

Occupational Health

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Occupational Health

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The protection and promotion of the health of workers by preventing and controlling;

- Occupational diseases and accidents and by eliminating **occupational** factors and conditions hazardous to health and safety at work.
- The development and promotion of healthy and safe **work, work** environments and **work** organisations.

(based on WHO, 1994)

The scale of the problem

- **1.3 million** people who worked during the last year were suffering from an illness (long standing as well as new cases) they believed was caused or made worse by their current or past work. **555 000** of these were new cases.
- **28.5 million** days were lost overall (1.2 days per worker), **23.4 million due to work-related ill health** and 5.1 million due to workplace injury.

Occupational Health

- OH should be an integral part of the **Risk Management System**
- **OH should not** be an add on or a luxury
- Nor should it consist purely of Health Promotion (lifestyle issues)

Terms used by OH

- Health Surveillance
- Health Monitoring
- Fitness for Work
- Health Promotion

Health Surveillance?

- The starting point is the risk assessment which should have highlighted health hazards within the workplace, identified who is at risk and taken measures to control the risk.
- If residual risks remain, further steps are needed, one of which may be health surveillance.
- Health surveillance is about systematically watching out for early signs of work-related ill health in employees exposed to certain health risks.



Who provides OH

- **Doctors:** should hold the D.Occ.Med qualification as a minimum
- **Nurses:** should be registered as a specialist nurse practitioner in public health (Occupational Health)
- **Occupational Health Technicians:** should be trained in the specific elements of the service they deliver, and must be clinically supervised.

Health Surveillance

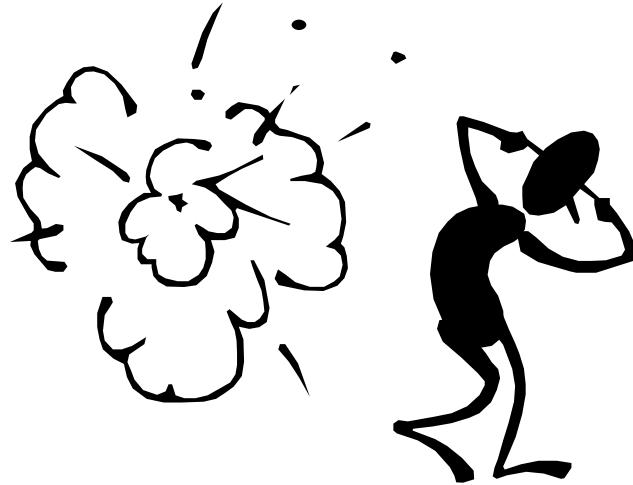
Some aspects of health surveillance also require additional competencies to be demonstrated e.g.



- HAVS: a Faculty of Occupational Medicine approved training course i HAVS or equivalent level of competency
- Noise induced hearing loss: a British Society for Audiology approved course for industrial audiometricians or equivalent level of competency.
- Respiratory: Association for Respiratory Technology and Physiology (ARTP) diploma or equivalent level of competency.

Main Hazards in Paper & Board

- Noise
- Dust
- Chemicals
- Moving & Handling
- Heat Stress



The Control of Noise at Work Regulations 2005

- There are two main action levels for continuous noise:
- **The lower exposure action value - 80 dB (daily or weekly personal noise exposure),**
 - provide information and training and make hearing protection available.
- **The upper exposure action value 85 dB (daily or weekly personal noise exposure),**
 - reduce noise exposure, such as engineering controls or other technical measures.
 - hearing protection **MUST** be used if the noise cannot be controlled by these measures, or while these measures are being planned or carried out.

Noise – Health Surveillance

- Competent person
- Risk assessment
- Pre-test examination – health questionnaire
- Audiometric testing
- Interpretation of results
- Health records

Health monitoring

- This is not health surveillance.
- Still may need to be undertaken
- For example –
musculoskeletal disorders

Health Monitoring for Musculo-Skeletal Disorders



- A musculo-skeletal **questionnaire** can be completed annually and returned to the occupational health provider.

- A **responsible person** can be trained so that employees can report any musculoskeletal symptoms.

- Any employees identified with or **reporting problems** must then be referred to an **Occupational Health practitioner**.

- It is recommended that a **statement of fitness** advised on **restrictions**



Fitness for work



- This again not health surveillance
- However important to assess the health of employees where the effects of work on health and health on work can have an adverse impact.

Heat Stress



- “Fitness for work in hot environment”
- Not health surveillance but still essential!

Results

- Ensure that OHP interprets results
- Employee is given results
- Employer should be given results
- Employer should keep individual health records
- **Use** the health records to inform the risk management system.

How can OH be cost effective?

- Risk Assess to identify the hazards
- Target the health surveillance to those at risk
- Use competent OH provider
- Analyse the results & act on them
- Review

Any Questions?

