ethical

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## BOARD OF TRUSTEES, OFFICERS AND OTHER KEY APPOINTMENTS

### The Board and Charity Trustees

The Board of Trustees (called the Board) comprises the charity trustees of the Faculty of Occupational Medicine. The Trustees are also the directors of the company under the Companies Act 2006. Except where indicated, the following all served as Trustees and directors throughout 2015:

Dr Richard Heron	President
Dr Ian Aston	Co-opted member (Academic Dean & Deputy President)
Dr Alan Bray	Universally elected member
Professor Neil Budworth	Lay representative nominated by the Confederation of British Industry
Professor Sherwood Burge	Representative of the Royal College of Physicians
Dr Aidan Challen	Co-opted member (Associate)
Dr Jillian Crabbe	Elected representative of Specialist/Specialty Registrars (from 15 January 2015)
Professor Jane Dacre	President, Royal College of Physicians
Dr Jim Ford	Universally elected member (to 8 July 2015)
Dr Imran Ghafur	Universally elected member (to 8 July 2015)
Dr Mark Groom	Co-opted member (Treasurer)
Dr Mark Hilditch	Elected representative of Scotland
Dr Sue Hunt	Universally elected member (resigned 16 November 2015)
Dr Ioana Kennedy	Universally elected member (to 8 July 2015)
Dr David Mills	Elected representative of Northern Ireland
Dr Graeme Nicholson	Elected representative of Regional Specialty Advisers (to 15 October 2015)
Ms Sarah Page	Lay representative nominated by Trades Union Congress
Dr David Roomes	Universally elected member
Dr Julia Smedley	Co-opted member (Registrar & Deputy president) (from 14 January 2015)
Dr Mike Tidley	Elected representative of Wales
Dr Ian Torrance	Universally elected member (from 8 July 2015)
Dr Charles Vivian	Universally elected member (from 8 July 2015)
Dr Nigel Wilson	Universally elected member (from 8 July 2015)

### Officers

Except where indicated, the following held office throughout 2015:

Dr Julia Smedley	Registrar (Deputy President)
Dr Ian Aston	Academic Dean (Deputy President)
Dr Mark Groom	Treasurer
Dr Jayne Moore	Director of Training
Gp Capt David McLoughlin	Director of Assessment (to 1 September 2015)
Dr Alan Bray	Director of Assessment (from 1 September 2015)
Dr Simon Sheard	Director of Quality Improvement
Ms Nicky Coates	Chief Executive (to 20 April 2015)
Ms Judith Willetts	Chief Executive (from 20 April 2015)

## Other key appointments

Dr Jon Spiro	Deputy Director of Training
Dr Nick Cooper	Deputy Director of Assessment
Dr Alan Bray	Chief Examiner Part 2 MFOM (to 20 July 2015)
Dr Shaun Austin	Chief Examiner Part 2 MFOM (from 20 July 2015)
Dr Shaun Austin	Deputy Chief Examiner Part 2 MFOM (to 20 July 2015)
Dr Steve Boorman	Chief Examiner DOccMed
Dr Lucy Wright	Deputy Chief Examiner DOccMed
Dr Sylvia Awbery	Chief Examiner DDAM
Wg Cdr Matthew Lewis	Chief Examiner DAvMed
Dr Henry Lupa	Deputy Chief Examiner DAvMed
Dr Steve Nimmo	Chief Examiner Research Methods
Dr Steve Nimmo/Dr Kaveh Asanati	Deputy Chief Examiner Research Methods
Dr Lucia Batty	Chief Examiner Workplace-Based Assessments (WBA)
Dr Steve Nimmo	Chief Examiner Hand Arm Vibration Syndrome (HAVS) (to 1 May 2015)
Dr Alan Bray	Chief Examiner Hand Arm Vibration Syndrome (HAVS) (from 1 May 2015)
Dr Kaveh Asanati	Deputy Chief Examiner Hand Arm Vibration Syndrome (HAVS)
Dr David Flower	Responsible Officer for revalidation
Dr David P Fox	CPD lead

## SEQOHS (Safe Effective Quality Occupational Health Service)

Dr Sally Coomber	Clinical Lead (to October 2015)
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## Membership breakdown 2015

Membership numbers	2014	2015
Honorary Fellows	92	90
Fellows	295	295
Members	415	417
Associates	154	154
Specialty Trainees	75	74
Affiliating Diplomates	376	380
Life members	84	84
Revalidating subscribers	21	21
<b>Total</b>	<b>1512</b>	<b>1515</b>

## REFERENCE AND ADMINISTRATIVE INFORMATION

The Faculty's address is: 3<sup>rd</sup> Floor, New Derwent House  
69-73 Theobald's Road  
London  
WC1X 8TA  
[www.fom.ac.uk](http://www.fom.ac.uk)

Charity Commission Number: 1139513  
Scottish Charity Number: SCO400060  
Registered Company Number: 07461063

Bankers: Lloyds Bank plc  
Langham Place branch  
PO Box 1000  
BX1 1LT

Solicitors: Hempsons  
Hempsons House  
40 Villiers Street  
London  
WC2N 6NJ

Auditors: Crowe Clark Whitehill LLP  
St Bride's House  
10 Salisbury Square  
London  
EC4Y 8EH

The Board of Trustees, who are also the directors of the charitable company, and executive officers are listed on page 4.

The Faculty Board presents its annual report for the year ended 31 December 2015 under the Charities Act 2011 and the Charities Accounts (Scotland) Regulations 2006, together with the audited accounts for the year, and confirms that these comply with current statutory requirements, the requirements of the charity's governing document and the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in 2015. The report is also a Directors' Report as required by Section 415 of the Companies Act 2006.

## **STRUCTURE, GOVERNANCE AND MANAGEMENT**

### **Governing document**

The Faculty is governed by its Articles of Association dating from December 2010 and last amended in May 2012. The Faculty's constitution is set out in its Articles of Association.

### **Recruitment and training of Board members**

Under the Articles of Association, with the exception of the President of the Royal College of Physicians (or her/his nominee), one other College representative, the lay members and co-optees, members of the Board are elected by various sections of the membership and serve on the Board until the third Annual General Meeting following the one at which their election is announced. Elected members may not serve for more than two consecutive elected terms and are ineligible for re-election until a period of one year has elapsed.

New trustees are inducted into the workings of the Faculty through the issuing of information for trustees, which includes relevant material from the Charity Commission, Office of the Scottish Charity Regulator, Companies House, the Faculty's governance, structure, management, strategy and key policies. At the time of writing, the Faculty is undergoing an extensive review of its governance structures and arrangements, which will be reported on in due course. This will influence the future recruitment and training of trustees.

### **Organisational management**

The Board, as the directors and trustees of the incorporated charity, is legally responsible for the overall management and control of the Faculty and meets quarterly.

The work of implementing most of its policies is carried out by the staff and Officers of the Faculty, the latter forming the Executive Committee which has delegated authority to deal with the business of the Faculty between meetings of the Board, and report such actions to the Board. With the exception of the President, who is elected and a trustee, the Faculty Officers are appointed in accordance with Governance Regulations. After an initial three years of service, the period of office for each Officer may be extended up to a maximum period of six consecutive years in one post if the Board so decides. The Executive Committee usually meets eight times a year, in the months in which the Board does not meet, and is chaired by the Registrar.

The other principal committees are the Fellowship and Honours Committee, the Ethics Committee and the Clinical Excellence Awards Committee. The Board may establish other committees or working groups as seems desirable. Committees may set up Subcommittees, which in turn may set up Working Groups (for short-term tasks) and Advisory Groups (for longer-term tasks). Each of these defined groups reports regularly to its 'parent' group against the Faculty's annual activity plan and the annual risk assessment carried out by the Board, in accordance with the Statement of Recommended Practice (SORP).

Proposals for Subcommittees and Working Groups have to be made in writing by the parent Committee/Subcommittee to the Executive Committee and funding is only provided for groups established in this way. Wherever possible, proposals are required sufficiently far in advance to allow for inclusion in the annual budget cycle. The Executive Committee formally reviews the output of all Subcommittees and Working Groups at least annually and determines whether their continuance is justified.

During 2015 there were five Subcommittees and one Working Group reporting to the Executive Committee: Assessment Subcommittee; Specialist Advisory Subcommittee; Regional Specialty Advisers Subcommittee;

Designated Body Subcommittee; SEQOHS Steering Group; Quality Improvement Working Group. There were no candidates for Clinical Excellence Awards in 2015.

Apart from the President (which is an elected role), all Officer vacancies and key appointments are advertised to the membership and appointment is by open competition. Recommendations for appointments are made by panels of the Board, which include a lay member, and are for the Board's approval. With the increasing workload of the Faculty, Deputies to Officers are appointed where required, and to constituency elected Board members.

### **Risk management**

The Board is responsible for the management of the risks faced by the Faculty and has a formal risk management policy to assess business risks and implement risk management strategies. This involves identifying the types of risks facing the charity, prioritising them in terms of potential impact and likelihood of occurrence and identifying means of mitigating the risks. Detailed consideration of risk is delegated to the Executive Committee, which at each meeting has an in depth review of one high risk area. A formal review of the charity's risk management processes is undertaken on an annual basis by the Trustees, and the Executive Committee reviews progress on the additional action required to mitigate the major risks.

The key controls used by the charity include, more generally:

- agreed mitigation steps
- formal agenda for all Committees and Board meetings
- detailed terms of reference for all Committees
- strategic planning, budgeting and management accounting
- established organisational structures and lines of reporting
- formal written policies, and
- clear authorisation and approval levels.

The Trustees are pleased to report that provisions are in place to mitigate the risks considered to be potentially the most major. It is recognised that systems can only provide reasonable but not absolute assurance that major risks have been adequately managed.

### **Public Benefit**

The Faculty primarily provides benefit to the public by supporting and promoting the work of its members and by continually upholding and improving professional standards. By doing this, the Faculty ensures that those working in Occupational Health deliver the best possible service to the working age population. The Faculty's members commit to annual appraisals and undergo a rigorous process of revalidation through the Faculty and other designated bodies. The Faculty's education and qualification programmes ensure that a level of excellence is achieved throughout the profession, and that this is maintained through Continuous Professional Development. The Faculty's SEQOHS standards are the recognised gold standard for providers of occupational health services. SEQOHS-accredited services provide an assured level of excellence for all those who use them.



## TRUSTEES' REPORT

### Introduction from the President and Chair of the Board of Trustees, Richard Heron

2015 has been a year of significant change for the Faculty. I have to begin by mentioning the new and departing colleagues we greeted and celebrated during the year.

In April, we welcomed our new Chief executive, Judith Willetts and in January, our new Head of Finance, Andy Harrison joined. Our Head of Professional Standards, Rachel Cooper went on maternity leave and gave birth to Amelia. Rachel Soper joined to cover the maternity leave and we said goodbye to Emma Cox-Smith, who chose not to return as training Manager after the birth of Isla. Congratulations to both Rachel Cooper and Emma. Other colleagues moved on to pastures new: Patrick Cullen, Siobhan Wheeler, Cinzia Spinazze and our sterling temporary staff, Bartosz Szafranski, Elisa Brewis, Thuy Vuong and Sharon Lukom. Thank you to them all for their contribution to the Faculty. We also said farewell to outgoing CEO, Nicky Coates and to Frances Quinn, both of whom have made major contributions to Faculty life over more than a decade. We also welcomed Rachel Richardson and Alex Edwards to the new Professional Standards team and Leigh Harrison joined as Communications Assistant. We are delighted to have them on board.

We have also had a significant number of new additions to Board and Officers, from Registrar, Julia Smedley to Trainee representative, Jill Crabbe. Nigel Wilson, Charlie Vivian and Ian Torrance joined the Board and we welcomed Alan Bray to the role of Director of Assessment, succeeding David McLaughlin. Simon Sheard, Director of QI, ended his term, and Sally Coomber ended her term as SEQOHS Clinical lead. We also said farewell to outgoing Board members, Sue Hunt, Graeme Nicholson, Jim Ford, Imran Ghafur, Ioana Kennedy and Michael Lambert. We are grateful to them all for their tireless work on behalf of the Faculty.

Although our staff and officers are changing, the focus of the Faculty is unchanged. In the summer, the new AFOM was re-introduced and our first successful candidate passed the examination. Aiden Challen represents AFOMs on the Board in a newly created position. Many AFOMs have already demonstrated their commitment to our specialty by examination, and workers throughout the country are benefiting from their skills; we must ensure that their contributions are better recognised and opportunities extend to those who wish to further their careers in Occupational Medicine.

During 2015, we looked closely at our future strategy and have produced a new Strategic Plan. Taking feedback from the SOM and FOM membership survey conducted at the close of 2014, we have reflected the priorities of our members in this plan. The strategic aims for 2016 are included later in this report.

Engaging with, and listening to our members continues to be paramount for the Faculty. We started to look at new governance structures for the organisation during 2015 and will be seeking members' views on new proposals in the early part of 2016. We aim to ensure that we achieve excellent levels of transparency and accountability through the Board and Committee structure and remind members that they are welcome to attend Board meetings as observers and can review all Board and Executive Committee meeting notes via the website. The proposed new governance arrangements, including strengthening the skill-set of Board members, will aim to streamline communication and workload and make the amount of time so many of our members give to the Faculty, voluntarily, as manageable as possible. This way, we can best use their professional input and maximise their contribution.

We continue to benefit hugely from this contribution, and are grateful for the unstinting efforts our committee members made during 2015. One matter of concern is the diversity of representation throughout the Faculty committees. We have a diverse range of trainees entering the specialty, but lack this diversity elsewhere. We are addressing this during 2016 and have created a new Inclusivity and Diversity Working Group to consider this issue and make appropriate recommendations to the Board.

The Trustees have reported on specific areas of activity and performance against objectives, and this is included in subsequent sections. In addition, I would like to highlight some key events of 2015. The Health and Wellbeing at Work 2015 conference took place on 3-4 March at the National Exhibition Centre in Birmingham. The event was well attended, attracting around 3000 health professionals of all varieties across the two days. We were pleased to once again support the conference alongside the Society of Occupational Medicine (SOM), and had a joint exhibition stand with our sister organisation. Aside from flying the OM flag high, I was delighted to be joined by other Faculty colleagues who were giving presentations, particularly Steve Boorman, Chair of the Ethics Committee and Lucy Wright, Deputy Chief Examiner DOccMed. Both the Faculty and Society will be returning in 2016.

In May the Faculty supported a highly successful meeting with Medical School training representatives to improve the wider inclusion of 'Health, Work and Wellbeing' in the Medical School Curriculum, with inputs from Chairman of the GMC, Sir Terence Stephenson, Professor Jane Dacre, President of the RCP and Special Advisor to DH and Public Health England, Professor Dame Carol Black.

2015 saw the Faculty run three Professional Briefing Days (PBDs) and seven 'Health for Health Professionals' courses (HHPs), led by Debbie Cohen. These continue to be well-attended and very well received, and we are grateful to Debbie and all our speakers for their contribution. The Faculty continues to develop its range of courses and events, with many more planned for 2016, including a significant increase in the number of PBDs being offered.

I was delighted at the success of the Faculty winter conference for 2015, 'Risky Business: Risk Factors in Occupational Health', which took place on December 15 at the Wellcome Collection in Central London. The conference featured seven presentations on a variety of issues affecting workers' health. Talks were lively and very well received and covered a broad range of physical and mental ailments. Musculoskeletal disorders, obesity and cardiovascular disease were all discussed alongside OH risks in large organisations, workplace aggression and bullying, stress and intellectual and developmental disabilities. Each session was led by a world-class expert, and the day also featured the debut of newly published research papers and their results, both of which combined with the wonderful venue and convivial atmosphere to make the conference an informative and entertaining experience for all involved.

I hope you have felt well informed about the work of the Faculty. I have tried to keep you updated with developments more informally through the Blogs and through Twitter @HeronRichard, and of course more formally through letters to the editors of journals. I welcome your feedback as we look forward to a strengthened and reinvigorated communications strategy.

Finally, I would like to thank, again, the highly committed members who continue to dedicate their time to the Faculty and to the next generation of Occupational Physicians. I look forward to working with and for our members during 2016.

**Richard Heron**  
*President*

## **CHARITABLE OBJECTIVES**

The Faculty's objects, as set out in its Articles of Association, are to:

- promote for the public benefit the advancement of education and knowledge in the field of occupational medicine;
- act as an authoritative body for the purpose of consultation in matters of educational or public interest concerning occupational medicine;
- develop and maintain for the public benefit the good practice of occupational medicine with a view to providing for the protection of people at work by ensuring the highest professional standards of competence and ethical integrity.

The Trustees have referred to the guidance issued by the Charity Commission and the Office of the Scottish Charity Regulator on public benefit when reviewing the Faculty's aims and objectives and in planning future activities. In particular, the Trustees consider how planned activities will contribute to the aims and objectives they have set.

The Trustees believe that all the work the Faculty undertakes demonstrates a clear benefit to the general public in line with its charitable objects as the Faculty's work seeks to protect and improve the health of people at work.

### **Objectives for the year**

For the purposes of this report, the objectives for 2015, together with impact reports are set out under the following five headings: influencing; educational/professional; quality improvement; strengthening the evidence-base; and organisational. Objectives for 2016 are set out on page 22.

## PERFORMANCE AGAINST OBJECTIVES 2015

The objectives for 2015 were grouped under five main headings:

1. Influencing;
2. Educational and Professional;
3. Quality Improvement;
4. Strengthening the Evidence Base;
5. Organisational.

### 1. Influencing

*To gain recognition for return to work as an important outcome measure, and for the negative impact of worklessness on health and well-being*

*To become recognised as the main contact point for occupational health for government, other professionals and the media*

*To ensure every Joint Strategic Needs Assessment (in England) is reviewed by a specialist occupational physician, in conjunction with a public health specialist, and makes reference to the health of the working-age population, by May 2017; and to set a comparable target relevant to Scotland, Wales and Northern Ireland*

Throughout the year, FOM President, Richard Heron, has engaged with key stakeholders with an interest in work and health. In January, he had the opportunity to present proposals to Simon Stevens, new CE of the NHS about how we might support him in strengthening the health and wellbeing of the NHS population. He described how the specialism can contribute to the Vanguard “new models of NHS care delivery” by focusing on return to work as an outcome measure. FOM Registrar, Julia Smedley was asked to lead a regionally representative working group to review existing and potential models to strengthen NHS OH services. This work has the support from the NHS Strategy leaders and progress will be reported in 2016.

We continue to work with the Council for Work and Health for closer collaboration between all the multidisciplinary specialties that operate at the interface between work and health. Meetings were held with leaders in Occupational Health Nursing and Physiotherapy as they look to further professionalise their training and accreditation. The Faculty is also working closely with the newly established Faculty of Occupational Health Nursing. The President has also spoken on behalf of the Faculty at several conferences attended by health professionals such as the Health and Wellbeing at Work, Institute of Occupational Safety and Health (IOSH) in March. In addition, he was a guest at the Irish Faculty in December where it was agreed to work together to strengthen their offering at ICOH 2017. We are represented on Public Health England’s Health and Work Advisory Committee and the NHS Occupational Health Advisory Board. The Faculty of Occupational Medicine is holding £17,127.49 on behalf of the Council for Work and Health. This balance does not form part of the accounts.

We built on our engagement with the Department for Work and Pension (DWP) with a meeting with Lord Freud, Minister for Welfare, to discuss their strategy. We have met twice with the British Medical Association’s (BMA) Occupational Health Committee and are working to identify our common messages which we can both reinforce through our communications.

Work on the Joint Strategic Needs Assessment has been moved to 2016.

## **2. Educational and Professional**

***To increase the number of trainees by 25% between (January) 2014 and May 2017***

***To explore actively the potential for extending Faculty qualifications overseas, with a view to increasing the number of candidates taking Faculty qualifications, by 100% between January 2014 and May 2017***

Attracting more capable people into careers in Occupational Medicine remains our top priority, together with the funding needed to support their training. Several fruitful meetings with Health Education England leaders, Professors Wendy Reid and Liz Hughes, have led to their support for a formal request to increase the number of training posts. While we have yet to see the outcome of the request, progress so far has been very much a team effort with support from our Board members and the National School. A key factor in progress so far is the encouraging news that our training posts have been significantly over subscribed in each recruitment round. This reflects the growing interest in joining Occupational Medicine. We are also seeing a rise in interest from GPs in our Diploma in Occupational Medicine. In 2015, the Faculty was delighted to award 99 Diplomas in Occupational Medicine. Nearly 200 candidates sat at least one part of the examination in 2015, the highest entry rate for five years.

There were 74 doctors in specialty training in 2015 (a 75<sup>th</sup> having deferred to 2016). 15 trainees completed training during the year and a further 4 recommendations were made to the General Medical Council (GMC) at the start of 2016. One of our key challenges remains the need to increase the number of available training posts and trainers to meet this increased level of interest.

### *Shape of Training Review*

This review was published in October 2013 and there has been considerable discussion within Colleges and Faculties during 2015. The area where there remains most uncertainty is around credentialing (a qualification which confirms special expertise within one part of medicine.) The Faculty had representatives at many of the multi-specialty meetings, but the implications of the changes on training in occupational medicine remain unclear at present.

### *Examinations and Qualifications*

The non-specialist qualification of Associateship of the Faculty of Occupational Medicine (AFOM) was re-introduced to have an intermediate examination between the Diploma and Membership of the Faculty. This qualification has the benefit of improving the level of knowledge of the non-specialists practising occupational medicine and also success in the AFOM can be used as part of a CESR (Certificate of Eligibility of Specialist Registration) application to enter the GMC Specialist Register. There was one candidate who was successful in the examination in June 2015.

There continued to be a great amount of work by the Faculty Workplace Based Assessment (WBA) Advisory Group to collate information to support the application to the GMC to approve changes in the Direct Observation of Practical Skills (DOPS) as Supervised Learning Events (SLEs) SLEs for audiometry, spirometry, biological monitoring, workplace assessments and communication activity were piloted during 2014. The GMC responded in December 2015 that these changes were approved & will be part of the curriculum. There will be a communication plan for their introduction in early 2016. They also contribute to the appraisal and performance review of examiners by giving immediate oral and written feedback.

We have continued a healthy dialogue with the Indian Association of Occupational Health regarding the potential to offer an International MFOM and extend our influence overseas. We also began a review of all our examinations and qualifications during the year, alongside a full cost analysis of these, and business models are being considered for new qualifications, including those for overseas candidates and markets.

#### *Awards, Prizes and Fellowships 2015*

We would like to thank our generous sponsors for their continued support. We congratulate the following:

#### **Wilf Howe Prize**

Winner: Dr Will Ponsonby

#### **Peter Taylor Award (The Silver Medal)**

Winner: Dr Ian Mollan

#### **William Taylor Prize for Highest Mark in Part 2 Memberships Examination**

Winner: Dr Fiona Hancock

#### **Diploma in Occupational Medicine Prizes for the Three Candidates who Attained the Highest Overall Marks**

Winners: Dr Carol Burton; Dr Sally Harris; Dr Zain Bamber

#### **Mobbs Corporate Health Fellowships**

Winners: Dr Clare Fernandes; Dr Abeyna Jones; Dr Minha Rajput-Ray; Dr Jacques Tamin

#### **Mobbs Corporate Health Student Elective Fellowships**

Dr Hashim Ahmed (University of Southampton)

Dr Rupert Phillips (Brighton & Sussex Medical School)

Dr Priyanka Singh (King's College London School of Medicine)

Dr Claire Walklett (University of Leeds)

Dr James Womersley (Peninsula Medical School)

#### **Exxon Mobil Student Elective Fellowship**

Dr Nisha Tailor (University of Birmingham)

#### **HONORARY FELLOWS**

Christina Butterworth

Professor Perluigi Cocco

Dr John Foulkes

Dr Max Henderson

#### **FELLOWS**

Dr Laurence Kwasi Addeiasil Khudher Boakye

Dr Martin Paul Cosgrove

Dr Omer Mohamed El-Nagieb

Dr Hampapur Sunderaj Giridhar

Dr Geraldine Ann Martell

Dr Philip William John McLroy

Dr Shriti Mansukh Pattani

Dr Paul Anthony Williams

Dr Paul David Baker

Dr Michael James Harrigan

Dr Ali Asad Hashtroudi

Dr Massoud Mansouri

### 3. Quality improvement

*To identify and contribute to opportunities that resonate with the current national agenda*

*To develop a comprehensive QI strategy which draws together SEQOHS, clinical audit and MoHaWk into a coherent whole*

*To see the number of SEQOHS accredited bodies double between January 2014 and May 2017*

*To develop a SEQOHS presence in at least five other countries by 2017*

The Quality Improvement Working Group was established in 2015 and held its first meeting in October. The group is working on a QI strategy. Following discussion with Syngentis, it has been agreed that MoHaWk will not be taken over by the Faculty in 2016, owing to investment and time constraints. Clinical audit and benchmarking remain on the group's agenda for 2016.

#### SEQOHS

Having been singled out in the Boorman Report as an excellent quality improvement model, SEQOHS goes from strength to strength. In April 2015, the revised SEQOHS Standards were launched. The key changes that appear in the revised standards are:

- Integration of what were separate NHS standards into the main standards;
- A key requirement that services must undertake systematic audit of clinical practice and provide evidence of action taken;
- Services must advise those commissioning their services about the value for occupational health needs assessments and the benefits of active and timely management of ill health.

Feedback has been immensely positive, with the following comments being made:

- "I think it has focused the team on the delivery of a high quality service and they are proud to have achieved this and want to maintain it and continually improve the service."
- "I feel that the Trust takes us more seriously now and sees the importance of our service."
- "Helped with being recognised as a good OH provider in the field of Occupational Health."

81% of SEQOHS-registered services agree that "Working towards and achieving SEQOHS Accreditation has helped to generate a culture of continual improvement within our service". SEQOHS is supported by the NHS and we are garnering support and buy-in from the FTSE 100 CEOs and Chairs. Key services are requiring SEQOHS accreditation from their providers, such as the *Fit for Work* service and *Crossrail*.

As at January 2016, there are 190 accredited services, with a further 186 working towards accreditation. Currently SEQOHS operates in one country outside the UK - the Republic of Ireland. Discussions are continuing to explore ways of extending this to other countries. We have had considerable interest from Canada, and are in the process of refining business models for potential markets.

### *Revalidation*

Since revalidation was introduced in 2012, the Faculty, in its role as a Designated Body, has grown and developed its systems and processes for managing revalidation. As well as providing revalidation services to individual doctors, the Faculty offers this to organisations which are Designated Bodies, but which elect to contract the services of a Responsible Officer in another Designated Body. Typically this situation arises where the number of doctors with a particular Designated Body is very small.

The Faculty's Designated Body Subcommittee, chaired by a lay member, is constituted to provide oversight on behalf of the Executive Committee in relation to the Faculty's role in revalidation and to support the Responsible Officer in his specific obligations under the RO Regulations. The Subcommittee receives and considers reports on the number of appraisals and revalidations, scheduled and completed, and approves revalidation and appraisal-related policy.

As of January, 2016, the number of doctors revalidating through the Faculty is 356, of which 31 are employed with other Designated Bodies, with one case being referred to the Faculty's Responsible Officer due to a conflict of interest elsewhere. The Responsible Officer has now made 274 positive revalidation recommendations. In exceptional circumstances the Responsible Officer has recommended deferring the revalidation decision, typically for reasons relating to the health of a doctor or due to the timing of new doctors establishing a prescribed connection with the Faculty. To date all such recommendations have been accepted by the GMC. The majority of the outstanding revalidations are scheduled to be completed by the middle of 2016.

Strengthened medical appraisal is a key component of revalidation and doctors must undergo an annual appraisal within a quality assured appraisal scheme. The Society of Occupational Medicine runs such a scheme and the Faculty recommends this scheme to its doctors, but does permit use of other schemes that meet the same quality assurance standards. The Faculty's Responsible Officer and Revalidation Manager work closely with Dr Nicola Cordell, recently appointed as the Society of Occupational Medicine's Clinical Appraisal Lead, on areas such as quality assurance and the development of training for appraisers.

The Faculty hosts the Occupational Medicine Responsible Officer Network. The Faculty's Responsible Officer, Dr David Flower, is a member of the GMC's Responsible Officer Reference Group, which advises on revalidation policy.

During 2015, the Faculty commissioned an external audit of its revalidation and appraisal systems. The audit was very positive and confirmed these as fit for purpose. It made some recommendations for enhancement in relation to the development of appraisers and the guidance provided to both appraisers and appraisees, which are being taken forward by both the Faculty and the Society.

### *Continuing Professional Development (CPD)*

Reflection and evaluation of Continuing Professional Development are key elements of appraisal. The Faculty recommends doctors undertake at least 50 hours of CPD per annum and ensure that this covers the entire scope of their practice. The resulting learning and reflection is then explored with the doctor during each annual appraisal.



The Faculty has an online CPD diary, access to which is available to members as well as doctors who are revalidating through the Faculty. Members using this facility can submit their CPD documents to the Faculty to be recorded and receive a CPD certificate for their own appraisal portfolios.

In addition to the Faculty's CPD scheme for members, providers of relevant educational activities can seek Faculty approval for CPD points. In 2015 59 organisations running educational activities applied for and received Faculty approval of their educational activity.

#### *Ethics Committee*

The Committee met twice during 2015 under the Chairmanship of Dr Steve Boorman. The members engage in in-depth discussion, consider legal matters and good practice and provide feedback and advice to those who submit questions and raise issues. The FOM *Ethics Guidance*, published in December 2012, continues to be the 'bible' for those working in Occupational Health. Work on a revised edition will commence during 2016.

#### **4. Strengthening the evidence base**

##### ***To develop a national research strategy for occupational health by March 2016***

#### *Academic Forum for Occupational Medicine (Health)*

A further meeting of the Academic Forum took place at the combined annual meeting held with the Society of Occupational Medicine in Manchester in July 2015. At that meeting it was agreed that the forum should represent the wider research activities in occupational health, not just occupational medicine so the name of the forum has been altered. Professor Ewan MacDonald has agreed to act as lead for the forum.

Dr J Smedley and Dr I Madan stepped down from the Research Strategy Working Group after agreeing that the work is best taken forward by the largest stakeholder group – the academic occupational health professionals. Professor E Macdonald, in his capacity as chair of the Academic Forum, has kindly offered to take over this workstream. One of the outcomes that the Faculty is hoping to achieve from this strategy going forward is a constant feed of ideas that will be suitable for trainees, but also applicable to OH practice. It is hoped that with assistance from the academic group, trainees might be able to identify academic support more easily in the future.

#### **5. Organisational**

##### ***To agree new ways of working more closely with the Society of Occupational Medicine, with clearly defined accountabilities, set out in a Memorandum of Understanding***

##### ***To support the ongoing development of the new National School for Occupational Health***

##### ***To identify new premises for the Faculty during 2015***

The relationship between the Faculty and the Society continues to be both strong and productive. The organisations produced several joint statements – such as the *Letter to the Editor* in response to a recent article in the BMJ; we shared a very successful conference in Manchester in the summer, and are working together on the joint meeting in 2016. We look forward to a new-style conference in 2017, when the 2 year planning cycle of SOM ASMs is complete.

The two organisations have jointly appointed Jane Edbrooke to the role of Head of Communications and Policy, which will further develop our shared key messages and enable us to have greater impact and influence through a common voice. The two CEOs worked closely from April 2015 onwards (when Judith Willetts joined the Faculty) and the two Boards have agreed to set up a joint Education Working Group to ensure our activities are complementary and provide a comprehensive range of events for the Occupational Health community. With the number of changes occurring during the year, and with the Society's CEO, Hilary Todd, retiring in 2016, no formal Memorandum of Understanding has been produced. However, this has not hampered the positive working relationship and the Presidents of both organisations meet regularly.

### *National School for Occupational Health*

The National School of Occupational Health is hosted by Health Education North West London with Julia Whiteman as the postgraduate dean. The National School is responsible for recruitment into occupational medicine and two recruitment exercises have been completed in 2015, in February and October. The recruitment processes must be regarded as a real success; in 2015 there were two recruitment rounds and 52 applicants competed for 16 posts. All of the successful applicants were of high calibre.

There is now a well functioning Board for governance of the National School. There is an independent chair and the membership is multi-professional. There is a place for Faculty representation and Jayne Moore, Director of Training, usually attends. England, Wales and Defence Services are members of the National School; Northern Ireland and Scotland continue as observers on the Board but have a standing invitation to join.

Professor Liz Hughes has stood down from her role as lead dean for occupational medicine and her replacement is Dr Julia Whiteman who is also the Postgraduate Dean for the National School. Our sincere thanks go to Liz Hughes who played an absolutely critical role in establishing the National School.

The National School will have ARCP (Annual Review of Competence Progression) exercises twice per year; the venues will be at various parts of the country. An agreed ARCP review document has been established by a National School working group, with Faculty involvement, to ensure consistency in the process.

### *Premises*

Towards the end of the year, the Faculty had an offer accepted on a property in South London. However, at the time of writing, it is unlikely that this purchase will go ahead. The search for suitable premises continues.

## FINANCE REVIEW

### *Performance during the year*

The Trustees are pleased to report that the Faculty has ended the year in a better financial position than was hoped, limiting the budgeted deficit of £64,401 to an actual deficit of £38,168. This is before accounting for unrealised gains and losses and represents the underlying operational performance of the Faculty.

The Faculty's overall income was 8% higher than expected during 2015, with contributions from across the range of the Faculty's income-generating activities; almost all income streams performed better than expected. The only exception to this was income from conferences due to the Faculty not holding its own ASM this year, although this was offset to a large extent by less than budgeted expenditure on conferences, specifically the ASM. A similar model to 2015 for the ASM is currently being planned for 2016 although in 2017 the ASM will be jointly hosted with the Society of Occupational Medicine. This will be designed to be a 'must attend' event for occupational health practitioners.

Although income from qualifications dipped slightly from last year (£211,811 in 2015 compared with £222,603 in 2014), qualifications remains the most exciting income stream in terms of increasing revenue both in the medium and long term. The Faculty has an aim of not only increasing total income but also of reducing the financial reliance on membership income, which continues to represent 47% of total income.

The DOccMed MCQ and portfolio examinations were particularly successful and both these and the Part 1 MFOM exams received excellent feedback. This success must be used as a springboard to attract even greater numbers of entrants. However, increased numbers can only be accommodated, whilst maintaining our reputation for offering high quality examinations, by automation of the examination preparation, which is currently very labour intensive. This automation will be achieved with investment in examination systems and processes.

The income that the Faculty received from the SEQOHS scheme, in which it is partnered by the Royal College of Physicians (RCP), exceeded expectations this year. Following the signing of a new three year contract with the RCP, the Faculty will receive a guaranteed £50,000 per annum. It is expected that income will remain at this level during the next few years whilst investment is made in the scheme to enable it to reach international markets. The Faculty is working in partnership with RCP in order to create a model that will provide the Faculty with healthy and increasing revenues from this scheme for years to come. It remains the gold standard for occupational health practice and is respected as such in the UK and abroad. Investment is required so that international markets can be reached and serviced without any reduction in the quality of either the SEQOHS scheme or our examinations.

The Faculty's overall expenditure was 3% higher than expected during 2015. The Faculty was able to achieve its budgeted expenditure despite investing in staff, namely our new CEO and a new member of the Professional Standards team. The new CEO has already set out a clear vision for the Faculty and identified clearly defined plans during the next three years to increase trainee members and ensure the sustainability of the Faculty through investment now that will see returns in the future. A new member of the Professional Standards team followed by a restructure with clearer reporting lines was necessary as the first step to increasing the number of healthcare professionals taking our examinations. A solid foundation, ensuring the very highest of standards, is required before scaling up.

### *Reserves*

The Faculty's reserves policy, set by the Trustees, remains that 50% of planned annual expenditure should be held in reserve. General funds stand at £410,920, which represents 41% of planned expenditure for 2016. The Faculty has not achieved the desired policy figure but continues to hold a significant amount within reserves overall. At 31<sup>st</sup> December 2015, the Faculty had total funds of £1,411,362.

### *Accommodation*

Of the total funds at 31<sup>st</sup> December 2015, £822,047 was held as designated funds. Further to the Board's agreement that the Faculty should proceed to purchase a property once the current tenancy agreement ends, £750,000 of these designated funds would be used for this purpose. As previously mentioned, a suitable property was found, but it has been decided not to proceed with its purchase, given the cost of renovation and refurbishment.

The Faculty has considered moving out of London but the Board has determined that continuing to be based in central London will allow the Faculty to influence the working-age health agenda at a national level and maintain contact with organizations critical to the specialty, including the Academy of Medical Royal Colleges, the RCP and Government.

### *Pension*

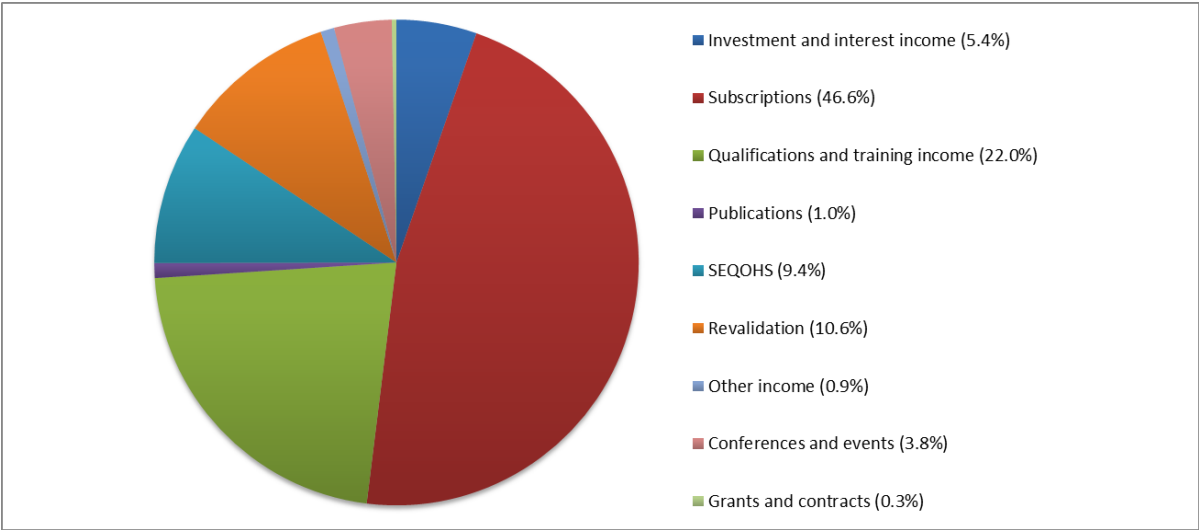
The Faculty will be introducing a workplace pension scheme next year for its staff. The law regarding workplace pensions requires all employers to automatically enrol eligible staff into a pension scheme and make contributions. All members of the Faculty staff are eligible, given their age and the amounts that they earn.

The Pensions Regulator, which is the UK regulator of work-based pension schemes overseeing automatic enrolment, gave the Faculty a staging date of 1 February 2016. After a substantial review of potential work place pension providers, the Board of Trustees, at their meeting on 13th January 2016, approved the selection of The People's Pension run by B&CE ([bandce.co.uk](http://bandce.co.uk)) to be the Faculty's workplace pension scheme.

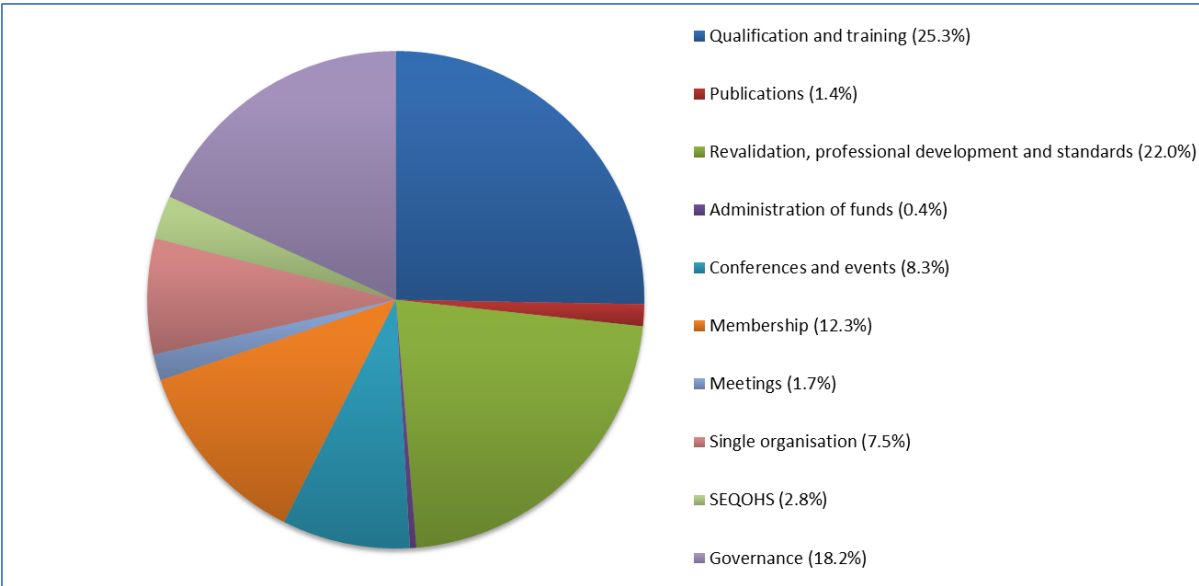
The Trustees consider that the Faculty's financial situation during 2015 was satisfactory, given the investment in staff, due to with higher than expected income in most areas of activity and expenditure being controlled. The Faculty continues with its period of transition after the appointment of its new CEO, Judith Willetts. The investment plans prepared during 2015 will now be implemented in 2016 as the Faculty moves forward with the purchase of a property, a replacement CRM and new examinations system. Membership continues to provide the Faculty's most significant source of income and the Trustees are pleased to be able to keep the increase in subscription rates to just over 1% in 2016, having been increased by 1% in 2015 and frozen in 2014. The Trustees are indebted to those individuals and their employers who continue to support the Faculty, providing considerable time and energy voluntarily.

The Faculty remains in a sound financial position and the Trustees look forward to a new period of activity to sustain its future. The Trustees believe that the Faculty's charitable activities can continue to be met through sensible budgeting and by capitalising on opportunities that ensure a sustainable future.

Income : £962,217



Expenditure : £1,000,385



## **STRATEGIC AIMS and OBJECTIVES FOR 2016**

### **Strategic Aim 1**

*To increase the number of Occupational Physicians practising in the UK.*

#### **Objectives**

- 1.1 To increase the number of trainees in trainee posts to 150 by December 2017.
- 1.2 To raise awareness of OM and the role of Occupational Physicians and to promote Occupational Medicine as a respected and attractive professional specialism to potential trainees and to other specialists.

### **Strategic Aim 2**

*To continue to develop education, training, professional development and assessment to meet the needs of occupational health practitioners now and in the future, both in the UK and overseas.*

#### **Objectives**

- 2.1 To work with OH practitioners to identify these needs.
- 2.2 To continually improve the Revalidation system from Appraisal through to successful revalidation.
- 2.3 To develop a comprehensive education, training and CPD programme.
- 2.4 To develop a range of tools and resources for trainee and qualified specialists.
- 2.5 To identify the requirement (market need) for qualifications and assessments and thus develop the Faculty's suite of examinations to meet this, both in the UK, Europe and internationally.

### **Strategic Aim 3**

*To continue to set standards in occupational medicine and ensure they are upheld through leadership and expertise in service provision and practitioner excellence.*

#### **Objectives**

- 3.1 To develop a comprehensive and sustainable Quality Improvement strategy.
- 3.2 To develop the SEQOHS service in the UK and increase the number of accredited bodies to 280.
- 3.3 To develop a SEQOHS-related market overseas.

### **Strategic Aim 4**

*To represent, support, engage with and grow our membership.*

#### **Objectives**

- 4.1 To identify ways in which the Faculty can improve services and benefits.
- 4.2 To identify and agree specific areas within which to work with the SOM for the benefit of its shared membership.
- 4.3 To provide access to excellent information and resources.
- 4.4 To represent the specialty and its contribution to health, wellbeing and the economy to key influencers and stakeholders. (Also see 5.2 & 5.3)

## **Strategic Aim 5**

*To ensure that key audiences broadly understand the importance of Occupational Medicine to the health and wellbeing of the work-aged population and the economic health of nations.*

### **Objectives**

- 5.1 To facilitate the development of the evidence base in the wide field of occupational health and wellbeing.
- 5.2 To gain recognition for: return to work as an important outcome measure; the negative impact of worklessness on health and wellbeing.
- 5.3 To become recognised as the main contact point for occupational health by government, other professional and the media.

## **Strategic Aim 6**

*To maximise the Faculty's resources and income streams and use them efficiently to invest in the future to develop the organization sustainably. (Strategic Aim 6 and its objectives are by nature enabling. Given the extent and importance of the objectives, they have been identified as one of the 6 areas of focus, rather than being repeated throughout the other aims and objectives.)*

### **Objectives**

- 6.1 To identify and develop new revenue streams for the Faculty.
- 6.2 To establish a risk profile within the Faculty's trustees that informs investment and new business priorities.
- 6.3 To work to an agreed strategic plan with measurable outcomes and a budgeted implementation plan.
- 6.4 To purchase London-based premises for the Faculty's head office (to move by 08/16).
- 6.5 To recruit, retain and develop excellent staff.
- 6.6 To ensure the Faculty's Governance structures are fit for purpose and reviewed regularly to maximise organisational effectiveness and impact on our charitable mission and to maximise the involvement of stakeholders, elected members and officers.
- 6.7 To ensure the Faculty has appropriate business systems in place to allow for maximum efficiency and capacity growth, and in order to provide new services and benefits to members. (Links to Objectives under SA 2)

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also directors of the Faculty of Occupational Medicine for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires trustees to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities Statement of Recommended Practice (SORP);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

**APPROVED** by the Trustees and directors on **6 April 2016** and signed on their behalf by:

**President:** Dr Richard J L Heron MBChB FRCP FFOM FACOEM



# AUDITED ACCOUNTS FOR THE YEAR ENDED 31 DECEMBER 2015

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## **INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES AND MEMBERS OF THE FACULTY OF OCCUPATIONAL MEDICINE**

We have audited the financial statements of The Faculty of Occupational Medicine for the year ended 31 December 2015 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet and the related notes numbered 1 to 18.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and to the charitable company's trustees, as a body, in accordance with section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company's trustees and members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

### **Respective responsibilities of trustees and auditor**

As explained more fully in the Statement of Trustees' Responsibilities, the trustees (who are also the directors of the charitable company for the purpose of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditor under section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

### **Scope of the audit of the financial statements**

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements.

In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

## **Opinion on financial statements**

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2015 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and Regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

## **Opinion on other matter prescribed by the Companies Act 2006**

In our opinion the information given in the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

## **Matters on which we are required to report by exception**

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit: or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption **from the requirement to prepare a strategic report or** in preparing the trustees annual report.

## **THIS REPORT HAS NOT YET BEEN SIGNED**

Mike Hicks (Senior Statutory Auditor)

for and on behalf of  
Crowe Clark Whitehill LLP, Statutory Auditor  
St Bride's House  
10 Salisbury Square  
London  
EC4Y 7AD

Date: 2016

Crowe Clark Whitehill LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

**STATEMENT OF FINANCIAL ACTIVITIES**  
**(incorporating the Income & Expenditure Account)**  
**Year ended 31 December 2015**

	Notes	Unrestricted funds			Total 2015	Total 2014
		Designated Funds	General Funds	Restricted Funds		
		£	£	£	£	£
<b>INCOMING RESOURCES</b>						
<b>Incoming resources from generated funds</b>						
Investment income	3	40,681	10,870	-	51,551	40,147
<b>Incoming resources from charitable activities</b>						
Subscriptions		-	448,458	-	448,458	455,798
Qualifications and training		-	211,811	-	211,811	222,603
Publications		-	9,454	-	9,454	6,966
SEQOHS		-	90,134	-	90,134	46,456
Revalidation		-	102,124	-	102,124	100,728
Other income		-	8,736	-	8,736	12,814
Conferences and events		-	36,965	-	36,965	62,762
Grants and contracts	2	-	-	2,985	2,985	2,000
<b>Total incoming resources</b>		<u>40,681</u>	<u>918,552</u>	<u>2,985</u>	<u>962,217</u>	<u>950,274</u>
<b>RESOURCES EXPENDED</b>						
<b>Charitable activities</b>	4/5	-	792,282	27,652	819,933	876,015
<b>Governance costs</b>	6	-	180,452	-	180,452	73,659
<b>Total resources expended</b>		<u>-</u>	<u>972,733</u>	<u>27,652</u>	<u>1,000,385</u>	<u>949,674</u>
Net incoming resources before transfers		40,681	(54,182)	(24,667)	(38,168)	600
Unrealised gains/(losses) on investments	10	(74,252)	-	-	(74,252)	3,945
<b>Net movements in funds for the year</b>		<u>(33,571)</u>	<u>(54,182)</u>	<u>(24,667)</u>	<u>(112,420)</u>	<u>4,545</u>
Funds balance brought forward at 1 January 2015	15	£855,618	£465,102	£203,062	£1,523,782	£1,519,237
Funds balance carried forward at 31 December 2015		<u>£822,047</u>	<u>£410,920</u>	<u>£178,395</u>	<u>£1,411,362</u>	<u>£1,523,782</u>

All income has been generated from continuing operations.  
All recognised gains are included in the Statement of Financial Activities.

## BALANCE SHEET

31 December 2015

	Notes	£	2015 £	£	2014 £
<b>FIXED ASSETS</b>					
Tangible assets	9		7,591		15,997
Investments	10		810,902		851,974
			<u>818,493</u>		<u>867,971</u>
<b>CURRENT ASSETS</b>					
Debtors	11	67,243		68,016	
Cash on deposit		571,699		569,710	
Cash at bank and in hand		198,837		268,515	
		<u>837,779</u>		<u>906,242</u>	
<b>CREDITORS</b>					
Amounts falling due within one year	12/13	224,910		230,432	
Dilapidation provisions	14	20,000		20,000	
		<u></u>		<u></u>	
<b>NET CURRENT ASSETS</b>			592,869		655,810
<b>NET ASSETS</b>			<u>£1,411,362</u>		<u>£1,523,782</u>
			=====		=====
<b>REPRESENTED BY:</b>					
<b>Unrestricted funds</b>					
General funds	15	410,920		465,102	
Designated funds	15	822,047		855,618	
		<u></u>	1,232,967	<u></u>	1,320,720
<b>Restricted funds</b>	15		178,395		203,062
<b>TOTAL FUNDS</b>	16		<u>£1,411,362</u>		<u>£1,523,782</u>
			=====		=====

These financial statements have been prepared in accordance with the provisions applicable to small companies subject to the small companies' regime within Part 15 of the Companies Act 2006.

The financial statements, which were approved and authorised for issue by the Board of Trustees and directors of the company on **6 April 2016**, were signed below on its behalf by:

**President:**

Dr Richard J L Heron MBChB FRCP FFOM FACOEM

**Treasurer:**

Dr Mark R Groom FFOM MRCGP DAvMed

Registered in England No 07461063

## NOTES TO THE FINANCIAL STATEMENTS

Year ended 31 December 2015

### 1 ACCOUNTING POLICIES

The principal accounting policies applied in the preparation of the financial statements of the Faculty are described below:

**(a) Accounting convention**

The financial statements have been prepared under the historical cost convention, as modified by the inclusion of fixed asset investments at market value, and follow the recommendations in 'Accounting and Reporting by Charities: Statement of Recommended Practice' issued in 2015 (SORP 2015) and in accordance with the Financial Reporting Standard for Smaller Entities 2015 (effective 1 January 2015) and the Companies Act 2003.

The financial statements have also been prepared on the basis of a going concern. The Trustees have no significant doubts about the Faculty's ability to continue as a going concern and have no intentions to either liquidate the Faculty or to cease its activities after the balance sheet date.

**(b) Fixed assets**

Individual fixed assets costing £500 or more are capitalised at cost.

Depreciation is charged so as to write off the cost of an asset over its expected useful life. Depreciation is calculated on each class of asset as follows:

Office equipment	- 33.33% straight line
Fixtures & fittings	- 20.00% straight line
Property	- 2% straight line

**(c) Income**

Income from subscriptions is accounted for on an accruals basis. Any income relating to future periods is included in deferred income.

Income in respect of grants, appeals and donations is recognised upon a receivable or received basis whichever is the earlier.

Income from examinations is recognised on the date the examination takes place and where received in advance is treated as deferred income.

Donated facilities are included at the value to the Trustees where this can be quantified and a third party is bearing the cost. No amounts are included in the financial statements for services donated by volunteers.

**(d) Operating leases**

Instalments under operating lease agreements are charged to the Statement of Financial Activities account in the year in which they are incurred.

**(e) Investments**

Investments are included at market value.

Unrealised gains and losses on investments arising in the year are included in the Statement of Financial Activities for the year in which they arise.

**(f) Pensions**

Contributions are made on behalf of certain employees into their individual defined contribution personal pension plans. Amounts are charged to the Statement of Financial Activities as incurred.

**(g) Funds**

Unrestricted general funds are funds which the Trustees can use at their discretion in accordance with the objects of the Faculty. The Trustees have designated part of this sum as a capital fund, equal to the value of the investments which are to be used to ensure the future of the Faculty.

Restricted funds are funds which must be used for specific purposes in accordance with the donors' wishes.

**(h) Basis of allocation of costs**

Staff costs are allocated based on the amount of time individuals dedicate to carrying out specific functions of the Faculty.

All other costs are allocated on a specific basis.

**(i) Expenditure**

Activities in furtherance of the Faculty's objects include costs relating to examinations, memberships and education and training and include an appropriate proportion of support costs. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management.

Support costs have been allocated to charitable and fundraising activity on the basis of time spent by staff in supporting the operation.

Governance costs are those incurred in connection with enabling the charity to comply with external regulation, constitutional and statutory requirements and in providing support to the Trustees in the discharge of their statutory duties.

**(j) Legal status**

The Faculty of Occupational Medicine is a private company limited by guarantee. Every Registrant undertakes to contribute such amount as may be required (not exceeding one pound) to the assets of the Charity in the event of its being wound up while he/she is a registrant, or within one year after he ceases to be a Registrant, for payment of the debts and liabilities of the Faculty contracted before he/she ceases to be a Registrant and of the costs, charges and expenses of winding-up and for the adjustment of the rights of the contributories among themselves. The Faculty's Articles of Association defines a Registrant as: Specialty Registrars, Associates, Members, Fellows, elected representatives of subscriber classes, lay Trustees, Trustees who represent the College (Royal College of Physicians) and co-opted Trustees, who are members of the Faculty for the purposes of the Companies Acts.

## 2 GRANTS CONTRACTS AND DONATIONS

	Designated £	Restricted £	General £	Total 2015 £	Total 2014 £
<b>Grants and contracts</b>					
ExxonMobil elective fellowships	-	1,000	-	1,000	1,000
Health for health professionals	-	1,985	-	1,985	-
	-----	-----	-----	-----	-----
	£-	£2,985	£-	£2,985	£2,000
	=====	=====	=====	=====	=====

## 3 INVESTMENT INCOME

	Designated £	Restricted £	General £	Total 2015 £	Total 2014 £
Bank interest	-	-	10,870	10,870	14,810
Dividends	40,681	-	-	40,681	25,337
	-----	-----	-----	-----	-----
	40,681	£-	£10,870	£51,551	£40,147
	=====	=====	=====	=====	=====



4 ANALYSIS OF COSTS	Direct Costs	Direct Salaries	Support Costs	Total 2015	Total 2014
	£	£	£	£	£
Qualifications and training	39,801	107,098	105,995	252,893	240,756
Publications	-	7,250	7,176	14,426	38,498
Revalidation, professional development and standards	53,194	83,706	82,843	219,743	152,600
Administration of funds	-	2,100	2,078	4,178	6,012
Conferences, events and projects	53,571	14,968	14,814	83,353	132,874
Membership	73,487	25,068	24,809	123,363	171,045
Meetings	16,932	-	-	16,932	22,078
Single organisation	5,819	34,877	34,518	75,214	92,109
SEQOHS	585	13,928	13,784	28,297	20,044
	-----	-----	-----	-----	-----
	243,388	288,995	286,017	818,400	876,015
<b>Governance costs</b>	23,109	79,849	79,026	181,985	73,659
	-----	-----	-----	-----	-----
	£266,498	£368,844	£365,043	£1,000,385	£949,675
	=====	=====	=====	=====	=====

5 BREAKDOWN OF SUPPORT COSTS	2015	2014
	£	£
Staff	85,659	70,018
Communication	7,770	11,396
Printing, postage and stationery	6,518	11,406
Premises	89,939	77,524
Repairs and maintenance	9,134	10,223
Advertising and recruitment	36,119	18,367
Irrecoverable VAT	43,322	39,656
Accountancy fees	685	(2,482)
Depreciation	8,115	11,067
Other direct costs	77,784	63,864
	-----	-----
	£365,043	£311,039
	=====	=====

Support costs are allocated to restricted activities on the basis of the amount of direct time attributable to each area.

<b>6 GOVERNANCE COSTS</b>	<b>2015</b>	<b>2014</b>
	<b>£</b>	<b>£</b>
Staff	79,849	30,990
Support costs	79,026	27,893
Audit fees	8,839	5,235
Meetings	10,078	8,622
Annual General Meeting	4,193	920
	-----	-----
	<b>£181,985</b>	<b>£73,659</b>
	=====	=====

**7 REMUNERATION OF TRUSTEES**

The Trustees did not receive remuneration or any benefits during the year for their services (2014: nil)

13 Trustees were reimbursed for expenses incurred in relation to Faculty business amounting to £9,458.36 (2014: 15 Trustees - £9,496.22).

<b>8 STAFF COSTS</b>	<b>2015</b>	<b>2014</b>
	<b>£</b>	<b>£</b>
Wages and salaries	393,184	358,483
Social security costs	39,521	38,358
Pension costs	10,935	14,405
Training & other staff costs	3,968	-
	-----	-----
	<b>£447,608</b>	<b>£411,246</b>
	=====	=====
The average number of full-time equivalent employees during the year was:	12	10
	=====	=====

One member of staff was remunerated in the £80,001 to £90,000 range (2014 – nil).

No member of staff was remunerated in the £70,001 to £80,000 range (2014 - one)

The associated pension costs of this individual were £0 (2014 - £7,662).

9 TANGIBLE FIXED ASSETS	Property	Fixtures and fittings	Office equipment	Total
	£	£	£	£
<b>Cost</b>				
At 1 January 2015	-	41,293	36,691	77,984
Additions	4,443	-	2,320	6,763
Removal of old assets	-	-	(7,057)	(7,057)
	-----	-----	-----	-----
At 31 December 2015	£4,443	£41,293	£31,954	£77,690
	-----	-----	-----	-----
<b>Depreciation</b>				
At 1 January 2015		(35,280)	(26,705)	(61,985)
Charge for the year		(6,010)	(2,104)	(8,114)
Removal of old depreciation		-	0	-
		-----	-----	-----
At 31 December 2015		(41,290)	(28,809)	(70,099)
		-----	-----	-----
<b>Net Book Value</b>				
At 31 December 2015	£4,443	£3	£3,145	£7,591
	=====	=====	=====	=====
At 31 December 2014	-	£6,012	£9,985	£15,997
	=====	=====	=====	=====

10 INVESTMENTS	2015	2014
	£	£
<b>Quoted investments</b>		
At 1 January 2015	851,974	818,692
Additions	33,180	29,337
Transfers in/(out)	-	-
Unrealised gain/(loss)	(74,252)	3,945
	-----	-----
At 31 December 2015	£810,902	£851,973
	=====	=====
Historical cost	424,387	424,387
No of units	101,160	101,160
Valuation	801.60p	842.20p

Investments consist of units in Schroders Charity Equity Fund.

<b>11 DEBTORS</b>	<b>2015</b>	<b>2014</b>
	<b>£</b>	<b>£</b>
Accrued income	16,401	13,114
Other debtors	5,552	13,857
Prepayments	41,885	38,959
Pension	429	527
VAT	2,976	1,559
	-----	-----
	£67,243	£68,016
	=====	=====

<b>12 CREDITORS: amounts falling due within one year</b>	<b>2015</b>	<b>2014</b>
	<b>£</b>	<b>£</b>
Trade creditors	53,442	27,424
Staff creditor	130	130
Accruals	16,619	55,171
Deferred income - examination fees received in advance	11,267	3,935
- subscriptions in advance	134,045	134,330
Tax and social security	9,407	9,442
	-----	-----
	£224,910	£230,432
	=====	=====

<b>13 DEFERRED INCOME</b>	<b>Examinations</b>	<b>Subscriptions</b>	<b>Total</b>
	<b>£</b>	<b>£</b>	<b>£</b>
Balance at 1 January 2015	3,935	134,330	138,265
Amounts released to Incoming Resources	(3,935)	(134,330)	(138,265)
Amounts deferred in the year	11,267	134,045	145,312
	-----	-----	-----
Balance at 31 December 2015	£11,267	£134,045	£145,312
	=====	=====	=====

<b>14 DILAPIDATIONS</b>	<b>2015</b>	<b>2014</b>
	<b>£</b>	<b>£</b>
Dilapidation provision	£20,000	£20,000
	=====	=====

15 FUNDS	As at 1 January 2015 £	Incoming Resources £	Gain/(loss) on Investments/ interest	Outgoing Resources £	As at 31 December 2015 £
<b>a) Restricted funds</b>					
<b>Good Practice Guidelines Funds</b>					
Esso Publications Fund	5,201	-	-	-	5,201
Rolls Royce Guidelines Fund	6,523	-	-	-	6,523
<b>Academic Activities Funds</b>					
Corporate Health (Mobbs) Fund	30,865	-	-	8,458	22,407
Donald Hunter Lecture Fund	11,069	-	-	-	11,069
Ernestine Henry Lecture Fund	3,087	-	-	-	3,087
Esso Research Fellowship Fund	563	-	-	-	563
ExxonMobil Elective Fellowships Fund	695	1,000	-	1,000	695
Wilf Howe Fund	4,181	-	-	-	4,181
William Taylor Memorial Fund	2,023	-	-	258	1,764
<b>Academy of Medical Royal Colleges</b>					
Environmental medicine Revalidation work	1,426	-	-	1,426	-
CPD online	28,853	-	-	-	28,853
e-Portfolio	42,658	-	-	7,313	35,345
MSF tool	5,859	-	-	-	5,859
Pilot	1,727	-	-	-	1,727
<b>Department of Health</b>					
(e-LfH) e-learning	44,736	-	-	-	44,736
Diploma grant	2,000	-	-	-	2,000
Health for health professionals	2,192	1,985	-	3,406	772
Professional Briefings grant	3,000	-	-	-	3,000
SEQOHS accreditation system	1,403	-	-	1,991	(587)
<b>NHS London Revalidation</b>	5,000	-	-	3,800	1,200
	-----	-----	-----	-----	-----
	203,062	2,985	-	27,652	178,395
<b>b) Designated funds</b>					
BUPA award fund	10,000	-	-	-	10,000
Capital fund	769,803	40,681	(74,252)	-	736,232
Department of Health Development Grant	75,815	-	-	-	75,815
	-----	-----	-----	-----	-----
	855,618	40,681	(74,252)	-	822,047
<b>c) General funds</b>	465,102	918,552	-	972,733	410,920
	-----	-----	-----	-----	-----
<b>Total funds</b>	£1,523,782	£962,217	£(74,252)	£1,000,385	£1,411,362
	=====	=====	=====	=====	=====

**Esso Publications Fund** provides for the publication of standards of practice of occupational medicine.

**Rolls Royce Guidelines Funds** were provided originally to cover the costs of Faculty back pain guidance and leaflets. As sufficient guidance was available elsewhere, the Faculty negotiated an alternative use with the provider.

**Corporate Health (Mobbs) Fund** provided four travelling fellowships in 2014

**Donald Hunter Lecture** provides funds for the costs incurred in connection with a biennial lecture given in his memory; there was no lecture in 2014.

**Ernestine Henry Lecture** endows a lecture in memory of Mrs Ernestine Henry to be delivered at least once every three years.

**Esso Research Fellowship Fund** comprises a number of annual donations, to provide a research fellowship.

**ExxonMobil Elective Fellowships Fund** funds electives open to medical undergraduates and doctors in Foundation Years 1 and 2.

**Wilf Howe Fund** provides a prize for an innovative project in memory of Dr Wilf Howe.

**William Taylor Memorial Fund** provides for an examination prize.

#### **Academy of Medical Royal Colleges:**

**Environmental medicine** funding is to explore how Colleges and Faculties can do more to promote good practice in this area and was used to fund part of the Trainee Conference held in March 2015

**Revalidation work** funding is to develop an online CPD system, an e-portfolio, to pilot revalidation, to train specialty advisers, and to provide a helpdesk.

#### **Department of Health:**

**e-LfH** provided funding for the development of learning modules on health and work for general practitioners.

**Diploma grant** provides funding to develop a new diploma.

**Health for health professionals** funds training days for professionals working in the NHS.

**Professional briefings grant** provides funding to run professional briefing workshops; the Faculty ran two in 2014.

**SEQOHS accreditation system** funds the development of the scheme to accredit occupational health services.

#### **NHS London**

**Revalidation** provided funding for a quality assurance exercise

**BUPA award fund** has been set aside towards the production of publications and guidance.

The **Capital Fund** was designated in 2000 and represents an amount equivalent to the value of the investment portfolio. These investments are held to ensure the future of the Faculty, namely the purchase of a freehold or long leasehold property for the staff and members of the Faculty. It is planned that, following an offer being accepted on a freehold property at the end of 2015, these funds will be utilised in their entirety to fund the purchase of this property after 31<sup>st</sup> December 2015

**Department of Health (DH) Development Grant** was awarded by DH to support curriculum development and specialty promotion.

The Faculty of Occupational Medicine is holding £17,127.49 on behalf of the Council for Work and Health. This balance does not form part of these accounts.

## 16 ANALYSIS OF NET ASSETS BETWEEN FUNDS

The net assets are held for the various funds as follows:

	Unrestricted			Total £
	Designated £	General £	Restricted £	
Tangible fixed assets	-	7,588	-	7,588
Investments	810,903	-	-	810,903
Net current assets	11,144	403,333	178,395	592,871
	-----	-----	-----	-----
	£822,047	£410,920	£178,395	£1,411,362
	=====	=====	=====	=====

## 17 OPERATING LEASE COMMITMENTS

The Faculty had an annual commitment in respect of operating leases as follows:

	2015 £	2014 £
Leases which:		
Expire within one year (land and building)	61,795	36,783
	-----	-----
	£61,795	£36,783
	=====	=====

## 18 CONNECTED CHARITY

The Faculty of Occupational Medicine is an independent registered charity responsible for its own administration and financial management. It enjoys close working ties with the Royal College of Physicians, its parent College, with whom it has had two partnership projects during the year: the Health and Work Development Unit (HWDU), which closed in August 2014, and the SEQOHS (Safe Effective Quality Occupational Health Service) accreditation system.