

**SUBJECT: OCCUPATIONAL HEALTH SERVICE IMPROVEMENT PROJECT UPDATE
REPORT**

**JOINT REPORT OF THE CHIEF FIRE OFFICER AND THE PERSONNEL ADVISOR TO
THE AUTHORITY**

1 PURPOSE OF REPORT

- 1.1 The purpose of this report is to brief members on the progress made in relation to the improvement project for Occupational Health provision within the Service.

2 BACKGROUND

- 2.1 The Service has a good track record of occupational health provision for its workforce, and this has been widely recognised and externally accredited. For example by achievement of the Better Health at Work Award Continuing Excellence level. This award follows progression through the Bronze, Silver and Gold awards levels over recent years. Although these awards recognise a good standard of OH practice it does not take into account the changing nature and context of the TWFRS workforce and the work they undertake consequently requiring occupational health support with changing and increasing demands over the next 5 – 10 years.

2.2 The Service

Current Occupational Model

The current OH service is delivered through a combination of directly employed OH professionals, a service level agreement with Sunderland City Council and third party contracts as follows;

Directly Employed Resources

The Service employs a number of OH professionals directly, including the Occupational Health Manager, an OH Advisor, an OH Technician and an OH Assistant.

SLA – Sunderland City Council

An historic service level agreement has been in place for many years with Sunderland City Council who provide the services of an OH Physician one day (7 hours) every two weeks. The Physician performs the role of Service Medical Adviser in relation to advising on any cases of employees' ill health, medical assessment of potential new recruits etc. SCC also broker the services of an Independent Qualified Medical Practitioner in cases where an IQMP is needed for potential ill health retirements etc.

Third Party Contracts

The provision of physiotherapy, optometry and associated accessories and counselling services are provided through external third party contracts. Appointment of such contracts are administered through the Service's procurement team.

Functions Performed

The main workload for the OH service focuses on;

- Supporting TWFRS with sickness absence management (including referring individuals to specialist resources such as physiotherapy or counselling)
- OH Physician oversees referrals which are more medically complex or contentious in nature.
- Medical assessment of all prospective employees for suitability for employment.
- More detailed assessment at entry for all operational and control room employees.
- Health surveillance medicals for operational employees, compartment fire training employees, control room employees and workshop employees.
- Provision of wellbeing screenings for all employees plus referrals to the Health & Fitness Advisor.
- Regular health promotion events.

3 CONTEXT AND OBJECTIVES OF THE REVIEW

- 3.1 The Service has a long track record of visible commitment to employee health and wellbeing which has been driven through the consistency of services provided by occupational health which goes beyond any of the mandatory requirements.
- 3.2 However experience and the recent pandemic identified there is room for improvement in the service's approach to the holistic management of wellbeing and impact and cohesion of OH services.
- 3.3 It is vital the service acknowledges the new and evolving health and wellbeing issues facing our workforce of the near future. This includes:
 - Longer working lives for Firefighters, as a consequence of pension scheme changes and later retirement, and the resulting need for Firefighters to retain

operational levels of fitness into their fifties and sixties, such as age-related musculo-skeletal problems;

- Female-specific health and fitness issues will be more prevalent as the proportion of female Firefighters increases, such as menopause, endometriosis, etc;
- The findings from ongoing research into the prevalence of different cancers amongst Firefighters;

3.4 The positive influence on workforce wellbeing created by having effective people and the correct physical and information resources available has never been more important.

4 REVIEW PROCESS

4.1 A similar service improvement methodology has been adopted to that being successfully used in the current HR service review.

4.2 The proposed methodology includes a number of consultation sessions between OH, HR and a cross section of SLT/ELT members and service managers to understand the customer experience and obtain feedback on improvement areas.

4.3 An improvement roadmap was developed to identify and prioritise the work streams to improve OH service delivery. Key areas of focus include;

- Customer Perception
- Capability
- Department Structure
- Systems
- Strategic Alignment

5 PROGRESS TO DATE

5.1 Meetings have taken place with members of Sunderland City Council's OH function, including a visit to the Thorney Close facility, to discuss and understand their operating model and systems to identify improvements that can be adopted here at TWFRS.

5.2 As a result of the meeting with SCC OH an invitation has been given to receive a demonstration of SCC's newly developed OH data management system. Currently the TWFRS system is mostly paper based and presents not only a risk for business continuity purposes but is not an efficient method of recording and retrieving workforce information.

5.3 Previously there had been issues when the counselling service were contacting employees to make appointments. To maintain confidentiality counsellors are unable to leave details on individual's telephones and relied on the employee returning the call. However counselling call would be originated from a withheld number so the employee did not have the details to return the call. Agreement has now been reached with the counselling service they will email employees in advance

of their call so that they can expect incoming contact from a withheld number. This will hopefully reduce the time taken for employees to receive their first counselling session and receive the appropriate support they require.

- 5.4 Following consultation with HR it was agreed that monthly meetings with the SMA would improve the information available for absence cases considered to be complex and long term. These meetings have been taking place now for the last two months and there has been a distinct improvement in the flow of information between OH and HR which has subsequently improved information available for decisions to be based upon.
- 5.5 HR have engaged with OH and the SMA to identify improvements to the OH report which is produced following a referral. It was agreed that information provided within the report will be enhanced to improve information which managers receive to make decisions upon. It was also agreed that the SMA would provide examples of report templates used by other OH services in order that any good practice identified can be incorporated into the TWFRS report.
- 5.6 Improvements to confirming individual OH appointments has been identified in order to automate the process and reduce workload volume. Work is being progressed to replace the current hard copy letters sent inviting employees to an appointment with a text messaging service.
- 5.7 It was identified that some individuals were not attending OH appointments (or responding to OH contact to schedule appointments). A new process has been implemented whereby escalations will be made directly to the employee's line managers immediately upon non-attendance or if the individual fails to make contact OH attempt to schedule review meetings.
- 5.8 Initiatives continue to be developed between the OH Service and the Health and Fitness Advisor in order to provide a collaborative and holistic support to employees who require both medical and fitness related advice.

6 LINKS TO OTHER WORK

- 6.1 A review of OH services has a far further reaching impact besides workforce wellbeing. By having the correct structure, skills, assets, management information and third party services there is a real opportunity to;
 - Positively impact organisational culture as employees will feel valued and supported when the right interventions are implemented at the time needed the most.
 - Support Finance in achieving its objectives by identifying areas of cost reduction through improved attendance and increased productivity.
 - Support Health & Safety in achieving its objectives through increased education on topics of risks and subsequent fewer accidents and claims.
 - Support HR in its objective of reducing employee absence. Attrition rates should reduce this retaining employees with the right skills and experience.
 - Reputation will be enhanced amongst our communities and other external partner agencies and stakeholders.

7 RISK MANAGEMENT

- 7.1 There are no direct risk implications arising from the content of this report. However, supporting the direction of travel in relation to Mental Health can help to mitigate risk for example in relation to employee turnover, improve employee wellbeing and reducing the risks of unplanned absence.

8 FINANCIAL IMPLICATIONS

- 8.1 There are no direct financial implications as a result of this report. Any costs associated with investments in resources will be considered at the appropriate time and using the appropriate Authority procedures.

9 EQUALITY AND FAIRNESS IMPLICATIONS

- 9.1 Equality Impact Assessments will be carried out as the various work and projects required to support our direction of travel commence.

10 HEALTH AND SAFETY IMPLICATIONS

- 10.1 There are no health and safety implications in respect of this report.

11 RECOMMENDATIONS

- 11.1 Members are recommended to:
- a) Note the content within the report
 - b) Receive further reports / updates as appropriate.

