

Update on Occupational Health Provision

Report of the Chief Fire Officer

For further information about this report please contact Rod Hammerton, Chief Fire Officer, on 01743 260201 or Lisa Vickers, Human Resources Manager (Contracts), on 01743 260211.

1 Purpose of Report

This report gives an update on the Occupational Health (OH) service supplied to Shropshire Fire and Rescue Service by the current providers, Shropshire Community Health NHS Trust, McClelland Centre (University of Worcester) and Shropshire Council (Occupational Health Physician).

2 Recommendations

The Committee is requested to note the report.

3 Background

Since November 2014 the OH contract has been divided into separate areas and awarded to three contractors:

- Occupational Health nursing and administration (OHN)
- Fitness.
- Occupational Health Physician (OHP)

The contracts were initially awarded on a one-year (+ 1) basis and are currently due to expire in February 2019. It is likely, given uncertainty over future structural changes, that the OHN and the OHP contracts will be extended again for a further period short period. However, as the Fitness contract is likely to stand outside any potential collaboration with non-fire organisations, it has been decided by SMT (August 2019) to go out to tender for this contract, working closely where possible in collaboration with Hereford and Worcester Fire and Rescue Service.

4 Summary of Activity to Date

There is a nurse-led service with nurse provision for six days each month and access to an appropriately qualified doctor for one day each month.

The nurse days are booked as required and, other than surveillance and medicals, are not on set days to allow flexibility for staff. Due to Health & Safety legislation it has been necessary to introduce an asbestos medical linked to the three-yearly medical, and part of this must be carried out by a suitably qualified/registered physician. This has increased the OHP time to two days per month. Additional services are available if required including physiotherapy, general counselling and specialist counselling.

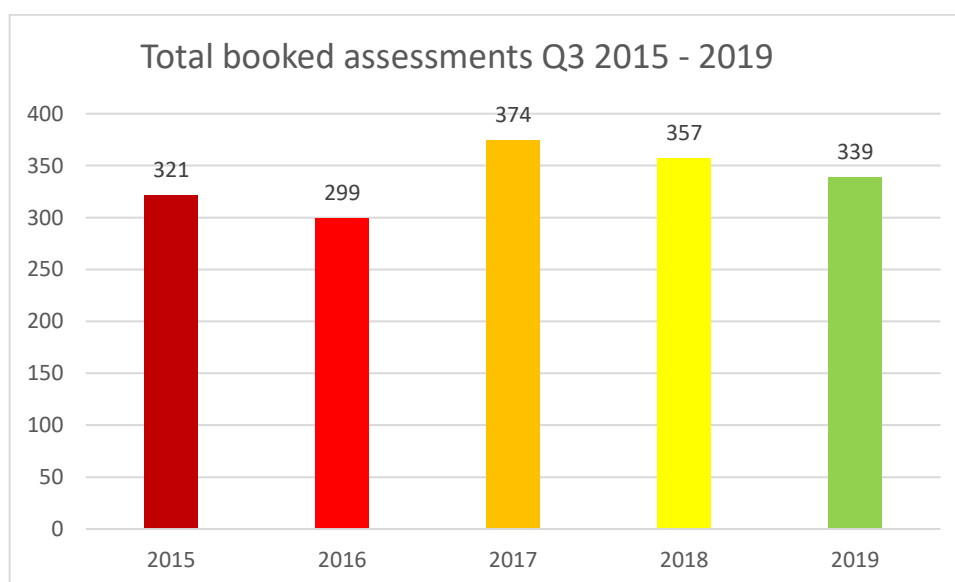
Fitness

All operational staff undergo a fitness test annually.

Q3 2019 Fitness Assessments

The following data represents the cumulative booked assessment figures across the last 5 years between the 1 January and 30 September for comparison.

- 2015 321 booked assessments
- 2016 299 booked assessments
- 2017 374 booked assessments
- 2018 357 booked assessments
- 2019 339 booked assessments

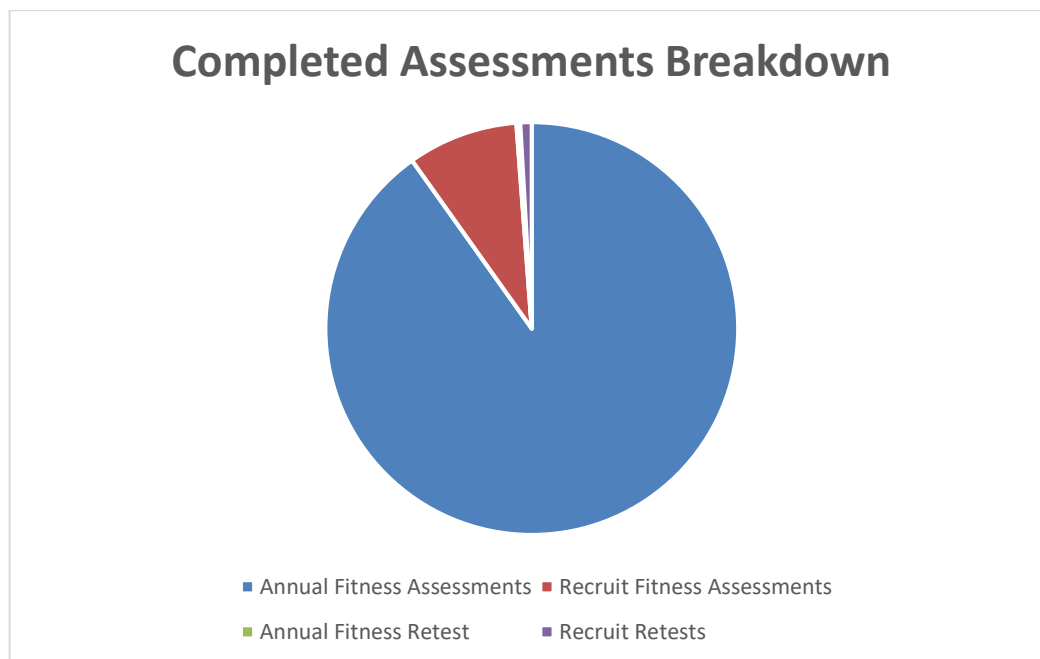


Between Q1 and Q3 of 2019, 339 assessments were booked. The slight fall in number when compared to 2018 is likely to be due to the natural variance in the volume of appointments booked during each quarter and the crossover of the role of exercise physiologist. However, the average amount of assessments over the previous five years is 336, this year is very close to this. In addition to this, last year the quarterly meeting was held in November which would give an additional couple of weeks for bookings to take place.

We would expect to see Q4 totals to rise to that closer in line with previous years.

Completed Assessments Breakdown

- Annual Fitness Assessments 302
- Recruit Fitness Assessments 29
- Annual Fitness Retest 1
- Recruit Retests 3



- four appointments were booked but not attended.
- two of the Did Not Attends (DNAs) were generated from a new recruit and 2 from on-call firefighters.

This following data is based on activities undertaken by Shropshire Community Health NHS Trust Occupational Health (OH) Service for the period 1 July to 30 September 2019.

The Occupational Health Service continues to work closely with the Human Resources team. All reports following assessment by the OH Adviser continue to be emailed on the same day the individual is seen and telephone contact is made where necessary, for example urgent advice on restricted duties/unfit for tour of duty.

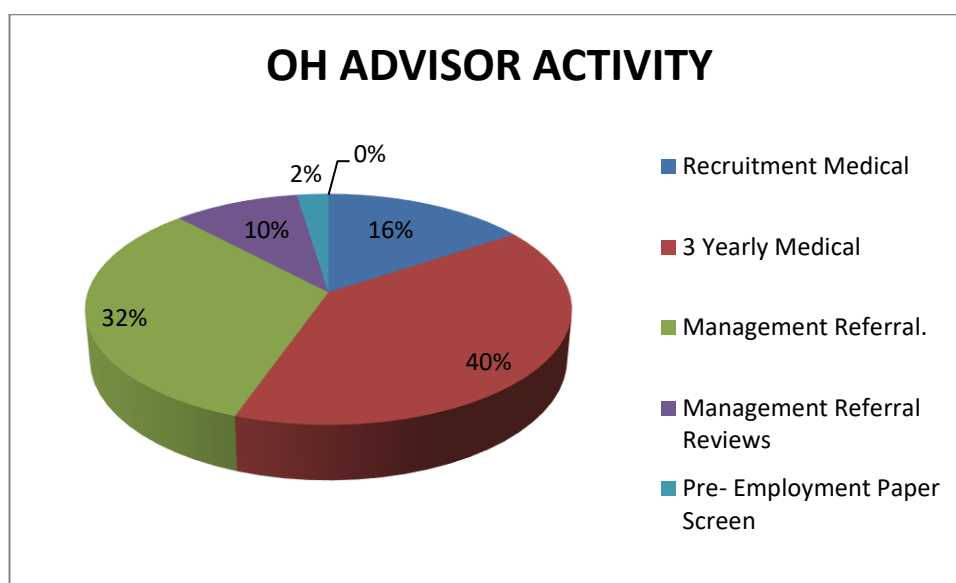
Appointments with the OH Adviser continue to be Monday to Friday giving flexibility to fit in with working patterns. The DNA rate has continued to increase throughout this quarter and Occupational Health and SFRS Human Resources team continue to work together in an attempt to improve this statistic.

During the period that this report covers, Occupational Health attended all scheduled Sickness Absence and Health and Safety meetings.

There has also been communication between the Service and Occupational Health regarding administering the Flu Vaccination to employees that have declared an interest, including evening visits to the outlying stations. Dates have been agreed for the administration of the flu vaccine.

Occupational Health Adviser Activity 1 July – 30 September 2019

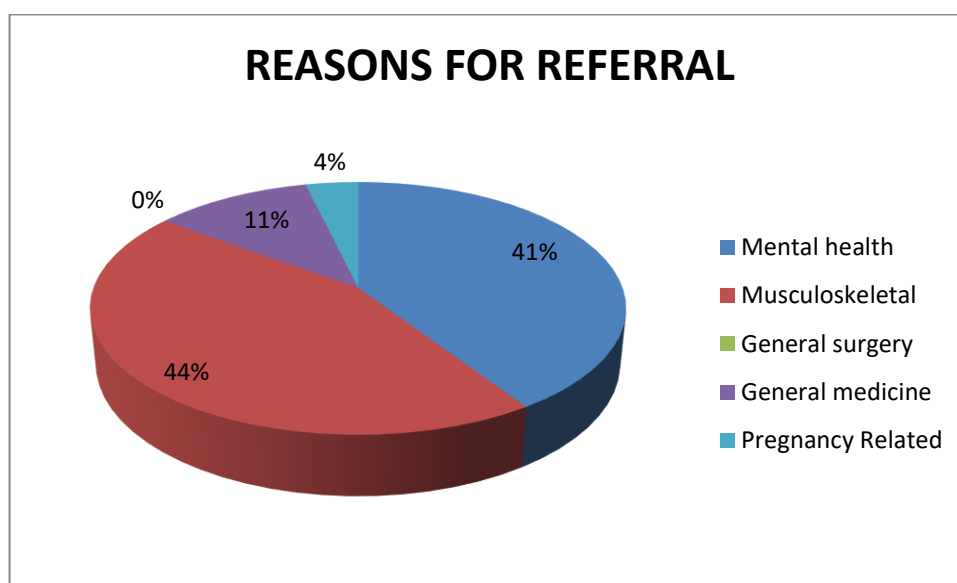
OH Adviser Appointments	Numbers Attended Jan - Mar 2019	Did Not Attend (DNA) Jan - Mar 2019	Numbers Attended Apr -Jun 2019	Did Not Attend (DNA) Apr – Jun 2019	Numbers Attended July to Sept 2019	Did Not Attend (DNA) July to Sept 2019
Recruit Medical	11	2	6	3	13	2
3 Yearly Medical	25	10	33	9	33	15
Management Referrals	13	0	16	6	27	5
Management Referral Reviews	5	0	0	0	8	0
Pre-Employment Paper Screen	1	0	5	0	2	0
Pre-Employment Health Interview	0	0	0	0	0	0
Asbestos Medical	5	8	13	7	11	19
Hot House Medical			6	0	0	0
Total	60	20	79	25	94	41



The current Did Not Attend (DNA) rate stands at 33.37% for this three-month period. This is an increase compared to the last quarter at 24%, with DNA rates for asbestos and 3 yearly medicals increased.

Reasons for Initial Management Referral Consultations to the OH Adviser 1 July – 30 September 2019

Reason	Number seen Jan to Mar 2019	Number seen Apr to Jun 2019	Number seen Jul to Sept 2019
Mental Health	7	7	11
Musculoskeletal	2	6	12
General Surgery	1	1	0
General Medicine	3	1	3
Pregnancy Related	0	1	1



The information demonstrates that for this three-month period musculoskeletal issues were slightly higher than those for Mental Health for management referrals.

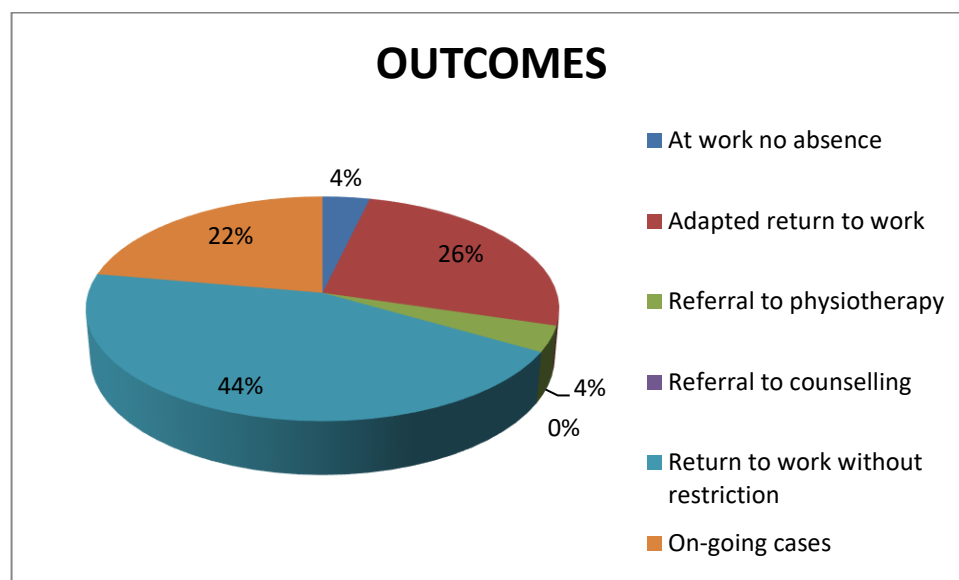
Mental ill health is increasingly prevalent as a cause of both short and long-term absence. Along with stress, musculoskeletal injuries and acute medical conditions, it remains most commonly responsible for long-term absence. (CIPD Health and Wellbeing at Work report 2019).

Ongoing Cases

This category is for ongoing cases, and for employees who have not been able to return to work yet or are requiring support while at work.

	Jan to Mar 2019	Apr to Jun 2019	Jul to Sept 2019
At work no absence	1	1	1
Adapted return to work	4	0	7
Referral to physiotherapy	1	1	0
Referral to counselling	3	2	1
Return to work without restriction	5	12	12
Ongoing cases	3	3	6

The above data highlights that out of the 27 individuals referred to Occupational Health in this period, six cases are ongoing; to be either reviewed by the OH Adviser, referred onto the OH Physician or an imminent return to work with support from the Service. Others have had a supported, timely return to work and one member of staff has remained in work and continues to do so with additional support. Twelve members of staff referred this quarter were able to return to work without restrictions or modifications advised.



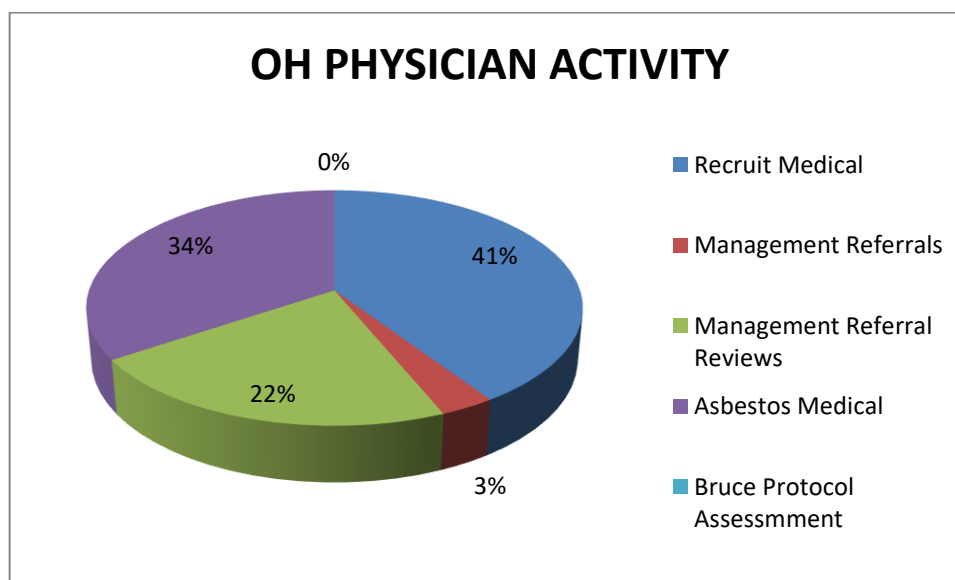
Occupational Health Physician Activity

1 July – 30 September 2019

The DNA rate for OH Physician appointments for this quarter is 43.85%, this is an increase to the previous quarter at 33.33%.

OH Physician Appointments Number Attended January – March 2019

OH Physician Appointments	Number Attended Jan – Mar 2019	Did Not Attend. DNA Jan – Mar 2019	Number Attended Apr -Jun 2019	Did Not Attend (DNA) Apr - Jun 2019	Number Attended July - Sept 2019	Did Not Attend (DNA) July - Sept 2019
Recruit Medical	11	2	6	3	13	2
Management Referrals	6	0	6	1	1	1
Management Referral Reviews	4	0	9	6	7	3
Asbestos Medical	5	8	13	7	11	19
Bruce Protocol Assessment	0	0	0	0	0	0
Total	26	10	34	17	32	25



Outstanding issue

Clearly as this report details the DNA rates are running at an unacceptable level the the HR team will work with OH and Area Command to rectify this.

5 Capacity

There are no capacity impacts arising from this report.

6 Collaboration / Partnership Working

As the Fitness contract is likely to stand outside any potential collaboration with non-fire organisations, it has been decided by SMT (August 2019) to go out to tender for this contract, working closely where possible in collaboration with Hereford and Worcester Fire and Rescue Service.

7 Community Safety

There are no community safety impacts arising from this report.

8 Environmental

There are no environmental impacts arising from this report.

9 Equality Impact Assessment

There are no equality or diversity implications arising from this report. An e-EQIA is not, therefore, required.

10 Financial Implications

There are no financial implications arising from this report.

11 Health and Safety

There are no health and safety impacts arising from this report.

12 Human Rights (including Data Protection)

There are no human rights impacts arising from this report.

13 ICT

There are no ICT impacts arising from this report.

14 Legal Comment

There are no legal implications arising from this report.

15 Public Value / Service Delivery

There are no public value or service delivery impacts arising from this report.

16 Reputation

There are no reputational impacts arising from this report.

17 Security

There are no security impacts arising from this report.

18 Training

There are no training impacts arising from this report.

19 Appendices

There are no appendices attached to this report.

20 Background Papers

There are no background papers associated with this report.