



**CITY UNIVERSITY
LONDON**

**FACULTY OF OCCUPATIONAL MEDICINE:
STANDARDS FOR
OCCUPATIONAL HEALTH SERVICES
IN THE UK**

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Accreditation Process

- Only for core clinical services – i.e. nurses and doctors not hygienists etc
- Voluntary
- Expected to begin 2011, standards to be published in Jan 2010
- There is a charge !
- Completion of pre-qualification questionnaire
- Web-based assessment
- Customer satisfaction questionnaires
- On-site survey by trained auditors
- Certification – accreditation lasts ? years
- FOM public register of accredited services – was in draft only



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DOMAINS THAT WILL BE ASSESSED

- Business Probity
- Information Governance
- People
- Facilities and Equipment
- Relationships with Purchasers
- Relations with Workers





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BUSINESS PROBITY

- **Conduct of business with integrity** – information about services, recruitment practices to ensure honesty of staff, check qualifications, follow research ethics
- **Financial propriety** – audit, asset controls and clear fee structure





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INFORMATION GOVERNANCE

- **Maintain adequate clinical records** – safe storage of files, back up of computer data, procedure for transfer of files if contractor changes.
- clinical audit of records to ensure legibility etc
- **Systems to maintain confidentiality** – policy of record retention , signed confidentiality agreement, password protection and encryption of sensitive data



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PEOPLE

- **Competence of Staff –**
professional registration & indemnity, CPD, appraisal,
- **Supervision –**
access to specialist practitioner , clinical supervision, identification of poor performance, clinical governance and audit of compliance with protocols
- **Appropriate numbers and skill mix –**
needs assessment, access to risk assessments, team working and 360 degree feedback





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FACILITIES AND EQUIPMENT

- **Premises :safe, accessible, appropriate –**
H&S, DDA, Hand hygiene, privacy
- **Medical equipment: safe and appropriate –**
calibration, vaccine fridges lockable, PA testing
- **Supply of medicines –** follow guidelines, competent, anaphylaxis drugs and training, audit trail of medicines and disposal. Vaccine handling



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RELATIONSHIP WITH PURCHASER

- **Fairness –**
contracts and SLAs, risk assessment of OHS inc. business continuity
- **Customer Focus –**
SLA s, communicate with customer, customer satisfaction, track KPIs





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RELATIONSHIP WITH WORKERS

- **Treat workers fairly and with respect**

Information about processing of and access to, clinical data , informed consent, equality and diversity

Customer feedback, consultation with workers





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**How does this compare with
what we agreed in April
at our last meeting ?**





Service Delivery Objective	Measurables	Data collection	Process
To see referrals and respond to them in a timely fashion <ul style="list-style-type: none"> •sickness absence •work related ill health •stress •musculoskeletal 	<ul style="list-style-type: none"> •percentage of appointments offered within agreed time •percentage of reports issued within agreed time •DNA rate 	<ul style="list-style-type: none"> •Date referral received, •date of appointment, •date report issued recorded on database 	<ul style="list-style-type: none"> •Bespoke database •Data entry managed by admin
<ul style="list-style-type: none"> •Carry out all statutory health surveillance at required intervals •Issue 'Fit to work' slips for those who need them 	<ul style="list-style-type: none"> •Percentage of statutory healthy surveillance carried out within a year •Percentage of employees past fit, unfit and not seen 	<ul style="list-style-type: none"> •Database of required health surveillance maintained with date of next appointment •Date at which seen and fit slip issued recorded on database 	<ul style="list-style-type: none"> •Bespoke database •Data entry managed by admin
<ul style="list-style-type: none"> •Carry out all required pre-employment and pre-placement screening in a timely fashion •pre-employment student assessments on course where this is required (e.g. PGCE) •Research passports and other honories 	<ul style="list-style-type: none"> •Number of fitness reports issued within the agreed time 	<ul style="list-style-type: none"> •Date of request for assessment and date of assessment recorded on a database 	<ul style="list-style-type: none"> • set service levels with employer



Service Delivery Objective	Measurables	Data collection	Process
Ensure that all persons requiring immunisation are immunised	<ul style="list-style-type: none">• Percentage immunised within agreed time scale• Percentage of staff who require immunisation receiving it	Auditing of departments where immunisation is commonly required	Follow Green book and DH guidelines
Service delivered on budget	Process <ul style="list-style-type: none">•Managing invoicing•Payments•Income generation	Audit	Agree budget Budget forecast reviewed quarterly





Professional Standards Objective	Measurables	Data collection	Process
Competence & appropriate qualification			
Accredited Physician	GMC registration FOM CPD scheme Annual Appraisal	Records/certificates	Annual appraisal
OHA	PREP RCN reg OH dip/ BSc	Records/certificates	Annual appraisal
Confidentiality- Staff -Students	Incidents Complaints	Random audit	Policy Audit
Record keeping	% records complying with policy	Audit	Policy
Professional behaviour • Patients • Admin and fellow colleagues	Complaints Grievances Disciplinaries	• Customer feedback • 360 degree feedback	Staff required to adhere to RCN and GMC code of conduct.



Clinical Governance Objective	Measurables	Data collection	Process
Appropriate qualification: Registered nurse, OHA, accredited specialist OHP	Current registration	Evidence e.g. certification	Annual registration check. Record % of staff with appropriate qualification
Practice complies with current legislation and DH, HSE, FOM guidance and ethical standards etc.	Clinical audit Audit medical records /database	Record keeping	Review policies and procedures against evidence based practice and guidelines etc
Clinical activity relevant to organisation e.g. health surveillance	Needs analysis: activity : % OH service delivered to requirement	Audit records	Needs and Risk analysis for the organisation





Clinical Governance Objective	Measurables	Data collection	Process
Risk control: Clinical equipment	Calibrated and serviced as recommended	% equipment calibrated % staff competent in use of equipment	Policy and protocols for care of equipment
Quality	Complaints procedure in place and adhered to	Number of complaints	<ul style="list-style-type: none">•Written procedures•Critical incident process
Continuous improvement	Clinical activity	<ul style="list-style-type: none">•Clinical audit•% meeting CPD requirements	<ul style="list-style-type: none">•Protocols /guidelines/algorithms available to all staff•Annual appraisals