

Initial accreditation report

Standards 1-8

British Occupational Hygiene Society

6 December 2023

Contents

About accreditation.....	3
The Outcome.....	4
About the Register.....	6
Assessment against the Standards	9
Share your experience	21
Impact assessment (including Equalities impact)	21

About accreditation

The Professional Standards Authority (the PSA) accredits registers of people working in a variety of health and social care occupations that are not regulated by law. To become an Accredited Register, organisations holding registers of unregulated health and social care roles must prove that they meet our *Standards for Accredited Registers* (the Standards).

Initial accreditation decisions are made by an Accreditation Panel following an assessment of the organisation against the Standards by the Accreditation team. The Panel decides whether to accredit an organisation or not. The Panel can also decide to accredit with Conditions and provide Recommendations to the organisation.

- **Condition** – Issued when an Accreditation Panel has determined that a Standard has not been met. A Condition sets out the requirements needed for the Accredited Register to meet the Standards, within a set timeframe. It may also reduce the period of accreditation subject to a review or the Condition being met.
- **Recommendation** – Actions that would improve practice and benefit the operation of the Register, but which is not a current requirement for accreditation to be maintained.

This assessment was carried out against the *Standards for Accredited Registers*¹ and our supporting *Evidence Framework*².

We used the following in our assessment of BOHS:

- Documentary review of evidence of benefits and risk supplied by the BOHS and gathered through desk research
- Documentary review of evidence supplied by the BOHS and gathered from public sources such as its website
- Due diligence checks
- Share your experience responses
- Site visits including discussions with members of staff
- Interviews with the President, CEO, Registrar
- Observation of a Faculty of Occupational Hygiene Committee meeting on 17 November 2022
- Assessment of BOHS' complaints procedures.

¹ https://professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-accredited-registers.pdf?sfvrsn=e2577e20_8

² https://professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-evidence-framework-for-standards.pdf?sfvrsn=55f4920_9

The Outcome

The Accreditation Panel met on 10 November 2023 to consider BOHS. The Panel was satisfied that BOHS met all the *Standards for Accredited Registers*, with one Condition.

We therefore decided to accredit BOHS with one Condition.

We noted the following **positive findings**:

- BOHS has developed new guidance on safeguarding, which clarifies how the organisation, and registrants, should handle safeguarding concerns. Although Occupational hygiene specialists do not tend to have direct contact with members of the public, this should help protect registrants and those they are working with, particularly lone workers.
- BOHS works to highlight workplace health issues affecting diverse groups, for example women’s workplace health³ and construction workers at risk of exposure to cancer causing silica dust⁴.
- BOHS works closely with the Health and Safety Executive (HSE) and will work with the HSE, and other stakeholders to raise awareness of its new Register of Occupational Hygiene Professionals.

We issued the following Conditions to be implemented by the deadline given:

Conditions		Deadline
Standard Five	<ul style="list-style-type: none"> • Condition One: BOHS’ complaints procedures should allow for appropriate lay input. 	Six months from the publication of this report

We issued the following Recommendations to be considered by the next review:

Recommendations	
Standard One	<ul style="list-style-type: none"> • Recommendation One: BOHS should consider including reference to specific guidance and other controls, so it is clear how it as an organisation, is mitigating risks within the parameters of the legislative framework and other broad controls for managing occupational hygiene risk. • Recommendation Two: Consider whether there are other risks related to professional behaviours and ethics, which should be included within the matrix in addition to that of safeguarding.

³ <https://www.bohs.org/media-resources/press-releases/detail/bohs-calls-for-urgent-action-to-tackle-uks-hidden-crisis-in-womens-workplace-health/>

⁴ <https://www.bohs.org/media-resources/press-releases/detail/bohs-asks-for-immediate-action-to-stop-unnecessary-silica-deaths/>

<p>Standard Two</p>	<ul style="list-style-type: none"> • Recommendation Three: BOHS should review its guidance on registration for consistency and clarity before publication. • Recommendation Four: Provide, or signpost to clearer information about the different levels of membership and expertise within the Register itself.
<p>Standard Five</p>	<ul style="list-style-type: none"> • Recommendation Five: Review the guidance to make clear that the criteria for determining length of restrictions on practice applies to all types of sanction.
<p>Standard Six</p>	<ul style="list-style-type: none"> • Recommendation Six: Consider how the FOH Committee can gain input from a broader range of stakeholders, for example employers and different population groups, into its decisions.

About the Register

This section provides an overview of BOHS and its register.

Name of Organisation	British Occupational Hygiene Society (BOHS)
Website	https://www.bohs.org/
Type of Organisation	BOHS is a registered Charity and holds the Royal Charter.
Role(s) covered	BOHS' Accredited Register is for Occupational hygienists. Through its Faculty of Asbestos Assessment and Management (FAAM), BOHS also offers professional membership for practitioners who manage and assess asbestos, but this is separate to the Accredited Register for Occupational hygienists.
Number of registrants	BOHS estimates there will be approximately 700-1000 people on its register when it launches.
Overview of Governance	BOHS is overseen by a Board of Trustees. BOHS Professional Register of Occupational Hygienists is overseen by the Faculty of Occupational Hygiene (FOH) Committee. There are separate Committees responsible for oversight of BOHS' education and training functions.
Overview of the aims of the register	BOHS Register of Occupational Hygiene Professionals aims to: <ul style="list-style-type: none"> • Provide a register of individuals competent to practice Occupational Hygiene. • Give employers confidence in who they appoint to carry out occupational hygiene services to help protect the health and wellbeing of their workforces.

Inherent risks of the practice

This section uses the criteria developed as part of the Authority's *Right Touch Assurance tool*⁵ to give an overview of the work of Occupational hygienists.

Risk criteria	Occupational hygienist
1. Scale of risk associated with Occupational hygienists.	a. Occupational hygiene describes the prevention of ill-health in the workplace by managing health risks, for example by controlling worker exposure to harmful substances. ⁶ BOHS has developed an illustrative <u>work profile</u> which provides an overview of the role of

⁵ https://www.professionalstandards.org.uk/docs/default-source/publications/policy-advice/right-touch-assurance---a-methodology-for-assessing-and-assuring-occupational-risk-of-harm91c118f761926971a151ff000072e7a6.pdf?sfvrsn=f537120_14.

⁶ <https://www.hsl.gov.uk/what-we-do/occupational-hygiene#:~:text=Occupational%20hygiene%20describes%20the%20prevention,worker%20exposure%20to%20harmful%20substances.>

<p><i>a. What do Occupational hygienists do?</i></p> <p><i>b. How many Occupational hygienists are there?</i></p> <p><i>c. Where do Occupational hygienists work?</i></p> <p><i>d. Size of actual/potential service user group</i></p>	<p>an occupational hygienist. This includes that ‘Occupational hygienists have the skills to identify, assess and find solutions to control workplace health hazards and thereby manage any associated risk to health. These may be chemical, physical, biological or ergonomic and can be present in the workplace in many forms.’</p> <p>b. BOHS estimates there will be approximately 700-1000 people on its register when it launches. This is likely to represent most people working as occupational hygienist in the UK, due to it being the only professional body in the UK. However, there may be other people working as Occupational hygienists on a contract basis who do not hold BOHS membership currently, and who may have trained overseas.</p> <p>c. Occupational hygienists provide services either as employees, or by contracting their services directly to a business. They may work in a wide range of workplace settings. Examples provided by BOHS include managing the handling of chemical products in a factory, measuring and sampling levels of dust in a quarry, and measuring noise levels in a factory. Further examples of workplace environments gathered from job descriptions include offshore oil and gas installations, and within the military.</p> <p>d. The work of Occupational hygienists affects the public, either directly or indirectly, through the management of health risks. BOHS highlights that in the UK there are 1.7m people suffering from work-related illness⁷ with 40,000 or more suffering from work-related chronic obstructive pulmonary disease (COPD) alone, and 13,000 deaths annually from occupational lung disease. Of 100 deaths caused by the workplace, 99 are caused by occupational illnesses derived from occupational exposure.</p>
<p>2. Means of assurance</p>	<p>The Health and Safety Executive (HSE) is Britain’s national regulator for workplace health and safety. BOHS has developed, with the support of HSE, a series of guides to service provision of Occupational hygienists (Good-Practice-Guide-Version-2-rebranded-2021-1.pdf (bohs.org)). The relationship between the HSE and BOHS is therefore a key means of assurance of the quality of occupational hygienist provision. The focus is on prevention, but HSE can investigate, and taken enforcement action if needed to prevent harm.</p>
<p>3. About the sector in which Occupational hygienists operate</p>	<p>Although occupational hygiene applies to any workplace, typically registrants will be working in environments which pose higher risk to employees and the public. Sectors include construction, offshore, chemical plants, manufacturing, infrastructure projects and other safety-critical industries. Occupational hygienists will often work as part of a multi-disciplinary team, including occupational health physicians, occupational health nurses and other health and safety professionals.</p>
<p>4. Risk perception</p>	<p>The types of workplace hazards that Occupational hygienists manage often pose significant health risks, and can cause fatal injury. These include the effects of exposure to chemicals, poisons and radiation. The</p>

⁷ [Health and safety statistics \(hse.gov.uk\)](https://www.hse.gov.uk/statistics/)

<ul style="list-style-type: none"> • <i>Need for public confidence in Occupational hygienists?</i> • <i>Need for assurance for employers or other stakeholders?</i> 	<p>well-known risks of asbestos to the public highlights the need for public confidence in the management of workplace hazards more generally including in areas the general public will be less aware of.</p> <p>It is equally important for employers and other stakeholders to have assurance of the quality of occupational hygiene services, since employers can be held to account by the HSE if they fail in their responsibilities. Occupational hygienists will often be a key part of how businesses are mitigating workplace risks, and the consequences of failing to do so effectively can be severe. The HSE reports that 'The total costs of workplace self-reported injuries and ill health in 2019/20 was £18.8 billion. Ill health causes the biggest proportion of total costs at around 60% (£11.2 billion), with injury resulting in around 40% of total costs (£7.6 billion).'</p> ⁸
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

⁸ [Statistics - Costs to Britain of workplace injuries and new cases of work-related ill health \(hse.gov.uk\)](https://www.hse.gov.uk/statistics/costs-to-britain-of-workplace-injuries-and-new-cases-of-work-related-ill-health/)

Assessment against the Standards

Standard One: Eligibility and 'public interest test'

Summary

The Accreditation Panel found it is in the public interest to accredit the BOHS Register of Occupational Hygiene Professionals. The Accreditation Panel found that Standard One is met. It issued the following Recommendations:

Recommendations:

- Recommendation One: BOHS should consider including reference to specific guidance and other controls, so it is clear how it as an organisation, is mitigating risks within the parameters of the legislative framework and other broad controls for managing occupational hygiene risk.
- Recommendation Two: Consider whether there are other risks related to professional behaviours and ethics, which should be included within the matrix in addition to that of safeguarding.

Accreditation Panel findings

Standard 1a: Eligibility

The PSA's powers of accreditation are set out in the National Health Service Reform and Health Care Professions Act 2002. Standard One considers whether a Register is eligible for accreditation, based on whether the role(s) it registers can be considered to provide health and care services and are not required by law to be registered with a statutory body to practise in the UK. We found that BOHS falls within the scope of the Accredited Registers programme and therefore meets the requirements of Standard 1a.

Occupational hygiene is a core discipline within the broader field of Occupational Health. Occupational health professionals can include statutorily regulated health professionals such as doctors, for example occupational health physicians; as well as those who are not required by law to be registered with a statutory body, such as occupational health technicians.

Occupational hygiene is aimed at the prevention of ill-health in the workplace by managing health risks. The knowledge required for this includes toxicology, and how hazardous agents impact on the human body. It also involves developing solutions for containing risks, such as personal protective equipment.

The work of Occupational hygienists does not involve direct contact with patients. The Accreditation Panel considered whether this affected eligibility of BOHS for accreditation, with reference to the criteria set out at Section 25E⁹ of the Act. It determined that Occupational hygienists can be considered as engaging in healthcare work, through their work to prevent ill-health in the workplace. This type of

⁹ [National Health Service Reform and Health Care Professions Act 2002 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

indirect healthcare provision is similar in nature to that of public health workers, for which there is an Accredited Register (the UK Public Health Register). Occupational hygienists are not required by law to be registered with a statutory body. Consequently, the Accreditation Panel determined that BOHS' Professional Register for Occupational Hygienists falls within the scope of the PSA to accredit.

The Accreditation Panel noted that BOHS plans to include eligible members of the Occupational Hygiene Society of Ireland (OHSI) on its Register, so that this can help facilitate cross-border working and consistency of standards. BOHS are aware that registrants must be made aware that the Accreditation Quality Mark can only be displayed in relation to work undertaken in the UK, and for its public Register to also make this clear. As long as these requirements are met, BOHS' approach will be in keeping with that of other Accredited Registers with international registrants and does not raise a concern under Standard 1a.

Standard 1b: Public interest test

The Accreditation Panel found that found that this part of the Standard is met.

i. Evidence that the activities carried out by registrants are likely to be beneficial.

As noted under Standard 1a, Occupational hygiene is a discipline within the broader field of Occupational health. It is aimed at the prevention of ill-health in the workplace by managing health risks. The main ways that Occupational hygienists achieve this can be described as: recognition of workplace hazards, and reduction of health risks; assessment, measurement and monitoring of hazards to health in the workplace; and controlling workplace exposures.

The professionalisation of Occupational hygienists stems from a national requirement for such skills identified in the 1960s, when the Government established a National Occupational Hygiene Service. The importance of employers promoting the health and wellbeing of their workers was then reinforced by the introduction of the Health and Safety at Work etc Act 1974 (HSWA). The Health and Safety Executive (HSE)¹⁰ is responsible for enforcement of the HSWA.

An example of how the work of Occupational hygienists helps to identify and reduce disease through recognition of workplace hazards is for occupational asthma. Asthma is a common lung condition that causes occasional breathing conditions and can be severe. HSE research (2005)¹¹ helped to confirm the links between isocyanates, which are a family of chemicals widely used in manufacturing, and asthma. Occupational hygiene techniques were used to identify the different sectors where isocyanates were used and provide estimates of the numbers of workers exposed, and Occupational hygienists have an important role in helping employers to manage this risk today. HSE notes that whilst there is no common definition for occupational asthma, 'asthma caused by specific work factors is of two broad types: 'allergic occupational asthma' and 'irritant-induced occupational asthma' and incidence has been increasing since 2014' (HSE, 2021¹²). This example highlights the need for, and preventative health benefits of occupational hygiene.

¹⁰ <https://www.hse.gov.uk/>

¹¹ <https://www.hse.gov.uk/research/rrpdf/rr311.pdf>

¹² [Work-related asthma statistics, 2022 \(hse.gov.uk\)](https://www.hse.gov.uk/research/rrpdf/rr311.pdf)

The assessment, identification and monitoring of hazards to health in the workplace and subsequent recommendation on control measures is important since, although Occupational Hygienists will work to eliminate health hazards elimination is not always possible or appropriate (for example due to the utility of the hazard). Occupational Hygienists follow the requirements of the Control of Substances Hazardous to Health (COSHH) regulations.

One of the techniques used by Occupational hygienists to measure exposure of an individual is biological monitoring, which involves testing samples of biological media from an individual (such as urine) for the presence of certain chemicals, to assess the level of exposure. Biological monitoring is normally carried out with the assistance of Occupational Health professionals. The results can then be compared against the limits defined as safe by Biological Monitoring Guidance Values published by the HSE. The outputs from biological monitoring can be used to inform workers about their potential for exposure and the health effects which may arise and be used to recommend control measures to help ensure that workers are not exposed to dangerous levels of a health hazard.

A key function of the role of Occupational hygienist is to determine effective control strategies for exposure to hazards. To be effective, the control needs to properly recognise the hazards; assess, monitor and/or measure the exposure level; and then devise the most effective control strategy. An example of this is the cancers caused by respirable crystalline silica (RCS), a fine dust which the HSE describes as ‘the biggest risk to construction workers after asbestos¹³.’ Occupational hygienists work with employers and other professionals to devise controls that prevent, or limit, exposure to RCS. HSE signposts to BOHS in its guidance for employers on *Getting help to prevent work-related lung disease*¹⁴ and finding suitably qualified professionals.

The Accreditation Panel considered the examples of how Occupational hygienists help to prevent work-based ill health and concluded that there were clear benefits of their work in terms of the health and wellbeing of workers.

ii. Evidence that any harms or risks likely to arise from the activities are justifiable and appropriately mitigated by the register’s requirements for registration.

There are significant risks associated with not carrying out the duties of an Occupational hygienist in a competent way. Errors or inadequacies in the assessment, monitoring and measuring of workplace hazards can lead to injury as highlighted by the list of industrial diseases entitling claimants to benefits if not adequately protected by their employer¹⁵.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) has expanded the data held on work-related harms and helps to highlight

¹³ <https://www.hse.gov.uk/construction/healthrisks/cancer-and-construction/silica-dust.htm>

¹⁴ <https://www.hse.gov.uk/lung-disease/help.htm>

¹⁵ <https://www.gov.uk/government/publications/industrial-injuries-disablement-benefits-technical-guidance/industrial-injuries-disablement-benefits-technical-guidance#appendix-1-list-of-diseases-covered-by-industrial-injuries-disablement-benefit>

that failure to adequately protect workers can also lead to fatal injury. Many of the risks associated with inadequate occupational hygiene have a long latency period, such as the development of conditions such as cancer.

Having appropriate technical standards, and professional codes of conduct and ethics, are a key mitigation for these risks. The effectiveness of BOHS' requirements for registrants in these areas are discussed further under the relevant Standards. BOHS also maintains a detailed risk matrix, broadly structured around the three main areas of practice described for Occupational hygienists: the identification, monitoring, and containment of work-based hazards. This allows for mitigations for specific areas of risk to be identified, and for the ongoing identification and management of emerging risks that may arise from the occupational hygiene literature and other sources.

During our assessment, we asked BOHS whether the risk of safeguarding was relevant to their area of practise, considering that registrants will rarely be in contact with members of the public. BOHS told us that whilst it had not considered this specifically to date, there was growing evidence of safeguarding risks in relation to registrants working alone; particularly when registrants are females working in largely male dominated industries and sectors. BOHS has subsequently developed a policy on 'Occupational hygiene and Adult Safeguarding', which at the time of writing was in draft. This is considered in further detail under Standard Three. This document sets out the principles of safeguarding, and how they apply to the role of registrants.

The Accreditation Panel considered the risks arising from the practice of Occupational hygiene and the mitigations that BOHS has in place at a high level. It found that the benefits of the work of occupational hygiene appeared to outweigh the risks. However, it made the following recommendation, aimed at allowing for greater specificity of how BOHS mitigates risks arising from different areas of practice within its risk matrix:

- Recommendation 1: BOHS should consider including reference to specific guidance and other controls, so it is clear how it as an organisation, is mitigating risks within the parameters of the legislative framework and other broad controls for managing occupational hygiene risk.

The Accreditation Panel also noted that the risk matrix is currently focused on technical risks. Whilst this reflects the nature of Occupational hygiene and the importance of precise standards, it may be of value to additionally consider if there are further risks relating to professional behaviours in addition to safeguarding.

- Recommendation 2: Consider whether there are other risks related to professional behaviours and ethics, which should be included within the matrix in addition to that of safeguarding.

iii. Evidence of commitment to providing accurate information about treatments and services.

BOHS registrants do not offer services directly to the public, but instead to employers and directly to businesses, as contractors. It is therefore important that

they represent their services in a clear and transparent way that does not mislead about their level of skills and competency.

BOHS' *Code of Ethics* includes a section on professional opinions. This includes requirements for registrants to 'ensure judgements are supported by honest, accurate, transparent and auditable evidence-bases,' and make 'all reasonable endeavours to ensure that information regarding risks to health and safety are derived from reliable sources.' The Code also requires registrants to only perform services in their areas of competence.

The Accreditation Panel was content that this part of Standard 1b was satisfied.

Standard 2: Management of the register

Summary

The Accreditation Panel found that Standard Two was met. It issued the following Recommendations:

Recommendations:

- Recommendation Three: BOHS should review its guidance on registration for consistency and clarity before publication.
- Recommendation Four: Provide, or signpost to clearer information about the different levels of membership and expertise within the Register itself.

Accreditation Panel findings

The Accreditation Panel considered the development of the BOHS Register of Occupational Hygiene Professionals. At the time of the meeting, the Register had not yet been launched but the Accreditation Panel had been able to access the unpublished version to see how it will work in practice.

Members of the FOH have been transferred over to the Register if they meet eligibility requirements and confirmed they abide by the Register's Code of Ethics. Once launched, BOHS will also accept new applications to the Register. There is a dedicated Registrar, who is responsible for ensuring that only people who meet the necessary requirements are admitted to the Register. Registration is overseen by the FOH Committee.

The Accreditation Panel considered the guidance for new applicants that will be published. This sets out the qualifications that are required for different levels of registration, and other requirements such as for Continuing Professional Development (CPD). Since BOHS is also the only awarding body for Occupational hygiene qualifications in the UK, it can easily validate education and training requirements. Since BOHS operates as part of a wider international framework overseeing Occupational hygiene qualifications, assessing equivalence for people who have qualified internationally is also straightforward. There is however also an appeals mechanism for unsuccessful applicants.

Registrants will be required to renew their registration annually. This includes reaffirming their commitment to the Code of Ethics and completing the required level

of CPD. BOHS has published detailed guidance for registrants on CPD¹⁶ and undertakes annual audit of 5-10% of registrants to check compliance.

The Accreditation Panel noted that BOHS had also developed guidance on applications for restoration to the Register following removal as part of disciplinary action, and for the annual renewals process, to be approved by the FOH Committee in December 2023. Whilst the guidance overall met the minimum requirements for Standard Two, it was noted that the respective roles of the FOH, and the wider organisation may not always be clear to someone not familiar with BOHS' work. The Accreditation Panel issued the following Recommendation:

- Recommendation Three: BOHS reviews its guidance on registration for consistency and clarity before publication.

The functionality of the Register itself met our minimum requirements and appeared clear and accessible. Registrants have unique IDs and are searchable by name, and by level of expertise. There is also a field for 'complaint against the Code of Ethics upheld'. It specifies that if blank, this means there is no complaint. Including this information within the main Register makes it clear and accessible to the public and employers using the Register.

Once launched, the 'Find an Occupational Hygienist' page will be the landing page for the Register. This includes links to the FOH governance documentation including regulations, code of ethics and its procedures, the BOHS complaints procedure. We will review the live Register and its placement within the website to check that it is clear and accessible once launched and within BOHS' first annual check against the Standards.

Although the Register met our Minimum Requirements, we thought it could be improved by including clearer links to information about the different levels of expertise. The Accreditation Panel issued the following Recommendation:

- Recommendation Four: Provide, or signpost to clearer information about the different levels of membership and expertise within the Register itself.

Standard 3: Standards for registrants

Summary

The Accreditation Panel found that Standard Three was met.

Accreditation Panel findings

Registrants are required to sign up to the FOH Hygiene Regulations and the Code of Ethics¹⁷ when they join the Register. Terms of membership are published¹⁸.

¹⁶ [BA.2-07-01-2021-FOH-CPD-Guidance.pdf \(bohs.org\)](https://www.bohs.org/app/uploads/2021/07/BA.2-07-01-2021-FOH-CPD-Guidance.pdf)

¹⁷ <https://www.bohs.org/app/uploads/2023/07/Code-of-Ethics-May-2023.pdf>

¹⁸ https://login.bohs.org/BOHS/Membership-Terms.aspx?_ga=2.44637159.299311058.1686222828-515626414.1686039777

The FOH Hygiene Regulations sets out the key qualifications for different levels of registration. The *BOHS Buyers Guide v2 (2021)*¹⁹ provides guidance for those seeking occupational hygiene specialist services. This guidance includes a detailed description of the differences between the types of skills and knowledge at different levels. Since practising outside of technical competence is a key risk, having clearly defined scopes of practice for the different levels is an important mitigation. This is further underpinned by the Code of Ethics, which states that registrants must only perform services within their area(s) of competence.

The Code of Ethics sets out the professional behaviours by which registrants must abide. These meet our requirements since they specify areas such as accountability, honesty, openness, integrity, respect. The Code also covers areas such as information sharing, data handling and confidentiality. It makes clear that registrants must also avoid circumstances where a compromise of professional judgement, or a conflict of interest, might arise.

Occupational hygienists generally practice as employed persons and will normally be protected by employers' liability. BOHS told us that only a very few individuals work as sole traders. For the small number of individuals who are not covered by employer liability, BOHS will request a copy of their insurance to be uploaded as part of registration.

As part of our assessment, we reviewed BOHS' arrangements for handling safeguarding concerns. Occupational hygienists do not provide health services directly to adults, or children. However, safeguarding threats could arise in relation to other adults that registrants work with, within their workplace environment. BOHS considered this further during the assessment and developed new guidance for registrants on this area. Its Code of Ethics now has an Occupational Hygiene and Adult Safeguarding Appendix which sets out the concepts and principles of safeguarding. It also sets out the major risks that Occupational Hygienists should be aware of, covering a range of relevant risks, including sexual abuse, domestic abuse, and modern slavery.

The Accreditation Panel was satisfied that BOHS met Standard Three.

Standard 4: Education and training

The Accreditation Panel found that Standard Four was met.

Accreditation Panel findings

BOHS is the only body with designation to undertake its role in quality assurance and training of occupational hygiene, as set out by the HSE. Detailed requirements of the qualifications it accepts are set out in its *Certificate of Competence in Occupational Hygiene and International Certificate in Occupational Hygiene Qualification Guide*²⁰.

The overall responsibility for setting the education and training framework for Occupational Hygiene qualifications rests with the Faculty of Occupational Hygiene. The FOH sets the general framework for competence within which all providers must

¹⁹ <https://www.bohs.org/app/uploads/2021/10/BOHS-Buyers-Guide-Version-2-September-2021.pdf>

²⁰ [PQC-POL003-Qualification-Guide-for-CertOH-and-iCertOH-v2.0-rebranded.pdf](https://www.bohs.org/app/uploads/2021/10/PQC-POL003-Qualification-Guide-for-CertOH-and-iCertOH-v2.0-rebranded.pdf) (bohs.org)

operate. BOHS assesses the quality of training through its approved training provider scheme (ATP) which ensures that training courses meet BOHS quality standards. The Quality and Governance team is responsible for ensuring the integrity of qualifications systems, resources, policies, and practices and, with the support of the examiner team, will undertake due diligence to assure the appropriateness of personnel and partners to undertake roles.

The Accreditation Panel considered the governance arrangements for BOHS qualifications, which are set out in its Quality Handbook. The Quality Enhancement Committee (QEC) oversees operational delivery. It reports to the FOH for oversight of matters relating to Occupational Hygiene qualifications and to the Board's Policy, Publications and Technical Committee. Technical and subject matter expertise is provided to the Quality Enhancement Committee by the Technical Advisory Group (TAG). The work of the Quality and Governance team is overseen by both the QEC, and the TAG.

The International Occupational Hygiene Association (IOHA) provides independent assurance of BOHS' quality assurance of qualifications and training providers. The IOHA was 'established to improve, promote and develop occupational hygiene worldwide through its member organisations, and to improve and maintain a safe and healthy working environment for all.'²¹ Its National Accreditation Recognition (NAR) Committee is responsible for ensuring that BOHS meets the requirements of its IOHA Model Certification Programme. During our assessment we reviewed examples of the NAR's assessment of BOHS. This assessment covers areas required by our Standards, including knowledge of the wider health sector as relevant to the role.

The Accreditation Panel was satisfied that BOHS met Standard Four.

Standard 5: Complaints and concerns about registrations

The Accreditation Panel found that Standard Five was met. It issued the following Condition and Recommendation:

- Condition One: BOHS' complaints procedures should allow for appropriate lay input.
- Recommendation Five: Review the guidance to make clear that the criteria for determining length of restrictions on practice applies to all types of sanction.

Accreditation Panel findings

The Code of Ethics Procedures sets out the process for how concerns about a registrant in relation to technical competency and/or professional conduct will be handled.

The Registrar is responsible for the initial decision about whether a complaint about a registrant falls within the scope. If accepted, the process allows for some complaints to be resolved informally. The Procedures set out criteria for complaints

²¹ <https://www.ioha.net/>

that are not appropriate to be handled in this way due to the factors such as future risk of harm to the public. If any of these are met, then the complaint will proceed to formal investigation.

In this instance, the Registrar will designate, on the advice of the FOH Committee, three Fellows of the FOH, who are in good standing and have appropriate technical expertise, to form an Investigating Committee (IC). The IC will gather further evidence as required to undertake an Initial Review of the complaint. The purpose of this is to establish whether there is sufficient evidence, and seriousness to warrant a full investigation. The IC will come to a majority view on whether this threshold is met and advise the Registrar of this through an Initial Review Report. This Report will be shared confidentially with the FOH Committee.

If the FOH Committee agrees with a recommendation that the complaint should not be taken further, then the complainant and the registrant will be notified. If the FOH Committee agrees with a finding that the complaint should proceed to a full, formal investigation then the complainant and the registrant will be notified, and the registrant will be notified of which section(s) of the Code of Ethics the alleged breach relates to. The IC will then gather more evidence and seek specialist input as required. This stage may involve an oral hearing, in which all parties have opportunity to provide evidence. The purpose of this is to allow more timely, robust, and fair decision making by the IC.

Following this, the IC will make a Final Investigating Report to the FOH Committee, setting out its recommendation about the merits of the complaint. The FOH Committee will consider this and, if it is satisfied with the quality of the investigation, decide on what further actions are required. This may include issuing sanctions, or restrictions on the registrant's practice. If the FOH Committee has found that the complaint is founded, it will inform the registrant of this, who will then have opportunity to appeal. Following the conclusion of any appeals process, the outcome would usually be published (unless there are any extenuating circumstances). The FOH Committee would report the outcome of the complaint to BOHS' Board.

The Accreditation Panel queried whether BOHS' Board could overturn decisions made by the FOH Committee but was satisfied that the reporting was a formality rather than ratification. BOHS also confirmed that it would consider historic complaints, if there was a public protection concern.

Our minimum requirements specify having lay involvement in complaints decisions. The Accreditation Panel noted that BOHS does not currently have lay representation on its Investigating Committees. Although the FOH Committee includes a member from the HSE, they are also a practising Occupational hygienist. This means that there is no lay involvement in complaints decisions. BOHS had provided its rationale for this during the assessment, with reference to the fact that most complaints are of a technical nature, and that unlike with most other Accredited Registers, registrants do not engage in the direct provision of healthcare to patients or service users.

The Accreditation Panel discussed the purpose of our requirement for having lay involvement in complaints. This can be seen as two-fold: it allows independent input into decision making and can make sure that the interests of patients and service

users are represented. These aspects safeguard against the risk of professional interests guiding decision-making on complaints.

Although BOHS' complaints procedure has a clear focus on public protection, the Code of Ethics covers professional behaviours as well as technical competence. Additionally, although there is no direct contact with members of the public, lay input could allow for the interests of groups most affected by the work of Occupational hygienists, to be represented. The Accreditation Panel determined that the requirement to have lay involvement in complaints decisions is relevant to BOHS' Professional Register of Occupational Hygienists. It issued the following Condition:

- Condition One: BOHS' complaints procedures should allow for appropriate lay input.

The Accreditation Panel considered the guidance that BOHS has in place for determining the length of restrictions on practice (also known as sanctions). We noted that this appeared to focus on suspension. The Accreditation Panel issued the following Recommendation:

- Recommendation Five: Review the guidance to make clear that the criteria for determining length of restrictions on practice applies to all types of sanction.

Standard 6: Governance

The Accreditation Panel found that Standard Six met. It issued the following Recommendation:

- Recommendation Six: Consider how the FOH Committee can gain input from a broader range of stakeholders, for example employers and different population groups, into its decisions.

Accreditation Panel findings

BOHS is a registered Charity and holds the Royal Charter. Its Strategy 2021-25²² sets out its key aims:

- 'Work to eliminate harmful exposures;
- Promote safe and effective substitutes for existing hazards;
- Design out threats to human health;
- Manage out work practices that place people at risk;
- Ensure all people in all working environments have the right protection at the right time.'

BOHS publishes its Annual Reports, which set out how it has achieved its aims and used its resources during the reporting period. As part of our assessment, we undertook due diligence checks of BOHS' registrations with the Charity Commission and Companies House.

²² <https://www.bohs.org/strategy/>

BOHS has an overarching Board of Trustees, which the FOH's Committee reports into. The FOH Committee has responsibility for the management of the BOHS Professional Register of Occupational Hygienists.

The Terms of Reference for the FOH Committee state that its purpose is to:

- 'Pursue excellence for all those who practice the science of occupational hygiene
- To establish, develop and maintain standard of competence in occupational hygiene practice for those who are members of the faculty of occupational hygiene
- To act as the guardian of professional standards and ethics in occupational hygiene.'

BOHS' has a Conflicts of Interest Policy which applies to BOHS' Board and governance Committees, Head Office, wider staff and when acting on behalf of BOHS, Approved Training Providers. The scope of this policy applies to all of BOHS' work, and specifies 'Member and interprofessional engagement, guidance and support' and 'Education, training management, assessment and awarding.' It has also published a Trustee Conflicts of Interest Policy²³.

The governance arrangements allow for separation of decision making about registration and complaints, education, and broader membership matters. The role of the different governance Committees in these functions is set out under the relevant Standards. At the meeting of the FOH Committee that we observed, the focus was on ensuring that high standards are maintained.

There is clear and accessible information about the BOHS's governance in a dedicated area of its website. This includes the Job Descriptions for the Board, and the FOH Registrar. BOHS has confirmed that it will publish minutes from FOH Committee meetings, to align with the launch of the Register.

At the FOH Committee meeting we observed, there was detailed discussion of the risk matrix, and consideration of new, emerging risks and those which required escalation to the Board. BOHS has a separate, documented risk management policy and we suggest this could help make sure that escalation routes are transparent.

BOHS' risk management processes are integrated with its business continuity plans. BOHS highlights that this approach allowed it to adapt effectively during the Covid-19 pandemic, without the need to furlough any staff. Its reserves position allowed it to absorb some financial loss, and it ensured that key services were mostly uninterrupted. Despite also having a flood of its physical server, it was able to move all systems to a cloud-based system. BOHS has back-up systems in place for the Register in case of software failure.

The Accreditation Panel noted that all members of the FOH Committee and Board are professionals working in the field of occupational hygiene. Although BOHS works

²³ [Trustee-Conflicts-of-Interest-Policy-V3-July-2023.pdf \(bohs.org\)](#)

closely with the HSE and other stakeholders on public safety issues, it does not have formal routes for input from those representing the interests of employers, and different population groups, into its governance decisions. In terms of employers, this could provide a useful channel for work to identify and address emerging issues, such as on safeguarding. The Accreditation Panel issued the following Recommendation:

- Recommendation Six: Consider how the FOH Committee can gain input from a broader range of stakeholders, for example employers and different population groups, into its decisions.

The Accreditation Panel was satisfied that BOHS met Standard Six.

Standard 7: Management of the risks arising from the activities of registrants

The Accreditation Panel found that Standard Seven was met.

Accreditation Panel findings

As noted under Standards One and Six, BOHS has a detailed risk matrix that captures potential risks arising from the practice of Occupational hygiene. This reviewed on a regular basis by the FOH Committee. At the Faculty Committee meeting observed by the Accreditation Team, there was detailed discussion on the occupational hygiene risk matrix. Discussion included consideration of risk level, whether current mitigations to risks were effective, and discussion on how the evidence base for risks could be enhanced, for example through setting up a database of occupational hygiene monitoring with an external partner. We also reviewed minutes from the FOH Committee held in October 2022, in which risks were discussed.

BOHS publishes clear guidance about the role of occupational hygienist. This helps inform those using their services, about both the scope, and limitations of the role. A particularly helpful document in this regard is the [Guidance for Employers - British Occupational Hygiene Society \(BOHS\)](#) 'the Buyers' Guide'. This is a free guide and 'aims to serve as the industry standard for competency in occupational hygiene consultancy services.' It sets out what types of activities the different levels of its membership are equipped to undertake.

A particular challenge with risks is that the effects if not managed correctly may not be identifiable until several years have passed, and/or through studies on large populations of workers. This is highlighted by BOHS in its documents and informs its whole approach to prevention through an evidence-based approach to management of workplace hazards.

The benefits of occupational hygiene are also highlighted through its campaigns on topics such as respiratory health on construction sites.

The Accreditation Panel was satisfied that BOHS met Standard Seven.

Standard 8: Communications and engagement

The Accreditation Panel found that Standard Eight was met.

Accreditation Panel findings

BOHS has consulted with members on the development of the Register. It has also developed a communications strategy for raising awareness of the Register with key stakeholders, such as trade unions and employers, once launched. This includes close working with the HSE as a key partner. BOHS has developed Frequently Asked Questions for its website.

BOHS works closely with the HSE and other key stakeholders in the field. Recent examples are joint work with HSE and others on the HSE's [Dust Kills](#) campaign. BOHS also holds its own conferences, to share learning amongst members and broader stakeholders.

The Accreditation Panel was satisfied that BOHS met Standard Eight.

Share your experience

We received three responses to our Share your Experience (SYE) consultation highlighting points about BOHS. Two of these were positive, describing BOHS as a trusted source of expert advice.

One response highlighted the following concerns about BOHS:

- a) Quality of electronic systems for members, including the online payment systems
- b) Searchability of the current membership register
- c) Not enough information about different membership categories for applicants

BOHS responded to these points:

- a) The systems are continuously reviewed by the membership team to improve the customer experience.
- b) The current membership database is not in the public domain. However, the register will be in the domain and easily searchable.
- c) Information about different membership categories will be part of the communications plan as part of the launch of the register.

These points have been considered within the assessment and we anticipate will be addressed by the launch of the Register, and by the recommendations made in this report for clearer signposting to information about the different levels of expertise.

Impact assessment (including Equalities impact)

We carried out an impact assessment [\[add link to impact assessment when published\]](#) as part of our decision to accredit BOHS. This impact assessment included an equalities impact assessment as part of the consideration of our duty under the Equality Act 2010.

Occupational hygiene affects a significant proportion of the UK population – and most of the 32 million UK workers. The Accreditation Panel thought that accreditation would have a positive impact, by providing independent assurance of BOHS' Professional Register of Occupational Hygienists. This should give employers confidence in the expertise and professional behaviours of an Occupational hygienist they appoint from the Register to help them meet their responsibilities under the HSWA to protect the health and wellbeing of their workers.

There are some groups that may be more likely to directly experience these positive impacts. In terms of service users, Occupational Hygiene has a very significant impact on the health outcomes for older populations. Occupational exposure is also the cause of significant levels of disability in the UK.

BOHS collects and analyses diversity data about its members. It uses this to inform diversity impact assessment of significant changes to its membership, qualifications, and events. It also uses the data to develop appropriate policies and practices to enable greater reach and impact with under-represented groups in the profession. Recognising BOHS' work to encourage diversity in the profession itself and to progress understanding of how groups with protected characteristics are affected by their work through accreditation is a further positive impact.

We did not identify any potential negative impacts arising from accrediting BOHS in terms of equalities, social or cost/market impacts.