



One Year on.....

Occupational Health for Primary Care in Devon and Cornwall is now One Year Old!

It's been a busy informative and very interesting year for us and we hope for you too. We have been made very welcome in the Practices we have visited and been able to provide practical help and support to assist you in having a healthy, happy and safe workplace.

We have lots of plans for 2001 but would very much like to hear from YOU! Please get in touch (details on the back cover) if you have problems or ideas that perhaps we could help to tackle. It is important that this service continues to focus on YOUR needs. We welcome your suggestions and look forward to hearing from you. If you haven't met us yet - do get in touch!



'Tis the season to be merry Tra la la la

Christmas is almost upon us!! Now begins the season of parties, and general over indulgence in all things alcoholic!!

At this time of year more than any other we are all particularly good at rationalising why we should comfort ourselves with an extra drink or two:

- "I've still got all the Christmas shopping and Christmas cards to do"
- "I really don't fancy going to his/her family this year"
- "Where am I going to get the right brand of sweatshirt/PC game/scooter for the kids?"
- "This is the first Christmas since he/she left me"
- "Work is so busy what with the pre-Christmas panic and Relenza!!"

Hey, what the heck, its Christmas – lets have a drink"!

Messages about alcohol consumption do not make great reading BUT, if you are going to cope this Christmas by over indulging then you need to know the facts.

Current HEA advice recommends that:

Women should drink no more than 2-3 units of alcohol per day.
Men should drink no more than 3-4 units of alcohol per day.

THIS DOES NOT MEAN THAT YOU HAVE TO DRINK THIS AMOUNT!!!
It means that you should take care not to drink any more than this.

'Units' of alcohol are measured in the following way (figures in brackets refer to alcohol by volume or ABV):

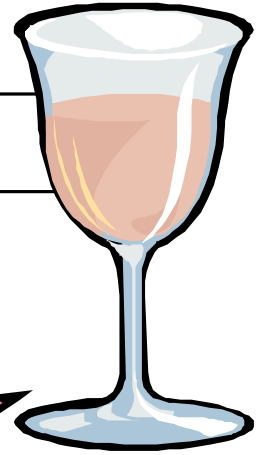


ONE UNIT IS EQUIVALENT TO:

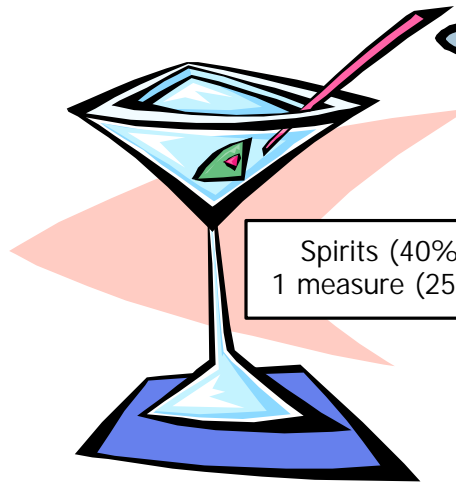
1 small (12 Beer/Lager/Cider
½ pint



Sherry/Port (20%)
1 small (50ml) glass



Wine (8%)
1 small (125ml)



Spirits (40%)
1 measure (25ml)





In many ways these measures are out of touch with the reality that much of the beer and wine that we now consume has a much higher percentage of alcohol by volume. Have a look at the % figure on your favourite bottle of wine or can of beer and compare it to the figures above.

Applying this reality check to the above means that you may well be drinking considerably more alcohol than you realise, so that for example;

A 440ml can of beer with an ABV of 4.5% = 2 units

A small (we're not talking home measures here!) glass of wine, ABV 13% = 1.7 units

Why not try to introduce some self-regulating rules and limits to your drinking this year:

-  Alternate every drink with a soft drink (or tap water if you want to spare your bank balance!)
-  Dilute your drinks with plenty of soda, tonic, lemonade etc.
-  Try a non-alcoholic alternative (see the recipes below), you may be surprised how much you enjoy it
-  Get drunk on atmosphere instead of alcohol – go to parties prepared with some new jokes and a bottle of dandelion and burdock!



And, of course, don't drink and drive, regardless of whether you think you are within the legal limits – leave the car at home.

If you achieve some of the goals above, then reward yourself (no, not with a drink!) in the New Year.

Book a half-day of Annual Leave and do whatever you want for a few hours - Shop, swim, read a good book, walk, sleep!

If you have serious concerns about the way in which you use or abuse alcohol (or other substances), or you would simply like more advice for yourself or others on sensible drinking, then please do not hesitate to contact the OH Service. Your enquiry will be treated in confidence.



How about trying one of these delicious alcohol-free punches this Christmas:

Duck's Fizz – a quick and easy cocktail, serves 10

1 ¾ pints (1 litre) Dry Ginger Ale (well chilled)

1 ¾ pints (1 litre) Sparkling White Grape Juice or fresh orange juice, well chilled

Combine the ingredients in a large jug with plenty of ice. Serve with a few raspberries, slivers of lime and mint leaves.

Judge's (Sober as!) Christmas Punch — takes longer to prepare but its worth it, serves 10

1 pint (560ml) water	½ pint (280ml) lime cordial
1lb 8oz (600g) sugar	1 ½ pints (840ml) iced water
1 pint (560ml) orange juice (with bits!!)	2x 750ml bottles dry ginger
1 pint (560ml) apricot juice/nectar	1 small can pineapple pieces in natural juice
Fresh mint leaves, kiwi slices, lime slices and strawberries to serve.	

Bring the 1 pint of water and sugar to the boil, stirring regularly until all the sugar is dissolved. Refrigerate overnight.





Make up some ice cubes with a single mint leave frozen inside each one. Put the prepared ice into a large jug and pour all the remaining ingredients on top. Serve immediately with slices of kiwi, lime and strawberries. Decorate with more fresh mint leaves.

ENJOY!!!!!!

RISK ASSESSMENT MADE EASY - Continuing our series to help you not only comply with the law but to have a happy healthy workplace! This month - Manual Handling in the Practice

We can hear you from here! - "We don't do any manual handling in the practice"
OH YES YOU DO! (It **is** nearly the pantomime season!).

The term 'manual handling' encompasses

	The LOAD (whatever it's size, weight or bulk)
	The TASK
	The PERSON undertaking the task
	The ENVIRONMENT in which the task is performed.

So, how do we go about assessing the risks?

KEEP it SIMPLE! Think about all the manual handling tasks that are undertaken in the practice - it might help to consider everyone's role. The administration staff who file notes, unpack and store supplies, move the occasional computer etc! - the Practice nurse or Doctor who helps patients on and off couches; the cleaner!

Consider also the ergonomic issues where posture might cause health problems - the chiroprapist continually bending over to attend to a patient's feet or the nurse having to bend to do a leg dressing or to take blood from a patient.



Ask your colleagues - they may be undertaking manual handling tasks that you have not even considered.

First of all think realistically - Is there a risk to health and safety? Just because a task is only undertaken occasionally does not mean there is no risk!












Is it possible to AVOID manual handling by eliminating the task altogether? If not, then the risk must be assessed and reduced as far as is reasonably practicable.

For example, the retrieving and filing of patient records - an onerous task if ever there was one!

We hope this scene doesn't look TOO familiar!

Ideally, storage systems will be well planned and realistic for the number of records they are expected to hold but like Pinocchio's nose they have a habit of growing out of control.

Consider -

-  Are notes regularly culled?
-  Could they be reduced by moving to a 'no paper' or 'reduced paper' system (Yes, we know that sometimes just introduces NEW problems!)?
-  Could records that are infrequently accessed be stored separately to leave more room?
-  As far as possible, can records (or those most frequently used) be stored at an appropriate height i.e. no higher than shoulder level or no lower than knee level?
-  Are appropriate stepstools or ladders available for ease of access?
-  Is there enough room between aisles for the worker to manoeuvre without having to twist or turn awkwardly?
-  Is the lighting adequate?
-  Does staff wear appropriate footwear?
-  Is there somewhere suitable (e.g trolley) on which to place the notes during retrieval?
-  Have staff received basic manual handling training?
-  Don't forget to record the risk assessment and document the control measures you have put in place as well as keeping a record of staff training.

Need further assistance/information, or want advice on training? Call the **Helpline** (contact details on back page).

“Emma and Bev always dreaded pulling notes for Dr Smith’s “diabetic/IHD audit!”



DSE COMPETENT PERSON TRAINING COURSE

*Full-day Session on Wednesday 31st January 2001
followed by a morning two-way feedback session on Wednesday 21st February
to be held at*

Kingsteignton Medical Practice







10 places available - BOTH sessions must be attended

The places will be allocated on a first come, first served basis. Contact Sue/Lesley - (details on back of newsletter). **COST £70 per person (provided all ten places are filled)**. Sandwich lunch/coffee provided.

Many thanks to Mark Procter, Practice Manager at the Kingsteignton Practice for agreeing to host this training.

You may recall from the article in the last newsletter that The Health and Safety (Display Screen Equipment) Regulations 1992 require that the workstations of all designated 'users' of Display Screen Equipment (DSE) are assessed for risk and appropriate control measures put into place.





This course will equip your designated 'competent person' to:

-  Understand the requirements of the regulations
-  Understand the risks associated with DSE use
-  Undertake risk assessments of DSE workstations
-  Identify appropriate control measures and source any necessary equipment
-  Inform, instruct and train other DSE 'users'
-  Link with the Occupational Health service for further support if problems arise

Further courses will be held based on demand.

If your Practice is able to host a training course that will accommodate up to 12 people in a training room and access to workstations in the afternoon of the first day, do let us know. This will give you 2 FREE places on the course, in addition to having some of your workstations assessed.

Contact Details for the OH Team

	0117 923 2381 any Wednesday morning from 09:00 – 12:30hrs
	You can fax us at any time on: 0117 923 2382 or 01530 224 762
	You can email us any time at: sue@abbottburke.co.uk or lesley@abbottburke.co.uk
	Our postal address is: 33 Logan Road, Bishopston, Bristol BS7 8DS

If you are not certain that your query or concern is related to Occupational Health, do not let this stop you – we will do our best to help.

All enquiries will be treated in confidence.



MEDICAL SICKNESS SOCIETY
PART OF THE WESLEYAN ASSURANCE SOCIETY



“How Our Patients Make Us III!”

This conference took place in November 2000. Its aim was to examine some of the factors affecting doctors' mental health. Over 120 delegates attended including 70 GPs from both Devon and Cornwall. A wide range of speakers gave their own perspective. Professor Ruth Chambers emphasised the opportunity that clinical governance offers as a way of reducing expectation and workload. Ben Charnaud presented very impressive figures on the number of doctors who had been seen for assessment and psychotherapy – almost all had had less than a month off work.

The conference also gave delegates the chance to meet and listen to other local and national speakers. The general feedback we have had has been very positive.

I should like to thank Pfizer for their generous sponsorship, Sue and Lesley and the LMC staff who did all the organisation of the conference so well.

A theme emerged from the daySystems - abusive systems, supportive systems, systems to protect. A theme for next year's conference?!



(L-R) Professor Ruth Chambers, Dr Gerard Woodroof, Mrs Zuleika Robertson, Dr Ben Charnaud (with microphone) and Dr David Longdon.



The Occupational Health Team would like to wish everyone a Happy Christmas and a Healthy and Safe New Year

