

Health and Safety at Work, the Commitment of Colombian Companies in the Area of Continual Improvement

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Abstract

Occupational safety and health is an issue that has now received special attention from all members of the country's work environments. This is largely due to the recent reforms that the governing bodies have carried out with a view to giving way to a more reliable scenario in which workers have real guarantees for carrying out their productive activity. Next, and with the purpose of reflecting on the current state of the insertion of Occupational Safety and Health Management Systems within the organizational and strategic components of any business cell, we will review the postulates that researchers in the area have made in this regard, which indicate that this is a pending task in the country, since the advances are not as

perceptible as would be expected by this date. The methodology used was documentary, taking as reference articles published in the last 5 years, which will facilitate to observe the approaches of the mentioned topic and to generate at the end contributions and analysis from the professional point of view, as contribution to the construction of new knowledge in the area of interest.

Keywords: Occupational Safety and Health (OSH), employer, employee, working environment

1 Introduction

Occupational Safety and Health (OSH) is defined as the discipline that deals with the prevention of injuries and illnesses caused by working conditions, and the protection and promotion of workers' health [1]. It aims to improve working conditions and the working environment, as well as health at work, which entails the promotion and maintenance of the physical, mental and social well-being of workers in all occupations [2]. The 2013 report on Safety and Health at Work and the Environment, published annually by the International Labour Organization (ILO), showed that 2.34 million people die from work-related accidents or diseases, leading to an annual loss of 2.8 billion US dollars, distributed in direct and indirect costs. These costs are equivalent to 4% of the Gross Domestic Product (GDP) in the world calculated from 2012 GDP [3].

When reference is made to the Occupational Health and Safety Management Systems (OHSMS), an issue that is of interest to everyone is touched upon, since in one way or another we are all linked to the issue of welfare and quality of working conditions, whether because we are employees, students, users, contractors or service providers, permanently or temporarily [4]. At the international level and thanks to the demands of entities such as the International Labor Organization (ILO), guidelines have been generated that demand that the leading subjects of the work environments direct their policies towards a trend that seeks the preservation of health and the construction of well-being for people who develop some type of work activity [5]. Therefore, in Colombia the Ministry of Labor has for several years been given the task, to organize, compile and disseminate, all the legislation that is responsible for demarcating the minimum compliance that any productive organization must contemplate, to give people in their different areas of activity a proper space for their development and quality of life in the labor issue [6].

Thus, after several processes of analysis, testing and observations, in 2014 Decree [7] is announced, which compiles all the components that must be taken into account to manage occupational safety and health; but since the expected result is not obtained, the new Decree [8] is issued in 2015, which in book 2, part 2, chapter 6, dictates all the strict compliance provisions that must be inserted and implemented in the country's labor systems in order to give order, guarantees and structure to risk management in favor of employees in general [9].

Shaping the new structure of occupational health management in Colombia has not been easy at all because since the enactment of Decree [8], there have been two postponements of the entry into force of this regulation, indicating that several factors may be affecting the adoption of all the dynamics and demands linked to this important line of work environments [10]; for this reason, an outline of the evolution of the occupational safety and health (OSH) issue in the country is given below, and a series of points of view are presented which, from an academic perspective, may contribute to the general debate on why the issue of SSGSS remains a pending task for the country.

2 Background of the SGSST in Colombia

In Colombia, the legislation that preceded the Decree8 became known in 1979 with the dissemination of the Law [11], with which the Congress of the Republic at that time incorporated the first guidelines on the subject of welfare and optimal conditions for the country's citizens, as well as the initial parameters for environmental management [12]. As of this year and according to the political, economic and labor moments, the country was incorporating new concepts that finally resulted in the compilation of the decree in force to date [13].

Figure 1 below summarizes the main legal provisions that the country has had in the area of occupational health. This is how laws, decrees and resolutions will be observed, which have had more impact or dissemination and which, due to their characteristics, have marked a decisive moment in the management of work environments.

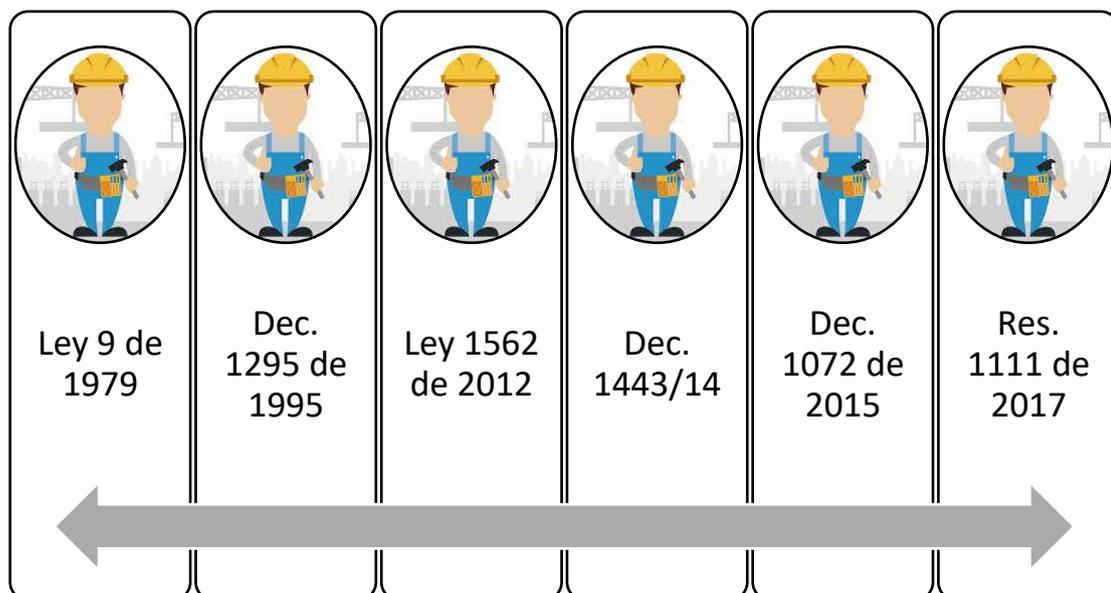


Figure 1. OSH Laws Timeline in Colombia

As stated in the Law [11], it was the one that established the previous guidelines for occupational risk management; with Decree [14] the General System of Professional Risks (SGRP) is organized and established [16]. In 2012, with Law [15], the SGRPs are replaced and the new figure called the Occupational Safety and Health Management System (SGSST) is put into effect [17], this figure is updated with Decree [7]. With the Decree [8] the Ministry of Labor sought to compile in a single document everything related to the labor issue in the country and this is how the regulations were consolidated at this time¹. However, and due to the insertion of several changes, the Resolution [18] was published this year, which establishes some stages to achieve the full implementation of the SGSST in the country.

3 Reality of the SGSST in the country

Once analyzed the legal mechanisms and the evolution that they have had in the history of the country, it can be appreciated that there is a disconnection between what the State has arranged and what happens on a daily basis in the companies and productive entities of the country [19]. Evidence of these is the high accident rate recorded at the national level and in various lines or sectors, which is increasing the numbers of deaths, accidents and diseases reported or reported to official sources [20]. According to information as of 12/31/2016, in Colombia there were 871 deaths due to occupational accidents, 3 deaths due to qualified occupational illnesses and 438 new pensions due to occupational illnesses, among other data of interest [21]. According to the same source these figures are of great concern, since from 2010 onwards the annual increase of these indicators is above 5%.

With the figures provided by the Colombian Safety Council (CCS), it is possible to observe the evolution of accidents - occupational diseases in Colombia and their comparison with the recent results of 2016 [22].

Table 1. Figures for Accidents and Occupational Diseases in Colombia from 2009 to 2014 CCS

year	number of workers in the system	No. AT Rated	Occupational Diseases	Deaths by AT	Dead by EL	Deaths Total
2009	6.499.155	410.410	6.068	588	-	588
2010	6.829.956	435.826	8.293	499	2	501
2011	7.499.493	555.479	8.277	692	1	693
2012	8.430.801	659.170	10.053	676	2	678
2013	8.270.156	622.486	9.483	706	2	708
2014	9.011.879	687.171	9.771	552	16	568

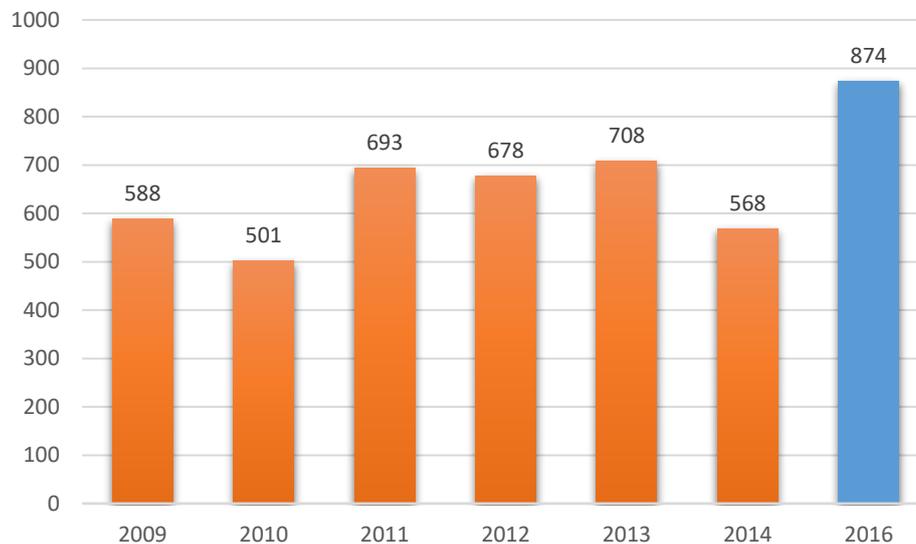


Figure 2. Evolution of Total Deaths

When contrasting the figures indicated, it can be cited that there is a disconnection between the current regulations and the real situation of the SGSST in the different labor environments, because if the legislation has been renewed in order to be in tune with regard to OSH, the figures should not be rising, on the contrary, they should be in a state of balance and almost total control. However, when looking for the reasons for which a panorama of insecurity in the workplace is generated, there are several premises or statements that recent research shows [24].

According to author [24], one of the factors affecting the state of OSH in Colombia is the lack of planning and availability of resources for the timely management of risks that may arise from work and productive activities. This affirmation is something that is alarming, because in practice it is common to hear and observe that for many businessmen everything related to OSH is one more expense, or something that the Ministry of Labor demands, or even some have called it one more tax. The above blurs the fundamental object of the norm and obviously, subtracts all the importance to the preventive purpose that should be given to everything related to the adequate promotion of occupational risks [25].

Other experts point out that one of the reasons why the SGSSTs have not been able to position themselves as expected is due to the lack of commitment on the part of the employees, i.e., that there is no culture of self-care [10]. The foregoing may be true, however, it may derive from a direct effect of the lack of management on the issue, that one of the essential elements for the issue of occupational health is constant training and education in the workplace, as a prevention tool [26].

Finally, in research on the transition from the concept of occupational health to OSH, it has been possible to identify that in order for the SGSSTs to become an attainable and lasting component in the country's employment environments, it is necessary to carry out a transformation process, which implies the integration of all the variables that in each organization are the determinants of success for any project, especially for those that have to do with the health and well-being of the people who give life to each organization [12].

Therefore, it is possible to assert that the adoption and implementation of the SGSSTs in the country can take place in a fluid and structured manner, only to the extent that the different factors involved can be aligned with the current regulations and with the requirements of the parties of interest. Thus, employees, employers, government governing bodies and associated entities such as Aseguradoras de Riesgo Laboral (ARL) should unite, making joint and directed efforts in the same line, because if there is no articulation decided by more efforts, the process will not generate the expected results and, therefore, the situation of the SGSST will continue in the same state.

4 Findings

When drawing up an outline of the current situation of the SGSSTs in the country, it is necessary to indicate that they are at a construction stage, since no noticeable or noteworthy progress has yet been made. In the proposed exercise of reflection, it was possible to specify that, although the legislation dates from 1979 and has been renewed at various times in the nation's labor history, up to the current stage where with Decree [8] and Resolution [18], a new schedule has been established to facilitate that with this new legislation if the objectives outlined are met.

It is necessary to improve the recognition of risk factors in the working environment (diagnosis of working conditions) and of the effects on workers' health (diagnosis of health conditions), and to use epidemiological surveillance as a tool, within the framework of occupational safety and health management systems [27]. In addition, more and more scientific research shows the need for companies to have a sense of corporate social responsibility aimed at promoting health and achieving better workplaces if they want to achieve better results in their products and services. The chain of effects of workplace accidents ranges from the organizational level to individual behavior, through the safety response of supervisors and managers to the response of work groups [28].

When examining the contributions that research over the last five years has made to this debate, it could be seen that aspects such as the commitment of employers, training of employees and hosting a process of organizational transformation can be key factors conducive to a real change at the national level, only in this way can a new culture be built in terms of occupational health, thus allowing the growth in indicators and reduce the events of deaths, disabilities and occupational diseases, among others.

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