



Faculty of
Occupational
Medicine



Summary
Annual Report 2004





Bill Gunnyeon
President

2004 began on a positive note with our conference on the impact of predicted changes in medicine and society on the role of the occupational physician. Throughout the year we worked to raise the profile of our specialty, to interact with and seek to influence Government, to improve and develop the management of the Faculty and to progress our review of training and assessment to ensure tomorrow's occupational physicians meet the evolving needs of the world in which we work. The following is a snapshot of some key activities:

Internal

- **Governance:** The proposed new governance structure was piloted and will be presented to the 2005 AGM for approval
- **Lay Representation:** Nominees of the CBI and the TUC will join the Board in early 2005
- **Position Papers:** The first of our series of Position Papers were published – "Age and Employment" and "Smoking and Work".

External

- **The Health and Work Handbook:** The outcome of a joint Faculty/Society/Royal College of General Practitioners working group, this guide will be published during the second quarter of 2005 and aims to assist GPs in relation to their role in returning their patients to work
- **Academy of Medical Royal Colleges:** The Faculty is leading an Academy working group looking at how to engage hospital specialists in seeing a return to work as an indicator of a successful outcome following medical intervention
- **Faculty of Public Health:** A joint project with our sister Faculty will produce a

guide for employers on improving the health and wellbeing of employees

- **Influencing Government:** Meetings took place with the Minister for Work at Department for Work and Pensions and with the Chief Medical Officer; we participated in the consultation relating to the Framework for Vocational Rehabilitation and the "Choosing Health" White Paper
- **Immigrant Workers:** A working group was established to look at the occupational health issues of immigrant workers
- **Irish Faculty:** Meetings took place to further strengthen the relationship with our sister Faculty in Ireland

Conclusion

As always I am indebted to all who support the work of the Faculty: our good natured and hard working team in the Faculty office; the Officers whose guidance and wise counsel is invaluable; the positive and constructive input from our Board; and the enthusiastic support from our members.

The Faculty is in good heart, our infrastructure is more robust, a series of key initiatives is progressing and our profile is rising. We have a huge opportunity to play a key role not just in our traditional area of protecting and promoting the health of those at work but also in contributing to the wider public health agenda. There is however much work still to do and we must guard against complacency. The opportunities that now present must be grasped in order to secure the future of our Faculty and our specialty and to allow us to make a real difference to the health and wellbeing of all those at work.

Bill Gunnyeon



David Snashall
President-Elect

I am looking forward to taking over as President of the Faculty on 19 May at a time when occupational medicine appears, suddenly, to have come of age. By this I mean that employers are begging for our services, the government is asking for our opinion and our own colleagues in the medical profession are beginning to accept us as real specialists in our field.

With the increased workload most of us are experiencing, it has been particularly encouraging to see how willing members of the Faculty have been to participate in its activities. I intend to encourage as many members as possible to make their own personal contributions.

It would be naive to expect a smooth ride in such a demanding post: the responsibilities are quite daunting but the reforming work done by Bill Gunnyeon and his Board over the past three years and the hard work of the staff have enormously improved the Faculty's fitness for purpose and given it the capacity to punch well above its weight. I also look forward to cooperative working with a number of other organisations, not least the Department for Work and Pensions (which is now the Health and Safety Executive's Sponsoring Department) when Bill Gunnyeon takes over as Chief Medical Adviser later this year. Close relations with the Society of Occupational Medicine will continue to be maintained.

During my three years in office I undertake to get things moving towards having a greater voice both nationally and internationally. Other pressing issues are the mismatch in the numbers of occupational physicians both trained and in training and the needs of employees and employers and – one for the horizon – whether the Faculty should emulate its American cousin and expand into the rapidly changing climate of environmental medicine. Early signs that the focus of academic medicine may be moving outside its traditional niches and into schools of business are an intriguing development.

For those that did, thank you for voting for me. For those that didn't, I will do my best to represent you. It is an honour to be leading the Faculty on all your behalves.

David Snashall



Olivia Carlton
Registrar

The new governance arrangements, primarily designed to separate the functions of the Board and the Executive Committee, were shadowed this year. They will be formally introduced in May 2005 if they are ratified at the Annual General Meeting. The Executive Committee has been expanded to include the Director of Assessment (Chief Examiner) and the Director of Professional Development. Under the new arrangements the Registrar chairs the Executive Committee, and the Chief Executive reports to the Registrar.

There were several elections and changes of Officers during the year: Raymond Agius and Lisa Birell were elected as Ordinary Board members, replacing Tim Finnegan and Alister Scott; Geoff Denman was elected unopposed as the representative of Wales, replacing Will Davies who had served as the previously coopted representative of Wales; and David Snashall was elected as President to take office in May 2005. Keith Palmer resigned from his post as Director of Continuing Professional Development, and the Board appointed Jacques Tamin to the post, now called Director of Professional Development. Philip Raffaelli resigned as Chief Examiner, and Dennis Ferriday was appointed by the Board to the post, now called Director of Assessment. The Assistant Registrar, Ursula Ferriday, resigned. This is currently an elected post, but will not be so if the new governance arrangements are ratified. An interim Board appointment was therefore made to complete the current term of office. Kevin Holland-Elliott was appointed, and the name of the post has been changed to Director of Communications. I would particularly like to thank Ursula who worked closely with me on the Executive Committee.

The process of appointing Fellows has been reviewed, with a view to ensuring greater transparency. The first change that has been made is that Members being proposed for Fellowship are made aware of this and asked to provide their own information, including their career details and contributions to the Faculty. An application for Fellowship may now come from the Member themselves, provided that they have existing Fellows to propose and second their application. The second stage of the change will be introduced next year, with a review of the criteria to be used by the Fellowship Committee.

One role of the Registrar is to support the Faculty staff. Judith Secker, the Chief Executive, resigned at the end of the year. In typical fashion, as one of her last contributions, she helped appoint an interim Chief Executive, Nicky Wilkins, to take over as she left. I have worked closely with Judith for nearly three years and would like to pay tribute to her hard work, vision and commitment to the Faculty, which has led to greatly improved processes and working conditions for Faculty staff.

Olivia Carlton



John Harrison
Academic Dean

As a result of the Faculty's new governance arrangements, the Academic Dean post has evolved to create a role requiring leadership of the academic aspects of Faculty business and a strategic overview of internal and external developments. The challenges for 2004 have been:

- the creation of the Postgraduate Medical Education and Training Board (PMETB) and the implications for training and assessment in occupational medicine;
- seeking to influence positively the wider

occupational medicine agenda by engaging with the Academy of Medical Royal Colleges and with European neighbours.

The Faculty will not have a place on the board of PMETB but we have places on the specialist programmes subcommittee, which will report to the Training Committee of the PMETB board. I have also become a member of the postgraduate education committee of the Academy of Medical Royal Colleges. In this way we hope to ensure that there is a voice for occupational medicine in the planning of training and assessment in the future so that the specific needs of our specialty are taken into account.

Our own training and assessment review is progressing. The aim is to produce a revised training curriculum that will set out how we train tomorrow's specialist occupational physicians, ensuring that Faculty approved training posts provide a suitable training environment to deliver competency-based training. New "workplace" assessments of trainees are being developed including 360-degree appraisal and directly observed clinical practice.

Training of non-specialist occupational physicians remains a concern of the Faculty. The Diploma in Occupational Medicine is one of our most successful examinations. This has enabled us to expand the pool of appropriately trained professionals, thus extending the public benefit of the Faculty's work in line with our charitable aims. We are looking at revising the way in which we train doctors wishing to obtain the Diploma in Occupational Medicine. Modularisation of training could be the way forward by making training more flexible and, hopefully, more attractive. We have used the development of a training and assessment module in Hand-Arm Vibration as a pilot for this approach.

We enjoy good relations with the Faculty of Occupational Medicine of the Royal College of Physicians of Ireland and, this year, we have started to work closely with them on developing reciprocal arrangements and mutual recognition of training posts. As both our Faculties are reviewing training and assessment methods, there is an opportunity for convergence for mutual benefit. There are not only practical benefits from such a relationship, but also strategic benefits within the European Union.

John Harrison



Gordon Parker
Training Dean

Delays in the establishment of the Postgraduate Medical Education and Training Board (PMETB) have had a number of effects. PMETB was expected to take over the functions of the Specialist Training Authority (STA) in the autumn of 2004, but will not now 'go live' until September 2005. This has meant that assessment of the equivalent status of overseas specialists in relation to the General Medical Council specialist register has continued under Article 9 of the European Specialist Medical Qualifications Order, rather than Article 14 of the General and Specialist Medical Practice Order. It has also delayed the assessment of other doctors who may wish to apply for entry to the register through their experience as well as training. PMETB will have more direct responsibility for this process than the STA had (including setting fees and establishing documentation), and has suggested that applications under Article 14 should begin in mid-2005. The Faculty's Equivalence Sub Committee is currently working on the assessment process, under the chairmanship of Dr Nick Cooper.

The Faculty responded to the publication of the curriculum for Modernising Medical Careers Foundation Years 1 (F1) and 2 (F2) by developing guidance for training departments, Postgraduate Deans and Regional Specialty Advisers. Occupational medicine is an ideal environment in which to deliver learning opportunities and core skills training, including communication and the social aspects of medicine. Possible models for delivery include a four month day-release programme and a two week block, but we acknowledge that unless new funding can be identified, deaneries may not be able to include occupational medicine in F2.

The move to Foundation training means that as part of the Faculty's major review of the training curriculum, training programmes and assessment methods, we will have to decide whether to introduce 'run-through' training from Foundation Year 2, or whether to attract doctors who have completed a further year's training in medical specialties beyond F2. This work is currently ongoing.

The Faculty's Specialist Training Committee (STC) welcomed Dr Ian Hastie as new Lead Dean for Occupational Medicine on the retirement of Professor Brendan Hicks. The Faculty is most grateful to Brendan for his wise counsel and technical advice, and wishes him well for his retirement.

Regional Specialty Advisers' meetings have included important training in equal opportunities and valuing diversity and on aspects of new employment legislation. There are currently 154 trainees in the NHS and 109 in non-NHS posts, compared with 61 in the NHS and 111 in industry at this point last year. There are 20 unfilled (approved) training posts in the NHS and 33 in industry.

This is my last report as Training Dean, and I should particularly like to thank Louise Heyes, Head of Education and Training, for her support and for keeping the training process on track, all the members of the STC and especially Dr Martyn Davidson, who has deputised for me in a number of key areas throughout the past twelve months.

Gordon Parker



Kevin Holland-Elliott
Assistant Registrar

I should like to begin this report by paying tribute to my predecessor, Ursula Ferriday, and members of the Communications

Working Group, Cathy Amos, Dale Archer, Paul Grime, Mike McKinnon, Dipti Patel, Colin Payton, Robin Philipp and Rob Thornton, for the work that they have put in over the past few years. This work has really borne fruit over the past few months in particular. I inherited an Assistant Registrar role that was in the process of evolving to become a Director of Communications under the new governance arrangements. This is a functional role, with the need to focus on developing a communications strategy, infrastructure and processes through which quality communication to members of the Faculty and the wider public can be delivered.

As the Chief Executive points out, one tangible new development has been the improvement of the website with its new format, presentational style and separated members' area. This is under continuous development. Helen Chaloner, our webmaster, and members of the web group should be congratulated for all their efforts. In line with the development of the website we have also moved to more electronic communication through the Chief Executive's regular e-mail, which also appears to have been a great success. We are also about to move to a predominantly electronic newsletter and annual report, although some hard copies will be available.

For a charity such as the Faculty, it is imperative that the charitable aims are clearly understood by as many people as possible and that we can demonstrate to the Charity Commission compliance with those aims. The welcome development of position papers for the website has helped provide focused and well argued pieces to support these aims and enhance public debate. We hope to contribute further in due course. Another success has been to agree with other organisations that we exchange links on each other's website. For example, agreement has been reached with The Institute of Electrical Engineers (approximately 150,000 members worldwide) and more recently with other professional health and safety groups in POOSH (Professional Organisations in Occupational Safety and Health). Our web hits are already high but we hope to build on this success even further. In 2004, there were 72,913 visitors to the website, a 37% increase on the previous year. The new website in October 2004 resulted in a 28% visitor increase on the previous quarter.

In line with the governance arrangements of the Faculty, the Executive Committee has agreed a quality control mechanism to

ensure all information disseminated by the Faculty is properly approved.

Finally, I recognise the invaluable input from Frances Quinn and, in her time as Chief Executive Officer, Judith Secker. In the near future we hope to gear up and prepare for further media coverage, in order to support our charitable aims which 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.

Kevin Holland-Elliott



Judith Secker
Chief Executive

This is the last of my three annual reports, as Chief Executive of the Faculty. There has been a large amount of change in that time, much of it modernising the infrastructure and the processes of the Faculty.

The upgrading of the Faculty's electronic facilities has enabled many of the major changes. At the AGM in 2004, the membership accepted changes to the Standing Orders allowing electronic communication in respect of major Faculty business. This not only facilitates speedier communication with members, but also significantly reduces costs.

During 2004, we developed our new member and contacts database, piloted an

electronic newsletter, which was well received, and will now continue in its electronic form (although hard copy versions will still be available to members who do not have access to email) and also decided to make the 2004 annual report available electronically. We have updated the Faculty's website, making it more user-friendly and more useful to the public, and also creating a separate section for members.

At the AGM in 2004, the President set out for the membership the proposals of the Board to update the governance structures of the Faculty. These new structures are set out in a document entitled "Governance Regulations", which is available on the members' section of the website. The updated Standing Orders have been issued to the membership via the website and will be offered to the 2005 AGM for adoption.

The Faculty has commenced a detailed review of its education and training assessment procedures, both in order to meet its obligations to the specialty and also to satisfy the new requirements which will come into place with the inauguration of PMETB (the Postgraduate Medical Education and Training Board).

In April 2004, the Faculty published the results of a major review of the HAVS (Hand-Arm Vibration Syndrome) international literature. The associated launch conference spawned the development of a syllabus for a Faculty qualification in HAVS assessment. This qualification is planned to meet the new Health and Safety Executive requirements for assessments; courses will be available at several centres across the UK.

I would like to thank my colleagues, Helen Chaloner, Jane Davies, Louise Heyes, Anna McNeil, Charlotte Pederson, Frances Quinn, Lynn Staff and Jean Whaley, for their hard work and support throughout this very active year.

2005 is going to be a busy year for the Faculty. I believe that the landscape for medical training and professional development will have changed dramatically by the end of the year. I wish the Faculty and all its staff and members a very successful future in this challenging new world.

Judith Secker



Jacques Tamin
Continuing Professional
Development Director

In line with the new Governance arrangements agreed at the 2004 AGM, the changes to the Director of Continuing Professional Development (CPD) role and the Revalidation Committee have been piloted. This included the expansion of the Director of CPD role and the creation of the new Professional Development Sub-Committee.

In April 2004 the General Medical Council (GMC) issued a guidance document entitled *Continuing Professional Development*, which made it clear that the GMC regards participation in CPD to be an essential component of the revalidation process. Other essential components are audit and appraisal.

The Faculty has been working with the Society of Occupational Medicine to develop an appraisal process which will be available to members, who might otherwise have had difficulties in finding an appraiser. Many members have contacted the Faculty to express their concern that the GMC may not understand how the circumstances of our specialty are different from other specialties. We have a representative from the GMC on the Professional Development Sub-Committee (as there was on the Revalidation Committee), and members can be reassured that these points are made to the GMC representative. In addition, the President and I highlighted these differences at a meeting with the GMC.

Being "in good standing" with the Faculty includes the requirement to participate in its CPD scheme. This means that, to be entitled to represent the Faculty, or hold Office, or be elected for Fellowship, members must participate in our CPD scheme.

The number of CPD returns in 2003, 340, continued on the upward trend from previous years. Although it is encouraging to see a steady improvement in numbers participating in the scheme each year, we still have less than 50% participation. One might anticipate that revalidation will have an influence on the 2004 returns rate.

80 participated in the audit, of whom 74 were confirmed as having 50 CPD points or over.

Some members experienced problems with recording internal CPD, in spite of the new form (CPD7) that was produced last year for this purpose. For this reason, a "record of reflective learning form" is being piloted.

The last sentence of the Director of Professional Development's job description reads: *shall be responsible for promoting a climate in which high quality CPD is accepted as a professional obligation and valued and undertaken by all.*

That is my ultimate aim. We are some way from there still, but I hope to continue the work that my predecessors have started, and make participation in our CPD scheme increasingly more straightforward and more understandable. I hope that most of you will not see it as a chore, but rather, in its requirement for us to pause, and plan, and reflect on our professional development, the CPD scheme will act as a catalyst to our continued development. This would ensure ever higher professional standards, and benefit our patients or clients, or the communities that we serve.

Jacques Tamin



Dennis Ferriday
Chief Examiner

As referred to by the Training Dean, the whole structure of postgraduate medical education is changing in a direction which will bring about greater harmonisation with the other Royal Colleges. From summer 2005, the Royal Colleges and Faculties will no longer be the sole judges of the probity of their examinations, but will take their lead from the new Postgraduate Medical Education and Training Board (PMETB), which will assume responsibility for ensuring that postgraduate medical examinations are fit for purpose. Although there must be some sadness about the loss of our independence, I am sure that once the change has occurred our examination system will emerge enhanced and better able to assess the competency of the occupational physicians of the future.

We are now working towards adopting this competency based system and are rethinking just about every aspect of our examination system. Major tasks during 2005-2006 will be to develop the common component building blocks for our examinations to ensure consistency, and new systems which effectively assess competence.

Another major strand of work during 2005 will be the development of quality assurance processes for examinations. This will include a new selection method for examiners, together with an enhanced training programme. To lead this quality initiative John Cartwright is being appointed in January 2005 to act as Chief Examiner (Quality) and is already starting on this work.

Our examinations must not only be objective, but must also be perceived as such. The final area of development in 2005 will therefore be to review all our systems, to ensure that individual examinations are as objective as possible and that no particular sub-group of candidates is disadvantaged for any reason. Our goal is to develop Faculty examinations that meet the needs of the candidates and are fair, open and honest.

I would like to thank my predecessor, Philip Raffaelli, who was so ably supported by Richard Wakeford, and my Deputy Chief Examiners, Steve Boorman, Mike Dean, Dil Sen, Mike Gibson and Tony Batchelor, as well as the members of their examination committees, for their hard work and dedication throughout the year. Finally I am indebted to Lynn Staff and Charlotte Pederson for their work as Examination Administrators. They have both done a terrific job during 2004.

Dennis Ferriday



Paul Litchfield
Treasurer

2004 Accounts

The year has been a difficult one financially. Core income was significantly lower than anticipated in a number of areas and several heads of expenditure were higher than budgeted despite the implementation of mid-year controls.

Key Income Lines

Subscriptions	£283,336	Up 3.7%
Qualification Fees	£142,605	Down 11.5%
DoH Grant	£3,024	Down 90%

Key Expenditure Lines

Staff Costs	£243,442	Up 9.2%
Publication Costs	£59,991	Up 48%
Meeting Costs	£30,140	Up 11%
Legal Fees	£13,318	Up 73%

The net result was a deficit on running costs of £40,593 (approximately 6% of budget). However the general financial climate was more benign than in recent times and our investment portfolio grew by over 10% during the year so that the Capital Fund (£285,840) has finally risen above its previous 2001 peak. Nevertheless the overall position is a reduction in Faculty reserves of £6,270 over the period. If we are to prosper as an organisation we must ensure that we not only increase our activities and raise our profile but also that we grow our revenues to support what needs to be done.

2005 Budget

The budget for 2005 has again been a challenge to construct given the fundamentals of a static membership base, declining examination revenues and increasing demands from the Government, the public and our own members. Increases in membership and examination fees have therefore been set at a rounded 4.9% with a

£20 subscription supplement for specialist members in work to cover the increased costs of the Continuing Professional Development scheme. Costs are being contained as far as possible and additional sources of revenue are continually being sought but achieving the level of growth we aspire to will require a major sustained effort by all committed to the best interests of the Faculty.

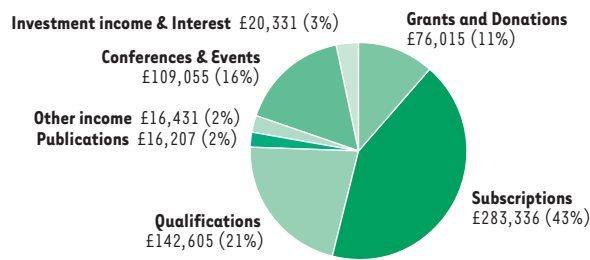
Corporate Governance

A revised structure for the governance of the Faculty has been developed. The guiding principles are a clearer separation of powers between the Board and the Executive with improved accountability of the latter. The various risks to the Faculty were again considered formally by the Board in accordance with the requirements of the Statement of Recommended Practice "Accounting and Reporting for Charities" (SORP 2000) and the major risks and the provisions in place to mitigate them are shown in the audited accounts.

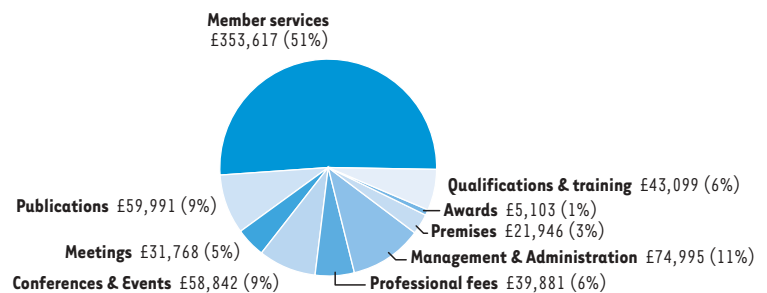
Paul Litchfield

The information in this document is provided to give an indication of the activities for 2004. The figures have been extracted from the full annual accounts for the year which have been audited and given an unqualified opinion. The full annual accounts, Trustees' report and auditors' report form part of the complete version of the Faculty of Occupational Medicine's Annual Report and Accounts for 2004 which is available at www.facocmed.ac.uk. This includes full versions of these summarised reports and reports from the representatives of Scotland, Wales and Northern Ireland, as well as a report from the Specialist Registrars' representative. Full lists of the Board members and of all the committees are to be found there, as are the lists of Faculty representatives on other bodies, together with their reports. The web version also includes comprehensive information on the Awards of Fellowship, Membership, Associateship, the Diploma in Occupational Medicine, the Diploma in Disability Assessment Medicine and the Diploma in Aviation Medicine, as well as the prize winners for 2004.

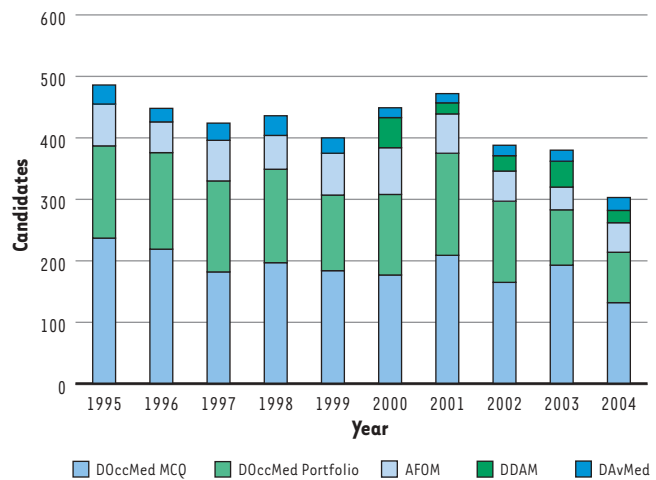
Income – £663,980



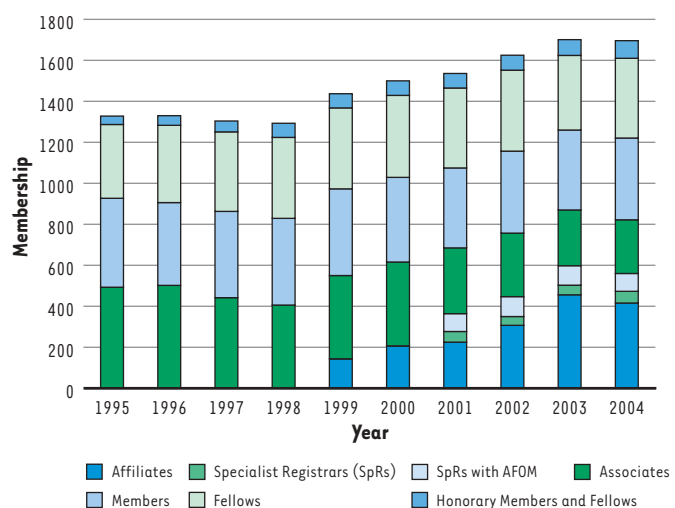
Expenditure – £689,242



Numbers of examination candidates by year



Membership by grade by year



Our Mission

Everyone should have access to advice from a competent occupational physician as part of comprehensive occupational health and safety services. Our aim is for healthy working lives through:

- Elimination of preventable workplace disease
- Maximisation of functional capacity
- Adaptation of work to suit the needs of the individual



The objectives of the Faculty of Occupational Medicine

- To promote for the public benefit the advancement of education and knowledge in the field of occupational medicine
- To act as an authoritative body for the purpose of consultation in matters of educational or public interest concerning occupational medicine
- To 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

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