

Occupational Health Committee

The Occupational Health Committee met on 3 February, with Dr. L. G. NORMAN in the chair.

Constitution of B.M.A.

The Committee considered the revised draft report of the special committee on the constitution of the Association.

Dr. J. A. L. VAUGHAN JONES* urged that doctors in occupational health should be represented not only on the proposed regional B.M.A. councils but also on Council itself and in the Representative Body. Urging that the Chairman of the Occupational Health Committee should be *ex officio* a member of Council, Dr. Vaughan Jones stressed that that was important, because the interests of occupational health were concerned in many matters not directly related to occupational health which were discussed by the Council. Relatively speaking, there were few industrial medical officers who had an opportunity to be elected to the Council.

Dr. F. H. TYRER, supporting Dr. Vaughan Jones's plea, said: "I suggest that our particular interest is broader than that in many specialties." Dr. H. ALEXANDER stated that he had known many instances when reports of other committees contained items of interest to the Occupational Health Committee. If the chairman of the committee were not a member of the Council the significance of these items might be missed.

Calling for representation of the different types of occupational health practice on the Representative Body, Dr. VAUGHAN JONES said they were not likely, in the proposed arrangement of things, to get representation through the ordinary machinery. "In the next few years," said Dr. J. ROGAN, "there is likely to be a re-examination of the basis of medical practice, and any such examination would be myopic if it did not consider industrial medicine." Dr. R. L. LUFFINGHAM pointed out that under the model by-laws an occupational health representative was usually co-opted to divisional executive committees.

Hospital Occupational Health Service

While generally welcoming the idea of an occupational health service for hospital employees, the Committee decided to discuss the matter with the occupational health committee of the Royal College of Nursing. Several members expressed concern at aspects of the report on a hospital occupational health service adopted by an R.C.N. delegate meeting and approved by the R.C.N. Council for presentation to the Minister of Health.

Dr. J. C. MACMASTER said that the proposed service would impinge to a certain extent on existing services. Dr. J. J. O'DWYER pointed out that there were hospitals where there was care for the nurses but none where there was care for the large number of other employees, and Dr. MACMASTER agreed. Dr. G. E. GRAVES PEIRCE thought the crux of the matter was that there should be an independent doctor responsible for the health of the hospital workers.

Dr. O'DWYER reported the comment of an orthopaedic consultant that there was a lack of occupational preventive care for nurses,

and he instanced the occupational hazard in nursing of lifting. The large turn-over in hospital staff was owing in large measure to the lack of a hospital occupational health service, though there was care for sick nurses. Dr. R. A. TREVETHICK said that 10% of the staff in American hospitals were commonly off duty because of injuries caused by accidents. Dr. ROGAN thought an independent doctor going into hospital to practise occupational health would be in difficulty. It would surely be better to nominate a member of the medical staff to receive some instruction in ergonomics and environmental medicine. That would be practical. As it stood the R.C.N.'s report might be discarded as too idealistic.

Dr. FISHER said it had been found to be better that university student health services should be manned by independent doctors and not by members of the teaching staff. He thought that that was what was intended in the report. Dr. ALEXANDER thought that the R.C.N. report presented the Committee with a *fait accompli*. Dr. TYRER replied that the nurses' tactics might have been wrong but it was not wrong that they should have put their proposals forward. Dr. LUFFINGHAM agreed that the Committee should support the nurses.

Professor T. S. SCOTT thought that doctors should be very conscious of the fact that they had not themselves instituted any kind of occupational health service for hospitals. That was a glaring omission on the doctors' part. He thought there was a real need for a service in hospitals.

Dr. ROGAN said that, though there was a need for something to be done, nurses were only one section of hospital staff: there were porters, radiographers, and physicists, for example. Clearly there was merit in the report, but he did not think it had been carefully considered. The R.C.N. should have consulted the B.M.A. earlier. The support of the Central Consultants and Specialists Committee would be needed.

The Committee decided, at the suggestion of Dr. WAND, to have exploratory talks with the R.C.N.

Appointed Factory Doctors

A copy of a letter from the Association of Industrial Medical Officers to the Chief Inspector of Factories had been sent by the Association of I.M.O.s to the Committee. The Association of I.M.O.s protested in its letter against the B.M.A.'s decision that directors of group services should be excluded, on principle, from being appointed as district appointed factory doctors. "However," the letter continued, "if the Ministry persists in this view, then in equity such posts should also be denied to general practitioners who hold one or more part-time appointments as industrial medical officers. Furthermore, where existing district appointed factory doctors hold such a combination of appointments they should resign from part-time posts in industry. Conversely, if it were felt impossible to ask the holders of factory doctor appointments to resign from industrial appointments it was inequitable to ban directors of group services from district appointed factory doctor appointments."

Dr. VAUGHAN JONES, supported by Dr. GRAVES PEIRCE, raised the question of

whether, under its agreement with the B.M.A., the Association of Industrial Medical Officers should have taken this action.

Dr. TREVETHICK said that the council of the Association of Industrial Medical Officers felt strongly on this question. The director of a group company had been summarily dismissed within a fortnight of the appointment of a district appointed factory doctor in a factory which had been in the scheme.

Dr. J. P. W. HUGHES confirmed that his council of the Association of I.M.O.s felt strongly about this, and had indeed given its president and secretary *carte blanche* to take whatever action they thought right irrespective of the opinion of the Occupational Health Committee. It felt so strongly that it wanted to give the Occupational Health Committee an opportunity of reconsidering its view. The Ministry relied entirely on the view of the Committee.

Dr. TREVETHICK said the Association of I.M.O.s apologized if it had transgressed in going to the Ministry. Having made representations to the Occupational Health Committee on a previous occasion and having been rejected, its only course was to write direct to the Ministry, and to send a copy of the letter to the Committee.

By eight votes to six the Committee agreed to reopen the matter. The CHAIRMAN said that a clash between the two associations should be avoided. Like other matters, he hoped it would be resolved by mutual discussion. The Ministry of Labour was reviewing the duties of the appointed factory doctor through a subcommittee of the Industrial Advisory Committee. The Chairman suggested that the matter might be referred to a subcommittee. Dr. VAUGHAN JONES supported the Chairman's proposal, and the reference to a subcommittee was agreed to by the Committee.

On behalf of the Association of Industrial Medical Officers, Dr. TREVETHICK thanked the Committee for being prepared to reconsider the matter.

Medical Education

It was reported that the Council had referred to the Committee on Medical Science, Education, and Research an invitation from the General Medical Council to the B.M.A. to put forward suggestions and ideas for revising the recommendations on the undergraduate medical curriculum. In the expectation that the Medical Science Committee would appoint a subcommittee, the views of the Occupational Health Committee were invited.

It was decided that the two reports that the Occupational Health Committee had produced on the teaching of occupational health and the one on undergraduate education in occupational health should be sent to the subcommittee, and that the subcommittee should be asked to receive a small deputation from the Occupational Health Committee.

Correction.—The Chairman of the B.M.A.'s *ad hoc* Committee to prepare evidence to the Royal Commission on the Penal System is Professor F. E. Camps, not Dr. Doris Odlum (*Supplement*, 6 March, p. 80). Dr. Odlum is Deputy Chairman of the Committee.

* Dr. Vaughan Jones died on 26 February (*B.M.J.*, 13 March, p. 727).