

The Lothian Occupational Health Project

United Kingdom



The Lothian Occupational Health Project explored the possibility of providing occupational health care services via a primary health care setting. Project partners were the Health Promotion and Primary Care Departments of Lothian Health Board, the Lothian Trades Union and Community Resource Centre and the Lothian Federation of Trades Union Councils. A steering group was drawn from the Federation of Small Businesses, Occupational Health Medicine, Health Education Board for Scotland and the Public Health Sciences Department of Lothian Health Board.

About the project

The provision of occupational health services to employees in the SME sector is currently very limited and only a third of all employees in Scotland have access to an occupational health service. Provision of an in-house service is beyond the means of most SMEs and the number of SMEs purchasing OH services from an external provider is negligible. However every employee has access to the primary health care service and it is within this setting that considerable potential exists to address occupational health needs. Unfortunately, studies show that the links between a person's health and their occupation are rarely explored in patient consultations and the opportunity to deal with work related health problems could easily be missed. In 1994 / 5 a number of factors combined to create an opportunity to explore the potential of offering occupational health services through the primary care setting, in this instance through General Medical Practitioners (GPs) surgeries. Despite understandable initial caution from GPs (e.g. regarding potential disruption to the practice), the

Lothian Occupational Health Project was launched in November 1995 in seven GP practices on five sites.

Putting the project into practice

Two occupational health advisors spent one day each week in the five primary care sites. Patients were invited to take part in an interview as they waited to see their GP. The interview included a discussion about the patient's work history, any work related ill-health experienced and any hazards they may have encountered. If any links between the patient's work and health were identified these were followed up with written and oral information about the cause of the condition and what could be done in response. The legal responsibility of the employer together with the employee's responsibility and rights were included in this information. A record of the interview was included in the patient's records. If the patient's condition caused concern then the occupational health advisor would brief the GP. In some cases, if the employee desired it, the GP could then write to alert the

employer of potential risk and suggest measures to reduce it. Visits to a patient's workplace by Occupational Health Advisors were rare, but when they did occur the advice was well received and action was taken to reduce health risks.

Aims and objectives

The project had two goals: to work with primary care teams to improve the identification and treatment of work-related ill health, and secondly to contribute to the prevention of work-related ill health by seeking to eliminate or reduce hazardous working conditions. The project's contribution to the above aims was also evaluated. In the long term it was hoped the data collected would help to identify patterns of illness by industry type and geographical area. Evaluation was built into the project from the outset and included observation of interviews between the occupational health advisors and patients to ensure that consistent advice was being given and that patients understood and could effectively participate in the process.

Getting results

Almost 4000 patients were interviewed during the first thirty months of the project. Half worked in small or medium-sized companies and three quarters reported that they had no access to occupational health services at work.

What work hazards have been reported?

Figure 1: Percentage of patients reporting moderate or serious risk from the following hazards:

<i>Lifting</i>	45.3
<i>Stress</i>	39.2
<i>Environment</i>	36.3
<i>Job design</i>	34.1
<i>Hours of work</i>	30.2
<i>Dust</i>	27.3
<i>Noise</i>	23.7
<i>Fumes</i>	16.5
<i>Infections</i>	12.3
<i>VDU's</i>	11.9
<i>Chemicals</i>	11.2
<i>Fuels/ solvents/oils</i>	9.3
<i>Vibration</i>	6.6
<i>Asbestos</i>	2.0

What work-related ill health has been identified?

Figure 2: Percentages reporting work-related ill health caused or made worse by current job:

<i>Back</i>	31.0
<i>Muscles (other than back)</i>	25.6
<i>Nervous system</i>	11.7
<i>Skin</i>	11.6
<i>Nose/throat</i>	10.6
<i>Psychological</i>	7.9
<i>Chest</i>	5.6
<i>Hearing</i>	5.2
<i>Gastric/digestion</i>	4.2
<i>Asthma</i>	3.3
<i>Heart/circulation</i>	1.8
<i>Bladder</i>	0.4
<i>Reproductive</i>	0.2

Referrals

n 28 patients were referred to the project by their GP

- n 134 cases were highlighted for the special attention of the GP
- n 12 cases were recommended for referral to the Consultant in Occupational Health Medicine
- n 179 patients were recommended for hearing tests because of suspected work related hearing loss
- n 32 patients were given advice regarding possible compensation claims for occupational asthma, 10 for Beat Knee and Vibration White Finger, and 16 for accidents or other work related issues.

Conclusions

The Lothian Occupational Health Project addressed health and safety, occupational health, welfare rights and workplace health promotion through workplaces, the health services and the social partners. It was a very good example of how a broad base of support can be achieved to address work related health issues. One of the project's great strengths was its orientation towards the experience of the patients. It is the patient, of course, who has the real experience of the workplace and is in a position to make valuable comments on how situations arise and can be improved. Many of the GPs also felt that the project was beginning to affect their own practice in relation to occupational health in a positive way.