



## ◇ Dr David Longdon ◇ PARTNERSHIP AGREEMENTS ◇



sickness can easily cause major conflict especially where partners have lots of outside commitments.

It would be helpful to know if anyone has found a good way of producing a new agreement!! I suspect that a pragmatic approach is to deal with it in sections with the use of standard wording for the generic parts and then customising other areas to meet the partnerships specific needs or variables. An alternative could be “an away week!!”

Please do not forget the opportunity to consider a couple of areas not mentioned by the BMA/GPC :

- “All partners agree to undergo assessment by an independent Occupational Health Consultant if 2 or more partners ask.
- all partners will provide a sick note after one week.
- where possible all partners will be registered with a GP outside the practice who is not a close friend or family member.
- it is recognised that all partners have a responsibility to have in place a process for return to work after illness” - this may be an agreement to seek Occupational Health advice after say 6 weeks and also include protected time when returning after shorter periods”.

These are just a few ideas . I would be very interested to hear of anyone else's comments or good phrases. - [dl@devonlmc.org](mailto:dl@devonlmc.org)

The introduction of GMS 2 does mean that most old partnership agreements need revising. Extensive and helpful guidance is available to both members and non members on the BMA website. From an Occupational Health perspective, the process of producing a new agreement can be helpful if it establishes and clarifies the informal contract between partners and makes this overt rather than covert. Issues such as workload, money, holidays and

## Occupational Health & Safety Manual –

**New inserts** will be circulated within the next few weeks. Let us know if yours doesn't arrive!!

- COSHH
- Managing Sickness  
Absence
- Pregnancy at Work
- Reporting of Accidents  
and Incidents

We will also be delivering an extra manual which we would like to be stored in the Treatment Room – many of

the guidelines are especially useful for Practice Nurses, although Manual should be available for all staff.



**Make the Manual available to ALL staff! – the QOF audit requires that any Guidance should be available to everyone within the practice, this would include Health and Safety Guidance as in the OH&S manual. Some of the contents will also help you to tick boxes and claim points.**

*In recent months The Health & Safety executive (UK enforcement body for most health and safety law has begun to take a keen interest in the health sector. **This includes you !***

Dr Gerard Woodroof advises how to be prepared for that occasion when ‘The Inspector Calls’

Many have that inner thought that health and safety can be a bit tedious, but are afraid to admit it in public. Health and safety is always put forward as an argument as to why we cannot do what we want to do! And anyway, accidents happen to other people not ourselves.

However, to some, H&S is their very reason for existence. In fact, the Health and Safety Executive have indicated that they consider the health sector to be one of their priorities for attention. To be fair to them they have made no secret of the areas within health upon which they will be focusing. And it is becoming a question of when they come to visit you, rather than if!

So, our introduction to this year’s hot topics (!) for H&S in healthcare – and it really can be quite straight forward. Five main areas of current interest. Perhaps just discuss them at you next Practice Meeting – are they a concern for us? What have we in place? Views of those present on what more we might do? ..... and write it down (you could even call it part of your “risk assessment”).

Firstly, violence towards healthcare staff. **Within this, we might also include possible hazards faced by lone workers on home visits etc.....would anyone know if we**

**did not come back, e.g. after the last visit if the day, and we live alone – might no one miss us until we failed to arrive for work next day! What about our cleaner who works in the evening and, if injured, might be alone all night? Or are we more concerned at verbal abuse?**

Secondly, the now almost-traditional manual handling and musculoskeletal injuries **sometimes associated with moving patients etc. All in date for training on safer techniques? We really must get those heavy items of equipment moved.....it really is awkward getting stores from the back of that cramped cupboard under the stairs.....**

**Thirdly, stress.** After extensive research the HSE have identified a number of factors which seem to crop up time and time again as being potentially stressful to those of us at work.

They have come up with six simple questions, which they describe as a “first class filter tool”. These are printed below. The idea would be to consider them either individually or perhaps as a group. It may well be that some simple discussion and changes can be introduced to alleviate stress. However, if concerns remain over any one particular area further questionnaires are available to help tease out the problem and solution.

Fourthly, work related accidents. **What is your record? In any places, the most frequent accidents are simply people tripping over things! Try this simple “audit”:** spend just 2 minutes walking through your building with an enquiring eye. How many “slip, trip or fall hazards” do you see? A simple remedy – usually, yes! Repeat next week in a different part of your building - and don't forget outside as well

**Finally, Latex:** Primarily, interest has been in the use of latex gloves, although latex is in fact quite widespread in medical equipment etc. The problem is that latex has been associated with allergic reactions, both skin and respiratory, and both chronic

and acute. The spectrum runs from a minor skin irritation through to occupational asthma and in the worst case an anaphylactic reaction. More detailed information has been published by, amongst others, the Medical Devices Agency.

**In summary:**

**1. powdered gloves should no longer be used.**

**2. latex gloves should only be used if it can be convincingly argued that no other glove will provide the necessary protection.**

**See also the background leaflet from the HSE entitled ‘Latex and You’ in the OH&S manual and they also have a very useful website. [www.hse.gov.uk](http://www.hse.gov.uk)**

#### **HSE –First class Filter tool’ – Sources of Stress at work**

*You might like to use this simple tool as the basis for some work on stress within your Practice. The OH service are very happy to assist you with this if you wish. Contact details on back page.*

The following six questions cover the areas that have been found to be the main sources of stress for people at work. Tick the box that most accurately reflects how you feel about your job at the moment.

##### **Demands**

**1. I am able to cope with the demands of my job.**

Often  Sometimes  Seldom  Never/Almost never

##### **Control**

**2. I am able to have a say over the way I do my work.**

Often  Sometimes  Seldom  Never/Almost never

##### **Support**

**3. I believe that I receive adequate support and information from my colleagues and superiors.**

Often  Sometimes  Seldom  Never/Almost never

##### **Relationships**

**4. I am subjected to unacceptable behaviours (e.g. bullying) at work.**

Often  Sometimes  Seldom  Never/Almost never

##### **Role**

**5. I understand my role and responsibilities within the organisation.**

Often  Sometimes  Seldom  Never/Almost never

##### **Change**

**6. The organisation engages staff frequently when undertaking organisational change.**

Often  Sometimes  Seldom  Never/Almost never

## Liquid Nitrogen

***Do you have Liquid Nitrogen in your practice? Have you considered that the way in which it is stored and used, could prove a risk to the health and safety of those involved? You should first consider if you need to use it at all!***

Liquid Nitrogen is non-flammable, non-oxidising, non-toxic, non-corrosive, and chemically inert and does not constitute a fire hazard or explosion risk (phew!)

**So why worry? - FACTS!**

- **one volume of liquid nitrogen gives approx. 700 volumes of nitrogen gas and is an asphyxiant.**
- Its absolute temperature is  $-196$  degrees Celsius, and thus has the potential to cause **severe cold burns.**

**Important therefore** that ALL staff know of the hazards/risks

- **always** wear suitable Personal Protective Equipment (PPE) when handling it,
- **always** use it in a well-ventilated environment
- **store** in a well-ventilated and secure location. There is very specific guidance on how and where dewers should be stored.
- **transport** – always transport in upright and secure position. Advise your insurer and display a hazard data sheet in your vehicle. Dewers must not be transported in a car. Avoid tilting them when moving them around.
- **seek** further information and advice from your supplier .

Many suppliers offer training on using liquid nitrogen. Why not check with your neighbouring practices to see if they use it, and share the costs of a course?

**Only** those trained in the handling and use of liquid nitrogen should be using it.

There is a legal requirement to assess the risks of using this substance (see 'COSHH' in the new OH&S manual inserts (about to be issued)

**Accidents do happen – don't let it happen to you.**

### **Personnel/HR queries?**

**We often get queries about employment issues not directly associated with occupational health – we thought you might find these two sources useful.**

[www.acas.org](http://www.acas.org) - this website contains information about all of ACAS's services as well as extensive question and answer section, plus latest news and developments. You can also access their easy to read publications – many of them downloadable.

ACAS also run some excellent seminars (at cost price and usually a few hours or half a day) on subjects such as :

Reducing absence and staff turnover  
 Managing discipline and grievance at work  
 Dealing with bullying and harassment in the workplace  
 Employing people – an overview for employers  
 Contracts of employment and the written statement  
 Employment Act 2002- new rights for working parents

For further information see ACAS website or ring South West Regional office on 01179 06 5249.

[www.personneltoday.com](http://www.personneltoday.com) - this is journal for personnel people but gives useful information and updates on employment law.

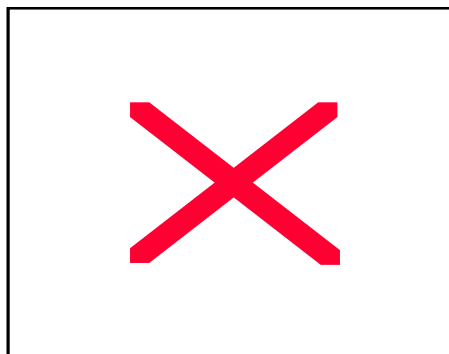
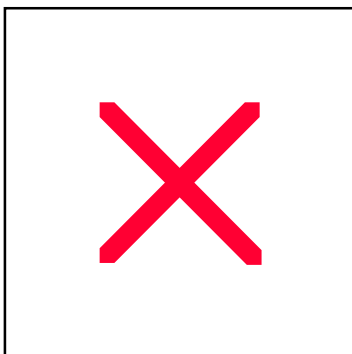
**COUNSELLING** – Counselling is available to all staff. Contact one of the team, in confidence, for further information.

**Manual Handling Training -**

Many thanks to the Occupational Health Team for arranging Manual Handling Training at Lisson Grove Medical Centre in May. It was a great success and very enjoyable. The trainer arrived with several 'props' including a wooden man and taught us how to things as safely as possible with the minimum physical effort. We moved our reclining volunteer (OH Nurse – Ellen) up and down the floor so many times I wonder if she will ever volunteer for anything again! We felt this was 3hrs well spent and many techniques are transferable to our home environment in addition to the benefits we are sure we will find in the workplace.

Regards

Cindy/Suzanne Brown  
Practice Manager  
Lisson Grove Medical Centre  
01752 315538



The **Manual Handling Course** is held in your own Practice (or you could join up with a neighbouring Practice if numbers are small). It is 2 \_ hours in total – first part of the session is for **ALL** practice staff, the second part of the session is for clinical staff who are handling and moving patients.

If you would like further information contact Ellen on 01752 762116.

COntact details	
☎	0117 923 2381 any Wednesday from 9:00am – 5.00pm
7	You can fax us at any time on: 0117 923 2382 or 01530 224 762
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