

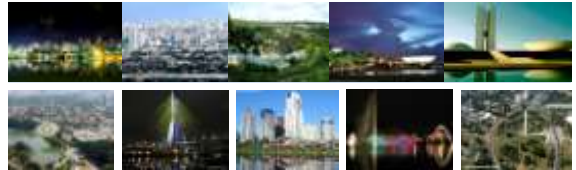


Administration of Occupational Health in Brazil

Carlos R. Campos
Specialist in Occupational Medicine
President of the National Association of Occupational Medicine



Foundation: March 26 ,1968
27 Federated throughout Brazil
5,600 Associates
22.000 Occupational Medicine Professionals
Administrative Headquarters in Goiânia
Patrimonial Headquarters in São Paulo



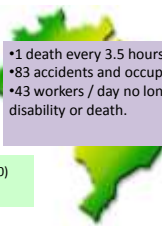
Session ID: SS095 Title of Special Session: Different models of occupational health administration in Latin America
Organizer: National Organizing Committee / Claudio Taboada

Population (IBGE, 2010)
190.732.694 million

Per capita income in Brazil is US\$ 10.814

IDH 2011 0,718
Norway: 0,943

PEA (IBGE, 2009)
99,5 million



•1 death every 3.5 hours
•83 accidents and occupational diseases every hour
•43 workers / day no longer return to work due to disability or death.

INSS (MPS, 2010)
55,9 million

Formal jobs (MPS, 2010)
45,2 million

Disability benefits (MPS, 2010) 1,7 million

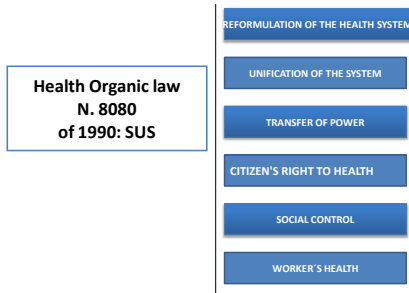


CONSTRUCTION OF THE SST POLICY IN BRAZIL

THE 80'S



MINISTRY OF HEALTH



Construction of public health policy and the worker in Brazil



After almost 500 years of history, in 1998, the Brazilian people won the universal right to health given by the **Brazilian Constitution** in its article 196 as " ... a universal right is a duty of the State, guaranteed by social and economic policies aimed to reduce the risk of disease and factors that aggravate...".

Después de casi 500 años de historia, en 1998, los brasileños ganaron el derecho universal a la salud de las disposiciones de la Constitución brasileña en su artículo 196 como "... un derecho universal y un deber del Estado, garantizado por políticas sociales y económicas encaminadas a reducir el riesgo de enfermedad y otras enfermedades ...".

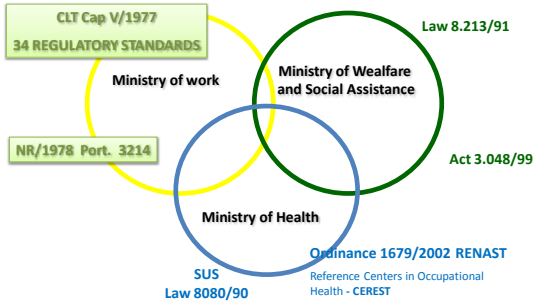
It was created SUS – Sistema Único de Saúde - Unified Health System **BASED ON UNIVERSAL ASSISTANCE**, full and equal, the Unified Health System(SUS) represented a breakthrough because it allows the inclusion of thousands of Brazilians in health care in its **5,561 municipalities**.

Se creó el SUS - Sistema Único de Salud Basado en la asistencia universal, plena e igualitaria, el Sistema Único de Salud (SUS), representó un gran avance, ya que permite la inclusión de miles de brasileños en el cuidado de la salud en sus 5.561 municipios.

30th Congress of the International Commission on Occupational Health (ICOH), Cancun Mexico, March 2012.

LEGAL MARK - LEGISLATION

Administration of Occupational Health



CLT Cap V/1977
34 REGULATORY STANDARDS

<http://portal.mte.gov.br/legislacao/normas-regulamentadoras>

- Norma Regulamentadora NR 01 - Anexo PDF (278kb)
- Norma Regulamentadora NR 02 - Anexo PDF (248kb)
- Norma Regulamentadora NR 03 - Anexo PDF (248kb)
- Norma Regulamentadora NR 04 - Anexo PDF (248kb)
- Norma Regulamentadora NR 05 - Anexo PDF (248kb)
- Norma Regulamentadora NR 06 - Anexo PDF (248kb)
- Norma Regulamentadora NR 07 - Anexo PDF (248kb)
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- Norma Regulamentadora NR 09 - Anexo PDF (248kb)
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NR 7 - MEDICAL CONTROL PROGRAM OF OCCUPATIONAL HEALTH

7.2. Guidelines.

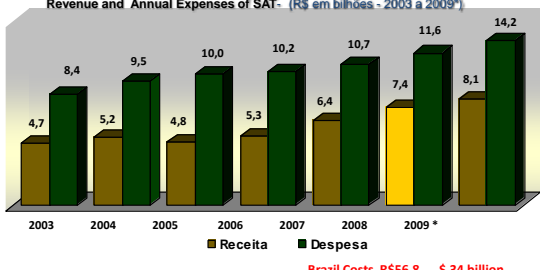
- 7.2.1. The PCMSO is part of wider set of initiatives of the company in the health of workers and should be articulated with the other requirements of the NR ...
- 7.2.3. The PCMSO should be for prevention, screening and early diagnosis of health problems related to work, including the nature of subclinical ...
- 7.4.1. The PCMSO should include, among others, the mandatory medical examinations: a) admission, b) periodic c) return to work; d) the change of function, and) demissional
- 7.4.2. The tests described in item 7.4.1 include:
 - a) clinical evaluation, including occupational anamnesis and physical and mental examination;
 - b) Additional tests, performed according to the specific terms of this NR and its attachments.



Ministry of Welfare and Social Assistance



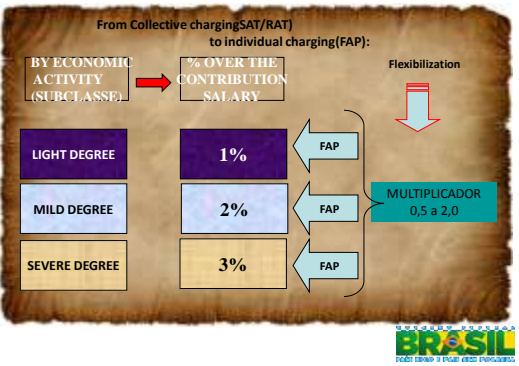
Benefits and costs in Brazil



Brazil Costs R\$56,8 \$ 34 billion

Source: AEPS and Dataprev, Síntese (Serie SUB.CRESP and EMISSION)
* Forecast

Occupational Accident Insurance



Accident Prevention Factor (FAP)

Value assigned to company depending on their performance against other companies in its Economic Activity

calculated on a statistical basis, take on consideration:


- **Frequency** in accidents at work;
- **Severity** of the accidents
- **Custos** of Social Welfare

Bonus X Malus
More accidents pay more

EVASION OF CAT- Notice of work accident

New: Compliance with the art. 22 of the Law 8.213/91 (in the emission of CAT), detected in a process of fiscalization, implies in FAP = 2,0000.

Resol. 1316: 2.4



DECENTRALIZATION 5.561 MUNICIPALITIES CAPILLARITY

Ministry of Health

HEALTH ASSISTANCE SURVEILLANCE The WORKPLACES


National Network Attention Integral Health Worker
Rede Nacional de Atenção Integral à Saúde do Trabalhador

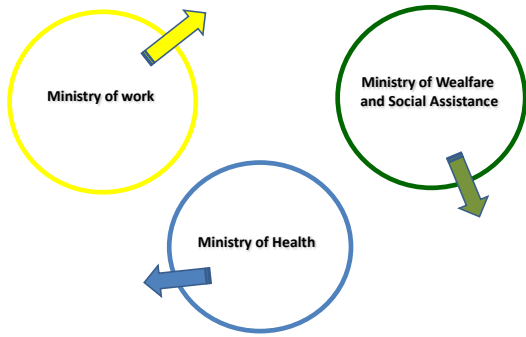
Manual de Gestão e Gerenciamento
MANUAL FOR ADMINISTRATION AND MANAGEMENT






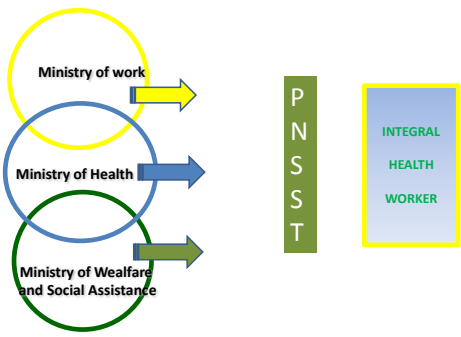
LEGAL MARK - LEGISLATION

Administration of Occupational Health 



LEGAL MARK - LEGISLATION

Administration of Occupational Health 



National Policy Health and Safety at Work
PNSST



ACT 7.602, NOVEMBER 07 2011

1. the inclusion of all Brazilians workers in the national system of promotion and protection of health ;
2. **harmonization of legislation** and the articulation of actions of promotion, protection, prevention, assistance, rehabilitation and repair of the worker's health; (MTE – MS – MPS)
3. Adoption of special measures to the **high-risk sectors**.
4. the structuring of **integrated network of information** on worker health;
5. Promotion of the implementation of systems and **management programs of SST in the job sites**;
6. promotion of an integrated agenda of studies and research on SST.

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Principles of a SGST
MANAGEMENT SYSTEM IN HEALTH AND SAFETY AT WORK



- All accidents are preventable;
- The explicit Leadership of top management is essential for the implementation and maintenance of SGTS;
- Line management is directly responsible for the performance of the Occupational Safety and Health;
- The SST management is a systematic process that comprehends the whole organization;
- The risk management should be integrated into all aspects of SST management;
- Prioritize control activities with potential for high risk.

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BRAZILIAN REGULATION

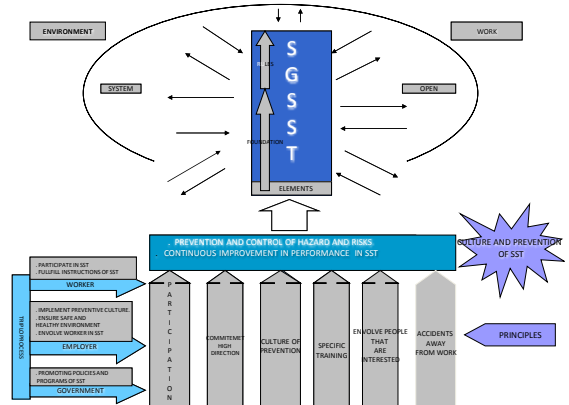
MANAGEMENT SYSTEM IN HEALTH AND SAFETY
Requirements

ABNT – Brazilian Association of technical standards

Brazilian Regulation in the SST
Management System



- The purpose is to support and promote good practices of SST in balance with the socio-economic necessities.
- This orientation line is based on OIT/OSHA, and other standards or publications about management systems of SST to increase the level of compatibility of this regulations for the benefit of their users.
- Demonstration of successful application of this rule may be used by the organization to assure interested parties that adopts appropriate SST MANAGEMENT SYSTEM.
- This rule does not included specific requirements of other systems, as quality, environment, etc, even so the respective elements could be align or integrated with other management systems.



Administration of Occupational Health in Brazil

idea of employment is dying
new patterns/models of work
world economic crisis
sacrifices
new ways of tackling
determinants of health at work
demography
work
employment
government

surveillance
risk monitoring
legislation
compensation scheme
information
capacity



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