

Occupational Health Update

a current awareness bulletin for primary health care

22

March 2005

Research finds significant improvements in occupational health arrangements at work following advice in primary health care.

A two-year follow-up study looked at the changes made by patients or made in their workplace after receiving occupational health advice. Two existing service providers in primary health care (in Sheffield and Newham) took part in the study which was funded by the Health and Safety Executive.

Patients were provided with information on health hazards and solutions to problems at work. Advisers wrote letters on their behalf to employers, carried out health surveillance, and advised on the financial consequences of options the patient had.

The research found significant differences between the early and delayed (control) intervention groups at follow-up. Patients reported twice as many changes to the organisation of health and safety, and more measures taken to assist with return to work. There were significantly more changes in how work was carried out. Patients who said that workload had increased said that there were more staff to help carry it out.

The research was carried out by Dr Craig Jackson at the University of Central England at HealthWorks in Newham in London, and Sheffield Occupational Health Advisory Service.

Patients in the HSE study were recruited from amongst those attending surgeries. They were asked to fill in a questionnaire and to state whether they wanted advice on occupational health and safety issues. Patients who asked for urgent advice were given it. Other patients were randomised into two groups, one receiving advice straight away and the other receiving advice in six months later. Changes at work over the first six months were assessed in both delayed and immediate advice groups.

Patients included in the study had a mean age of 40. Most worked in the service sector and in clerical jobs. 38% were male; 83% were white. As might be expected more participants were off-sick and in full-time employment, and more were in hazardous employment, than non-participants.

Health problems caused by work included back pain, headache, fatigue, sleeping problems, anxiety, and respiratory problems. The causes at work included heavy workload and long hours, feeling undervalued, pressure to do more, monotonous work, temperature and air-conditioning problems, dust and fumes, etc.

Patients' satisfaction with the service was high:

- 93% rated advice useful or very useful

- 88% understood all of the information given
- 85% interview helped with main problem(s)
- 66% shared the advice given
- 45% of patients felt that their work-related symptoms had reduced as a result of the advice received
- 23% said that they were very much improved.
- 96% said they would recommend the service to others.

The number of symptoms and hazards reported did drop over the course of the research but for methodological reasons this finding is open to more than one interpretation.

The research demonstrated that providing occupational health advice in a primary care setting is effective. It received confirmation recently with the publication of an independent evaluation of the Leeds Occupational Health Advisory Service. This found that:

- 48% of patients referred to the service said that support provided had helped them to reduce visits to their GP (28% greatly helped).
- 75% said that deterioration in their health had been prevented a little (44%) or a great deal (31%).

This bulletin is produced by Sheffield Occupational Health Advisory Service. We aim to provide advice tailored to the needs of clinical workers in primary care in the Sheffield area. In addition we will feature in each issue the work of a local specialist or group with a particular area of interest in occupational health.

For more information on any item, contact SOHAS at the address below or visit our website at www.sohas.co.uk and <http://whig.org.uk>

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GPs want occupational health professionals to refer patients to

In a separate report, researchers from the Health and Safety Laboratories and Sheffield School of Health and Related Research (ScHARR), carried out a national survey as well as interviewing primary health care staff in Sheffield and Manchester about the profile of occupational health in primary care.

They were critical of the lack of attention paid by employers to the health of their patients, and said that routes of communication between employers and GPs were poor.

GPs, nurses and practice managers identified as problems:

- The lack of professional training and knowledge in occupational health
- A lack of access to appropriate routes for referral of patients.

Primary care staff called for

- Improvements in the system for recording and evaluating the role of patients' employment.
- Improved access to information and to specialist advisory services like the Sheffield Occupational Health Advisory Service, the Health and Safety Executive's medical inspectors, and the DWP Disability Employment Advisers.

- Resources to support continuing professional development in partnership with the NHS, DWP and other government departments (e.g. through PLI events).
- On-line resources on occupational health for primary health care staff.
- HSE support for national initiatives to achieve these changes.

GPs and nurses took a focused approach to exploring patients' occupation when relevant, but felt that they would record more information if there were better methods of doing so. The demands of other areas of work were cited as the main restriction on giving occupational health a higher priority.

Jackson, CA. The evaluation of occupational health advice in primary health care. HSE Research Report 242. HSE: London, 2004
<http://www.hse.gov.uk/research/rrhtm/rr242.htm>

O'Hara R et al. The profile of patients' occupational health in primary care. HSE Research Report 254. HSE: London, 2004
<http://www.hse.gov.uk/research/rrhtm/rr254.htm>

Tilford S, Harper S. OH in primary care – the Leeds service. Occupational Health Review 109:25-28. May/June 2004

Government guidance on managing sickness absence

For recently updated materials on certification from the Department for Work and Pensions go to:

<http://www.dwp.gov.uk/medical/deskaid.asp>

<http://www.dwp.gov.uk/medical/med-training.asp>

<http://www.dwp.gov.uk/medical/intro-v1b.asp>

Health and Safety Executive advice on managing sickness absence is available on:

<http://www.hse.gov.uk/sicknessabsence/index.htm>

- The importance of GPs' role in offering advice on return to work is emphasised in a paper by Dr Philip Sawney, Corporate Medical Adviser at the Department for Work and Pensions.

Sawney P. Current issues in fitness for work certification. *Brit J Gen Practice* 2002; 52(476):217-222.

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