



General Practitioners Curriculum Consultation Documents

IOSH response to the Royal College of General Practitioners Consultation

Consultative
Document

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Introduction

Founded in 1945, the Institution of Occupational Safety and Health (IOSH) has around 28,500 individual members, is Europe's largest occupational safety and health (OSH) professional body and has strong OSH links worldwide, with members in over 50 other countries.

Incorporated by Royal Charter and a registered charity, IOSH is the guardian of OSH standards of competence in the UK and provider of professional development and awareness training courses. The Institution regulates and steers the profession, maintaining standards and providing impartial, authoritative, free guidance on OSH issues. We are regularly consulted by government departments and other bodies on OSH issues and act as secretariat to UK, European and International professional body networks. The Institution also has a research and development fund, which is focused on helping establish and develop the evidence-base for OSH policy and practice and on closing knowledge gaps in this area.

In respect to our structure, IOSH has 24 Branches in the UK and also Branches in the Caribbean, Hong Kong and the Republic of Ireland. In keeping with the diversity of our members' roles, we have 14 special interest groups covering a wide variety of employment sectors and topic areas: communications and media; construction; consultancy; education; environment; fire risk management; healthcare; international; offshore; public services; railways; retail and distribution; rural industries; and safety sciences. IOSH members work at a variety of strategic and operational levels across all employment sectors and our vision is:

A world of work which is safe, healthy and sustainable

Summary

IOSH believes that General Practitioners have a vital role to play in helping to improve the occupational health of the nation's workforce and should be given the necessary training and opportunities to develop and maintain appropriate knowledge and skills in this important area. We are therefore very pleased to have this opportunity to comment on the *GP Curriculum Consultation Documents* and in the response that follows, have answered the questions asked in the consultation from an occupational health perspective and have also completed the on-line form. We have suggested the creation of a new curriculum area covering "Care of working age people" and also the integration of occupational health within the other proposed curriculum elements, recommending that trainee GP visits to a variety of workplace environments and organisations providing occupational health support could be beneficial to their training. IOSH would welcome further opportunities to explore ways in which we might help to develop the occupational health aspects of the GP curriculum.

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IOSH response to consultation questions

1. Do you agree with the philosophy of, and the approach behind the curriculum?

The Institution of Occupational Safety and Health (IOSH) strongly suggests that the curriculum should have far more on occupational health throughout its content and should also have a section titled '**Care of working age people**'.

2. Assuming it is correctly implemented, will it lead to better standards of patient care or not?

As there are estimated to be around 28 million workers in the UK and around 28 million working days per year are lost to work-related ill health (2 million people have a health problem they believe is caused or made worse by their current or past work), IOSH believes that including occupational health in GP training could potentially lead to better standards of patient care.

3. Is the level pitched correctly for GP Registrars? Will it produce GPs who are fit for purpose to meet the needs of patients?

Again, as it is estimated that only about 3 per cent of employers in the UK provide adequate occupational health support, IOSH believes that to be 'fit for purpose' in meeting patients' needs, GPs need adequate training in occupational health.

4. Is there anything that you feel has been omitted that should have been included?

Yes, IOSH feels that not including occupational health is a serious omission and should be addressed by creating a new section, which could be titled '**Care of working age people**' and also by **integrating occupational health** throughout the GP curriculum where not already included, e.g.

1. 'Being a General Practitioner'

Domain 1

1.3 We suggest adding 'communication with occupational safety and health services'.
(e.g. NHS-Plus and Workplace Health Connect)

1.4 We suggest adding to the second bullet, after 'other care pathways', 'including occupational safety and health services'.

Domain 3

3.2 We suggest including in the second bullet, '...including family, **work** and social factors'

Domain 4

4.3 We suggest including in the second bullet, '...variety of possible approaches, including return to work programmes and vocational rehabilitation, as appropriate'.

Appendix 1 We suggest that the eleven stated characteristics of a GP might be increased to twelve, in order to include GP responsibilities as an employer or co-worker, in looking after the occupational safety and health of GP surgery staff and also ensuring their continuing professional development. IOSH has developed two free 'tools' for small businesses, one an

interactive website www.safestartup.org providing basic health and safety information to business start-ups and the other, a risk management toolkit covering some key business risks (including health and safety) available to download from www.iosh.co.uk/techguide The Institution also provides a range of short OSH training courses in working safely and managing safely for employees and managers, see www.iosh.co.uk/training

5. 'Healthy people: promoting health and preventing disease' (e.g. return to work and rehabilitation)

8. 'Care of older adults' (e.g. the UK has an ageing workforce, with around 1 million people in work above pensionable age)

12. 'Care of people with mental health problems' (e.g. work-related stress)

14.4 'ENT and facial problems' (e.g. noise-induced hearing loss and tinnitus)

14.8 'Respiratory problems' (e.g. occupational asthma; pneumoconiosis; asbestosis)

14.9 'Rheumatology and conditions of the musculoskeletal system' (e.g. work-related upper limb disorders and back pain); and

14.10 'Skin problems' (e.g. occupational dermatitis)

5. Do you think it will add value to education and learning over and above current approaches for GP registrars? For example, will it produce GPs with a higher level of knowledge and clinical skills?

While we cannot comment on the 'added-value' of the new curriculum in its entirety, IOSH believes that providing occupational health training **certainly would** add value over and above the current approaches and should help increase GP knowledge and clinical skills in this important area (see answers to Q4 and Q8).

6. Do you think the curriculum is teachable?

Again, while we cannot comment on the 'teachability' of the entire curriculum, IOSH believes that occupational health is teachable and that there is plenty of information and expertise available for the RCGP curriculum developers to draw upon. We would suggest that trainee GPs could benefit greatly from visits to work environments that provide occupational health support, so that they gain practical understanding of workplace health hazards and can discuss controls and interventions with occupational safety and health practitioners and employees. IOSH is willing to explore with RCGP how occupational health teaching could best be delivered to GPs, including workplace visits and possible speakers where appropriate.

7. *What do you think the process should be for the maintenance and review of the new curriculum?*

IOSH welcomes this opportunity to comment on the content of the GP curriculum and believe this public consultation part of the process should be used for future reviews. We also suggest consideration should be given to increasing the frequency of reviews, for example, not longer than every 5 years. Importantly, we believe the occupational health element (and others) of the curriculum will also need to be supported by continuing professional development opportunities/requirements for GPs.

8. *Any further comments you feel would be helpful?*

IOSH would welcome further opportunities to explore ways in which we might help in the development of the occupational health dimension of the curriculum.