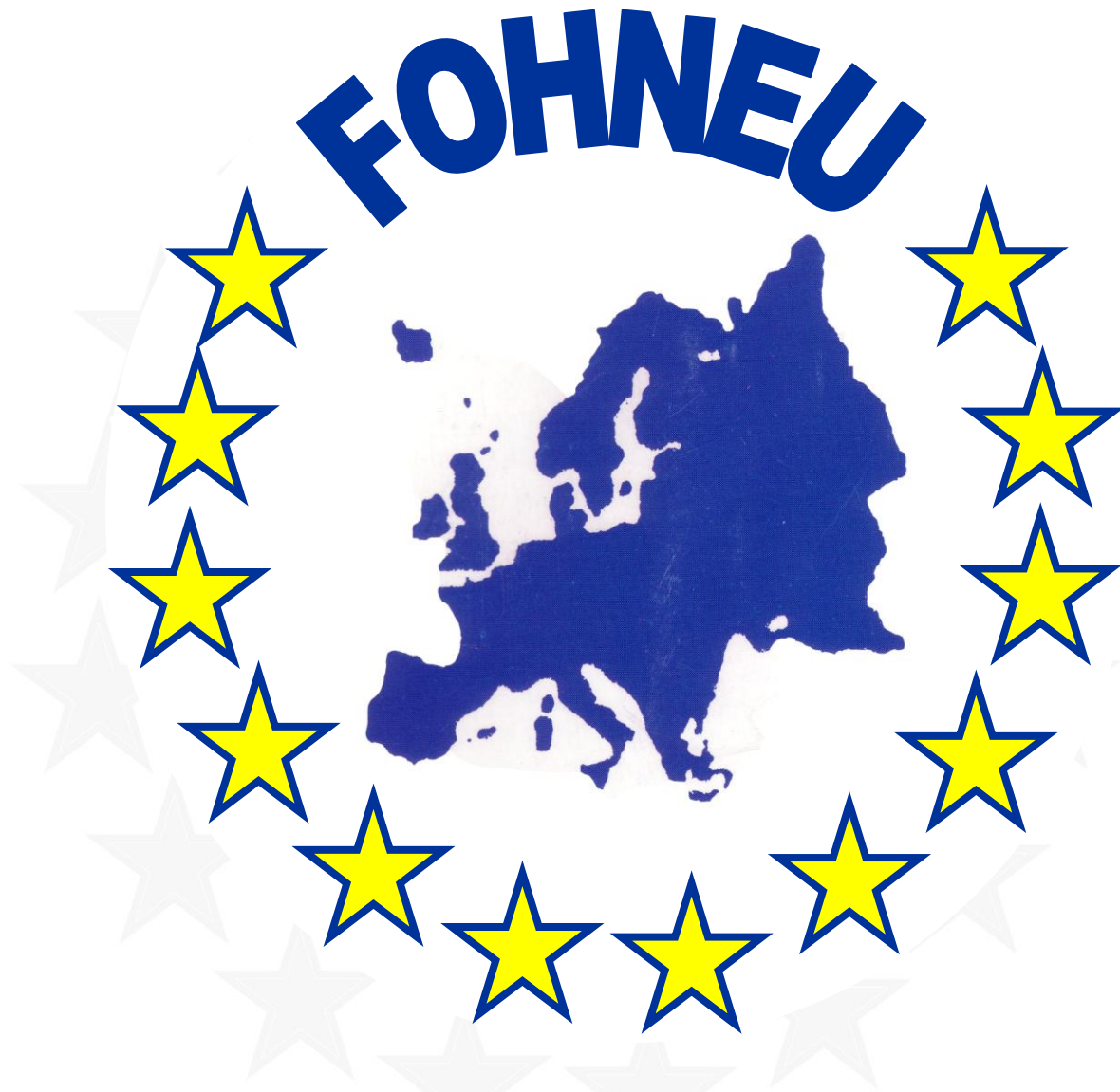


# The Federation of Occupational Health Nurses within the European Union



## Core Curriculum

3<sup>rd</sup> edition 2014



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# 1. BACKGROUND AND INTRODUCTION

The Federation of Occupational Health Nurses within the European Union (FOHNEU) first published a Core Curriculum in 1996, followed by a revised edition in 2002. The aim was to provide a basic framework for the education and training of nurses working in occupational healthcare settings. Although the programme is offered at post graduate level, the Curriculum does not provide the student with a formal specialist qualification. Rather, it allows the student to be introduced to the basic tenets of occupational health and safety. The programme content also aims to standardise occupational health nursing education throughout the European Union (EU), particularly in countries where no programmes exist. The contents can also be applied at a higher level for example, a Master degree.

The Core Curriculum was based on courses designed by the Royal College of Nursing (United Kingdom), the National Institute of Working Life (Sweden) and the National Board of Education (Finland), and can be adapted to meet the needs of students working in different settings and to reflect cultural diversity, emphasising the autonomous role of the occupational health nurse as an important member of the workplace health and safety team.

The World Health Organisation's "Global Strategy on Occupational Health for All" (WHO, 1995) and the International Labour Office (ILO, 2003), stress that all countries should have progressive development of occupational health services with the ultimate objective of covering all workers with such services. In the WHO programme there are ten objectives outlined, one of which is the development of human resources for occupational health (Appendix 1).

The WHO recommends guidelines for educational programmes in co-operation with, for example, the International Labour Organisation, the International Commission on Occupational Health and other professional agencies. This Curriculum while being primarily constructed for nurses within the European Union (EU), may be used by other nations when developing an educational programme for occupational health nurses.

Appendix 2 is a paper from the European Federation of Nursing, (EFN, formerly PCN), and The European Specialist Nursing Organisations (ESNO formerly ENNO). This publication should be read carefully before preparing and presenting course programmes. Students participating in these specialist programmes should clearly understand the National level and status of the programme for example, certificate, diploma, and/or degree levels. It is essential to note, that the FOHNEU Core Curriculum in itself does not lead to an award which entitles the nurse to designate himself/herself as a "specialist nurse".

To what extent can occupational health nurses implement the global strategy in their work? What direction will the development of occupational health nursing take in Europe? Occupational health nurses can use their knowledge and skills to contribute to the improvement of occupational health at the workplace. As occupational health is organised and delivered in many different ways in the European countries, the main objective of this publication is to outline how the education of occupational health nurses can be structured to meet the different demands of the working community, which if neglected could result in negative human and economic consequences. Occupational health aims to promote the health and wellbeing of workers by increasing awareness of the prevention of work related accidents, and promoting the concept of empowerment.

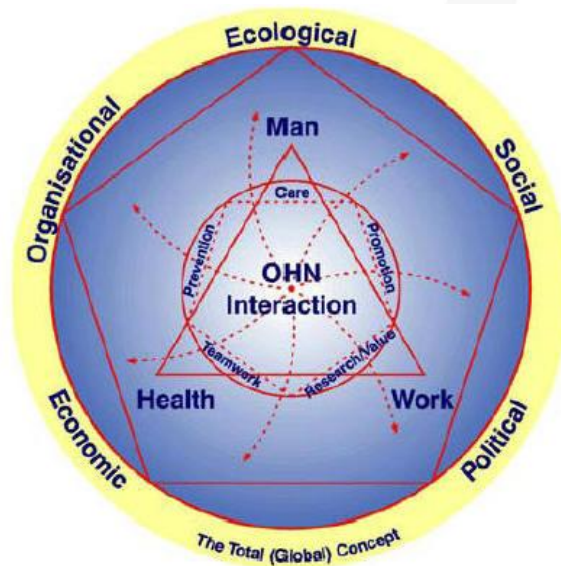
Health at work and a healthy work environment are amongst the most valuable assets for individuals, enterprises/communities and countries. Occupational Health is a key issue not only to ensure the health of workers, but also to contribute positively to job satisfaction, increased productivity, reduced absenteeism, the quality of products and to the overall quality of life of individuals and society.

In most countries occupational health nurses are the core professionals contributing to improve the health and wellbeing of the worker. This is achieved by actively participating in occupational health strategy planning and supporting a multidisciplinary collaboration within the organisation.

## 2. THE CONCEPT OF OCCUPATIONAL HEALTH NURSING

The broad aims of occupational health nursing are to create a healthy and safe working environment and a functional working community, to prevent work-related diseases, and to promote work stability.

The interaction between the occupational health nurse and the working environment is illustrated in the Hanasaari Model (Alston et al. 1988) (Figure 1).



The Hanasaari model, Alston et al., 1988

Figure 1. **The Hanasaari Conceptual Model.**

**The General Environment System**, which incorporates health and safety aspects, is represented by the large outer circle—a global concept. Within the outer circle the influences, which have global effects, which in turn may affect health, are represented by economic, political, social, ecological and organisational factors. These are interesting areas for practice and education innovation in occupational health nursing.

**Man Work and Health Concept.** This is represented by the man, work and health triangle and operates within the total environment, aspects of the total environment having a significant (although indirect) effect on workplace health. Political and social policies for example will either expand or contract the development of occupational health. Organisational cultures and strategies may exert a stronger more direct influence on the man, work, and health triangle

**Occupational Health Nursing** is presented in the center of the model. Flexibility was interpreted as being proactive rather than reactive. Flexibility is represented by a curving circle of arrows, which exerts influence and develops the concepts identified, ultimately improving the health of people at work and affecting the health of communities outside the workplace, in the total environment. The outward proactive approach may influence politically, socially, economically and ecologically particularly if Occupational Health Nurses raise the level of awareness of their real contribution to health issues in a wider environment.



### 3. THE AIMS OF OCCUPATIONAL HEALTH NURSING

The Mission Statement of FOHNEU states that 'Occupational Health Nursing aims at securing the health, safety and wellbeing of the workforce. This is achieved through assessing, monitoring and promoting the health status of the workers, and developing strategies to improve the working conditions and the total environment '.

The overall aim is to improve the working environment and the health of the worker, in collaboration with the worker through the process of empowerment. Occupational health nursing may be defined as a goal-oriented activity, based on client needs, with focus on work, and the working environment.

The broad aims of occupational health nursing are to create a healthy and safe working environment and a functional working community, to prevent work-related illnesses/injuries, and to promote working stability.

To achieve the aims of occupational health nursing the Occupational Health Nurse is required to be:

- **Personally and professionally responsible**
- **Included as part of the Occupational Health team as an independent professional**
- **Responsible for evaluating and developing work methods and systems**
- **May have administrative and management responsibility work activities**
- **An expert in promoting health, and wellbeing in the working environment.**



## 4. THE EDUCATION OF AN OCCUPATIONAL HEALTH NURSE

Continuous and evolving change in the working environment means changes within the speciality of occupational health nursing and as a consequence in the education of occupational health nurses. The settings in which education and training is given may vary in accordance with the health and educational structures of the country or region in which the education and training takes place. Part-time, modular or distance learning programmes should not be excluded from planning courses based on this curriculum.

Occupational health nursing education is an expert/advanced practitioner activity based on the principles of life-long learning. Each nurse undertaking a course based on this core curriculum should already have achieved the first level qualification of a nurse as established in the EU directives. Regarding the education of a registered nurse the WHO recommendations state that the programme should emphasise health and not focus on illness. The core curriculum can be used to develop a specialisation programme or a Master degree, depending on the organisation of nursing education in the individual country.

A model for the roles of the occupational health nurse as developed by Staun & Falck based on a previous model by Rossi & Heikkinen (1990) is shown in Figure 2. The five stages of development are:

1. The Basic Role
2. The Specialist Role
3. The Collaborative Role
4. The Unique Role
5. The Leadership Role

Figure 2. Model of Development of Occupational Health Nursing (Staun and Falck, 2014).

MODEL OF DEVELOPMENT OCCUPATIONAL HEALTH NURSING	
OHS	
5 ↑	<p><b>LEADERSHIP ROLE</b></p> <ul style="list-style-type: none"> <li>• The principles and practice of business administration</li> <li>• The principles and practice of leadership/management</li> <li>• The principles of organisational strategy and policy development</li> <li>• The social responsibility of an industry, business or organisation</li> <li>• The principles and practice of cost benefit analysis</li> <li>• The principles and practice of health economics</li> </ul>
4 ↑	<p><b>UNIQUE ROLE</b></p> <ul style="list-style-type: none"> <li>• The principles of data collection and analysis</li> <li>• Research and dissemination of results</li> <li>• The principles and practice of planning, implementation, monitoring and evaluation of workplace health promotion.</li> <li>• The principles and practice, of quality control and assurance; auditing.</li> <li>• The principles of writing proposals to prove cost-effectiveness.</li> <li>• The application of theoretical knowledge to Evidence Based Practice</li> </ul>
3 ↑	<p><b>COLLABORATIVE ROLE</b></p> <ul style="list-style-type: none"> <li>• The concepts of wellness</li> <li>• The principles and practice of industrial hygiene and accident prevention</li> <li>• The causes, symptoms and prevention of occupational diseases and injuries</li> <li>• The principles and practice of ergonomics and toxicology</li> <li>• The principles and practice of job analyses</li> <li>• The principles and practice of health assessment and health screening/surveillance</li> <li>• The health education methodology, including dynamics of human behaviour</li> <li>• The principles of health needs assessment for different working populations, including vulnerable groups</li> <li>• The principles and practice of community development and participation</li> </ul>
2 ↑	<p><b>SPECIALIST ROLE</b></p> <ul style="list-style-type: none"> <li>• The principles and practice of occupational health and safety</li> <li>• Basic economics, sociology and industrial relations</li> <li>• The industrial systems and unions</li> <li>• The codes and laws regulating worker health, social security and compensation</li> <li>• The laws regulating nursing practice</li> <li>• The principles and practice of standardization</li> <li>• The principles and practice of social services</li> <li>• The co-operation with agencies both within the organisation and in the community</li> </ul>
1	<p><b>BASIC ROLE</b></p> <ul style="list-style-type: none"> <li>• The history of occupational health and occupational diseases</li> <li>• The history of occupational health nursing</li> <li>• The principles and practice of occupational health nursing</li> <li>• The dynamics of communication</li> <li>• The principles and practice of problem solving</li> <li>• The psychology of motivation and human behaviour</li> <li>• Group dynamics</li> <li>• Workplace risk assessment</li> <li>• Accident prevention</li> </ul>
<b>ADMISSION CRITERIA: REGISTERED GENERAL NURSE</b>	

## 5. THE PROGRAMME CONTENT

The education programme is focused on the occupational health nursing process. The contents in the modules develop and support this process. The education of occupational health nurses should be based on the art and science of nursing. Both approaches should be included in education as well as in practice. The basic principles of the research process should also be taught.

The programme aims to provide nurses with relevant knowledge and development of skills which will encourage further learning at a higher level. This could include programmes of study which lead to specialist qualifications or academic degrees in occupational health nursing.

This core curriculum programme comprises of five modules based on the stages of the role development (Figure 2) and includes both theoretical and practical components. The five modules can be studied as a complete programme or as individual modules. The course programme includes both theoretical and practical components. Suggestions for the theoretical content are included as Appendix 3 and the practical contents are included as Appendix 4.

The learning and teaching methods can include:

- lectures and seminars
- literature review and presentation
- group work and discussion
- case studies and problem solving
- distance learning

Assessment criteria can be based on different methods depending on the organisation of the programme and according to individual country prerequisites.

## MODULE 1

### THE BASIC ROLE OF AN OCCUPATIONAL HEALTH NURSE

#### Aims of the Module:

To understand the framework of occupational health nursing in relation to the history of occupational health and safety, occupational diseases, and the history of occupational health nursing.

To develop skills in effective communication methods, and to acquire knowledge on how to promote the benefits of a comprehensive Occupational Health Service.

#### Content:

1. The principles of nursing within an Occupational Health Service.
2. Development of the work of an Occupational Health Nurse
3. Marketing and communication methods

#### After completing the module the occupational health nurse will have the knowledge and skills required to understand:

- the history of occupational health and occupational diseases
- the history of occupational health nursing
- the principles and practice of occupational health nursing
- the dynamics of communication
- the principles and practice of problem solving
- the psychology of motivation and human behaviour
- group dynamics
- workplace risk assessment
- accident prevention

## MODULE 2

### INDEPENDENT/SPECIALIST ROLE OF AN OCCUPATIONAL HEALTH NURSE

#### Aim of the Module:

To understand the history of working life and the links between health care, economics, health and safety legislation and employment legislation.

#### Content:

1. EU Directives
2. National Health & Safety Policies
3. Current issues concerning health at work
4. Work ethics and legislation at work
5. International aspects of Occupational Health Services

#### After completing the module the occupational health nurse will have knowledge and skills required to understand:

- The principles and practice of occupational health and safety
- Basic economics, sociology and industrial relations
- The industrial systems and unions
- The codes and laws regulating worker health, social security and compensation
- The laws regulating nursing practice

## MODULE 3

### COLLABORATIVE ROLE OF AN OCCUPATIONAL HEALTH NURSE

#### Aims of the Module:

To provide knowledge of adverse environmental conditions on the health of the workers.

To promote and maintain the health of the worker, at individual, collective and national level.

#### Content:

1. Working environment hazards and their effect on health.
2. Understanding environmental surveys
3. Preventive strategies and worker protection
4. Methods for assessment of work ability
5. The theory of motivation

**After completing the module the occupational health nurse will have the knowledge and skills required to understand:**

- Concepts of wellness
- Principles and practice of industrial hygiene and accident prevention
- Causes, symptoms and prevention of occupational diseases and injuries
- Principles and practice of ergonomics and toxicology
- Principles and practice of job analysis
- Principles and practice of health assessment, screening and surveillance
- Health education methodology, including dynamics of human behaviour
- Principles of health needs assessment for different working populations, including vulnerable groups
- Principles and practice of community development and participation

## MODULE 4

### UNIQUE ROLE OF AN OCCUPATIONAL HEALTH NURSE

#### Aims of the Module:

To teach the principles of research.

To raise awareness about the skills required for early detection of illness and work related diseases.

To understand the importance of quality awareness and assessment and quality assurance.

#### Content:

1. Epidemiology
2. Work design
3. Research methodology
4. Efficiency and quality assurance systems

#### After completing the module the occupational health nurse will have knowledge and skills required to understand:

- The principles of data gathering, analysis and dissemination.
- The principles and practice of planning, implementation, monitoring and evaluation of workplace health promotion.
- The principles and practice of quality control and assurance and auditing.
- The principles and application of cost benefit analysis
- The principles and practice of standardisation of policies and procedures.
- The application of theoretical knowledge to Evidence Based Practice

## MODULE 5

### LEADERSHIP ROLE OF AN OCCUPATIONAL HEALTH NURSE

#### Aims of the Module:

To understand and identify occupational health as part of a larger concept of business entrepreneurship and organisational strategies.

To understand the Occupational Health Service as an expert organisation and the occupational health nurse as an independent competent practitioner

#### Content:

1. Occupational Health Services as part of corporate strategy
2. Organisational systems- culture and climate
3. Aspects of management and leadership
4. The entrepreneurial role of the occupational health nurse

#### After completing the module the occupational health nurse will have knowledge and skills required to understand:

- The principles and practice of business administration
- The principles and practice of leadership and management
- The principles of organisational strategy and policy development
- The social responsibility of an industry or business
- Cost benefit analysis



## 6. CONCLUSIONS

This curriculum has been prepared for countries within the European Union. It is an outline of the educational and training needs of an Occupational Health Nurse. With emphasis on flexibility, the curriculum is intended as a basic framework document to be interpreted and adapted at National level.

As a framework, it is essential to note, that the FOHNEU Core Curriculum does not lead to a formal qualification in occupational health nursing. This publication should be read carefully before preparing and presenting course programmes. Students on these programmes should understand clearly the level and status of such courses, for example, certificate, diploma, degree. The "Recommendations for a European Framework for Specialist Nursing Education" (Appendix 2), should also be taken into account when the core curriculum is used for the development of a specialisation programme.

The contents will require further development as the demands and functions of occupational health services and working life evolve.

## Appendix 1

Global Strategy on Occupational Health for All. The Way to Health at Work (WHO 1995, pg. 3).

The 10 priority objectives proposed by the strategy are as follows:

1. Strengthening of international and national policies for health at work and developing the necessary policy tools
2. Development of healthy work environment
3. Development of healthy work practices and promotion of health at work
4. Strengthening of occupational health services
5. Establishment of support services for occupational health
6. Development of occupational health standards based on scientific risk assessment
7. Development of human resources for occupational health
8. Establishment of registration and data systems, development of information services for experts, effective transmission of data and raising of public awareness through public information
9. Strengthening of research
10. Development of collaboration in occupational health and with other activities and services

## Appendix 2

### **PCN [now EFN]**

Comité Permanent des Infirmier(e)s de l'UE  
Standing Committee of Nurses of the EU

### **ENNO [now ESNO]**

European Network of Nurses Organizations

## **Recommendations for a European Framework for Specialist Nursing Education**

Adopted on November 2, 2000 in Paris, France.

### **Purpose**

Whereas in many countries within EU there is a specialist nursing practice requiring a post-basic nursing education that is varying from one country to another, the European Network for Nurses Organisations has developed a framework for specialist nursing education, in order to harmonise the post basic nursing education and then to facilitate the free movement of specialist nurses.

### **Preamble**

The field of nursing knowledge and its associated skills have become too vast and complex for any one person to master in full, and acknowledges that specialisation within nursing has now become a necessity, in order to provide quality care and ensure patient and consumer safety and wellbeing.

Early in its development, professional nursing recognised that certain population needs and particular settings for nursing practice require practitioners with more specific and specialised knowledge and skills than could effectively and efficiently be gained through an educational program for general practice.

Benefits of specialisation in any occupation are said to accrue to the recipient (patient/client/consumer), to the profession, to practice, and to practitioner. The development of nursing specialties is believed to be critical in stimulating the growth of nursing knowledge and expertise and then to improve the quality of care provided to the population. The 1987 ICN definition that specialisation "... implies a level of knowledge and skill in a particular aspect of nursing which is greater than that acquired during the course of basic nursing education ..." acknowledges that specialisation is a path whereby nursing practice is deepened and refined.

The regulation concerning the nursing profession and free movement within Europe is the EU Directive 77/452/EEC considering the equivalencies for the practice and education of the nurse

responsible for general care, but doesn't take account of the specialist and post-basic \* educated nurse. The Directive 89/48/EEC and Directive 92/51/EEC, as amended in 1997, and supplemented by the Directive 1999/42/EC on the general system for the recognition of professional qualifications are the only directives appropriate for the specialist nurses. It is based on the consideration of the education, training and professional experience of the practitioner.

### **Specialist Nurse**

A specialist nurse is a nurse formally educated and practically trained beyond the level of generalist nurse and authorised to practice as a specialist nurse with advanced expertise in a branch of nursing.

Specialised practice includes advance nursing and/or clinical skills, and related tasks, and advisory, research, teaching and administrative activities in the field of the specialty.

Specialist nursing education is a formally recognised post-basic program of study which follows on from general nursing education and training and provides the knowledge and experience needed to ensure competence in the specialisation concerned.

Further education, training, and authorisation are determined in the light of the tasks, training, education, and activities of post-basic specialists in other branches of the profession and in the light of the rules and regulations applicable to them.

Titles for specialist nurses mostly include the designation specialist nurse combined with the name of the specialisation.

### **Recommendations and Principles**

- The specialty defines itself as nursing and subscribes to the overall purpose, functions, and ethical standards of nursing;
- The specialty practice is sufficiently complex and advanced that is beyond the scope of general nursing practice.
- There is both a demand and a need for the specialty service.
- The focus of the specialty is a defined population that demonstrates recurrent problems and phenomena that lie within the discipline and practice of nursing
- The specialty practice is based on a core body of nursing knowledge that is being continually expanded, updated and refined by research and experience
- The specialty has established educational and practice standards that are congruent with those of the profession and are set by a recognised nursing body.
- The specialty adheres to the licensure/registration requirements for the general nurse.

- Specialty expertise is obtained through a professionally approved advanced education program that leads to a recognised qualification. The program is administered by or in collaboration with a specialist nurse.
- The specialty has a Credentialing process determined by the profession or in accordance with the national practice for other professions. Sufficient human and financial resources are available to support this process.
- Specialist nurses are organised and represented within a specialty association or a branch of the national nurses' association and /or nursing authoritative body in order to develop and control the specialty education and practice.

### **Specialist Nursing Education**

Specialist nursing education is a formally recognised post-basic program for nurses previously recognised as registered nurses within EU regulation ( Directive 77/452/EEC), with a minimum of one year of nursing experience , that:

- Takes place in an institute of higher education (University or equivalent) while assuring adequate access to practice and /or clinical resources for the clinical practice;
- Is continued from year to year ( that is , is not a refresher course or seminar), and is regularly updated;
- Is recognised by an appropriate authority;
- Has specified admission requirements;
- Has a full-time teaching staff or faculty including nurses qualified by education and experience ( preferably with a masters or doctoral degree) and by request other professionals recognised for their expertise;
- Is developed, controlled and administered by or in collaboration with the nursing profession, including specialists.

### **Length of the Program**

This will vary with the content of basic nursing education but may be equivalent to at least one year, with a minimum of 720 theoretical hours and a minimum of 50% of the total duration dedicated to clinical and/or practice training.

### **Qualification/Graduation**

Upon qualifying, the nurse will be provided with a certificate, diploma, or degree appropriate to the education designating him/her as a specialist nurse.

## Glossary

**Post-basic:** Additional education beyond the level of general care nursing education, considered as the basic one.

**Study hours:** Includes all types of theoretical hours that are not classroom hours ( personal work, technical and lab training, library, research )

The above proposal has been developed by the appointed ENNO steering group:

- International Federation of Nurse Anaesthetists (IFNA): Pascal Rod (Chairperson)
- European Dialysis and Transplantation Nurses Association ( EDTNA-ERCA): Anna Marti i Moros, Nicola Thomas, Waltraud Küntzle)
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- Irish Nurses Organisation (INO) : Annette Kennedy
- National nurses association of Netherlands (NU'91): Ted Kraakman, Pieter Jochems.
- Swedish Association of Health Professionals: Ella Danielson.

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International Council of Nurses, *Nursing regulation guidebook: from principle to power*, 1991

Directive 77/452/EEC

Directive 89/48/EEC

Directive 92/51/EEC

Directive 1999/42/EC

## Appendix 3

# THE THEORETICAL CONTENT

The five modules refer to people at work, their interaction between health, their work and the working environment. Part of the theoretical content is already acquired during undergraduate education. This knowledge should be used to build upon by adding specific theoretical knowledge that is needed for occupational health nursing practice.

<b>PEOPLE AT WORK</b>	<ul style="list-style-type: none"><li>• Philosophy</li><li>• Ethics</li><li>• Biomechanics</li><li>• Sickness absence</li><li>• Presenteeism</li><li>• Work Ability</li><li>• Psychosocial factors</li></ul>
<b>HEALTH AND THE WORKING ENVIRONMENT</b>	<ul style="list-style-type: none"><li>• Epidemiology</li><li>• Research methodology</li><li>• EU and National Legal frameworks</li><li>• Occupational diseases</li><li>• Occupational injuries</li><li>• Occupational hygiene</li><li>• Occupational safety</li><li>• Ergonomics</li><li>• Work-life balance</li><li>• Organisational culture/climate</li><li>• Administration</li><li>• The interaction between working environment and the wider physical and psychosocial environment</li></ul>

## Appendix 4

# THE PRACTICAL CONTENT INCLUDES

<b>WORK SURVEYS</b>	<ul style="list-style-type: none"><li>• Work design</li><li>• Risk assessment process</li><li>• Ergonomics</li><li>• Development, implementation and evaluation of questionnaires and interviews</li><li>• The multiprofessional approach; collaboration and contact with other advisors and specialists</li></ul>
<b>OCCUPATIONAL HYGIENE</b>	<ul style="list-style-type: none"><li>• Acquiring product information / hazard data</li><li>• Measurements, qualitative and quantitative, of physical, biological and chemical factors affecting health at work</li><li>• Interpreting and evaluating the results</li><li>• Development and implementation of instructions on safe use of chemical products</li></ul>
<b>HEALTH SCREENING AND SURVEILLANCE</b>	<ul style="list-style-type: none"><li>• Conducting individual health surveillance programmes based on risk assessment</li><li>• Screening tests should be used as part of the individual worker risk profile.</li></ul>
<b>HEALTH EDUCATION / PROMOTION</b>	<ul style="list-style-type: none"><li>• Prepare and carry out health education projects for individuals and groups</li><li>• Plan and implement wellness programmes including Employee Assistance Programmes</li><li>• Support and guidance on psychosocial factors</li></ul>
<b>ADMINISTRATION</b>	<ul style="list-style-type: none"><li>• Case management</li><li>• Business management</li><li>• Crisis management</li><li>• Disaster management</li></ul>



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