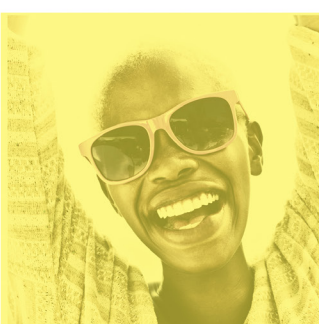
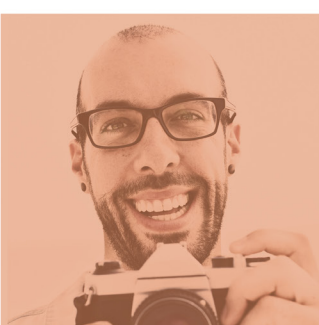
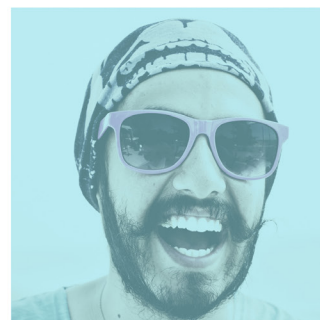
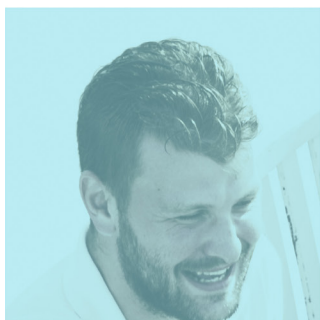


# Colleague Health Guide Barnardo's



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## Message from Anne Comber

Duradiamond is Barnardo's appointed occupational health partner. Barnardo's is committed to working in partnership with Duradiamond to improve employee wellbeing at work, particularly mental health, by giving support and advice to individual employees and their manager. We have long been committed to making reasonable adjustments to support employees with long term health needs and phased return to work plans for staff who have been unwell. Access to quality occupational health advice and recommendations is a vital part of that process.



# Occupational Health Services for Colleagues

## **An Introduction to the Duradiamond OH service**

Occupational health is dedicated to helping people to keep well, and to help them to work to their potential regardless of health problems, as and when these do arise. We know that work is an important ingredient of staying well, and beneficial for people who are having to cope with illness, so helping people to remain in work isn't just good for employers, it's good for their staff too.

We want you to feel supported throughout your career with the charity and look after yourself so you can work to the best of your ability

## **Who's Who in the OH service**

In order to provide an excellent service to Barnardo's we believe that we need to get to know Barnardo's as an organisation. In order to achieve this, we have appointed a number of dedicated individuals to look after the service provision and build up strong relationships with our key contacts. These dedicated people and teams manage the running of Occupational Health services and are as follows:

### **Chief Medical Officer (CMO)**

Dr Alasdair Emslie

Dr Emslie, your CMO is responsible for overseeing the clinical provision of services, managing complex cases, advising you on your organisational health strategy and providing general medical advice to managers and HR staff.

### **Account Manager**

Sophie Dove

Email: [Sophie.dove@duradiamondhealth.com](mailto:Sophie.dove@duradiamondhealth.com) Tel: 01273 023079

Sophie is responsible for overseeing the service provision to your business, she will manage any contractual concerns and be a point of contact for escalation.

### **Client Associate Team**

Team 1

Email: [team1@duradiamondhealth.com](mailto:team1@duradiamondhealth.com) Tel: 01273 023170

The Client Associate team are responsible for managing the all your organisations referrals, booking appointments, publishing reports etc. They are the main point of contact for all day to day queries and concerns.

Your Client Associate team are your first point of contact for all queries.

Please contact them by email or telephone on:

Email: [team1@duradiamondhealth.com](mailto:team1@duradiamondhealth.com)

Tel: 01273 023170



### **What is Occupational Health?**

Occupational Health is the specialist branch of medicine that concentrates on preventing work-related illness, improving health and well-being and supporting people back to work after absence for illness.

Returning to work or staying well at work is an important clinical outcome because we know that being at work is generally a positive and healthy experience.

Work absence is commonly associated with health inequalities, a greater risk of serious illnesses including cancers, reduced longevity and social isolation. We try very hard to support individuals back to "good work" to avoid these preventable risks.

We work with a multidisciplinary team of healthcare professionals including occupational health nurse advisors, registered mental health nurses, registered general nurses, physiotherapists who are all supported by consultant occupational physicians. We carry out consultations using telephone, tele-video and face-to-face assessments.

We will work with individuals to help them make healthy lifestyle choices to reduce the impact and likelihood of ill-health, signpost them to advice and expertise to better manage their health, and work with them and their managers to create work activities that help them return to work or stay in the workplace.



# Attendance Management Services

As part of our service we provide Barnardo's with advice in relation to staff members who have had sickness absence. Usually this is when someone has had a long period of sickness absence, multiple short spells of absence or has reached an absence trigger. Referrals can often also be made when an individual has disclosed a health condition to their manager and the business require some advice or guidance.

Usually our reports following an attendance management referral will include advice on fitness for work, recommended adjustments or restrictions and also provide responses to any questions asked by the manager on the referral

## Working with Barnardo's and their health-related policies

### **Drug and Alcohol Policy**

Your organisation understands that it can be very difficult for someone to admit that they have a drug or alcohol problem, especially if they are fearful of what the reaction might be. At the same time openness is important if employers are to be able to help people with drug and alcohol problems, and if the risks of harm (to them and to other people) are to be reduced. Therefore, in circumstances where somebody who is struggling with drug and alcohol problems asks for help, the organisation has a drug and alcohol policy to ensure that they are given the help they need.

This will typically include a referral to the occupational health service to oversee the person's rehabilitation, in conjunction with the support and treatment provided by the local Drug and Alcohol Services. It also means that the organisation will give what support they reasonably can, for example if the person was to need a period of time away from work, or if they needed to work in a different role until the issue had been resolved.

The role of the occupational health service is to support the employee in their efforts to get better and to help the employer to ensure that there are no serious risks to the safety of the person or to other people in the meantime. Where there is evidence that the problem has been addressed we explain this to the organisation and try and help the person to get back into their usual job. Where the person is not able or willing to engage with this help then the drug and alcohol policy explains that, ultimately, the organisation may need to view their drug or alcohol use as a disciplinary issue.



### **Mental Health Policy and Support**

Mental health problems are common among society and in the workplace. Helping employers to understand the interactions between work and mental health can be important in helping to reduce the risk of somebody they employ becoming unwell. In circumstances where somebody is already unwell it can mean that that this is recognised more quickly within the workplace so that appropriate help can be offered.

The occupational health service works with your employer to provide training for managers about these issues, and is on hand to give advice and support about how an employee who is experiencing problems can best be helped.

### **First Aid and First Response**

The occupational health service advises your employer about the kind of policies, training and equipment that would be most appropriate within your workplace to ensure that people who become acutely unwell whilst in work receive the help that they need.

### **Wellbeing Programmes**

We also provide a range of wellbeing programmes. It is important to us that you and your colleagues stay well and have good overall wellbeing, as it is a key ingredient to creating a productive and focused workforce. Good wellbeing therefore benefits both the employee and the employer in equal measures.



# FAQ's

## **Q. Can I see the referral that my manager sends you?**

A. Yes. An occupational health referral should be a transparent process, meaning you should understand why your manager has referred you, what questions they are seeking our advice about, and what options your manager is considering depending on the advice that we give. That is why on our referral form we ask referring managers to confirm that they have discussed the reasons for the referral with the employee they are referring. If you are unsure why you have been referred then you should speak to your manager about this, and can ask to see a copy of the referral form that they have sent us if you wish.

## **Q. What if I don't want to be referred?**

A. If you are worried about being referred then it may be helpful to speak to your manager about what their concerns are and what they propose to do if you do not agree to the referral, as this information may be helpful in helping you to decide whether to agree to the referral or not. If your employer would like to refer you to the occupational health service, we advise that it is in your best interests to agree to the referral. That is because we think it is better that your employer has access to relevant occupational health advice, when making decisions about your employment, than having to make those decisions without such advice. But ultimately, like all healthcare professionals, we work with your consent and would only arrange an assessment for you if you agreed to it. If you did not want to engage with the service, then we would respect your wishes.

## **Q. How will you assess my case?**

A. Most of the time, by speaking to you! For the majority of referrals we receive, one of our healthcare professionals (typically a nurse or a doctor but sometimes, depending on circumstances, another professional such as a physiotherapist or registered mental health nurse) will assess the situation by speaking to the employee by telephone. Sometimes it is necessary to see the employee in person to assess them, and we will make an appointment with the appropriate healthcare professional in order to do that.

## **Q. If I am asked to attend an assessment, where will that be?**

A. That depends. Sometimes we hold clinics in someone's place of work, alternatively we may arrange an appointment for you at one of our local clinics. When we are making appointments, we try and find a clinic that is relatively close to you to avoid unnecessary travel. Of course when we are able to assess you by telephone that avoids you having to travel at all.

## **Q. Are the things that I tell the occupational health service kept confidential?**

A. Generally, yes. Often it is helpful for your manager to have some





understanding of the nature of the problems you are experiencing because it helps them to make appropriate adjustments in the workplace. If however, there are any aspects of your situation that you would prefer that they did not know then most of the time, we are able to advise in functional terms (talking about what it is that you can do, and what you may struggle with) and without revealing clinical details such as a diagnosis. When we prepare a report for your manager this will be discussed with you and the occupational health professional will advise you what they believe it would be helpful to include. Very rarely clinicians may need to breach confidentiality, but this would only be justified if it was necessary to protect the individual or anyone else from serious harm. For example, if somebody had a medical condition that made it unsafe for them to drive but they refused to accept medical advice to stop driving. This is true for all doctors and nurses and occupational health professionals are no exception.

**Q. Can I see the reports that you send to my manager?**

A. Of course! We routinely copy you on any reports that we send to your employer, and if you would prefer to see a report even before we send it to your employer we can do that too.

**Q. What if I disagree with your advice?**

A. When our clinicians assess colleagues, they do take time to explain the advice they are giving and most of the time, there is no disagreement. Inevitably sometimes people do not agree with our advice: We are always happy to include a personal statement from them, sent to the employer in conjunction with our report, so that the employer is aware of their personal views. If you do not want us to send our report to your employer at all then generally speaking, we would not do so. But we discourage this because we do not think it is in someone's best interests for their employer to have to manage them without the benefit of occupational health advice. In rare circumstances, where we think there would be a serious risk of harm otherwise, we may give advice to your employer even without your permission. However, we would limit this to the bare minimum we felt necessary to avoid that risk.

**Q. Do you communicate with my own doctor?**

A. Sometimes when we are assessing people we will discover things that it would be important for their own doctor to know (for example if their blood pressure is a little high). We would then get the person's permission to send the information to their doctor, and of course the contact details for them. Occasionally it will be helpful for us to obtain information from somebody's general practitioner, because it may help us decide what is the most appropriate occupational health advice to give on their behalf. In those circumstances, we would get the person's written permission to write to their



doctor for a report. Increasingly, as patients are provided with copies of outpatient correspondence, they can give us the relevant information directly which can be helpful because it avoids us having to trouble their general practitioners unnecessarily.

Some people are surprised how often we give occupational health advice without communicating with their own doctor. That is because most of the time we need to understand the person's functional status (what they are and are not able to do), and whether the person is at risk from performing any given activity, rather than knowing all the detailed clinical information that is kept on their primary care records. Most of the time we can establish enough functional information through our own assessments and by speaking with staff members directly, and without having to add further pressure to the primary care service by asking for information that is unnecessary. With your permission, we would normally like to send a copy of our report to your GP to keep them informed of our advice.

**Q. Does my employer have to follow your advice?**

A. No, our advice is just that – advice. Whilst we can give our expert opinion about what would be medically desirable, only your employer can decide what adjustments they can reasonably make within your job. This is one of the reasons why we encourage the manager and the employee meet to discuss our report after one of our assessments. It is an opportunity for the manager to explain what is going to be realistic from the organisation's point of view, and also for the employee to explain what adjustments they feel would be particularly important for them to feel confident about working. Sometimes we might advise changes that are not just "nice to have" but necessary if the person is going to be able to work safely; obviously if the employer cannot accommodate these changes then that might mean that the person is not in fact able to work. When we are making recommendations in our reports we always use phrases like "if operationally feasible" to try and avoid setting any unrealistic expectations and to make it clear that, whilst we are giving advice, only your managers can make management decisions about your case.

**Q. If I want to, can I see my occupational health file?**

A. Of course. Your occupational health file is considered to be sensitive and personal information about you and you are entitled to see it, if you wish, under the terms of the current data protection legislation



# Return to work advice sheets and support.

How to set up your Display Screen Equipment

<http://www.hse.gov.uk/pubns/indg36.pdf>

How to set up your driving position

<http://drivingergonomics.lboro.ac.uk/downloads/vehicle%20ergonomics%20and%20best%20practice%20guide.pdf>

Mental Health Support

<http://mind.org.uk/information-support/>

<https://www.rethink.org/resources/w/whats-reasonable-at-work>

Work-Related Stress

<http://www.hse.gov.uk/pubns/indg430.pdf>

Cognitive Behavioural Therapy (CBT)

<http://www.nhs.uk/Conditions/Cognitive-behavioural-therapy/Pages/How-does-it-work.aspx>

Cancer

<http://www.cancerresearchuk.org/about-cancer/coping-with-cancer/>

Chronic Fatigue Syndrome

[http://www.nhshealthatwork.co.uk/images/library/files/Clinical%20excellence/CFS\\_employees\\_leaflet.pdf](http://www.nhshealthatwork.co.uk/images/library/files/Clinical%20excellence/CFS_employees_leaflet.pdf)

Back Pain

<http://www.arthritisresearchuk.org/arthritis-information/common-pain/back-pain/back-pain-exercises.aspx>

Recovery After a Slipped Disc Operation

<https://www.rcseng.ac.uk/patient-care/recovering-from-surgery/discectomy/what-to-expect-after-the-operation/>

Neck Pain

<http://www.arthritisresearchuk.org/arthritis-information/conditions/neck-pain/how-can-i-help-myself.aspx>

<http://www.arthritisresearchuk.org/arthritis-information/conditions/neck-pain/neck-pain-exercises.aspx>

Shoulder Pain

<http://www.arthritisresearchuk.org/arthritis-information/conditions/shoulder-pain/shoulder-pain-exercises.aspx>



Knee Pain

<http://www.arthritisresearchuk.org/arthritis-information/conditions/osteoarthritis-of-the-knee/knee-pain-exercises.aspx>

Knee Replacement

<https://www.rcseng.ac.uk/patient-care/recovering-from-surgery/total-knee-replacement/>

Hip Replacement

<https://www.rcseng.ac.uk/patient-care/recovering-from-surgery/total-hip-replacement/returning-to-work/>

Tennis Elbow

<http://www.arthritisresearchuk.org/arthritis-information/conditions/elbow-pain/tennis-elbow-exercises.aspx>

Foot Pain

<http://www.arthritisresearchuk.org/arthritis-information/common-pain/foot-pain/how-can-i-help-myself.aspx>

Arthritis and young people

<http://www.arthritisresearchuk.org/arthritis-information/young-people.aspx>

Carpal Tunnel Syndrome

[http://www.arthritisresearchuk.org/~media/Files/Arthritis-information/Conditions/Carpal-tunnel-syndrome\\_2008\\_12-1.ashx](http://www.arthritisresearchuk.org/~media/Files/Arthritis-information/Conditions/Carpal-tunnel-syndrome_2008_12-1.ashx)

Parkinson's Disease

<https://www.parkinsons.org.uk/content/quick-introduction-parkinsons-leaflet>

Multiple Sclerosis

<https://www.mssociety.org.uk/>

Epilepsy

<https://www.epilepsy.org.uk/sites/epilepsy/files/B135-Work-and-epilepsy.pdf>

Stroke

<https://www.stroke.org.uk/resources/complete-guide-work-and-stroke>

<https://www.bhf.org.uk/publications/heart-conditions/stroke---your-quick-guide>

<https://www.stroke.org.uk/>

Heart Conditions

<https://www.bhf.org.uk/>



HIV

<http://www.tht.org.uk/myhiv>

Dyslexia

<http://www.bdadyslexia.org.uk/screening>

<http://www.bdadyslexia.org.uk/common/ckeditor/filemanager/userfiles/Adult-Checklist.pdf>

Asthma

<https://www.asthma.org.uk/advice/living-with-asthma/work/>

Wisdom Teeth Removal

<https://www.rcseng.ac.uk/patient-care/recovering-from-surgery/wisdom-teeth-extraction/download-full-pdf-version/>

Sun Protection

<http://www.hse.gov.uk/skin/sunprotect.htm>

Pregnancy, and New and Expectant Mothers at Work

<http://www.nhs.uk/Planners/breastfeeding/Documents/New%20and%20exp%20mothers%20who%20work.pdf>

<http://www.nhs.uk/conditions/pregnancy-and-baby/pages/your-health-at-work-pregnant.aspx>

A Health and Safety Guide for Homeworkers

<http://www.hsmc.co.uk/uploads/free%20guides/HSMC%20Homeworking%20Guidance.pdf>



# Employee Benefits

## Employee Assistance Programme - Health Assured

Everyday life, and just balancing the requirements of work and home, can create pressures for all of us. To assist in achieving this balance, organisations can put an Employee Assistance Programme in place.

The EAP service provided by Health Assured offers a quick, confidential, and highly professional way to resolve, whatever life throws at you and is there whenever you need it.

The EAP can help employers support their staff with concerns such as:

- Health and well-being information
- Stress at home or work
- Financial issues including debt
- Family and relationship matters
- Consumer issues

An EAP is a personal support programme that can greatly assist employers and their staff to achieve a positive balance in life. The service gives unlimited access to a range of specialist support and information including:

- Telephone support and counselling provided by qualified and experienced therapists
- Up to eight Structured Telephone Counselling (STC) sessions per person, per annum

The service is completely confidential and can be accessed via a free phone number and is available 24 hours a day, 365 days a year. The service is available to employees and immediate family members residing at the same address.

**EMPLOYEE ASSISTANCE PROGRAMME**

<b>Family Issues</b>	<b>FREE 24 HOUR</b> <small>personal support service</small> <b>0800 716 017</b>  Code/password is barnardos  <a href="http://www.employeeecare.com">www.employeeecare.com</a>
<b>Debt</b>	
<b>Work</b>	
<b>Lifestyle Addictions</b>	
<b>Relationships</b>	
<b>Legal</b>	



# Self-help resources

## NHS Choices

The NHS Choices website is a very useful compendium of information about a wide range of health problems, treatment options and self-management strategies.

[www.nhs.uk](http://www.nhs.uk)

## Condition Specific Websites and Self Help Resources

Rethink Mental Illness <https://www.rethink.org/>

Mind (Mental Health) <http://www.mind.org.uk/>

Black Dog Institute (Mental Health) <http://www.blackdoginstitute.org.au/>

Bipolar UK <http://www.bipolaruk.org/>

Sleep Hygiene <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/sleepingwell.aspx>

Cancer Research UK <http://www.cancerresearchuk.org/>

Macmillan Cancer Support <https://www.macmillan.org.uk/>

Diabetes.co.uk <http://www.diabetes.co.uk/>

Weight Loss and Healthy Eating

<http://www.nhs.uk/LiveWell/Loseweight/Pages/Loseweighthome.aspx> and

<http://www.nhs.uk/Livewell/Goodfood/Pages/eight-tips-healthy-eating.aspx>

The MS Society [www.msociety.org.uk](http://www.msociety.org.uk)

Arthritis Research UK <http://www.arthritisresearchuk.org/>

Parkinson's UK <https://www.parkinsons.org.uk/>

Disability Rights UK <https://www.disabilityrightsuk.org/>

Stroke Association <https://www.stroke.org.uk/>

British Heart Foundation <https://www.bhf.org.uk/>

Terrence Higgins Trust (HIV) <http://www.tht.org.uk/>

Age UK <http://www.ageuk.org.uk/>

Asthma UK <https://www.asthma.org.uk/>

Epilepsy Action <https://www.epilepsy.org.uk/>

Arthritis Research UK (Exercises to manage neck pain) <http://www.arthritisresearchuk.org/arthritis-information/conditions/neck-pain/neck-pain-exercises.aspx>

<http://www.arthritisresearchuk.org/arthritis-information/conditions/neck-pain/neck-pain-exercises.aspx>

Cardiovascular Risk Calculator <https://qrisk.org/2016/>

Alcoholics' Anonymous (Addictions Support)- <http://www.alcoholics-anonymous.org.uk/>



# Other resources

## **Mental Health Helpline**

SANE - <http://www.sane.org.uk/> (0300 304 7000) (Mental Health Helpline)

## **Citizen Advice Bureau**

The Citizens Advice Bureau is a very useful source of free, independent, impartial and confidential help and advice with a wide range of problems that people may encounter in their lives

<https://www.citizensadvice.org.uk/>

## **Remploy**

Remploy is a leading provider of employment placement services for people with disabilities

<http://www.remploy.co.uk/>

## **Access to work**

Access to Work is a government funded service that can help people with disabilities to find and sustain employment. They can arrange a wide range of workplace assessments in order to identify workplace adjustments that may be helpful to the individual and in many cases can assist with the implementation of such adjustments by subsidising their cost on behalf of the employer

<https://www.gov.uk/access-to-work/overview>

