

Occupational health

Revised September 2010

This factsheet gives introductory guidance. It covers:

- what is occupational health
- the benefits of using occupational health
- confidentiality and occupational health
- making occupational health effective in the workplace
- the CIPD viewpoint.

What is occupational health?

Occupational health is a specialist branch of medicine focussing on health in the workplace. It is concerned with the physical and mental well-being of employees. Occupational health specialists can support organisations through advising on work-related illnesses and accidents, carrying out medicals for new starters and existing employees and monitoring the health of employees.

Occupational health services are also used to assist organisations in managing absence situations – both short and long term. The opinion of an occupational health specialist might be crucial in determining how to manage a capability issue, and the opinion of an occupational health specialist can be key evidence in a claim to an employment tribunal.

Only large organisations are likely to employ their own occupational health specialists. Most organisations will contact an external provider of occupational health services as and when they need it. In some organisations there will be an employed full time nurse who has training in occupational health. This might be supported by a part-time doctor who comes to the organisation to carry out medicals and other assessments. Other organisations, particularly those working in hazardous areas, are more likely to employ their own doctor.

The level of provision is likely to be determined by the size of the organisation and the nature of the operation. An organisation that operates in a particularly hazardous area is clearly likely to need more occupational health support than other organisations.

The interaction of employees with occupational health will largely depend on the presence of the service. If there is a full time service on site then employees are more likely to make ad-hoc use than if the service is only available at specified times. It is important that employees are clear about the nature of the service, and see the distinction between what is offered by occupational health and what they should refer to their own GP.

Services to be provided

As well as addressing issues that occur, a lot of the work of an occupational health service

should be proactive, aiming to reduce potential problems in the workplace. Hence the activities of occupational health are likely to include:

- implementing policy
- ensuring compliance with health and safety regulations
- minimising and eliminating hazards
- dealing with cases of drug and alcohol abuse, and advising on HIV/AIDS issues
- offering pre-employment health assessment
- maintaining relations with appropriate bodies and individuals
- monitoring the health of employees after an accident, illness and during and after pregnancy
- managing clinic facilities, basic health checks and first aid
- advising on medical severance and ill-health retirement
- advising on ergonomic issues and workplace design
- promoting good health education programmes
- promoting healthy eating
- monitoring symptoms of work-related stress
- providing advice and counselling
- working with special needs groups.

The occupational health service will be provided by a diverse range of occupational health practitioners including physicians, hygienists, psychologists, ergonomic experts and occupational health nurses.

Within an organisation occupational health is likely to work closely with those in HR and those responsible for health and safety. However, for occupational health to have the greatest impact on the organisation it is important that line managers feel able to approach the occupational health adviser to discuss any concerns and issues.

The benefits of using occupational health

Forward-thinking organisations recognise that managing their people is just as important to success as control of financial and capital resources. Some organisations are moving towards promoting a concept of 'wellness' as a preventive measure to address employee health. Through an investment in people organisations can achieve excellence and maintain a leading edge.

CIPD's annual absence management surveys consistently show that sickness absence accounts for a significant proportion of lost working time. The average cost of absence is significant.

- [View our latest absence management survey](#)

Focusing on the health of employees and designing interventions to improve health can help to reduce absence levels. This brings the benefits of:

- reduced costs to the organisation

- less disruption as the result of employees being absent
- greater engagement and motivation of employees as they feel valued by the employer.

Absence in the workplace can be reduced by:

- identifying common hazards and reducing or eliminating them
- monitoring absence and identifying any common trends - occupational health specialists can assist by suggesting interventions to address these trends
- carrying out workplace surveys to identify sources of ill health and reducing these
- educating employees about a healthier lifestyle, and supporting employees in making changes to a healthier approach.

In summary, organisations can work with occupational health to improve the current and future health and success of their enterprise by developing a healthy culture and by adopting a systematic approach to occupational health.

For more information on issues related to occupational health see our factsheets on absence measurement and management, data protection, health and well-being, and stress and mental health.

- [Go to our factsheet on Absence measurement and management](#)
- [Go to our factsheet on Data protection](#)
- [Go to our factsheet on Health and well-being at work](#)
- [Go to our factsheet on Stress and mental health at work](#)

Confidentiality and occupational health

Under the Access to Medical Reports Act 1988 an employee is entitled to see a medical report relating to him or her before it is passed to an employer. However, this only applies to a report from a doctor who is responsible for the clinical care of the individual. Hence, if an employer asks for an employee to undergo a medical with an occupational health doctor, this is not covered by the Act because it is very unlikely that the occupational health doctor will be providing clinical care to the employee.

The Access to Health Records Act 1990 gave individuals the right to access health reports relating to them, but the provisions of this Act have largely been overtaken by the Data Protection Act 1998. This Act is much broader and allows employees access to any information held about them, on paper or on computer. It has to be presumed, therefore, that an employee might have access to any report written about him or her at some time.

Prior to any medical examination with an occupational health doctor the employee should be clear about:

- the nature of the examination
- the reason for the examination
- who will see any report that is written as a result of the examination
- whether the employee will receive a copy of any report written as a result of the examination

- how long any report will be kept and where it will be stored.

It is important that only those who need to see a medical report have access to it. For example, a line manager might not need to see the full report and might only need to be made aware of any recommendations from the doctor.

Making occupational health effective in the workplace

When introducing occupational health to the workplace it is important to start by establishing what is required of the service. To do this employers should follow these steps:

- Gain senior management involvement and commitment.
- Develop a mission statement to communicate the initiative – why, what and how.
- Conduct an audit to establish the existing position, if possible in numerical and financial terms.
- Benchmark against organisations in the local area, similar sector and nationally.
- Plan the way forward – what improvements are needed, what needs to be developed, what are the priorities, how will success be measured.
- Establish goals and targets relating to business needs.
- Develop a strategy to achieve the goals.
- Determine resources and assign responsibilities.
- Communicate to employees through group briefings, email, intranet, internal newsletters etc.
- Review and monitor progress regularly.

CIPD viewpoint

CIPD believes that personnel specialists play a critical role in convincing organisations of the competitive benefits to be gained from proactive strategies and that the effective management of the health and welfare of people at work:

- contributes to performance improvement and increases competitive advantage
- reduces unacceptable losses associated with ill-health and injuries
- lowers absenteeism, improves morale and reduces litigation costs.

CIPD recommends the implementation of practical occupational health policies tailored to circumstances. Top management must demonstrate commitment and provide leadership in formulating strategy, developing policies and monitoring performance. It must ensure the necessary resources are available to implement policies. Health policies do not apply to large organisations alone; small and medium-sized enterprises need to tailor their response based on culture and resources.

Information about workers' health is classed as sensitive personal data under the Data Protection Act 1998. Therefore these details should be protected with appropriate measures and kept securely.

Useful contacts

- [Business Link](#)
- [Health and Safety Executive \(HSE\)](#)
- [Institution of Occupational Safety and Health](#)
- [Royal Society for the Prevention of Accidents](#)
- [Society of Occupational Medicine](#)
- [Workplace wellbeing tool](#)

Further reading

CIPD members can use our Advanced Search to find additional library resources on this topic and also use our online journals collection to view journal articles online. *People Management* articles are available to subscribers and CIPD members in the *People Management* online archive. CIPD books in print can be ordered from our Bookstore

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- [Go to our online Bookstore](#)

Books and reports

ACAS. (2006) *Health work and well-being*. Advisory booklet. Rev ed. London: Acas.
Available at: <http://www.acas.org.uk>

DONALDSON-FEILDER, E. (2007) *Well-being and performance*. London: Chartered Institute of Personnel and Development.

INCOMES DATA SERVICES. (2009) *Employee health and well-being*. HR studies update. London: IDS.

KLOSS, D. M. (2010) *Occupational health law*. 5th ed. London: Wiley.

Journal articles

GRIFFITHS, E. (2010) Managing for health. *Occupational Health*. Vol 62, No 5, May. pp14-15.

O'REILLY, N. (2008) The Black report: key roles. *Occupational Health*. Vol 60, No 5, May. pp22-24.

SILCOX, S. (2009) Fit notes: occupational health key to their success. *Occupational Health*. Vol 61, No 7, July. pp8-9.

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