

## Update on Occupational Health Provision

### Report of the Chief Fire Officer

For further information about this report please contact John Redmond, Chief Fire Officer, on 01743 260201 or Ingrid Jones, Human Resources Manager, on 01743 260292.

### 1 Purpose of Report

This report gives an update on the provision of the Occupational Health Service provided to Shropshire Fire and Rescue Service by the current provider: Working Well Occupational Health and Wellbeing Services, part of the Worcestershire Acute Hospitals NHS Trust.

### 2 Recommendations

The Committee is requested to note the report.

### 3 Background

Following a formal tender exercise, Shropshire and Wrekin and Hereford and Worcester Fire and Rescue Authorities jointly appointed Working Well Occupational Health and Wellbeing Services to deliver occupational health services for three years with effect from January 2012.

As part of the contract management arrangements it was agreed that quarterly reports would be provided to include, but not limited to:

- Number of employees seen, categorised by both health and reason for referral
- Number of pre-employment health questionnaires actioned
- Number of ill-health management referrals
- Workplace visits undertaken
- Meetings attended
- Telephone enquiries dealt with
- Number of fitness tests scheduled and completed
- Details of other activities, including review and development of policies, guidelines and instructions, research etc.
- Time spent on these activities

Contract review meetings also take place every quarter and the above statistics and reports form part of the agenda for these meetings. The following points are also discussed:

- Contract performance and improvements
- Quality of service
- Delivery programme
- Information and record keeping

## 4 Summary of Activity to Date

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

Quarterly contract management meetings have taken place on a regular basis. In January 2013, when the contract had been in place for one year, a review meeting was held to assess the quality of the provision and its viability. At this stage some areas were identified as a cause for concern and required standards were reiterated in detail.

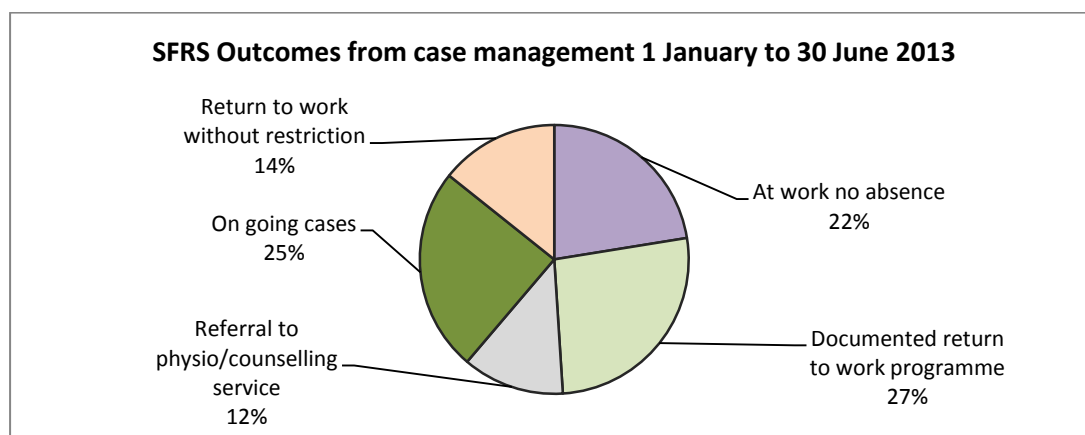
The main areas were administration and management of appointments, quality of medical reports and communication between the parties. It became apparent that many NHS systems, used by the provider, have been developed to meet their needs rather than those of an independent customer. Work has been ongoing in relation to these concerns and they have now largely been addressed.

## 5 Fitness Assessments

In the six-month period from 1 January 2013 to 30 June 2013, 208 appointments were made, 190 individuals were seen and 18 did not attend (referred to as DNAs). Of the 190 attendees, 185 (98%) were passed fit and 5 were referred for medical advice.

## 6 Case Management

The outcomes of the management of cases are shown below.



<b>Outcome from Case Management</b>	<b>Number of Outcomes</b>
At work, no absence	11
Documented return to work programme	13
Referral to counselling or physiotherapy service	6
Return to work without restriction	7
Remaining unfit for work/ongoing cases	12

13 employees returned to work on modified duties, prior to being fully fit for their full job role.

Of the 6 referred to counselling or physiotherapy, 4 employees received physiotherapy, or counselling support sooner than if they had been referred via their GP. Evidence shows that early access to such services increases the likelihood of recovery and return to work sooner.

The nurse participates in the Service's monthly attendance management meetings and the quarterly Health and Safety Committee meeting, which helps to ensure effective communication is maintained.

Regular contract monitoring ensures the Occupational Health provision is being delivered in line with the original contract document and any anomalies or concerns are addressed at an early stage.

## **7 Financial Implications**

There are no direct legal implications arising from this report.

## **8 Legal Comment**

There are no direct legal implications arising from this report.

## **9 Initial Impact assessment**

This report details historical information, which is brought before the Human Resources Committee purely for information. An Initial Impact Assessment is not, therefore, required.

## **10 Appendices**

There are no appendices attached to this report.

## **11 Background Papers**

There are no background papers associated with this report.