

# AUTUMN MAGAZINE ■ 2021



## Workplace support from Occupational Health for Plan B

SOM supports the new public health measures to reduce the spread of the Omicron COVID-19 variant. It is highly likely that there will be an increase in close contacts and cases in workers. This could have a significant effect on attendance and absence and is a potential threat to business continuity.

There is a mental health consequence of the move to Plan B and employers need to mitigate these risks e.g. managers should stay connected with employees to say how this change affects them. Occupational health professionals can advise on workplace health issues that may arise - such as mental health implications for employees. SOM has produced resources to help such as [Mental Health Support for Small Business Owners and Team Leaders](#) and [Home Working and Display Screen Equipment during COVID-19](#).

It is therefore important employers with occupational health review the controls in workplaces to minimise impact. The review should include:

- Ensure everyone follows rules on social distancing and mask wearing
- Explore the possibility of implementing workplace testing programmes
- Look at options to improve air quality and ventilation in the workplace
- Encourage vaccination and boosters
- Follow government guidance to work from home
- Carry out risk assessments for vulnerable workers
- For health surveillance, this should be subject to risk assessment, but SOM is seeking clarification from the Health and Safety Executive.

Reduction of transmission should take into account the “Swiss cheese model”. No one layer is perfect; each has holes, but several layers combined – social distancing, masks, handwashing, testing and tracing, ventilation, and vaccination – all add one more protective layer.

Professor Neil Greenberg, Trustee of SOM said:

*"It is evident that the understandable focus on whether Omicron is more deadly or not appears to have missed the potential mental health impacts of moving to Plan B. Whilst the new measures are not in themselves overly restrictive, many people are likely to fear the uncertainty of the future now more than ever. There have now been multiple new measures introduced in a quick succession and the message this gives is that it is more likely than not that even more restrictive measures will be introduced in the very near future. Members of the public who have put their psychological wellbeing eggs in the 'I have to have a good Christmas with my family this year' basket are likely to view the Prime Minister's announcements as another nail in the coffin of their mental health. Those working in frontline services, including health and social care, can only infer that they are about to go from the frying pan into the fire. In my view, there should have been much more active discussion of the mental health impacts of the new variant. Furthermore, the Plan B announcement should have included active measures that the government will be putting in place to ensure that the public's mental health, as well as physical health, needs are being considered in the planning process."*

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# Work, Health, Wellbeing & Sustainability: Time to Act on Climate and Health

by Dr Fiona Adshead

With the world's leaders having descended on Glasgow for COP26 in early November, there has never been a more important time to talk about climate and health.

Financial markets will be legally required to consider the carbon risk of capital, so that investor scrutiny of companies is now focusing on ESG factors (Environment, Social, and Governance). Governments and public procurement frameworks increasingly place social value and environmental impact at their core; businesses are rediscovering the value of "purpose".

It is here that we find common cause with health. The pandemic has shown how important health is for society and economy, and that a culture of health needs to be central. We are discovering that action on the environment and climate change improves health - from promoting mental health by connecting with nature to linking the benefits of renewable energy with improved air quality. At the same time the role of business and investors in improving health is gaining greater recognition.

In response to this, SOM convened a roundtable to consider how workplaces can act on sustainability and health by:

- Preparing for the impact of climate change - becoming more resilient to heat stress, fires and floods;
- Linking actions to promote health, and prevent chronic disease with shared benefits for the planet;

- Strengthening health and wellbeing metrics in emerging ESG reporting, so that their own importance is recognised, and value of linking it to action on climate change and not being overshadowed by it.

***"The pandemic has shown how important health is for society and economy"***

The roundtable posed two questions. The first was what would good sustainable work look like both for organisations and individuals? The second was how do we design health and climate into everyday decisions, accelerate action, recognising wellbeing as a leadership challenge?

All of this will be captured in a report. We are looking for examples of how organisations are building resilience to climate change and improving health whilst simultaneously improving the environment. We would love to include these experiences in a case study within the report.

If you would like to share your experience, please get in contact with Dr Fiona Adshead: [Fiona.adshead@btinternet.com](mailto:Fiona.adshead@btinternet.com)



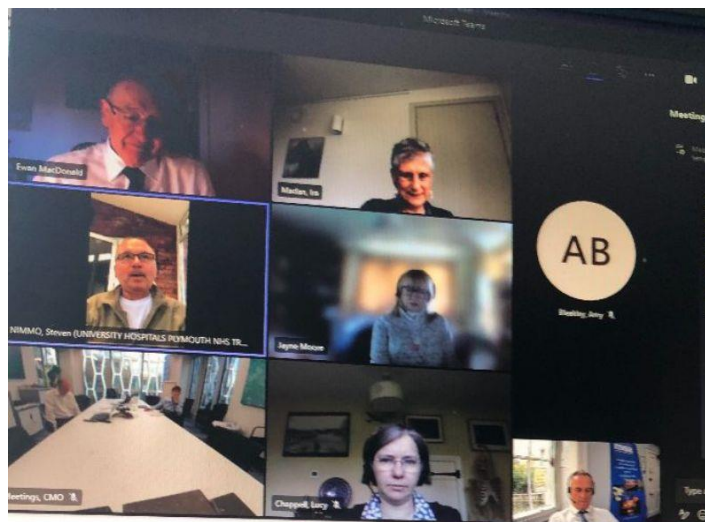


## SOM/FOM meeting with Professor Chris Whitty

In October the SOM and FOM Presidents met with the Chief Medical Officer (CMO) Professor Chris Whitty. The following were discussed:

- Support for the “Growing OH programme” - which aims to promote recovery of NHS staff and support the NHS Plan on staff wellbeing.
- Having a follow up to a previous meeting with Dr Lucy Chappell, Chief Scientific Advisor, discussing work and health as research. Prioritise looking at funding the call for the Department of Work and Pensions (DWP)/the Department of Health and Social care (DHSC) with UK Research and Innovation Centre for work and health stated in the DWP/DHSC “[Health is everyone’s business](#)” response.
- The need for support for capacity growth in Occupational Health and Medicine trainees - with the lack of multidisciplinary OH staff.

Following the discussions that took place, additional meetings have been planned in the new year with other CMOs, in Wales, Scotland, and Northern Ireland. To keep updated, follow us on [Facebook](#), [LinkedIn](#), and [Twitter](#).



Since the meeting with Professor Whitty, a letter that the President of SOM Dr Jayne Moore wrote to NHS CEO Amanda Pritchard was met with a favorable response where Amanda expressed full support of the strategic vision for the “Growing OH programme”. SOM members can log in and [click here](#) to view the full letter.

## Q&A with Dr Abeyna Bubbers-Jones

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### ➔ How did you get into occupational health?

I know many OHPs say they 'fell into it' accidentally, however my journey to OH was purposeful in the sense that at a time where I was considering other options I did a lot of research, shadowing and networking to determine whether it would be right for me. I wasn't entirely convinced to be honest however I took the plunge anyway and I never looked back!

### ➔ Occupational health hero?

I have several but they include: Occupational Physiotherapist and Entrepreneur Clare Henson-Bowen - having pioneered an OH Physio service at King's College Hospital she went on to develop a hugely successful company, Bespoke Physiotherapy, and now supports therapists in developing their own businesses; Nick Pahl - as a non-clinician he's an invaluable asset to OH and has really helped to put the spotlight on the profession; and Dr Clare Fernandes - hugely talented OHP - currently CMO of BBC. Definitely an OH leader to watch!

### ➔ Best occupational health book?

Monitoring for Health Hazards at Work - a good read to enable you to really understand Occupational Hygiene.



### ➔ Dream dinner party guests (4 allowed)?

My husband - to hold the space (he's a professional mediator), Serena Williams - to learn about her drive in tennis and business, Anne Boleyn - to understand the how-not-to in politics, and Ossie Brown - my dearly departed uncle who was simply one of the best.

### Tell us a joke ...

The joke below from  
@BritishHumour

#### Very British workplace translation guide

*What everything said in the office really means:*

- 1 "Could do." Nope.
- 2 "I'll have a look in a sec." Please go away.
- 3 "I'll sort it out tomorrow." I'll forget about it forever.
- 4 "We've had a few teething problems." It's been a bloody nightmare.
- 5 "Let's agree to disagree." You're wrong but I'm so tired.
- 6 "What have you got on at the minute?" Prepare for your workload to triple.
- 7 "I'll see what I can do." You're on your own.
- 8 "It's the next thing on my list." I don't even have a list.
- 9 "Sorry, could you just clarify something?" What the hell are you drivelling on about?
- 10 "I have had better days." These have been, without exception, the worst 24 hours of my life.

## Occupational Health Technician Survey Results

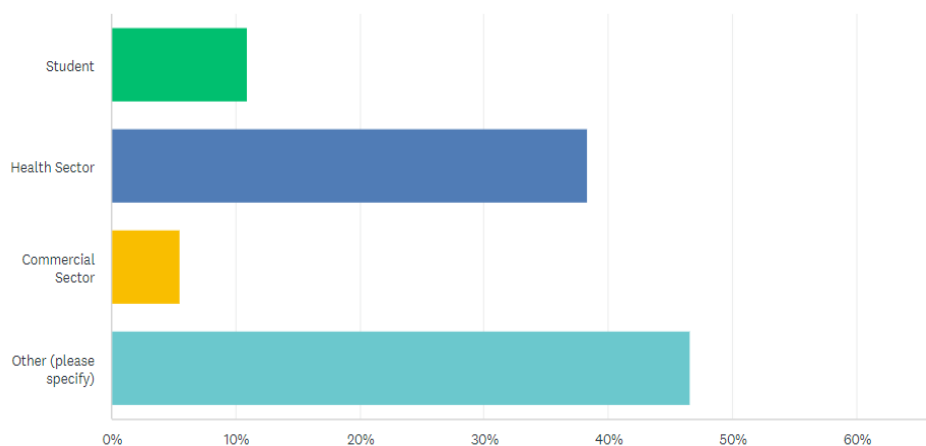
At the end of September 2021, SOM conducted a survey that was shared through our social media channels. The survey asked Occupational Health Technicians questions that related to their salary.

Questions included: 'What was your previous role before being an OH Technician?', 'In the past year, have you seen a pay increase?' and 'What is your full-time equivalent salary?'

Here are some of the findings:

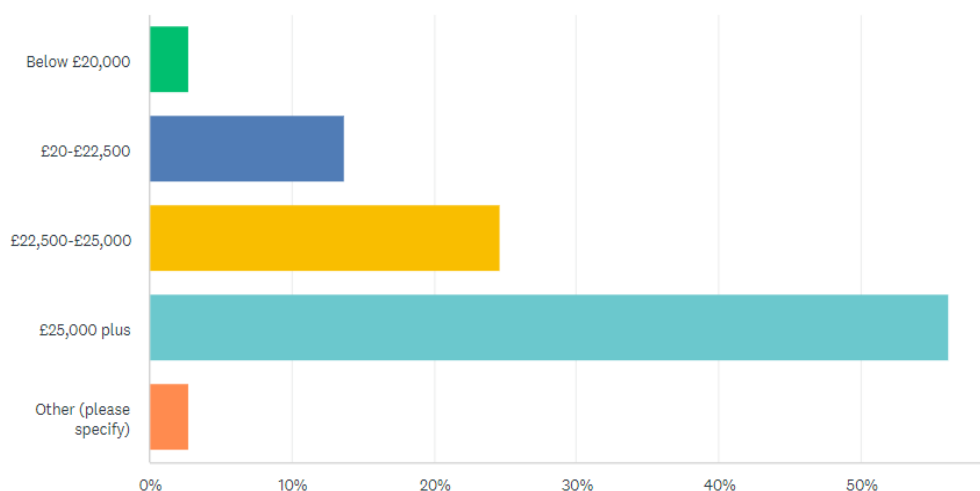
**What was your previous role before being an OH Technician (please state below)?**

Answered: 73 Skipped: 1



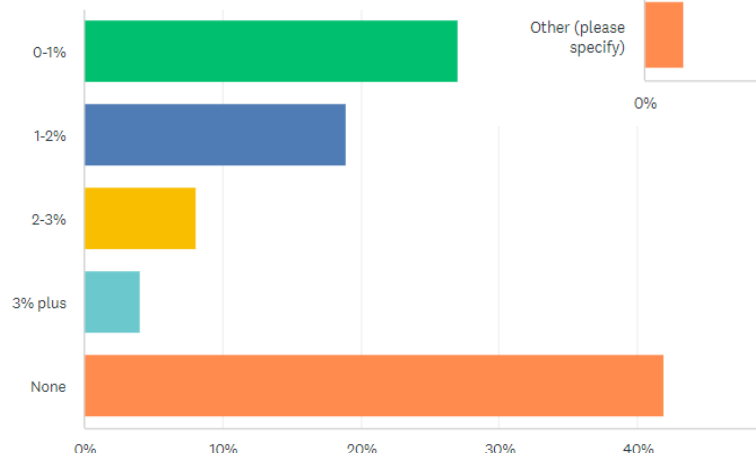
**What is your full time equivalent salary?**

Answered: 73 Skipped: 1



**In the past year, have you seen a pay increase?**

Answered: 74 Skipped: 0



If you would like to view more of the results from the survey, please click [here](#).

## Upcoming SOM events

For more details, visit our [events page](#)

Date and Time	Title
12 <sup>th</sup> January 2022 - 12pm - 1pm <a href="#">Register here</a>	SOM Leadership webinar: Supporting applications to the growing OH leadership opportunities - Dr Steve Boorman and Dr Shriti Pattani
18 <sup>th</sup> January 2022 - 9am - 10am <i>Registration not yet available</i>	C3/SOM breakfast webinar on menopause and work - Emma Persand
27 <sup>th</sup> January 2022 - 12pm - 1pm <i>Registration not yet available</i>	SOM Webinar: Aviation Medicine - Helen Parsons and Dr Rae Chang
8 <sup>th</sup> February 2022 - 12pm - 1pm <a href="#">Register here</a>	SOM Webinar: Mental health in politics - Dr Ashley Weinberg
9 <sup>th</sup> February 2022 - 12pm - 1pm <i>Registration not yet available</i>	SOM Webinar: Whole body vibration - Dr Roger Cooke
15 <sup>th</sup> February 2022 - 1pm - 2.30pm <i>Registration not yet available</i>	Global webinar tbc
22 <sup>nd</sup> February 2022 - 12pm - 1pm <i>Registration not yet available</i>	SOM Webinar: Running an effective OH consultation - Marie Church
23 <sup>rd</sup> February 2022 - 9am - 10.30am <i>Registration not yet available</i>	Australia/UK webinar with ANZSOM/BOHS/SOM: Ventilation
3 <sup>rd</sup> March 2022 - 12pm - 1pm <i>Registration not yet available</i>	SOM Webinar: Fit note - Dr Lara Shemtob



# Supporting staff with Long COVID in the workplace

By Dr Yvette Martyn, Occupational Health Physician at Medigold Health

**28.09.21** - 18 months on from the World Health Organization declaring a pandemic, the vaccination programme is in full swing. The emphasis has shifted from a need to protect workers from contracting COVID-19 to supporting employees with the potential aftereffects of the infection.

869,000 people in the UK are still experiencing symptoms 12 weeks after a COVID-19 infection with 376,000 reporting symptoms for longer than 12 months, according to the Office for National Statistics. Long COVID is defined as signs and symptoms that develop during or following an infection consistent with COVID-19 that last longer than four weeks and which are not explained by an alternative diagnosis, according to the National Institute for Health and Care Excellence (NICE). There is no need for a positive test for COVID-19 to meet the diagnostic criteria.

NICE published guidance on Long COVID in December 2020, and in November 2021 [updated the guidance](#). The symptoms of Long COVID are not confined to the respiratory tract but fall across most body systems from abdominal pain to tinnitus and depression to skin rashes.

*“869,000 people in the UK are still experiencing symptoms 12 weeks after a COVID-19 infection”*

I recently asked a group of Occupational Health Physicians what Long COVID symptoms they had encountered in workers they had assessed and while symptoms such as fatigue, shortness of breath, brain fog and muscle aches were most frequently reported, less recognised symptoms such as anxiety, reduced motivation and neurological symptoms were also described.

Recent research has tried to establish the course of this disease. The evidence suggests that individuals may be prone to experiencing relapses; these may be triggered by physical or mental activity, stress, menstruation, heat, or alcohol. But in some cases, relapses can occur with no specific trigger. Some individuals have described feeling well after their initial infection, only to then experience a recurrence of symptoms, sometimes with new symptoms that they have not experienced before.

What is clear from the evidence base is that those with Long COVID often describe a significant functional impairment, they may have issues undertaking their activities of daily living, caring

for dependants and feel unable to return to work. Those who feel able to return to their job may only feel able to do so at a reduced capacity.

Individuals with Long COVID may be experiencing ongoing symptoms, and in addition are faced with uncertainty about their future; given that it's a new illness, the prognosis is not entirely clear. Recent research shows a high proportion of individuals continue to experience symptoms six months after an initial infection with COVID-19 indicating that recovery is likely to be slow.

## Supporting an individual with Long COVID at work

With ongoing symptoms and an uncertain prognosis there is a dilemma for both employees and employers – when is the right time for a return to work and what level of workload is appropriate? Unfortunately, there is not a one size fits all approach. It is therefore recommended that workers with Long COVID are referred for an individualised assessment with occupational health, so that appropriate advice can be provided.

Occupational health professionals are experienced in assessing new conditions as well as diseases that are poorly understood. The emphasis is on assessing an employee's

functional ability alongside the demands posed by their workplace.

A phased return is likely to be beneficial, this means that hours or workload are gradually increased over time. While workplaces may have a restriction on how long they can accommodate in relation to a phased return, this may need to be reconsidered. If a phased return is timed inappropriately or planned incorrectly, then there is a risk that an employee could experience a relapse, so a longer phased return than the typical four to six weeks might be needed.

Other factors to consider are:

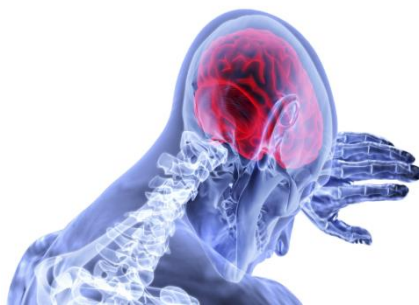
What tasks does an employee undertake, does this need to be adapted?

Is specific equipment needed for a worker to undertake their role?

What hours will the employee work and how should breaks be allocated?

Employers should consider what support can be provided by the individual's manager, since checking in regularly and adapting adjustments to changing circumstances is likely to be beneficial. Employees may also benefit from colleague support such as having an allocated buddy in the workplace.

While there is a lot of uncertainty



around this condition, common symptoms seem to resolve in most people over time, albeit often slowly and over a period of several months. Returning to work can be an important aspect of an individual's rehabilitation. If an employer can work with an employee in identifying and accommodating adjustments that allow a return to work, then this is likely to be beneficial to both the workplace and the individual.

**SOM Long COVID resources:**  
**SOM Podcast: Long COVID and work**

**COVID-19 return to work guide: For recovering workers**

**COVID-19 return to work guide: For managers**

**Perspectives on Long COVID and work - Online summit recording**

*In addition to the above resources, SOM worked with Public Health England on a series of COVID-19 Work, worklessness and wellbeing webinars (recordings and presentation slides are [here](#)). The factsheets are available to support employers, local authorities and regional governments, and health and social care workers to*

*maintain and improve good health and work outcomes in their communities during the pandemic and its aftermath. View the factsheets below:*

1. [Supporting businesses to build back better: The benefits of age diversity](#)
2. [Supporting your approach to workplace diversity and inclusion](#)
3. [Creating better quality work and workplaces](#)
4. [Managing stress, burnout and fatigue in health and social care](#)
5. [Supporting workplace mental health and wellbeing in COVID-19 and beyond](#)
6. [Developing a COVID-19 secure mental health and wellbeing strategy](#)
7. [Managing change – restructuring, redundancy, and homeworking](#)



## The SOM Podcast

In this [podcast series](#) we explore a range of topics relating to work and health. We speak to occupational health professionals, professors, patient advocates and other experts on a wide range of topics from Long COVID to Return to Work.

### **Episode Three: Avoiding snake oil in workplace health - what is the evidence base?**

In this episode, we discuss evidence based approaches to return to work following the COVID-19 pandemic. The pandemic has intensified the transformational shift from largely workplace based employment to a hybrid model. Although working from home will remain for many, others will be returning to their employer's premises while flexible working will be more common than it was pre-COVID. How can businesses manage this and what have occupational health and wellbeing professionals learned from the last couple of years? Guests Dr Nancy Doyle, Dr Gail Kinman and Dr Kevin Teoh join our host Steve Randall to consider the evidence.

### **Episode Four: Diversity and Inclusion as an Occupational Health Issue**

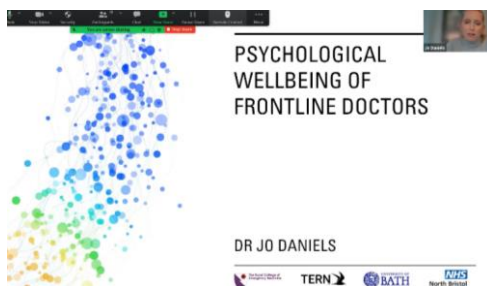
The COVID-19 pandemic exposed existing inequalities within society, with disproportionate outcomes relating to socio-economic status, ethnicity, gender, age, geographic location, and ability. In this episode, Dr Sheetal Chavda, chair of SOM's Diversity and Inclusion Task Force, and vice chair Emma Persand are joined by Dr Sade Adenekan, Task Force member, Mental Health Champion and UK specialist in Occupational Medicine and Public Health, and Dr Abeyna Bubbers-Jones, Consultant Occupational Health Physician and Founder of Medic Footprints, to discuss diversity and inclusion as an occupational health issue. Introduced by Task Force member Anna Harrington and with a personal story from Katie Neeves, Trans Ambassador.

### **Episode Five: Neurodiversity and the workplace**

In this episode, Helena Brady, senior occupational health advisor at TP Health, Dr Nancy Doyle, Occupational Psychologist and founder of Genius Within, and Aidan Healy, Business Psychologist and CEO of Lexxic, examine the barriers that neurodiverse individuals can face when seeking employment and when in work. They discuss how those barriers can be broken down, looking in particular at the role of management in embedding inclusivity into the workplace and recruitment process. With guest host Professor Anne Harriss.

Available to listen and subscribe from: [Apple Podcasts](#) / [Spotify](#) / [Google Podcasts](#)

## Psychological wellbeing of frontline doctors by Dr Jo Daniels



Recording of a SOM webinar with Dr Jo Daniels, University of Bath.  
Watch [here](#).

## Acas Working from Home England Guidance

Workplace experts Acas advises employers and employees to be practical, flexible and sensitive to each other's situation when working from home because of the COVID-19 pandemic. View the guidance [here](#).

## COVID-19 vaccination

The government has announced that NHS staff in England will be required to be fully vaccinated against COVID-19 by April 2022 – [see here](#). The [FOM's position](#) was that a voluntary system would be the correct ethical approach.







## SOM Parliamentary Question and Answer

### **Question:**

*To ask the Secretary of State for Work and Pensions, whether the Government's programme to help tackle health inequalities will include improved access to occupational health. (56499)*

*Tabled on: 15th October 2021*

### **Answer:**

*Chloe Smith:*

*Quality Occupational Health (OH) services have the potential to prevent work-related illness and avoidable sickness absence, support disabled people and those with ill health conditions to remain in work, support business productivity and potentially reduce pressures on the NHS.*

*Following the publication of the response to the Health is Everyone's Business consultation, we are exploring a number of policy options in partnership with the Department for Health and Social Care to increase access to quality and cost effective OH services, whilst ensuring that the market has the capacity to provide the services. We are particularly focusing on improving access to OH for SMEs and the self-employed as evidence suggests that smaller employers are less likely to provide access to OH than larger employers.*

## ***Occupational Medicine Call for Papers***

Occupational Medicine

Rising temperatures, rising sea levels, and reducing snow cover as a result of man-made climate change are likely to have significant effects on work, health and the environment. This may include extreme-weather related health effects, air pollution and vector-borne disease. There may be a change in occupational hazards and workplace exposures, and some occupational groups including farmers, fishermen, and firefighters may be disproportionately affected. *Occupational Medicine* is planning a themed issue on the rapidly developing area of climate change and occupational health. They are looking for editorials, systematic/narrative reviews, primary research, and fillers.

Please view the Instructions for Authors [here](#) for full information on submitting to *Occupational Medicine*.

Deadline for submission: 31st May 2022.

*We look forward to receiving your submissions.*



## The future of occupational health – World Health Organization (WHO) actions



Click [here](#) to view the new WHO website on occupational health which provides strategic directions and resources for global WHO's work on occupational health.

On 16-17th November 2021 in Helsinki, Finland, an international occupational health conference was held to discuss the current situation and future trends.

The programme was as follows:

**Session I:** New international policies and strategies for occupational health in the era of globalisation with special reference to current situation in recovery from the COVID-19 pandemic through occupational health research, training, and practices (Timing in video 34:50 - 3:22:00).

**Session II:** New trends in occupational health, occupational medicine and occupational health services (Timing in video 4:25:00 - 8:04:00).

**Session III:** New education and training strategies, models, and solutions (Timing in video 17:05 - 3:06:30).

**Session IV:** Occupational psychology, ergonomics and future of work (Timing in video 5:13:00 - 6:43:00).

Followed by a panel discussion (Timing in video 7:03:00 - 8:47:00).

Watch Session I and II [here](#).  
Watch Session III and IV [here](#).





## SOM Occupational Health Awards 2021 – winners announced



The winners of the 2021 SOM Occupational Health Awards were announced on Tuesday 7<sup>th</sup> December at the SOM Christmas Drinks at the Royal College of Physicians, London. Full list of winners as follows (and photos from the ceremony [here](#)):

- Outstanding Occupational Health Initiative - **March on Stress**
- Outstanding Occupational Health Practitioner, sponsored by [Health Management Limited](#) - **Dr Nurlan Baimenshin**
- Outstanding Contribution by an Employer to Workplace Health and Wellbeing, sponsored by [Greys Specialist Recruitment](#) - **National Express**
- Outstanding Occupational Health Team, sponsored by [Lloyd & Whyte Limited](#) - **Occupational Health & Wellbeing Department, King's College Hospital**
- Outstanding Contribution to the Development of OH Globally - **Dr Shawaludin Husin**
- Outstanding Contribution to Diversity and Inclusion, sponsored by [PAM Group](#) - **Southport and Ormskirk NHS Trust**

Highly commended were Dr Clare Fernandes and Dr James Quigley (Outstanding Occupational Health Practitioner); Anglian Water (Outstanding Contribution by an Employer to Workplace Health and Wellbeing); and Staying Well at Work (Outstanding Occupational Health Team).

Congratulations to all the winners and a big thank you to our sponsors:

