



FRIDAY 26 FEBRUARY 2016

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NHS Consultant Clinical Excellence Awards

It is expected that the 2016 National Awards Round will open during mid March to early April. At that time, we expect the Advisory Committee on Clinical Excellence Awards (ACCEA) to announce this year's deadline for applications. In order to ensure members have sufficient time to submit applications, the Faculty is advising early preparation of applications. Applications for Faculty support for new and renewal of consultants' clinical excellence awards at a national level (Bronze, Silver and Gold) are now invited from NHS consultants in occupational medicine based in England and Wales.

For more information on how the Faculty can support your application please visit [our website](#).

The RCP will be offering assistance to its Members and Fellows in completing their applications. Please contact them directly to organise this.

I look forward to receiving and supporting your applications alongside the Faculty

CEA Committee.

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Governance Consultation – Update

Thank you to members who have taken the time to send in comments or questions. The majority of responses have been hugely positive and supportive. Some specific questions have come in which are included below. You still have until **23 March** to contribute your thoughts, but here is a brief update.

Questions from Members

Q1: What has happened to the Trainee rep?

A: The Trainee Rep is a member of the Council and is not on the Board of Trustees.

Q2: If more of the day-to-day running is to be undertaken by the CEO and the staff team (the executive arm) and less work done by individual Board members, will this necessitate the need for extra staff. How much work needs to be transferred? How many staff will be needed, at what cost? What is the business case?

A: The Board is not concerned with the day-to-day running of the organization. This is currently the official role of the Executive Committee, but there are blurred boundaries and duplication of effort between this committee and the CEO and senior staff at present – hence the suggestion for change. Executive Committee meetings absorb the equivalent of at least 36 days of staff time per annum. Some of this would clearly be saved going forward. There is no requirement for additional staff. Once the major changes and improvements in how we operate the business have been achieved, the organization should operate in a more effective and streamlined fashion, enabling us to build capacity.

Q3: What is envisaged by 'opportunities to review and discuss strategy and ideas outside the regular board meetings are considered excellent practice'? I prefer to think all conversations about strategy would be formally minuted.

A: This is in the context of seeking to have an engaged group of trustees who talk and communicate regularly. This quotation refers to Charity Commission (and other) guidance that encourages Boards to meet outside their scheduled Board meetings from time to time. This might be at something like an away day. Boards need opportunities to think and to exchange ideas. It is not required or practical for all conversations to be minuted. What we have to record are the decisions taken by the Board and any key points or facts pertaining to that decision.

Q4: Does the CEO sit on the Board of Trustees?

A: No, the CEO is not and cannot be a member of the Board. S/he attends Board and other committee meetings as the head of the Executive (staff) team.

Summary of members' comments for current Board consideration

C1: The maximum length of time an individual could serve on the Board might need looking at. One could serve a 6 year term with a 2 year gap and another 6 years, for example (ie 12 out of 14 years). This is probably not ideal?

C2: Further discussion of how individuals are appointed to roles might be useful (who sits on appointment panel, how many etc).

C3: Make sure the executive role and responsibility of the CEO is spelled out and

is clearly separated from that of the Board. 'The unpaid trustees agree to the strategy and empower the paid CEO and team to deliver it.'

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Planes, Trains & Automobiles PBD

We still have a **handful of tickets** left for the **March 23** Professional Briefing Day on **fitness to operate vehicles**.

The event will be a day-long interactive exploration of what constitutes being 'fit'; the implications of health conditions; diagnosis, monitoring and appraisal processes; and wrestle with exactly what is meant by 'best practice'. Guided by experts from the RAF, Eurotunnel and the DVLA, the day will be fun, informative and highly rewarding, utilising lively discussion and group problem solving to ensure delegates take as much as possible from the experience.

Tickets are £125 and are available from the **Faculty website**.

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Growing the Specialty

Welcome, one and all, to the final newsletter of February. That's right: we're already a sixth of the way through the year—and my how it shows. The days are becoming longer (but no less cold), the bulbs we diligently planted last autumn are blossoming, and the birds are once again taking to the skies. Spring is approaching and I just can't help but think to the future.

Late last week we issued a **joint press release with the SOM** discussing what lies ahead for our specialty. Prompted by the recent publication of the '**Five Year Forward View for Mental Health – A report from the independent Mental Health Taskforce to the NHS in England**', the release tackles a number of pertinent issues around the health of NHS staff and the public.

It also broaches the unavoidable truth that, in the coming years, maintaining—let alone improving—health standards will require significantly more occupational health specialists than the current trainee pool affords us. The release ends with urging Health Education England to play its part, imploring it to "increase funding for trainees specialising in occupational health in order to meet this growing and clearly important need within the UK population".

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Richard Heron on The Huffington Post

Our own Richard Heron took to the Huffington Post on Tuesday to further the sentiments of last week's press release, in an article entitled **Return to Work as an Outcome - Good for Mental Health?** In it, Richard responds to an **earlier article** by health blogger Kate Lee questioning the viability of 'return to work' as a health outcome. Upon returning to work after long-term mental health issues, Kate saw that all medical support ceased and she was effectively 'on her own in the wilderness'.

In Richards's response he discussed how this is a patently ill-advised course of action, and that for return to work to be a successful and sustainable health outcome support must continue well beyond the initial 'return' phase. Richard

wrote: "Employers need to support employees if they are going to return to work successfully. Occupational Health experts should have worked with Kate to understand her needs, make necessary adjustments and support her to stay well.

"When we see "return to work" and return to function as measures of success for clinical interventions, it will be a great step forward and a catalyst for clinicians and occupational health specialists to see each other as partners in achieving patient centered outcomes."

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Imperial College London Careers Fair

Also on Tuesday, we headed out to Imperial College London's Charing Cross campus to attend a careers fair for medical students. The evening was a great success, and there was much buzz around our stand. Beyond the regular "I have no idea what Occupational Medicine is, I don't think it's on the undergraduate curriculum", were many fascinating questions. Luckily we had Doctors Jenny Leeser and Chris Schenk and Professor Paul Cullinan on hand with the answers!

I would like to thank all three of our experts for their kindness in generously offering their time to attend the fair, and would also like to tip my cap to those who were also set to attend but became otherwise engaged at the last minute.

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Regional and Deputy Regional Specialty Adviser Vacancies

We are still seeking Regional and Deputy Regional Specialty Advisers. These positions are vitally important to the specialty, as they perform both ambassadorial and clerical duties. RSAs and DRSA's act as points of contact for trainees, sit on interview panels for consultant vacancies, liaise with those running training posts and advise on the writing of job descriptions, alongside a variety of other diverse responsibilities.

The Faculty is currently looking to fill the following vacancies:

- Deputy RSA - East Anglia
- Deputy RSA - KSS East
- Deputy RSA - Northern
- Deputy RSA - South West
- Deputy RSA - Yorkshire
- RSA - South West
- RSA - Yorkshire

More information on both roles can be found by first logging into the members' area of the Faculty website and then visiting

<http://www.fom.ac.uk/communications-to-members>, where you'll find person specifications for both roles. Once you're comfortable with the roles, please fill out the 'Application Form for Other Key Roles and Committee Membership' form from <http://www.fom.ac.uk/forms> and return it to training@FOM.ac.uk by March 18.

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Free Tickets to Salford Health Conference

The University of Salford is kindly offering 15 Faculty members free tickets to its **The Future of Primary Care Conference: General Practice**, which is taking place on March 17 at Adelphi House, University of Salford.

General Practice, an integral part of primary care, is under pressure. The British Medical Association's April 2015 poll of more than 15,500 UK GPs found 93% said their heavy workload had negatively affected the care they provided, with 37% saying it was unmanageable. The strain is beginning to show, with 2014's official GP survey carried out by Ipsos MORI for NHS England finding that on a number of key measures, including overall experience and ability to be seen, ratings have fallen.

The strain looks set to increase further in the short term, with the introduction of a 7 day NHS, and in the long term, with older people on course to predominate UK demographics. Join us for The Future of Primary Care Conference: General Practice, where delegates will hear different perspectives from the NHS and end users on the care challenges GPs and patients face, and the solutions offered by senior government and industry representatives.

for more information on this fascinating (and free) conference, please visit the **event's website**.

To register, please send the following details to **c.reynolds1@salford.ac.uk** or **chris@onecpd.co.uk**:

- Name
- Job Title
- Email Address
- Contact Number
- Organisation

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That Was The ~~Week~~ Fortnight That Was

A few stories from the world of occupational health and medicine you may or may not have missed since last we spoke.

Employment as a Health Outcome? It Just Won't Work

- "When I did return to being gainfully employed my care stopped. I was still struggling with chronically low mood, suicidal ideation and frequent concrete plans to end my own life, but I was back at work. I was once again functioning at a level where I could put on a mask to the outside world and pay my dues to society - and my local mental health team stopped caring."

The Five Year Forward View on Mental Health

- The complete report on mental health strategy mentioned earlier this issue.

The crisis in mental health nursing and a nursing response

- And a mental health nursing perspective on the context of the report.

Depression doesn't stop when you go to work. It shouldn't be taboo to tell your boss

- "Depression affects millions of people around the world. It destroys lives, it ruins marriages and it also impacts on how we work. Yet mental health problems, including depression, are still often a taboo subject in the workplace, which is odd when you consider that one in four adults will experience a mental health condition in any given year."
- "All employers have a responsibility for their employees' health and safety in the workplace, including pre-existing mental health conditions and conditions brought on by work. How can employers ensure they meet this responsibility?"

Sugary drinks tax 'would stop millions becoming obese'

- The sugar tax question rumbles on....

Childhood obesity strategy delayed further and sugar tax unlikely

- ...although maybe not for much longer.

Membership of social groups after retirement 'boosts health and wellbeing'

- New research published by BMJ Open suggests that membership of social groups such as book clubs or church groups after retirement is linked with improved health and wellbeing.

It was #NationalDrinkWineDay

- 59% drink on a weeknight—of that group 71% do so because of stress at work.
- 24% pull a sickie at some point because of drinking.

The 'always on' workplace: risks, opportunities and how to make it work

- Interesting article pulling together studies on the benefits and risks of working from home—conclusion: it's pretty good for all involved.

NHS England publishes latest staff survey results

- A report filled with fascinating statistics on NHS staff opinions of their working conditions, abilities and health.

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Judith Willetts

Judith Willetts
Chief Executive

