

**From the President**

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December 2010

Dear Colleagues

I write this letter as we are finalising preparations for our conference on quality in occupational health care. Among other things, the meeting will be an opportunity for members to hear more about SEQOHS, the new accreditation scheme for occupational health services, which, thanks largely to the prodigious efforts of Paul Nicholson, is now coming into operation. No doubt there will be lessons to learn from our experience as the scheme gets underway, and the aim is that it should continually evolve and improve over time. But anecdotal reports suggest that it is already acting as a stimulus to enhanced performance.

If you were unable to book for the conference you may like to know that Paul Nicholson will be making a presentation on SEQOHS at the NEC health and work event on Tuesday 8<sup>th</sup> March. Further information will be also available from the Faculty stand there. Details are to be found in the enclosed flyer.

Another major event this autumn has been the first sitting of MFOM Part 2, and I am grateful to Keith Palmer, Dil Sen, David Brown, Tok Hussain and all their colleagues in the academic team, whose careful preparation ensured that the new examination ran smoothly. It was disappointing, however, that the candidates were outnumbered by the examiners – only four as compared with the 25 to 30 that normally used to enter for AFOM. An initial reduction in numbers was expected, since the new exam is taken later in the course of specialist training, and it takes a year or so for the first cohort to work through to this later stage. But that is not the whole story. In the past three years, there has been a clear decline in the numbers of new entrants to specialist training. Various factors may have contributed to this, including reduced provision of training posts, especially in the private sector, and relatively high pay (by historical standards) for GPs, making a switch to other work less attractive.

To address the problem, we need first to predict, as best we can, how many specialist occupational physicians are going to be required nationally over the next 10 years, and of these, how many realistically are likely to be funded. This is not a simple task because the organisation of occupational health care remains in flux, and care is needed to ensure that specialists focus on the roles for which their training and skills are particularly needed. However, we are better equipped to undertake the assessment than anyone else. Based on our estimate of need, and on the average working life of an occupational physician from the time of specialist accreditation, we can then calculate the numbers of new trainees that should be recruited per year to ensure that the required complement of specialists is achieved and maintained. With assistance from the Board and from senior colleagues in different industrial sectors, I have been working on a report on manpower planning which follows this approach, and when complete, it will be presented to the

wider membership for comment. Depending on the findings, we may need to press for Government funding to support all specialist training in both the public and private sectors, but in the current economic climate we will have little chance of success unless we can muster a strong and clearly argued case.

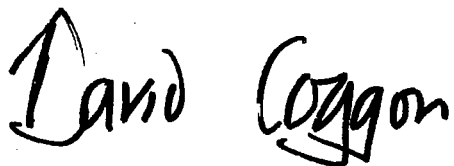
As set out in our strategy for occupational health care nationally, which was published earlier this year, we believe that occupational physicians could usefully make a larger contribution to public health. In particular, we would like to see the trial appointment of a small number of occupational physicians to local public health teams, where they would take lead responsibility for the health of people of working age, as well as contributing to health protection from chemical and physical hazards in the environment. Last week, Olivia Carlton and I had an encouraging meeting with Anne Milton and Lord Freud, at which we made the case for such appointments, and we hope that they will get some mention in the imminent White Paper on public health. In addition, we were pleased to welcome Lindsey Davies, President of the Faculty of Public Health, to our strategic Board meeting in October, and it is clear that we have many common interests that we should pursue together.

I am now in the last six months of my presidency, and people ask me whether I am winding down. The short answer is no. The longer I am in the job, the more I am conscious of further work that needs to be done. So I expect to be busy right to the end of my term, and if my successor wishes, with a few tasks beyond then. It is, however, a great reassurance to know that Olivia Carlton will be taking over from me in May, and already we are working together closely to ensure good continuity.

Finally, may I thank all who have contributed their time and expertise so generously to the Faculty during 2010, and wish all of you a happy and peaceful Christmas.

With best wishes

Yours sincerely

A handwritten signature in black ink that reads "David Coggon". The signature is written in a cursive, slightly slanted style.

**David Coggon**