

## NHS Occupational Health Accreditation Standards

The Faculty of Occupational Medicine launched the new accreditation system for Occupational Health providers on 1 December 2010 ([www.segohs.org.uk](http://www.segohs.org.uk)) Providers of occupational health services to NHS organisations are also required to meet some NHS specific standards, detailed below, in addition to SEQOHS standards. As part of the NHS Plus Quality Strategy and Department of Health requirements, all NHS OH providers will have to be fully accredited, or ready for accreditation, by 31 March 2013.

### NHS Standards (also referred to as Domain G)

Reference	Minimum Requirements	Prescriptive Evidence
<b>G1 CORE SERVICES</b>		
G1.1	An OHS must be able to deliver each of the six NHS core services to NHS customers	<p>Service Level Agreement, contract or other document describes an agreement setting out arrangements for each of the six NHS core services, or documentation to demonstrate that the OHS offered such services and that the commissioner declined that service.</p> <p>The six core services are:            Prevention – the prevention of ill health caused or exacerbated by work            Timely intervention – easy and early treatment of the main causes of sickness absence in the NHS            Rehabilitation – processes to help staff stay at work or return to work after illness            Health assessments for work – supporting organisations manage attendance, retirement and related matters            Promotion of health and well-being – using work as a means of improving health and wellbeing and using the workplace to promote health            Teaching and training – promoting the health and wellbeing approach amongst staff and managers</p>
G1.2	An OHS must review services with the NHS customer at least six monthly	Notes of review meeting with the NHS customer dated within the last six months, and documented amendments to the schedule of services if applicable
<b>G2 BUSINESS STANDARDS</b>		
G2.1	An OHS must cost out services using a costing model that is reviewed or updated annually	<p>A current costing model/tool that covers the main areas of pay and non-pay expenditure.</p> <p>It should include an allowance for ‘non-revenue-generating time’ e.g. annual</p>

		<p>leave, other absences, training and development, etc.</p> <p>It should allow for supporting professional activity. It must incorporate an allowance % for Trust overheads.</p> <p>An OHS not providing external services must be able to demonstrate that it has costed out its own internal service provision to its host Trust.</p>
G2.2	An OHS must have a current business plan	<p>The business plan does not need to follow a set format. It may consist of a statement of the key planned work activities and areas for improvement or service development.</p> <p>The plan must be for a minimum of 12 months and up to 5 years. There needs to be evidence that the plan is being reviewed and updated annually.</p>
<b>G3 DELIVERY STANDARDS</b>		
G3.1	An OHS must offer dates for an appointment within the timescales stipulated within the Service Level Agreement or contract	Record of an audit within the last 12 months showing that the mean waiting time for access to a service are within the criteria set out in the SLA or contract.
G3.2	An OHS must send reports within the timescales stipulated within the Service Level Agreement or contract	Record of an audit within the previous 12 months showing the mean time for dispatch of reports are within the criteria set out in the SLA or contract
<b>G4 CLINICAL STANDARDS</b>		
G4.1	An OHS must perform systematic audits of clinical care	Records of two local clinical audits every year and participation in any national NHS OH clinical audits