## A Manifesto for Occupational Health in Scotland

As Faculty of Occupational Medicine (FOM) representatives in Scotland, we are proud to outline our manifesto for improved access to and use of Occupational Health (OH) Services across Scotland.

Work is key to the health of the people of Scotland. Good work is associated with improved mental and physical health<sup>1</sup> and workplaces are key environments for positive health impact<sup>1,2</sup>. 'Good work' means 'good health'<sup>1,3</sup> and 'good business' <sup>4</sup> and employment addresses health inequalities.<sup>3</sup> Conversely, unemployment has negative impacts on health and wellbeing, and is one of the greatest risks to public health.<sup>5</sup> It is associated with higher consultation and admission rates, higher medicine use, increased levels of mental ill-health, social isolation, disability, obesity and early mortality.<sup>5-11</sup>

Further, there is some evidence of negative consequences across generations in the UK i.e. of intergenerational transmission of worklessness. 12-14 Keeping people at work and helping to maintain a healthy workforce is fundamental to the health of the nation and that of subsequent generations.

The concept of 'work as a health outcome'<sup>11</sup> has been endorsed by The Faculty of Occupational Medicine and Scottish Academy. In her 2005 report,<sup>2</sup> Professor Dame Carol Black highlighted: "...For too long doctors have failed to recognise the importance of work to their patients, seeing it as something potentially harmful rather than something which has huge benefits...supporting people's retention in and return to work is critical".

We endorse the benefits of collaborative working across clinical specialties in Scotland to facilitate both entry and return to 'good work' for Scotland's working age population. To do so, all specialties should embrace the importance health interactions within the context of impact on work or return to work. The aim of health practitioners should not only be to diagnose and treat, but to actively promote functional recovery<sup>15</sup> of their patients to be fully productive members of the working population. That is, the NHS should rehabilitate its patients back to work, with this being a universal health objective or outcome of every health interaction. Although, key health professional bodies collectively, have committed to support this agenda across the health and care sector over the next five years, <sup>16</sup> any material impact is yet to be demonstrated. We endorse the active pursuit of 'good work as a health outcome' by health practitioners and NHS Scotland. This would be a fundamental paradigm shift that would significantly improve the health of current and future generations of Scots.

Promoting entry into and maintaining Scots in employment should be a Government health priority. Alongside strategies to increase employment in Scotland and for the provision of 'good work', maintaining people in work and timeous return to work should be a key focus. The role of the OH clinician is wide ranging requiring a broad knowledge base and skill set. Key functions are fitness for work assessment, disability management (to assist those with disabilities to enter and remain in employment) and facilitating timeous return to work for those on sickness absence. Around 140 million working days are lost each year to sickness absence, costing the UK £22bn per year on health-related costs and sick pay. <sup>17</sup> In addition to the economic case to reduce sickness absence, early OH input is paramount given that the longer an individual is off work, the less likely they are to return. <sup>11</sup>

OH expertise also includes in-depth understanding of risk assessment and identification and control of workplace hazards i.e. workplace health protection/promotion. This OH skillset has been invaluable in addressing the challenges of the Covid-19 pandemic. The vital role of OH has been evident, in maintaining livelihoods and the economy, by supporting a large proportion of Scotland's population i.e. the workers, in continuing to work safely, whether

that be homeworking or in their workplaces particularly, the clinically extremely vulnerable. <sup>18</sup> OH has led in creating guidelines for health professionals on safe return to work for patients <sup>19</sup> and development of the innovative Covid-Age tool for individualised medical risk assessment. <sup>20</sup>

While it is recognised that addressing workplace health can improve public health, OH input into public health policies is lacking. The pandemic has highlighted the importance of integrative working between the specialties. We believe there is a need to integrate OH expertise within public health policy and for work with bodies such as Public Health Scotland, to ensure workplace health protection/promotion is not overlooked.

The immense value of key/essential workers such as NHS staff, social care workers, emergency services and local authority workers, who are so often overlooked, has been clearly demonstrated in this pandemic. As a healthcare employer, NHS Scotland should lead by example in maintaining, improving and investing in the health of its workers through improved funding and resourcing of OH services and innovative multi-disciplinary approaches to worker wellbeing.

Although historically perceived as a 'non-essential' specialty, the value of OH services and OH research is increasingly being recognised and demonstrated.<sup>17,21,22</sup> Yet only 50% of the working population have access to OH services.<sup>17</sup> This workforce group are in greatest need of these services and there is a strong economic case for improving access to OH, with increasing recognition that bridging the health and workplace divide will help reduce the health effects of a recession.<sup>23</sup>

We therefore call for universal access to OH services in Scotland; access for every worker in the country, including the self-employed. This could be provided by bolstered NHS OH services or via a network of public and private sector OH providers working to Faculty of Occupational Medicine quality standards (Safe and Effective Quality OH Services; SEQOHS).

To maintain and support the development of OH as a specialty and to achieve the above, there requires an investment in a hub of OH expertise in Scotland: a Centre for Occupational Health which would support research and development, ensure quality and training, foster collaboration with other specialties to drive improvement, promote awareness of the specialty and generate effective evidence-based workplace interventions.

There is a critical need for trainees in occupational medicine, OH nursing and allied OH professions including occupational therapists/physiotherapists/psychologists and hygienists.<sup>24</sup> Fundamentally, OH remains a poorly publicised and understood specialty,<sup>22</sup> and work is needed to promote its value in Scotland to key stakeholders, including Government, employers and employees and to attract high quality recruits/trainees to the profession.

In summary, our manifesto visions are:

- 1. Avoiding worklessness; improving the health of generations of Scots with access to 'good work'
- 2. Recognition and active pursuit of 'work as a health outcome' by health practitioners
- 3. Provision of universal access to OH services for all workers in Scotland, including the selfemployed
- 4. Investment in NHS OH services for worker wellbeing as an exemplar employer
- 5. Integration of OH expertise within public health policy and working with bodies such as Public Health Scotland, to ensure workplace health protection/promotion is not overlooked.
- 6. Development of a Scottish-based Centre for Occupational Health development, training and research

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