

INTERNATIONAL OCCUPATIONAL MEDICINE SOCIETY COLLABORATIVE

England & Wales · Charity number 1202706

Details

Other names IOMSC

Status Registered

Legal form CIO

Registered 2023-04-13

Register [View on the Charity Commission register](#)

Contact

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Website <https://www.iomsc.net/about>

Activities

Objects: 3.1 THE OBJECTS OF THE CIO ARE THE RELIEF OF SICKNESS AND POOR HEALTH AND THE PRESERVATION OF GOOD HEALTH AMONGST THE GENERAL PUBLIC IN PARTICULAR WITH A FOCUS ON PROMOTING GOOD PRACTICE IN THE FIELD OF OCCUPATIONAL MEDICINE AND TO REDUCE WORK-RELATED ILL HEALTH, OCCUPATIONAL DISEASE AND INJURIES IN PARTICULAR BY:3.1.1 FORMING AN ASSEMBLY FOR THE REPRESENTATIVES OF WORLDWIDE OCCUPATIONAL MEDICINE SOCIETIES TO COLLABORATE ON THE ABOVE;3.1.2 ENCOURAGING AND DEVELOPING OCCUPATIONAL AND ENVIRONMENTAL MEDICINE ORGANISATIONS IN COUNTRIES WHERE THE PRACTICE IS LESS WELL ESTABLISHED;3.1.3 PROVIDING SUPPORT TO INDIVIDUALS IN NEED BY REASON OF ILL HEALTH, DISEASE, INJURY OR DISABILITY; AND3.1.4 EDUCATING THE GENERAL PUBLIC IN THE TOPICS OF OCCUPATIONAL MEDICINE AND WORK-RELATED ILL HEALTH, OCCUPATIONAL DISEASE AND INJURIES BY HOSTING CONFERENCES, WORKSHOPS AND THROUGH THE CONDUCT AND PROMOTION OF RESEARCH INTO THOSE TOPICS.

Activities: The International Occupational Medicine Society Collaborative (IOMSC) is a global leader in Occupational and Environmental Medicine (OEM). A collaboration comprising of 53 national OEM societies, associations, and faculties in countries across the world. Between us, we already speak for more than 30,000 occupational medicine healthcare professionals worldwide.

Classification

- **How:** Provides Advocacy/advice/information
- **What:** Education/training, Disability
- **Who:** The General Public/mankind

Geography

- Argentina
- Australia
- Brazil
- Canada
- Chile
- China
- Colombia
- Costa Rica
- Croatia
- Denmark
- Egypt
- Estonia
- France
- Germany
- Greece
- Guatemala
- Honduras
- India
- Indonesia
- Ireland
- Italy
- Ivory Coast
- Japan
- Macedonia
- Malaysia
- Netherlands
- New Zealand
- Nigeria
- Norway
- Peru
- Philippines
- Portugal
- Qatar
- Russia

- Singapore
- Slovakia
- South Africa
- South Korea
- Switzerland
- United Arab Emirates
- United States
- Venezuela
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2024-12-31	£4,285	£4,964	-	-
2023-12-31	£10,158	£7,158	-	-

Trustees

Name	Role	Appointed
Ronald Ray Loeppke	Chair	2023-04-13
Dr Koji Mori Dr		2024-06-04
Herman Spanjaard		2023-03-13
Paulo Antonio de Paiva Rebelo		2023-03-13
Peter Connaughton		2023-04-13
Richard Heron		2023-03-13
Yohama Caraballo-Arias Dr		2024-06-04

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Improving Workers' Health Globally

Three million workers die every year due to work-related accidents and diseases ⁽¹⁾. Occupational risk factors include long working hours and workplace exposure to air pollution, asthmagens, carcinogens, ergonomic risk factors, and noise. The key risk was exposure to work related diseases – totally 2.6 million deaths. Circulatory diseases, malignant neoplasms and respiratory diseases rank among the top three causes of work-related death. Work accidents account for an additional 330,000 deaths.

Work-related diseases and injuries strain health systems, reduce productivity and can have a catastrophic impact on household incomes

The International Occupational Medicine Society Collaborative (IOMSC) is a medical and scientific voice on workplace health. See <https://www.iomsc.net/>.

Since its inception in 2013, IOMSC's membership has grown to include 52 occupational medicine societies in 46 countries representing more than 30,000 occupational medicine providers that impact more than one million workers throughout the world. It increases awareness of the value of occupational health and medicine, and provides an assembly for representatives of occupational medicine societies worldwide to improve worker's health by:

- Facilitating collaboration with the UN and global corporates.
- Researching and highlighting key issues such as heat stress and artisanal mining; and
- Promote the scale up of evidence-based occupational medicine (OM).

IOMSC:

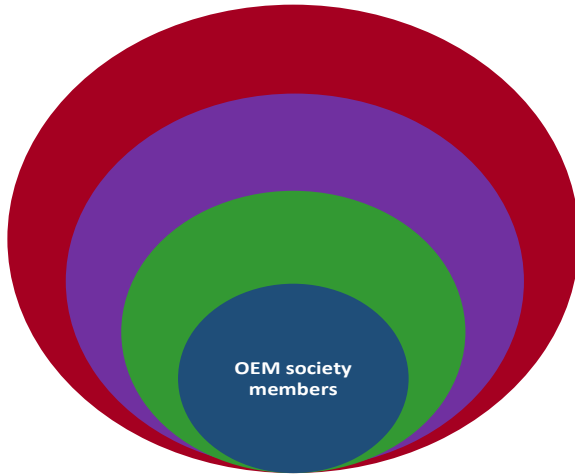
- Is the leader for OM societies worldwide, providing opportunities to gain and enhance knowledge and expertise.
- Provides tools and resources to emerging OM societies to educate their members to enhance the level of OM care worldwide.
- Practicing by what has been proven to work.

IOMSC recognizes the impact of prevention– reducing the burden of risk and illness in individuals and populations, improving the health and productivity of work forces, enhancing the vitality of national economies and, helping make the world a healthier and safer place.

Workplaces have a unique ability to improve health, and IOMSC serves as a valuable avenue to implementation with tools and resources as to best practice.

In particular, the impact of prevention can be profound – reducing the burden of risk and illness in individuals and populations, improving the health and productivity of workforces, enhancing the vitality of national economies, and helping make the world a healthier and safer place.

¹ ILO, 2023. 3 million people die of work-related accidents and diseases



Occupational Health Professionals impact tens of thousands of employees and their families annually.

IOMSC's timeline is as overleaf and include:

- Occupational Health and Safety Thought Leaders meeting of CMOs, ILO, WHO, WEF leaders at ILO

headquarters in Geneva, Switzerland - 2025.

- 2025 NEBOSH funded [Artisanal and Small-Scale Mining project](#) in Zimbabwe, Uganda, Colombia and Brazil.
- Supporting training of three clinicians in a Diploma in Occupational Medicine
- Information, education, and awareness to reduce illnesses, injuries, and deaths.
- Development of a "Declaration on Health Care Professional Well-being" and "Statement of Principles and Value,"
- Input into the WHO's 13th Global Programme of Work which guided WHO activity for 2019-2023 and join the "WHO's Health in the World of Work Network".
- Convening Global Insights Webinars such as on
 1. Occupational Health Measures in the Preparedness and Response to COVID-19 at the Workplace
 2. Mental and Emotional Health in the Health Care Workforce During the COVID-19 Pandemic Era: A Global Perspective
 3. How Health Care Worker Safety Impacts Patient Safety During the Pandemic Era
 4. Leadership in Occupational and Workplace Health
 5. Occupational health challenges across the world (e.g., Africa, the Middle East, South and Southeast Asia)
- Surveys on Global Trends, such as quantifying the reach of IOMSC globally and identifying modes of occupational medicine practice and key changes occurring in the workplace.

Following a strategic review, it wishes to enter an accelerator development phase, to fund raise to improve worker health. It welcomes funding from corporates and agencies on projects from its ILO event at the World Health Assembly week to heat stress [occupational heat-related](#) to advocacy and capacity building.

Support IOMSC as a Corporate

Benefits include:

- Sharing best practice via networking with senior Chief Medical Officer colleagues

IOMSC is a non-profit charity based in England and Wales.



- Keep to date with policy changes from the WHO and ILO etc.
- B to B opportunities within the OH community
- Send a representative to join its annual thought leadership meeting.
- Regular webinars

Corporate partnership funding of IOMSC is bespoke and could include:

- Sponsoring the annual Chief Medical Officer meeting – from partner support at \$20k to Lead Sponsor at \$40k
- Keep to date with policy changes from the WHO and ILO etc. - \$1k.
- B to B opportunities within the OH community via a specific reception - \$10k
- Send a representative to join IOMSC meetings - \$1k.
- Regular webinars - \$3k
- I need scholarships - \$4k.

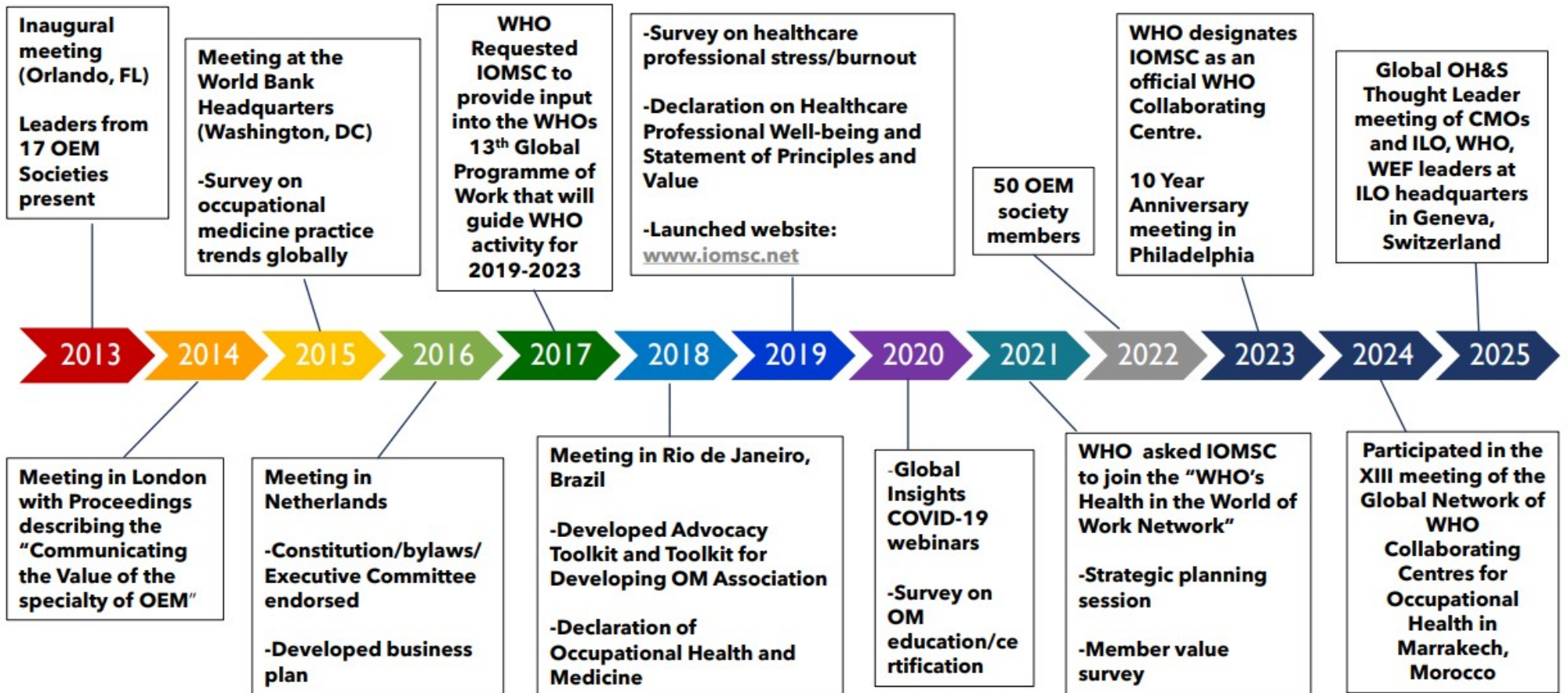
Founder member core support, to accelerate impact of IOMSC to provide:

- Capacity development to occupational medicine societies in resource poor settings
- Education and training - with a global OH course for health professionals in poor resource settings
- Advocacy as to the value of OH throughout the UN and Bretton Woods system
- and
- Policy and on the ground implementation e.g., regarding heat stress and artisanal mining
\$150k per year

IOMSC has a corporate partnership policy and currently has in-kind staff support from SOM (UK) and ACOEM (US) and an Executive Committee of occupational health clinicians from across the globe. For more information, contact Julie Ording, jording@acoem.org or nick.pahl@som.org.uk



ROADMAP OF IOMSC'S ACCOMPLISHMENTS



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IOMSC Virtual Annual General Meeting

June 4, 2024, 8:00 – 9:00 a.m. CDT

Attendees were represented from the following countries: Australia, Brazil, UK, Denmark, Japan, Venezuela, Portugal, Estonia. Germany, Guatemala, India, Philippines, Qatar, South Africa, Sri Lanka, United Arab Emirates, Canada, and the US. They included Drs. Ron Loeppke (Co-Chair), Richard Heron (Co Chair), Peter Connaughton (Executive Committee), Paulo, Rebelo (Executive Committee), Sandeep Sharma, Yohama Caraballo-Arias, Jasminka Laestadius, Chinwe Okala, Harald Meyer, Thomas Kraus, Anna Sofia Victoria, Rajgopal Thirumala, Koji Mori, Tayseer Mustafa, Tiia Piho, Millicent Jonga, Lanre Ogunyemi, Will Ponsonby, Govinda Narka, Aseni Wickramatillake, Rodolfo Ramirez, Fatma Tamim, Rikard Moen, Jorge Barroso Dias, Hamdaan Basheer, Sidney Siu, Marianne Cloeren, Tiapi, Nick Pahl (IOMSC Secretary), and Julie Ording (ACOEM staff)

1. Apologies for Absence

Julie Ording received apologies for attendance from Drs. Melinda Miller, Simon Ryder-Lewis and John Guthrie from Australia, Dr. Ivana Kerner from Croatia, Dr. Alexis Descatha from France, Dr. Herman Spaniard from Netherlands, Dr. Aesha Ashem from United Arab Emirates and Dr. Theodore Bazas from Greece.

2. Co-Chair Report – IOMSC Updates

IOMSC celebrated its 10th anniversary in 2023 and has grown over the years with a current roster of fifty-two societies in forty-six countries. We have 4-5 other societies interested in joining and are in the middle of reaching out to them.

Drs. Richard Heron and Ron Loeppke shared an update on IOMSC's work over the past year. IOMSC has become more involved with working with the World Health Organization (WHO) as an official Collaborating Center and Dr. Ivan Ivanoff at WHO headquarters led a meeting of the global network of World Health Organization Collaborating Centers for Occupational Health recently in Marrakesh. A WHO Collaborating Center is designated to conduct regional or global activities in support of the WHO's program. Designation also provides organizations with enhanced visibility and recognition by national authorities. Following public attention to the health issues on which they work, it opens improved opportunities for them to exchange information and develop technical cooperation with other organizations, at an international level, and to mobilize additional resources from funding partners. During that meeting, Dr. Ivanov outlined four priorities for the master plan of the global network of WHO collaborating centers – (1) occupational health and safety of healthcare workers, (2) healthy, safe and resilient workplaces for all, (3) occupational health and climate change, and (4) occupational health services in the informal gig economy. WHO is also focusing on artificial intelligence as it relates to occupational health, occupational cancer, and artisanal mining.

In addition, IOMSC participated in (by Zoom) a meeting of the Collaborating Centers in Geneva in November 2023, a prelude to the Marrakesh meeting. IOMSC is trying to take the opportunity to forge relationships with big influencers in the world of health and work. Dr. Tedros, who addressed the meeting in November, has a particular interest in workplace health and has publicly acknowledged that health is not just about treatment in hospitals and clinics, but it is about social determinants too (our homes, communities, schools, and workplaces). The systems just cannot cope and send people back to the same working conditions that made them sick. The prevention agenda is very much the language of the WHO. WHO's vision of the workplace entails looking to see places where everybody receives adequate health to perform their jobs without getting sick or injured because of their

work. WHO is looking at the prevention agenda, the health protection agenda, particularly in the case of public health threats (future pandemic preparedness). Lastly, they are focusing on health promotion. Three critical words – promotion, protection, and prevention.

Dr. Heron shared that he was able to attend a meeting looking at health and well-being for the World Economic Forum with Dr. Ivanov and they were able to progress the work being done together with IOMSC. Dr. Heron was also able to arrange a separate meeting with the leaders of the International Labour Organization. Overall, IOMSC is taking the opportunity to participate in shared platforms, and make sure that we are collaborating with organizations that have shared agendas. Major issues across these platforms are mental health, workplace health as a human right, health of healthcare workers, and artisanal mining which is probably a great example of health inequity where some of the most difficult workplaces have the least support. IOMSC is grateful to be invited to these conferences and support for trips to these conferences, so we have not had to rely on any funding from IOMSC.

3. 2023 Business Plan

Nick Pahl, as acting company secretary for IOMSC, has helped with pulling together the business plan and has been instrumental in guiding IOMSC to receiving charity status. Nick reported that IOMSC is set up as a community interest company in the UK under the Charity Commission. The Constitution of IOMSC was shared with everyone and as part of that Constitution, IOMSC will have an annual AGM, this being our first one.

IOMSC has a few projects underway that will be reported on shortly, but there are capacity issues. Members are expected to support the IOMSC and not just in the volunteer effort. There has been progress made in the education area and in advocacy that Dr. Heron previously discussed. IOMSC held a Zoom and an in-person reception for those members attending ICOH. IOMSC has executed an MOU with Workplace Health Without Borders and will be discussed in the Education Update. IOMSC does call out for voluntary contributions based on number of members and your economic status as a country, which I will cover in the Finance Report but did not receive all that was requested. Therefore, thus far, it has depended on volunteer efforts to operationalize the business plan.

4. Endorsement of Dr. Will Ponsonby - Honorary International Projects Lead

Part of the business plan includes case support. IOMSC worked with a fundraising consultant to develop a proposal related to artisanal small scale mining. We are looking for funds for supporting IOMSC members who work with small scale mining and who understand what the issues are then take it forward with members. Dr. Heron reported that we have some critical areas of focus where we have a need for leadership, and this is where Dr. Will Ponsonby has stepped up to lead this important piece of work on artisanal mining. Dr. Ponsonby has led health in mining companies, so is an ideal person to help lead.

It is estimated that over one hundred million people globally engage in artisanal mining and that includes child and female labor as well, often working in very poor conditions with either very basic or absolutely no occupational health and safety at all. Some countries have tried to ban it, but it forms a very important part of some countries' economies. It makes up a significant part of their GDP and it provides employment for millions of people globally. We know that the demand for metals and minerals is going to increase dramatically in the next decades because of the move away from a carbon-based economy. We want to work with other agencies to look at how we can improve the healthcare for artisanal miners. There is a good body of research already done in artisanal mining and one of the things we are hoping to complete is to gather some of the research together (e.g., producing a special edition of the *Occupational Medicine* journal focusing on mining and artisanal mining).

One of the disappointing things so far has been our appeal for funds for this artisanal mining proposal has not been successful. So, we are looking for ways to kick this off and find things

that we can do for low cost or no cost. For example, a review of the body of research and identifying where the gaps might be and looking where we can support or commission research in the future. Another thing we can do is use our IOMSC network to set up some basic research. For example, we can ask our members to see what artisanal mining exposures there are in their countries, how many people there are and what the health hazards are because they vary between the different types of mining. For instance, gold mining uses a lot of mercury which results in high levels of mercury toxicity. There may be some options to educate miners on the hazards of mining and education for healthcare workers. If anybody is either interested, wants to support this project in either time or finance, please reach out to Dr. Ponsonby.

5. Reappointment of Existing Trustees and Appointment of New Trustees

The Constitution covers how the organization is managed, conflicts of interest, liability, and trustee roles. The current trustees can choose two other trustees to serve. The current trustees are excellent, but trustees can be removed if they are not following the Constitution. It is an open and transparent way of working and the trustees have the responsibility to ensure effective management via IOMSC on members' behalf.

There was an announcement of the reappointment of the existing trustees who are Dr. Herman Spanjaard, Dr. Paul Rebelo, Dr. Peter Connaughton, Dr. Richard Heron and Dr. Ron Loeppke.

A decision was made to appoint two additional trustees:

- *Professor Yohama Caraballo Arias originally from Venezuela and*
- *Dr. Koji Mori from Japan.*

Dr. Mori is currently the President of the Japan Society of Occupational Health, and he has been in that role since 2021. He is also the director of the University of Occupational Environmental Health Training Center in Japan and has been actively involved in IOMSC for 10 years. He brings a tremendous amount of expertise, understanding, enthusiasm and leadership. Welcome Dr. Mori!

Professor Yohama Caraballo-Arias has led within IOMSC representing Venezuela. She has taken an active role in advancing international occupational medicine, occupational health and has taken on other roles within societies. She leads ACOEM's International Component. Dr. Caraballo-Arias is now based in Bologna where she is doing research on happiness and the importance of happiness. Welcome Dr. Caraballo-Arias!

6. Education Update/iHeed Scholarship

During our anniversary meeting in Philadelphia in 2023, members expressed that IOMSC should focus on offering more educational offerings. Over the past year, Dr. Marianne Cloeren has helped us progress in the educational arena. Dr. Cloeren shared initiatives that she and her team are working on.

- catalog the available free education on occupational and environmental medicine and package it in a way to promote it and make it more available. It has proved challenging to do so and this has taken a backseat to other initiatives.
- developing Global Grand Rounds which has a goal to create a network of international occupational medicine specialists with attention to low- and middle-income countries. This is being done with Workplace Health Without Borders and aims to identify specialists that can be recruited to help mentor others that are still just learning about occupational medicine and then launch an occupational medicine Global Grand Rounds. The group decided to start in Africa and had about forty occupational medicine doctors from Africa at a brainstorming session in February. This concept was presented at ICOH and AOHC. As you know, there is a shortage of physicians trained in OEM and many countries do not have a proper pathway for training and certification. So, the goal is to

develop an international collaborative educational program that will make the use of and engage residents who are training in developing countries and developed countries, where there are established residency programs to support the development of presentations. But the presentations would be delivered by occupational medicine experts in low- and middle-income countries. The goal is to develop a community of occupational medicine specialists that will collaborate with each other on training, mentoring, research, and advancing occupational health internationally.

- In addition, a small group reviewed applications received for a scholarship from iHeed to participate in an OEM training course. We received twenty-eight applications with several good candidates. Some of the applications were from individuals who already had a good foundation in occupational medicine or were already leaders in occupational medicine. We felt that the scholarship opportunity would be more appropriate for someone who is caring for workers, wants to have a career in occupational medicine, has exhibited leadership and expressed how they were going to work with IOMSC to spread the word. We selected someone this week but have not had the opportunity to contact them yet. All applicants will be good collaborators in our educational efforts and so we are planning to contact them about other ways to participate in our educational initiatives.

7. Financial Report - *agreed.*

Since IOMSC was set up as a charity in England and Wales, ACOEM transferred the funds to SOM in October 2023. The expenses from the meeting held during AOHC were reconciled (this meeting was also kindly sponsored). Some member contributions have come in and there were some consultancy fees (\$3,000) for development of the case for support for small scale mining. For 2024, a couple additional contributions have come in but overall, IOMSC's fund balance is still low. Therefore, it was reiterated that we are asking for contributions and to please reference the email that was sent regarding a contribution. Noted:

- Budget amounts do not currently require an external audit.
- Trustees are not getting paid.

There was a question clarifying the membership contribution. It is expected that members pay a yearly contribution fee. These were waived during the pandemic because societies had difficulty sustaining their organization during that time. It was reviewed that recommended contribution amounts are based on higher, upper, lower middle- and low-income countries and it also considers the number of members within the organization. We encourage any of you who felt that you did not see your organization on the list to go back to your organization and ask them to support fee payment. We produce an annual report of the value created which went out to all member organizations at the beginning of the year with an invoice requesting the membership fee. It was suggested that to:

- agree on an annual date for renewal that would fit with financial years around the globe.
- contribute other than through a bank transfer. Consideration should be given to accepting a credit card payment.

8. AOB

A suggestion was made to produce a Congress/meeting that could give direct value to some people and offer another way to finance the resources.