

Why should I invest in an occupational medicine trainee?



For your organisation to continue to succeed, investment in future occupational health talent is critical to the sustainability of your business.

Hosting a trainee occupational health physician improves the quality of your services by developing a pipeline of talent, qualified to a national level, and trained specifically in line with your unique approach and vision.

It demonstrates to your clients that you are committed to providing the highest quality service over the long term, with

the best talent you can find and nurture. It demonstrates a commitment to your existing staff that you are investing in the future of your organisation, and that you place the highest value on recruiting, developing and retaining the best people to help realise your objectives.

By training your people, you have an opportunity to cultivate the future clinical leaders in your organisation. Trainees tend to have a deeper understanding of what you do, how you do it, and how you want to achieve your aims.

## Two training scenarios

**OH provider A** identifies a potential shortfall in senior clinical leadership when producing five and ten year plans for the business. The possibility

of recruiting from outside the organisation is considered but deemed a risky option, due to the small projected numbers of new consultants and the likely difficulty of recruiting people with the right skill set.

A business case is put together to recruit and train a new occupational health physician. Within a few weeks, she is seeing patients with supervision and in less than a year has been exposed to a wide range of clients served by the business.

She completes two audits as required by her training programme, and presents the findings

at an internal company meeting. This demonstrates several ways to improve practice, identifying opportunities to increase quality while maximising efficiency, and improve compliance with relevant regulations.

She becomes chief medical officer for several clients in the second half of her training, and develops good relationships with them. She goes on a management course and leads an initiative to develop business from existing customers in addition to building relationships with new clients.

Her training is cost-neutral by the end of year one. By the time she has qualified you have achieved a return on investment. The organisation decides to recruit more trainees as a result of the success of the first and the demonstrated benefits to the business. Within ten years the provider has a talented workforce of consultants committed to the success of the business.

**OH provider B** identifies a potential shortfall in senior clinical leadership when producing five and ten year plans for the business. The possibility of

training within the organisation is considered. A decision is made to recruit several occupational health physicians directly to meet the demand from a large new client.

One of the recruits is interested in developing internal training. He sets up a journal club and arranges educational sessions, but these are moved to make way for meetings with new clients. Other recruits show little interest in peerled learning initiatives, preferring to get to clinic, finish their list, and get home. The self-appointed head of training becomes disillusioned and leaves for OH provider A.

Growth continues to increase as more large clients are gained. Adverts are placed for more OH clinicians but response rates are poor and many of those interviewed do not meet the company's standards. To service the new contracts, some clinicians are recruited who do not have the necessary specific skills, with an intention to train them on the job.

Without a programme of training, the new clinicians find themselves under-utilised, and OH provider B finds an increasing need to use independently contracting doctors, at great expense. Two senior clinicians decide to take early retirement, leaving a significant shortfall in clinician numbers in a key region for two major clients. Unable to service their needs, OH provider B exits one contract early, damaging their reputation. Recruiting becomes more difficult as potential recruits perceive the organisation to be struggling.

### Questions and answers

# What can trainees offer my organisation?

There are several ways trainees can benefit their employers:

- As ambassadors for further recruiting
  - Trainees go to teaching sessions and workplace visits, communicate using online forums, and collaborate when studying for exams. A training organisation raises its profile among the wider trainee cohort through its own trainees. This gives access to a network of potential recruits who have all undergone validated training and met the standards of the Faculty of Occupational Medicine (FOM) and Health Education England (HEE).
- Trainees bring new clinical ideas

All trainees in occupational medicine must have relevant clinical experience in another specialty. Adding clinicians to your workforce who have specific experience of respiratory medicine, cancer care, musculoskeletal problems, psychiatric management or primary care adds a valuable resource to your organisation that colleagues can draw on and learn from. Recent experience of the NHS gives them an insight into how services are currently set up, enabling you to advise customers how to help employees best.

- Trainees bring new non-clinical ideas
  - Research and audit is required by the training programme, and this is a great opportunity to gain valuable insight into opportunities for improvement in your organisation.
- High quality Occupational Health Physicians (OHPs) are often attracted to organisations which have trainees

By offering potential recruits who have already completed training the opportunity to get involved in helping the next generation, you attract individuals willing to be involved in training and staff development throughout the organisation.

#### What are the cost implications?

Training is an investment in the future of your organisation. Although there will be variations, a trainee programme that is well planned, that meets the standards of the General Medical Council (GMC), FOM and HEE can be cost neutral within the first two years. The potential for return on investment will vary depending on organisational costs.

Costs are partially offset by the reduction in a need to train externally recruited clinicians in your organisation's standard practice. The investment in training that comes with investment in a trainee also benefits other clinicians in terms of their development and capability.

## How do I ensure I am getting a good trainee?

Trainees go through a rigorous selection process. To be admitted onto a GMC-approved training programme, candidate trainees must demonstrate their potential to develop as a successful OHP, and manage the rigours of the training programme. The expense and organisation of this is undertaken by HEE.

## How do I ensure I am giving good training?

The FOM, HEE and the Society of Occupational Medicine provides support for trainers to ensure they are able to meet the requirements of the training programme. In addition to the standard appraisals you will perform, trainees are regularly reviewed to ensure they are continuing to develop. HEE monitors trainees at least annually, at no cost to their employers. This ensures they are continuing to progress successfully, and gives them valuable feedback regarding how to maximise their development.

# How do I find out more?



Faculty of Occupational Medicine

www.fom.ac.uk

Health Education England

https://heeoe.hee.nhs.uk/occupational\_medicine

Society of Occupational Medicine

www.som.org.uk

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