



**Minutes of the
POOSH Committee Meeting**

Held on 11 June 2012

IOSH, The Grange, Highfield Drive, Wigston, Leicestershire LE18 1NN

Present:

| | | |
|----------------------------|---------------------|-------------|
| Mr Roger Bibbings | RoSPA | RB |
| Ms Susanna Everton | AOHNP | SE |
| Mr Harry Hopkins | SARS (Chair) | HH |
| Mr David Kidney | CIEH | DK |
| Mr Reg Sell | IEHF | RS |
| Mr Richard Jones | IOSH | RJ |
| Ms Clare McNicholas | HSE | CMcN |
| Ms Sharon Brunt | BOHS | SB |

Invited Guest:

| | | |
|-----------------------|------------|-----------|
| Mr James Wolfe | DWP | JW |
|-----------------------|------------|-----------|

Secretariat:

| | | |
|------------------------|--------------------|-----------|
| Mrs Anna McNeil | Secretariat | AM |
|------------------------|--------------------|-----------|

1. Welcome and apologies

Harry Hopkins welcomed everybody to the meeting and thanked Richard Jones and IOSH for hosting the meeting and providing lunch. It was noted that RJ was deputising for JH.

Apologies had been received from:

| | | |
|-----------------------------|----------------------------------|-----------|
| Ms Caroline Minshell | RCN (Public Health Forum) | CM |
| Mr Barry Holt | IIRSM | BH |
| Mr John Holden | IOSH | JH |
| Ms Carolyn Williams | IRM | CW |

2. Invited Guest – Mr James Wolfe – DWP

HH welcomed Mr James Wolfe (JW) and thanked him for coming to speak to the POOSH Group. He added that JW's attendance came out of correspondence regarding how to use the Fit Note for accident reporting.

JW informed the Group that his duties at DWP included working on the response to the Sickness Absence Review and delivering the Lofstedt recommendations. He added that it was necessary to identify the role of employers in addressing workplace

health and accident reporting and engaging with GPs and employees in facilitating return to work. JW stated that the Fit Note guidance was currently being revised to improve the engagement of employers and define what the 'fit for work' criteria mean. With respect to the POOSH request there was limited space on the form, also it was aimed at the individual. Guidance for the roll out of the electronic fit note was being produced, there would be four elements to the guidance (employers, employees, healthcare professionals and GPs). Liaison with the Council on Work and Health was taking place.

JW asked why POOSH felt the RIDDOR guidance was not appropriate and discussion was opened up to the Group.

RS stated that cutting reporting dates from 3 to 7 did not address the causes of short term absences.

RB added that HSE had not addressed the type of information the regulator would like to receive and the burden on employers had not been considered; employers have a duty to monitor incidents and absence and to record the data that would be useful for both employers and the HSE.

JW stated the relationship between good workplace management and the regulations, and added to that the effect of regulation on employers. HSE regulations have become synonymous with excessive burdens on employers and Chris Grayling, who has a very scientific and risk-based approach to the guidance, wanted to reduce the burden on employers.

RB stated that the change to 7 day reporting had been brought in to reduce the negative impact on employers when procuring services. He added that Lofstedt needed to look at the Dangerous Occurrences list and employers should be asked to define the dangerous occurrences in their own organisation.

JW agreed that the Minister would be happy with RB's comments, but would be concerned that employers may have to collect additional data.

RJ referred to the Merseyside Study where the highest rates of RIDDOR were in local government with the main reason for reporting was time absent from work; other factors were not included. He added that the loss of the 3 day reporting HSE phone line would be a retrograde step. Figures reported for 2006-7 had increased on those for 2001-2.

CMcN added that on-line reporting would increase the accuracy of reporting. However it was not a perfect system and Chris Grayling was unsure about gathering information regarding management regulations and RIDDOR and felt it may be a duplication.

JW stated that the employer had duties, pre-3 days to fix the problem that caused the absence and post-7 days to fix the problem and report the incident. He added that Lord Young had made two recommendations, firstly to examine the changes to RIDDOR and to review reporting times. Changes to RIDDOR would almost certainly have widespread consultation.

DK suggested that with the recent launch of the Public Health workforce strategy consultation, (responses due by 29 June 2012), this would be a key time to bring occupational health to the forefront.

JW added he was aware that this was a key area identified by Dame Carol Black and took this opportunity to ask POOSH to keep this in the forefront and to identify a business case for increased occupational health input. He added that the Department of Health, DWP, and BIS were all working together on this project.

SE stated that there was generally poor understanding of what occupational health practitioners do, in addition many occupational health nurses are now ageing and not many are coming into the profession.

JW reminded the group that there would be a lot of work to be done as there were many areas that needed to be addressed, namely the roles for GPs, employers, and health professionals in supplying occupational health to employees. This would require many sectors being brought together. He asked the Group for ways to address these challenges.

DK stated that the challenge would be to join up what this group already does with other organisations; there is an overlap in many areas of approach. He felt there was a need to engage with employers both nationally and locally; multi-site organisations could be encouraged to have a relationship with one local authority rather than all (or multiple) local authorities.

SE added that educating employers and employees would be vital; sickness absence was not the only factor that should be considered.

JW reiterated that there was a business case for occupational health, not only the Department of Health and DWP to deliver workers back to work. There was a responsibility to the employee and employer to maintain the health of the workforce.

RB stated that employers had knowledge of the health profile of their workforce and a strategic approach was needed to gather that information.

Concern was voiced about how much GPs know about the range of jobs in their patients' companies.

JW stated that the current workforce trends were a) an ageing population and b) those with a portfolio career. There was a need to plug the knowledge gap for GPs and a need to have an alternative way to link up employees to alternative work.

SE added that occupational health nurse led practices may be a good idea.

JW commented that it would be impossible to generalise; each sector had a different role. Some GPs would be able to provide the right solution and others would not. Occupational health would be helpful in supplying good information to employers and that would also help in the decision making process regarding return to work.

It was noted that Government would respond to the Sickness Absence Review in November 2012; the review was independent and therefore the Government would announce which recommendations would be taken forward (also in November 2012).

It was agreed that the POOSH 'paragraph' regarding the Fit Note should be submitted within the next month.

Action: RJ / HH / AM

Feedback from the DWP meeting with stakeholders (taking place on 11 June 2012) should also be sought and circulated to the Group.

Action: AM

HH extended his and the POOSH Group's thanks to James Wolfe for attending the meeting and responding to their various questions.

JW stated that as the Sickness Absence is developed he would contact POOSH and keep them informed.

3. Minutes of the POOSH committee meeting held on 6 February 2012:

The minutes of the meeting held on 6 February 2012 were agreed as an accurate account.

4. Matters arising from the minutes not covered by the agenda

There were no matters arising that were not covered elsewhere on the agenda.

5. POOSH Secretariat update

It was noted that IEHF had very kindly agreed to fund the Secretariat for a period of two years starting with this meeting. HH extended thanks to IEHF for this very generous gesture. HH also thanked IIRSM who had funded the Secretariat for the last two years.

6. POOSH Conference – 14 March 2012

DK reported that the conference had been a very successful event with good attendance. The panel discussion had proved very helpful and many points raised had now been addressed. DK added that it would be worth holding another event in the future, however it would be wise to avoid date clashes with member organisations. On behalf of POOSH, HH thanked DK and the CIEH for running the event.

It was agreed that AM would obtain a link to the conference presentations and circulate it to the Group.

Action: AM

Post meeting note – link to presentations circulated to group

7. Reports from member organisations

It was noted that the following reports had been circulated prior to the meeting:

AOHNP, BOHS, CIEH, HSE, IOSH, IEHF, IRM, RoSPA, and SARS.

Additional information was raised at the meeting by the following:

IEHF:

RS circulated a paper '*Human Factors in Healthcare*' and asked if any members had any queries to contact him direct.

The Human and organisational factors in the oil, gas and chemical industries conference will take place 9-10 October 2012, in Aberdeen.

IOSH:

At the Honorary Vice Presidents' Lunch (May 2012) IOSH launched their SME survey on 'tax breaks' and other H&S management incentives ([Safety in numbers](#)):

- 1,000 SMEs (1-249 employees) surveyed by ComRes
- **At least half** of medium-sized enterprises think they'd benefit from tax breaks for therapy, such as physiotherapy
- This rose to **58%** of medium-sized enterprises that think they would benefit from tax breaks for providing subsidised access to public gyms
- **40%** of all SMEs say tax breaks would encourage them to provide more health support for employees

IOSH support National Men's Health Week and on 11 June officially launched their 'coronary heart disease' tool on their [OH Toolkit](#); this now joins other tools for managing common health conditions, including Diabetes, Pregnancy and Stroke (soon IOSH aim to add 'cancer')

Consultations – as well as responding to the HSE consultations on 'revocations', IOSH have also responded to the 'Long Term Conditions – developing a cross-government strategy' call for comments (DoH).

Launch of IOSH's new Sports Grounds and Events Group at Wembley Stadium has taken place, with a moving speech from Steve Rotheram MP regarding Hillsborough.

'Going for Gold' was an event at Westminster to promote IOSH's Life Savings campaign; the success of the Olympic park development was spotlighted and received supportive speeches from Chris Grayling MP; Stephen Timms MP; and IOSH's host, Kevin Barron MP.

Council for Work and Health (CWH)

RJ reported that IOSH were providing funding for the secretariat for a period of three years; Anna McNeil would provide the secretariat services.

IOSH are also funding an 8-month feasibility study into improving employer-GP communications (piloting the use of a 'standard' letter produced by CWH)

8. Future speakers

a. Mary Boughton (FSB)

It was noted that Mary Boughton was happy to attend the POOSH meeting in October but formal confirmation would be sought nearer the time.

Action: RJ / HH / AM

b. Diana Kloss (CWH)

It was agreed that Diana Kloss, Chair of the Council for Work and Health, should be invited to a future meeting (either October 2012 or the first meeting in 2013). AM agreed to check Diana Kloss' availability for the next two meetings.

Action: AM to check Diana Kloss' availability

Post meeting note: D Kloss available for both meetings

RB suggested that Frances Outram of the Small Business Trade Association Forum would be a possible future speaker.

9. Council for Work and Health

The notes of the Council for Health and Work meeting held on 8 February 2012 had been circulated. It was noted that the next meeting of the Council had taken place in May 2012 and notes of that meeting would be available for the next POOSH Meeting.

RJ is a member of the Council for Work and Health and reported that occupational health nurse training was being reviewed by a sub-group of the Council. The Council were also responding to a Department of Health Consultation document on Long Term Conditions Strategy.

10. IIG joint working with HSE

An update on IIG joint working with the HSE had been received from Professor Richard Taylor and circulated to the Group. It was noted that working groups had been set up covering three topics.

1. Competence Group
2. Business Case Group
3. Risk Communication Group

It was noted that Robin Smith of BOHS would be the POOSH representative on the Business Case Group.

RJ informed the group that he would be the IOSH representative on the Risk Communication Group and they would be meeting at the end of June. A framework will be prepared shortly.

RS added that he was a member of the Competence Group and they will be meeting towards the end of June.

It was agreed that RS would obtain the dates of the Hazards Forum meetings from Richard Taylor. It would then be possible to identify a possible joint POOSH / Hazards Forum evening meeting.

Action: RS to contact Richard Taylor

Post meeting note - Prof. Taylor would be happy to attend a future meeting to report on the progress/outcome of the workgroup activities.

11. Consultants' Register

HH informed the group that this is a standing item on the agenda. RB was concerned that no user-evaluation study had been carried out. He added that a Minister had requested a way of raising issues with a consultant on the register and that HSE were planning to create a complaints procedure.

RJ stated that the renewal process was currently in progress. Of the original 2800 members, 2100 had renewed. RJ added that an Extraordinary Meeting may be held to consider how to move to a competency-based registrar.

12. Health and Safety Legislation

HH reported that this would also be a standing item on the agenda. CMcN informed the group that the HSE was on track to remove the first seven regulations. RB stressed that it was necessary to ensure that Section 1.2 of these regulations would be met and CMcN confirmed that HSE were ensuring that cover would be maintained.

It was noted that Professor R Lofstedt may be called in to track how his recommendations have been carried out. RB asked if the Government Science and Technology Committee had carried out a risk assessment as recommended by Lofstedt. RJ responded that he believed this was being carried out, though he was not sure if it was as a result of the Lofstedt recommendations.

13. POOSH Contact sheet

It was agreed that all members would check and revise their entry. AM would then circulate an up-to-date version.

Action: All
Action: AM

14. Any other business

a. *Parting Shot. Being Business Friendly*

RB had circulated a draft article which will appear in OS&H in July and asked for comments from the Group.

Action: All

b. **Olympic Delivery Authority – Health and safety lessons learned**

AM had received a DVD from Lawrence Waterman (ODA Head of Health and Safety) which provided an overview of how the ODA sought to ensure maximum health and safety performance during the preparations for the 2012 Olympics. AM agreed to obtain copies for the Group.

Action: AM

Post meeting note: copies requested and to be circulated direct by ODA

c. **IOSH-funded health-related Research and Development projects**

RJ circulated a report showing the current IOSH-funded projects. A copy of which has been pasted at the end of these minutes.

15. Date, time and venue of the next meeting

The next meeting will take place on Monday 8 October 2012: 1300 for 1330, venue tbc. A London venue would be required as it is hoped that Mary Boughton will be attending the meeting.

Action: All

16. Meeting dates in 2013

It was agreed that AM would circulate possible meeting dates in 2013.

Action: AM

IOSH-funded health-related Research and Development projects – 11 June 2012

1. **Institution:** University College Cork; **Project leader:** Birgit Greiner
Title: Musculoskeletal injury as part of the job – Health and safety in hand-intensive occupations in health care occupations
Start date: January 2011; **End date:** September 2012

Project seeks to provide an evidence-base to inform strategies for effective prevention and management of work-related MSDs in health care occupations; with a specific focus on hand-intensive occupations. The study uses a quantitative cross-sectional study design; combined with a longitudinal design.

2. **Institution:** University of Southampton; **Project leader:** Professor Keith Palmer
Title: The role of health problems and medication in accidental injury at work: A population-based case-control study using the General Practice Research Database
Start date: April 2012; **End date:** August 2013

Project will carry out a detailed analysis on the relationship between health problems and risk of accidental injury at work. Using the General Practice Research Database, the study will explore the association of accidental injury with illness and prescribed medication. If found, the associations will be characterised and risks assessed in terms of different time windows of exposure prior to injury. Any attributable proportion of injuries will also be assessed.

3. **Institution:** University of Derby; **Project leader:** Dr Claire Williams
Title: Investigating the impact of behaviour change techniques on break taking behaviour at work
Start date: December 2011; **End date:** August 2013

Project will take a mixed methods approach to investigating break taking behaviour at work, within a constrained office-type environment. A field study will be undertaken which records data about how regularly staff get up from their desks before and after behaviour change interventions. This quantitative data will be supported with focus group data, which explores the attitudes and motivations underpinning the break taking behaviours.

4. **Institution:** International University of Monaco; **Project leader:** Dr David Ansiau
Title: Longitudinal study of the effects of shift work on health: analyses of VISAT (ageing, health and work) data.
Start date: June 2009; **End date:** June 2011

Project investigates the underlying causes of H&S problems associated with abnormal work schedules and ageing. The study determines the long term effects of shift-work on: Sleep; Cognition; Metabolic dysfunction; Quality of life. It also looks at the implications for H&S management, particularly job design, work organisation and the development of educational material.

5. **Institution:** Brunel University; **Project leader:** Dr Alexandra Farrow and Dr Frances Reynolds
Title: Post retirement age workers and health and safety
Start date: January 2009; **End date:** January 2011

This project critically reviews the literature in relation to the health and safety of older workers and specifically those of post-retirement age. The study also compares the safety experiences and practices of post retirement age workers with those of pre-retirement age workers

6. **Institution:** University of Nottingham; **Project leader:** Dr Jonathan Houdmont
Title: Evaluation of a sun safety training intervention for the British construction sector
Start date: February 2012; **End date:** January 2014

This project will investigate how effective, in terms of outcomes and processes, is a sector-specific intervention designed to increase knowledge of the risks of solar radiation exposure and encourage healthy sun safety attitudes and behaviours among construction workers in Britain.

Development Fund projects

1. Solar radiation in the British construction sector – ‘Sun safety’ DVD
2. UK Nanotechnology safety guide (working with UK Nanotechnology Safety Forum and HSE)

Richard Jones

IOSH Head of Policy and Public Affairs

For more information see www.iosh.co.uk/researchreports